

My ADHD Child Doesn't Seem Motivated to Get Good Grades

By

Richard Lougy, LMFT/School Psychologist

&

David Rosenthal, MD, Psychiatrist

All children at times find school work boring and not a high priority in their lives, but staying motivated to keep up with schoolwork seems especially difficult for children with ADHD. However, most children understand and learn that keeping up their grades can benefit them, whether with parental praise, monetary rewards, or the personal satisfaction from knowing they do well at something.

Why doesn't the knowledge that good grades can bring personal rewards seem to motivate a child with ADHD?

It's nearly *impossible* to fully answer this question without giving careful consideration to the child's diagnosis.

Many affected children report that they often are aware of tasks they need to do, want, and intend to do, but often have great difficulty getting started or completing a school task. Unfortunately, many affected children often feel unable to make themselves initiate the actions needed to get their homework done, study for a test, or remember to bring home needed material for homework. This difficulty in getting started, and remembering to remember, often leads to poor grades and discouragement by the child, frustration from the parent, and sometimes name calling, "lazy," "unmotivated" by teachers and other caretakers.

Over time a child can develop feelings of "learned helplessness", a feeling that no matter what he/she does, nothing seems to work. The child can be heard saying "I can't do it," "I don't feel like doing it," and when totally frustrated or discouraged, "I won't do it."

We have never met a child who wanted to be unsuccessful. We suggest that children with ADHD want to be successful like their peers; however, because of symptoms stemming from their diagnosis, they are greatly challenged by school tasks. What to teachers and caretakers seems like low motivation generally is a "neurochemistry of motivation." (Brown, T.E., 2005, p.24). Much of their low performance stems from a *chronic* problem in getting started, organizing and planning their school work, and sustaining attention long enough to complete a school task.

In this article we suggested possible reasons why an affected child's poor performance in school is not simply the result of "low motivation" around school work, but rather is the result of *their chronic inability to activate and manage their actions in the right way at the right time* (Brown, 2005) – an important self-regulatory task for success in school and life.

We recognize that many factors can contribute to children's motivation around school work, but there is little debate that the following reasons are important, but not exclusive contributors explaining why children with ADHD can struggle in school.

Reason 1# Executive Functions

Important contributors to success in school include one's ability to delay gratification; organize thoughts on paper; remember to turn in homework; bring home important school materials for studying; and maintain focused and sustained attention in class and when working on homework.

These important tasks are conducted by a neuropsychological process called "Executive Function" (EF). A snapshot look at the primary executive function processes includes:

- Selecting relevant task goals
- Planning and organizing information and ideas
- Prioritizing and focusing on relevant themes rather than irrelevant details.
- Initiating and sustaining activities
- Holding information to working memory (Holding information in mind while performing complex tasks. Drawing upon past learning or experiences to apply to a current situation or problem-solve strategies into the future)
- Inhibiting competing actions
- Self-monitoring, self-checking, and self-regulating behavior (Meltzer & Krishnan, 2007, p.74).

Research suggests that the prefrontal cortex, the least understood and most complicated part of the brain, not only affects functions related to paying attention, planning, and execution of thoughtful behavior, but also motivation – all cognitive processes related to the EF. These cognitive processes cluster together like a "basket encompassing related cognitive functions that depend on and interact continuously with the others, in ever-shifting ways" (Brown, T.E., 2005, p.21). Together they make up the management system of the brain – it is an "umbrella term," as suggested by one writer, that incorporates a collection of interrelated processes responsible for goal-directed and purposeful behavior" (Meltzer, 2007, p.79). An affected child will often have developmental delays in EF.

There is considerable evidence that when executive functions of the brain are impaired in those with ADHD, two particular neurotransmitter chemicals, dopamine and norepinephrine, are primarily responsible. The medications used to treat ADHD symptoms work by increasing dopamine and norepinephrine levels between nerve cells in the brain. Stimulant medication is the most effective intervention in addressing ADHD core symptoms and works on 70-80% of ADHD patients. Consequently, contrary to sometimes unfavorable articles or comments from relatives or skeptical friends and teachers, it's very important that an ADHD child is evaluated for the appropriateness of medication as part of his/her treatment. Given the often dramatic alleviation of ADHD symptoms, it is very *unfair* or difficult to sustain the notion that ADHD impairments are a matter of lack of willpower (Brown, 2005; Lougy/Rosenthal, 2002).

What is most confusing and frustrating to parents and teachers is that an affected child can quickly lose interest in routine tasks, such as school work, but they can become highly motivated when involved in high interest activities, which seem to elevate attention and focus (Barkley, 1997). Difficulty maintaining effort is closely aligned with difficulty maintaining concentration and effort. The attention deficit is often verbalized by students as, "I'm bored." The more focused the child is on the activity, the more successful he is and more motivated he is to stay with the task or activity. They often seek out new and exciting experiences to keep their interest –having an "attentional bias toward novelty" (Robin, 1998, pp. 16-17). In fact, in high interest activities, an affected child can become hyperfocused. Try, for example, to get an affected child's attention to get back to work on their homework when they are playing with their Nintendo or Play Station, or entertaining themselves on Facebook.

In fact, no matter how much pleading or demands by parents and teachers, an affected child seems not to learn from his/her mistakes as consistently as unaffected children. Parents will be heard pleading with their child, "If you put the same effort and focus into your school work as you do on your Play Station, you would do much better in school" or "You always seem to be focused during your Karate lessons, why can't you use this same focus when doing your homework?". The simple fact, unfortunately, is that there is no conscious voice that says on a consistent basis, "Just make your self do it!" or "Hey stupid, don't day dream again when Mr. Baker is giving our homework assignment." Sadly, in desperation, a parent or teacher will shame or punish the child in an effort to get him to do consistently what he ought to do.

Recognition that "executive functions generally operate without conscious awareness" (Brown, 2005, p.15) helps us understand why affected children struggle with self-regulation and self-monitoring, which are so important for school success. We tell parents that their child has eight cylinders' but when not on their medication, they often are only running on four or six cylinders'.

Reason 2# Lack of Confidence

Children with ADHD are often not motivated to work hard for good grades because they lack confidence and optimism about doing well in school. Because some have great difficulty with routines, such as those required in school, they feel a sense of failure rather than the positive enthusiasm and confidence needed for success. They don't seem to develop the attitude that things will turn out all right in life, despite setbacks and frustrations. In the words of Daniel Goleman (1995), "Optimism is an attitude that buffers people against falling into apathy, hopelessness, or depression in the face of tough going." Academic success, he says, "is the combination of reasonable talent and the ability to keep going in the face of defeat that leads to success". Optimism makes people more likely to make the best use of their talents and to do what it takes to develop them.

Looking at the establishment of confidence from a neurochemical point of view, research finds that an important neurotransmitter involved in motivation towards pleasure, is dopamine. When someone notices or is reminded of something that may bring them pleasure, “arousal is likely to be mediated by rapid release of increased dopamine into relevant circuits, even without conscious thought” (Brown, 2005, p.74). Conversely, lacking anticipation or awareness of getting a “payoff,” the “organism . . . tends quickly to abandon working and to ignore the task, even when the task may be essential to life (Brown, 2005, p.74-75). The mechanism by which the “brain registers *subtle* levels of rewards and punishment is crucial in many aspects of human living” (Brown, 2005, p.75). Lastly, it’s important to note that dopamine does not itself produce the pleasure, but it creates the conditions under which sensations are recognized as pleasurable. Often, an incentive to work on something or not stems from a person’s life experiences, which usually occurs as an aspect of perception.

If a child’s perception of school work is peppered with failure, failure without much benefit – a child understandably will simply give up, and giving up does not result in good grades.

Reason 3# Inconsistent Work Habits

Inconsistent work habits interfere with academic success. Affected children will turn in their schoolwork one day, and the next day walk out of the classroom with little to show for their time at school. *It is not that they cannot be productive, it is that they cannot maintain that level of productivity the way other children do.* Consistent work habits require the ability to resist momentary thoughts or distractions, an ability that children with ADHD struggle with. They are presented daily with *chronic difficulties* with internal and external distractions, sustained and focus attention, and attending to teacher and parent demands or directions. Their difficulty with consistent performance is generally not a matter of not wanting to get a homework assignment turned in or choosing not to do the work, but more often this pattern of inconsistent performance stems from neurodevelopmental delays in EF.

Inconsistent work performance contributes to low grades and over time, low motivation around school work.

Reason 4# Poor Organizational Skills

Because of poor organizational skills, affected children often spend a great amount of time trying to find lost assignments, spelling lists, or any number of things that they’re responsible for on a daily basis. It is very demoralizing for these children to deal with ongoing parental and teacher comments concerning poor organizational skills. Motivation to do school work can be destroyed, and a child will just give up. If he hasn’t given up, his inconsistent performance often leads parents and teachers to think he/she has.

In light of the fact that organizational delays stem in part from EF, it is important to note that medication generally does not measurably improve on all executive functions. Stimulant medications seem to help the EF domains of sustained attention and verbal learning, but stimulant treatment does not seem to have an effect on interference control and processing speed. The weakest effect of stimulant medication was in organization/planning. The authors suggest that the results of this study may “begin to explain the apparent dissociation between stimulant-associated improvement in core symptoms of ADHD and academic performance.” Consequently, this study would suggest that many affected children will need both psychoeducational and pharmacological interventions to find maximum support (Biederman, Seidman, et. al., 2008, p. 1154).

Reason 5# Poor Self-Managers

Affected children are often poor self-managers. Being successful in school requires doing well on tests and finishing long-term projects. To achieve that, the child must pay attention and manage themselves so they do not get too far behind. The affected child may be working on a test or project when something else catches their attention, and their mind quickly jumps to the new distraction without considering the consequences of not finishing what they have started. He may be playing with an eraser when he should be working on a test, and before he knows it, class time has run out, and he can't finish the test. He may spend most of his homework time checking his iPhone rather than focusing on a reading or writing assignment.

Reason 6# World's Greatest Procrastinators

Time management is a constant struggle for affected children. They often will underestimate or overestimate how much time an assignment will take to complete. Consequently, they will leave everything to the last moment. Why do it today when there is always tomorrow?

ADHD children have a distorted sense of time, according to Thom Hartmann (1993). They can have an “exaggerated sense of urgency when they're on a task and an exaggerated sense of boredom when they feel that they have nothing to do.” The child's sense of time speeding by when he is working on a project can lead to chronic impatience. This elastic sense of time can lead to emotional ups and downs, which often make it more difficult to complete assignments.

Reason 7# Associated Disorders

ADHD children often can have associated disorders that can impact on their school performance. Common disorders often seen with ADHD are:

- Learning disabilities (LD) (10%-40%)

- Anxiety Disorders (34%)
- Depression and Dysthymia (15% to 75%)
- Conduct Disorder (11%)
- Oppositional-defiant disorder (ODD) (40%)
- Bipolar disorder (2%)
- Sleep Disorders (25%-50% of adolescents)
- Executive Function Dysfunction (50%) (Brown, 2005)

The importance of addressing an associated disorder is that often children experiencing one or more of these disorders will often not show motivation towards school. Medication can address some of the disorders, such as depression and anxiety, but LD's require academic accommodations and interventions. As reported earlier, medication can address the core symptoms of ADHD, but not all EF's.

If a child is on medication but still struggling in his studies, it's important to have the child evaluated for other contributing factors.

Lastly, home stressors have an impact on a child's school performance, but if addressed, the child will generally go back to being motivated to get good grades.

Conclusion:

Children with ADHD are often perceived as poorly motivated, when in fact, the basic problem is inconsistent performance and poor grades, which can lead to personal discouragement, and over time, low motivation towards school work.

The following suggestions can help an affected child become more motivated to work for good grades.

- If your child's grades are not satisfactory, make sure the material is not too hard for him/her.
- Monitor your child's progress on a regular basis for both accuracy, completion, and understanding.
- Alternate subjects. Remember, affected children get bored quickly. They will stay motivated longer if they can alternate back and forth among subject areas (15 minutes on math, 15 minutes on social studies, etc.)
- Praise your child when you find him/her keeping up on their studies. We all like to be complimented when we do well at something.
- Add interest to the school work by taking your child to places or events that bring his school work alive, such as a trip to the fire station, weekend trip to a historical site, or a day trip to a college for high school students.
- Ask for academic accommodations under Section 504 or an IEP if the child is struggling significantly. Often, it only requires small academic accommodations to help the affected child find more success.

- Often, for older children when homework becomes more challenging, a proper medication regimen can be helpful. The affected child may need the support of medication when he does his homework after school or in the evening.
- If your child seems to struggle even when properly medicated, it is recommended that you have your child evaluated for other possible contributors to his low motivation around school work.
- Remind yourself that any child will go through periods when they are less motivated about school work than at other times. Middle school children often show a drop in academic performance as peer relationships become more important. The affected child's lack of maturity makes balancing social life with academic performance difficult. Maturation often is a great healer for high school problems, from keeping and making friends to getting good grades.

References:

Barkley, R. A., (1997). *ADHD and the Nature of Self-Control*. New York: Guilford Press.

Biederman, J., Seidman, L.J., Petty, C. R., Fried, R., Doyle, A. E., Cohen, D. R., et. al. (2008). Effects of stimulant medication on neuropsychological functioning in young adults with attention-deficit/hyperactivity disorder. *Journal of Clinical Psychiatry*, 69 (7), 1150-1156.

Brown, T. E., (2005). *Attention Deficit Disorder: The Unfocused Mind in Children and Adults*, Yale University Press, New Haven

Comings, D., (1990). *Tourette Syndrome and Human Behavior*, Duarte, CA: Hope Press.

Goldman, D (1995). *Emotional Intelligence: Why It Can Matter More than I.Q.*, New York: Bantam Books.

Hartmann, T. (1993). *Attention Deficit Disorder: A Different Perception*. Grass Valley, CA. Underwood Books.

Meltzer, L. (Ed.) (2007). *Executive Function in Education: From Theory to Practice*. New York: Guilford Press.

Lougy, R. & Rosenthal, D. (2002). *ADHD: A Survival Guide for Parents and Teachers*, Duarte, CA: Hope Press.

Robin, A. L. (1998). *ADHD in Adolescents: Diagnosis and Treatment*. New York: Guilford Press.

