



FACT
SHEET

04 SYMPTOMS OF HYPERACTIVITY AND INATTENTION IN YOUNG CHILDREN

1 CONTEXT

Attention Deficit Disorder with or without Hyperactivity manifests in childhood and can lead to problems in school and low self-esteem which persist into adulthood. Although attention deficit is often diagnosed around the age of 7 years, its manifestations can be present before a child enters the education system.

SOURCE

This fact sheet is a brief summary of the results presented in the following article: CARDIN, Jean-François, HÉLÈNE DESROSIERS, Luc BELLEAU, Claudine GIGUÈRE and Michel BOIVIN (2011). "Hyperactivity and Inattention Symptoms in Children, from Preschool Years To Grade 2," *Portraits and Pathways. Québec Longitudinal Study of Child Development – QLSCD Series*, Institut de la statistique du Québec, No. 12, June. http://www.stat.gouv.qc.ca/statistiques/sante/bulletins/portrait-201106_an.pdf

Note that the QLSCD has been following a cohort of children who were born in Québec in 1997-1998.

2 HIGHLIGHTS

Based on data collected from the parents, the children could be categorized into four groups according to the development of hyperactivity or inattention symptoms from 3½ to 8 years of age:

- The first two groups comprised children who manifested few or very few symptoms of hyperactivity or inattention (39% and 15%).
- The third group included children in whom a number of hyperactivity or inattention behaviours were sometimes observed or certain behaviours often observed (38%).
- The fourth group was composed of children who presented a high level of hyperactivity or inattention symptoms (8%) during this period of childhood.

These four groups were found among both boys and girls. However, proportionally more boys than girls presented chronic levels, moderate or high, of hyperactivity or inattention symptoms from 3½ to 8 years of age.

The teachers' assessments were consistent with those of the parents. For example, children in the fourth group presented more hyperactivity/inattention behaviours at the age of 8 years as reported by their teachers. They also presented lower academic performance than those in the three other groups.

When we examined the development of hyperactivity and inattention symptoms separately, we observe that from 3½ to 8 years of age, 9% of the children chronically presented a high level of hyperactivity symptoms, while nearly 4% presented a high level of inattention symptoms.

From 3½ to 8 years of age, we observed the early appearance and relative stability of hyperactivity and inattention symptoms.



3 OF NOTE

Approximately 7% of children 8 years of age had already been diagnosed with Attention Deficit Disorder with or without Hyperactivity (ADD/H) by a health specialist, while 6% had taken Ritalin® or another medication to treat hyperactivity or inattention in the 12 months preceding the survey.

Nearly three-quarters of the children presenting a high level of hyperactivity or inattention symptoms from 3½ to 8 years of age were not considered to have a handicap, adjustment difficulties or learning problems and were in a regular class in Grade 2 of elementary school.

4 DEFINITIONS AND MEASUREMENT INSTRUMENTS

Hyperactivity and inattention symptoms in the children were assessed using the following nine items:

- (1) Could not sit still, was restless or hyperactive;
- (2) Couldn't stop fidgeting;
- (3) Was impulsive, acted without thinking;
- (4) Had difficulty waiting for his/her turn in games;
- (5) Couldn't settle down to do anything for more than a few moments;
- (6) Was unable to wait when someone promised him/her something;
- (7) Was unable to concentrate, could not pay attention for long;
- (8) Was easily distracted, had trouble sticking to any activity;
- (9) Was inattentive.

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INTERVENTION PATHS

Given the persistence of hyperactivity or inattention symptoms over time and the fact that they were generally associated with more difficult life trajectories, early intervention would be important, as well as providing the child and his/her parents tools to foster his/her development. Parents seem to be in a position to detect these symptoms in their child at an early age. With regards to school, since the majority of students manifesting a high level of hyperactivity or inattention symptoms were in a regular class, it would be important to conduct a needs assessment prior to providing support to them and their teachers.