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Primary Education and Hyperactive Children

By *Alkisti Katsakou**

Through the years, hyperactivity disorder develops into one of the most common disorders in children, known as attention deficit hyperactivity disorder (ADHD), characterized by symptoms such as impulsivity, inattention, and hyperactivity. These symptoms can make it challenging for hyperactive children to focus on lessons and assignments, resulting in difficulties in school. However, there are steps that schools can provide to assist these children, such as creating a safe environment, incorporating breaks to address impatience and restlessness, allowing more time for activities to reduce pressure, and establishing clear rules for classroom behavior. Elementary school provides an opportunity for hyperactive children to learn how to control their attention and concentration, thus alleviating the symptoms of the syndrome. In the beginning of a children's life, hyperactivity symptoms begin to emerge. Inattention, hyperactivity, and impulsivity are among the main symptoms that can lead to an early diagnosis of ADHD (Barkley, 2006a). Attention Deficit Hyperactivity Disorder (ADHD) is one of the most common disorders in children and adults, affecting approximately 3% to 6% of the school population. While males are predominantly diagnosed, females also exhibit symptoms and receive diagnoses, albeit at lower rates (Cantwell, 1996; Ronald Kessler, 2006). From the symptoms mentioned above, only three are needed to lead to ADHD diagnosis at a very early age. Nevertheless, the diagnosis is usually overlooked by parents and teachers because these symptoms are common among children this age (Palmer, 2001; Rafalovich, 2001). These symptoms later become the primary challenges for the child's adjustment in school and social settings. ADHD can also be characterized by impulsive behavior, constant movement, difficulty sustaining attention, and problems with memory and information retention (Tamsin Ford, 2003; Ronald Kessler, 2006). Conversely, students with ADHD struggle with these elements and so making appropriate teaching methods and interventions is crucial for their success. In order to achieve this, appropriate teaching methods and interventions must be used (Kakouros, 2000). The teacher plays a key role in the education of this child because he has the knowledge to address his needs and the ability to help him learn with the right educational strategies. Also, children with ADHD face emotional and social challenges in their daily lives, particularly in school (Papageorgiou, 2005). In conclusion, hyperactive children often face challenges in elementary school due to their overwhelming experiences in the classroom. Their hyperactivity, impulsivity, and difficulty sitting still for extended periods can impede their academic progress. However, early diagnosis of ADHD and appropriate management can alleviate the symptoms, enabling children to effectively manage impulsivity, lack of concentration, and hyperactivity. With the right support, these children can lead fulfilling lives both socially and academically.

Keywords: *education, ADHD, teaching strategies, hyperactivity, special developmental difficulties*

Introduction

It is known that in recent years, Attention Deficit/Hyperactivity Disorder (ADHD) is one of the most widespread disorders of childhood and adolescence, with its rate ranging from 3% to 6% of the student population. More specifically, Factors such as sugar, incorrect parenting behavior and food allergies, were considered at times

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as causes of ADHD but without sufficient evidence (Kotsifi, Nikolakopoulou, & Kamoutsas, 2013). Nevertheless, the modern view of the problem demonstrates that the disorder is due to neurological hereditary factors and not to environmental causes. A typical example is the lack of concentration, impulsivity and hyperactivity as the three main characteristics of children with ADHD, thus creating various problems both in the school and family environment, as well as in their interpersonal relationships (Cantwell, 1996). A necessary condition for the diagnosis of ADHD is that the symptoms must have made their first appearance before the age of 7, persist for at least six months, do not correspond to the individual's developmental level and cause significant dysfunction in at least two different environments (Bambali, 2022). ADHD is often accompanied by a low IQ by 7-15 points below normal, reduced adaptive abilities, learning difficulties, problems in the development of language and speech, difficulties in the sense of time, intense emotional reactions, motor delay growth and sleep problems. Also, high rates of morbidity are observed in ADHD with other disorders and syndromes such as Oppositional Defiant Disorder (ADD), Conduct Disorder (AD), Mood Disorders and Tourette Syndrome (Tsifintaris, 2022). In parallel, with regard to inattention, hyperactivity, impulsivity are the main symptoms. The latter, in fact, can lead to the diagnosis of ADHD at a very young age. Even so, the diagnosis is often overlooked by parents and teachers because these three symptoms are common in children of this age. Later, they are the main problematic core of the child in his attempt to adapt to the school and social environment (Palmer, 2001; Rafalovich, 2001).

It is worth emphasizing that a child to achieve academic success must have certain skills and characteristics. The first key is the child's ability to listen to what the teacher has to say. The child must listen carefully to the teacher's instructions in order to understand the basis of the lesson and integrate with it. No teaching content should be confusing for the student but absolutely adapted to his needs. Then to learn to cooperate with his classmates. More specifically, this skill teaches the child to work in a team context, share ideas and solve problems in collaboration with others. Able to complete tasks and finally not distract the rest of the class during lessons. Organization, planning and completion of tasks contribute to the development of the learning process. Finally, the child's ability to maintain his attention during lessons is vital. The ability to concentrate without distracting the rest of his classmates ensures not only his personal development but also the harmonious rhythm of the class. In summary, strengthening these skills is considered critical to promoting academic success and creating a positive learning environment.

All of the above are skills possessed by a student with normal educational development. Concentration during lectures and his active role throughout the course. On the other hand, a student with ADHD appears to have academic difficulties due to the fact that he cannot achieve the above basic elements, nor the proper relationship with his classmates. To achieve them, appropriate educational methodologies and interventions must be applied (Kakouros, 2000).

Main Body

As we know, the term ADHD is used to describe children and adults who experience severe behavioral and cognitive difficulties in important areas of daily life, such as interpersonal relationships, school, work and family, due to excessive motor activity and reduced ability to control attention. ADHD, or Attention Deficit Hyperactivity Disorder, represents a complex neurodevelopmental condition that significantly affects various aspects of a person's life. It is important to understand that ADHD is not limited to childhood, but can persist into adolescence and adulthood.

It is a multi-faceted and multi-dimensional disorder that significantly affects the daily life of people who experience it. Challenges arising from this disorder involve attention regulation, impulse control, and hyperactivity, significantly affecting overall functioning in a variety of settings. For example, in the school setting, students with ADHD may experience difficulty concentrating and paying attention, affecting their academic progress (Pavlou, 2016). Their impulse control may be limited, while their hyperactivity may create difficulties in participating in daily school activities. In addition to school, ADHD affects daily social and family activities. Inability to regulate attention and limited control skills can create challenges in communicating and participating in social events. In order to address these problems, it is necessary to adopt specialized educational approaches, support from specialist teachers, and cooperation with the children's families to create an environment that promotes their success and good integration into society.

More specifically, integrated approaches are required at the educational, social and family level. The individualized educational strategy is a key pillar for successful treatment. In the educational setting, the use of adapted teaching methods, such as differentiated instruction and the use of technology, can support students with ADHD. In addition, working with specialist teachers and providing additional services such as counselling, can improve support for children. In the social environment, awareness and education of peers, teachers and parents is important (Balatsou, 2017). Creating a supportive and understanding environment can reduce social exclusion and boost children's self-esteem. At the family level, the participation and presence of parents in the educational process, the provision of support from specialist counselors and participation in support groups can strengthen the family's ability to cope with the challenges arising from ADHD. In this way, it is ensured that children's needs are treated with respect and adaptation, promoting the integration and self-esteem of children with ADHD.

In children, ADHD often manifests as difficulty maintaining attention in academic settings, completing tasks, or following instructions. Their behavior is manifested by elements of hyperactivity that presents as restlessness and inability to participate in calm activities. These challenges can strain interpersonal relationships, both with peers and family members, as individuals with ADHD may struggle with social cues and maintaining attention in social interactions.

The transition to adolescence and adulthood for people with ADHD is a behavioral event that can evolve, but key challenges remain. In an academic or professional environment, maintaining focus, organizing tasks, and meeting

deadlines become constant obstacles. It is worth noting that interpersonal difficulties encountered in childhood can extend to adult relationships, affecting communication and cooperation (Balatsou, 2017).

The emotional well-being of people with ADHD is not on the most balanced footing, as it is a persistent struggle that requires attention regulation and impulse control. This can lead to feelings of frustration, low self-esteem and increased levels of stress. It is important to recognize that ADHD is not the result of laziness or lack of willpower, but rather a neurobiological condition that requires a nuanced and empathetic understanding.

Management of ADHD usually involves a combination of behavioral interventions, psychoeducation and, in some cases, medication. It is important to approach ADHD holistically, considering the individual's strengths and challenges and implementing strategies that support their unique cognitive profile. By fostering an environment that recognizes the neurodiversity associated with ADHD, individuals can be empowered to navigate their lives more effectively and leverage their strengths. Education, awareness and knowledge are integral to ensuring that people with ADHD receive understanding and support from their environment.

Also, people with ADHD have difficulty working their memory and managing to retain information (Balasaki, 2015). Typically, the American Psychiatric Association emphasizes that there are three necessary symptoms to diagnose a student with ADHD. At first, parents must have noticed symptoms that appear before the age of seven and increase exponentially with the months. Symptoms should then continue to occur for at least six months in a row. In addition, the child is not ready to meet the developmental level of his age and shows an amount of dysfunction in at least two different environments. Symptoms occur consistently for at least six months in a row (Tamsin Ford, 2003; Ronald Kessler, 2006). In addition, the child is not ready to meet the developmental level of his age and shows an amount of dysfunction in at least two different environments. Symptoms occur consistently for at least six months in a row. Research shows that ADHD can be associated with a low IQ of 7-15 points, which can explain a child's reduced adaptive skills, learning disabilities, problems in speech and language development, difficulties with the sense of time, intense emotional reactions, delayed development of motor skills and sleep problems. From all the above, it is clear that the key to alleviating the syndrome is to detect it as early as possible and eliminate as many difficulties as possible that it can cause. There are three ways to intervene to alleviate this syndrome. The first is psychological, the second is pharmaceutical and the third is a combination of the two. In fact, the collaboration of a child psychiatrist, psychologist and special educator, together with the services of other mental health professionals, is considered necessary, especially if the child has other disorders and continues to face difficulties, despite the intervention to deal with the symptoms (Goria, Kontra, & Panagopoulos, 2017).

But psychological intervention does not only concern primary school children but also parents and teachers because they are responsible for educating the child and showing him how to develop his social skills. Psychoeducational support at home, with tailored symptom management strategies, can enhance the child's daily life. Informing parents about the variations in symptoms and how to deal with them

is essential. Teachers, on the other hand, need to be well informed about ADHD and develop adapted teaching strategies. Creating a classroom environment that supports the child's attention and participation can help achieve educational goals. Combined with therapeutic support, educational approaches at school and at home can contribute to reducing ADHD symptoms and help the child successfully cope with the demands of everyday life.

The syndrome is never cured but the child can learn to manage and succeed in personal and academic life (Balatsu, 2017). Treatment usually includes both pharmacological and psychoeducational interventions. Collaboration with qualified professionals, such as psychiatrists, psychologists and educators, is key to the proper management of the child with ADHD. Time management, organization and concentration, as well as educational strategies for managing the challenges of ADHD, play an important role. In addition, strengthening social skills helps the child develop positive relationships with peers. Programs that focus on enhancing self-esteem and social adaptability can have a positive effect. Overall, treating ADHD requires a comprehensive approach that incorporates both medical and educational aspects, enhancing the child's ability to manage their life successfully.

Special Development Difficulties – Emotional Dysregulation – Anxiety in Primary School

Special Developmental Difficulties, particularly emotional dysregulation and anxiety in the context of Attention Deficit Hyperactivity Disorder (ADHD) in elementary school children, are a multifaceted challenge stemming from struggles in organizing thought, speech, and behavior.

Initially, the main core of this syndrome comes from the difficulty the child has in organizing his thinking, speech and behavior. In more detail, the child with ADHD is usually abstract and loses things, makes mistakes as he does not have the patience to listen to the instructions that come to him while avoiding participating in the school procedures. The most important thing is that he does not calm down even during the lesson, which leads him to not being able to cope at school (Vassiliadis, Vlioras, Tsermentseli, & Tsaknakis, 2022). The child with ADHD usually exhibits abstract thought patterns and tends to make mistakes, mainly due to impatience to listen to instructions. This impatience extends to participation in school activities, where the child may avoid getting involved in various processes. The child ends up not being able to calm down even during lessons, which significantly hinders his ability to cope effectively in the school environment (Vassiliadis, Vlioras, Tsermentseli, & Tsaknakis, 2022).

Children with ADHD are more emotional and therefore sensitive and generally feel strongly. In fact, half of children with ADHD cannot regulate their emotions and sometimes fail to cope with an emotional response or a typical emotional response. This can lead to them crying more easily or feeling very angry. This emotional turmoil can manifest itself in a variety of ways, including impulsivity, outbursts, and difficulty shifting attention, all of which contribute to increased levels of stress for both the child and those around them. The above can lead to a variety

of emotions, such as sadness, anger, irritation and frustration. In particular, it has been established that these children with appropriate reinforcement become more irritable, while when the offered reinforcement is reduced, they experience the feeling of frustration more strongly.

On the other hand, research has shown that children with ADHD tend to have co-existing Tourette's syndrome (Pavlou, 2016) Tourette's syndrome is a neurodevelopmental disorder characterized by a diverse range of symptoms, including unexpected, uncontrolled movements and sounds, known as tics. Motor tics include unpredictable, repetitive movements, such as blinking, shaking the head, or making strange hand movements. Vocal tics include uncontrollable vocal utterances, such as uttering unintelligible words or sounds. In many cases, people with Tourette syndrome are aware of their tics, but have limited ability to control them.

Only a small number of children with ADHD have Tourette's, but a large percentage of children with Tourette's syndrome have ADHD, indicating that the presence of ADHD does not appear to increase the chances of developing Tourette's syndrome, however, children with Tourette's syndrome are likely to develop ADHD (Mahone, 2002).

The onset of the first symptoms of Tourette syndrome usually occurs during childhood, usually between the ages of 3 and 9. Symptoms may be persistent for some years and then improve, while in other cases they may persist to varying degrees throughout the person's life. Despite its challenging nature, the disorder does not affect the life expectancy or normal mental functioning of those who experience it. In conclusion, understanding and addressing the complex interplay between emotional dysregulation, anxiety and ADHD in primary school children is critical to providing effective support and promoting a positive and inclusive learning environment.

Strategies to Approach Students with ADHD in Primary School

As we know, the role of the teacher in primary education is crucial for the development and education of children. Educators at this level have many responsibilities and roles towards children, education and the community, especially when it comes to children with ADHD (Kyriakou, 2019).

Supporting students with ADHD in elementary school includes implementing strategies that address their unique learning needs, promote a positive learning environment, and encourage their academic and social development. In more detail, it is necessary to refer to the Individualized Educational Plans (IEP) which are adapted to the specific needs of students with ADHD. These plans describe individualized strategies, accommodations, and modifications to support the student's learning style. This may include privileged seating, frequent breaks, or modified assignments. Regular collaboration between teachers, parents, and special education professionals ensures that the IEP is consistently adapted to meet the student's evolving needs.

Still, the structured classroom environment benefits students with ADHD by providing a sense of routine and organization that offers balance and harmony. Clear and consistent expectations, visual timelines, and labeled workspaces help students understand what is expected of them and reduce stress. Teachers by using visual cues such as graphs or timers help students to manage their time effectively. Breaking down tasks into smaller, manageable steps and providing positive reinforcement for accomplishments contributes to a positive and supportive atmosphere.

Finally, differentiated instruction and multisensory learning is essential for students with ADHD. Teachers can use differentiated teaching techniques, offering a variety of approaches to content delivery, assessments, and assignments. Incorporating multisensory learning activities, such as hands-on projects or interactive lessons, accommodates the different learning preferences of students with ADHD (Katsiponti & Koutri, 2021). In addition, incorporating movement breaks or kinesthetic learning opportunities can help channel excess energy and enhance focus during academic tasks.

The teacher plays a key role in the education of the child with ADHD, because the teacher has the knowledge to meet his needs and the ability to help him learn with appropriate educational strategies (Kakouros, 2000). The teacher must be clear about what he expects the child to do and provide appropriate incentives to help him focus his attention. This can happen through the organization and structure of classroom activities, rules and routines. The goal is for the child with ADHD to gain self-confidence and self-esteem through reward and encouragement activities and exercises during the lesson. This will result in the child becoming familiar with both successes and failures (Capogianni, 2015).

These strategies, when implemented collaboratively and consistently, create an inclusive and supportive learning environment for students with ADHD that respects their needs. By recognizing and addressing the unique needs of each student, teachers contribute to their academic success and overall well-being by fostering a positive attitude toward learning and social interactions in elementary school.

Educational and Cognitive Style

The core principles of inclusive education state that all children should be taught and learn in an environment that allows them to develop their social-emotional and cognitive skills. The school environment must be prepared to offer appropriate guidance to a student with ADHD in order to eliminate the difficulties that may arise (Papageorgiou, 2005). This means that education must be adapted to the individual needs of each student, promoting interaction and cooperation between students.

In cases of children with Attention Deficit Hyperactivity Disorder (ADHD), the school environment must be specially prepared to offer effective guidance. Creating an environment that takes into account the unique needs of the student with ADHD is important in dealing with difficulties that may arise. Teachers need to be educated about ADHD so that appropriate teaching tools can support the student and adapt teaching methods.

According to the research of Papageorgiou (2005), the individualized approach to the education of students with ADHD is decisive for the effectiveness of teaching. When the teacher can recognize the particularities of his students, it means that he can also offer the student special strategies that will enhance his participation and performance in the school context, being next to him and an ally in his needs. The participation of teachers, parents, and school staff is the catalyst for creating an environment that promotes inclusive education and ensures the smooth academic progress of children with ADHD.

In fact, the modern school has an obligation to focus on the problem and utilize the findings of the latest research by proposing and implementing programs and coping methods. The latter are necessary as they help and prevent bad situations, which are capable of turning against society as a whole and also against the child himself who is possessed by such a disorder.

Ensuring a stable environment is critical for children with ADHD. The constant presence of the same teacher provides a sense of stability that is particularly important for the child's safety and flexibility as it brings balance to his mental world. Maintaining a balanced environment between physical and cognitive demands helps achieve optimal outcomes for the child.

Additionally, special adjustments to the curriculum are another practice that can support children with ADHD. Some lessons that require extra focus and concentration or have a significant degree of difficulty can be scheduled in the morning hours, when the child's ability to concentrate is at optimal levels. At the same time, collaboration with school experts and the provision of expert advisory support to teachers can help develop tailored approaches for each student. This shows the importance of collaboration and concerted effort in supporting children with ADHD. All are necessary to create the most conducive environment for children with ADHD (Katsiponti & Koutri, 2021). Even parents and their willingness to cooperate with teachers enhances the child's positive participation in school and helps to address his real needs. The parent becomes a member of the problem and a fighter for its solution.

At this point it is worth mentioning readiness, which plays a decisive role in the entire educational course of the child and in his success in life. So it is very important that the child is properly supported from the beginning. There are two types of readiness, learning readiness and school readiness.

In more detail, learning readiness refers to physical, motor, socio-emotional, behavioral, language and cognitive skills that indicate readiness to process and use standard educational instruction and environmental stimuli (Papadakis, 2020). These indicators demonstrate the child's readiness to process and use standard educational instructions and environmental stimuli (Papadakis, 2020). This multifaceted readiness is fundamental, laying the foundation for a child's cognitive development and adaptive skills.

On the other hand, school readiness refers to the knowledge and skills that a child needs to acquire in order to enter and thrive in a school environment. It includes the cultivation of appropriate attitudes that facilitate smooth adaptation to the school environment and successful navigation of the curriculum. School readiness is linked to intelligence, cognitive development, visual discrimination,

auditory ability, gross and fine motor skills, as well as social and emotional competence and maturity (Drosinou & Melas, 2009). Developing logical and mathematical thinking is a critical aspect of school readiness, emphasizing the importance of a holistic approach to preparing children for their educational journey.

It is imperative to recognize that in a child's early experiences the supports provided during the formative years significantly influence both learning and school readiness. Identifying and strengthening these readiness factors contributes to the overall development of the child and sets the stage for a successful educational journey. Parents, teachers, and the education system collectively play a vital role in cultivating these key elements of readiness.

Conclusion

Concluding the discussion of children with ADHD and their challenges in the school environment, it is evident that a collaborative and supportive approach is paramount to ensure their successful inclusion. The awareness of this issue on the part of parents and educational agents, information and cooperation between them can offer the most to students with ADHD and lay the foundations of a successful educational path for their children.

The difficulties of children with ADHD require a set of social interactions with a coordinated effort by teachers, parents and the wider community. Teachers play a key role in creating an inclusive and understanding classroom atmosphere. More specifically, professional development programs that educate teachers about ADHD, its manifestations, and effective teaching strategies can greatly enhance their ability to support students with ADHD. Cultivating a classroom environment that embraces neurodiversity and uses tailored interventions encourages a positive learning experience for every child.

In addition, the role of parents is critical in strengthening the support structure for children with ADHD. Communication between parents and teachers is considered so necessary that it aims at a holistic understanding of the child's needs and progress. Parents' involvement in advocating for appropriate accommodations and participating in their child's educational plan ensures a comprehensive support network. The role of the state and the State should not be overlooked as the provision of resources, funding and appropriate policies are only some of what they can offer and promote inclusive education. Access to special education services, early intervention programs, and trained professionals can make a significant difference in the academic and social development of children with ADHD. The state must offer opportunities for every student and contribute to the creation of an educational system open to all.

The diagnosis of children with ADHD must be quick so that the solutions come without haste. Children with ADHD pose a challenge to the educational mechanism and its reflexes in students with needs. Early detection allows the implementation of individualized interventions and support mechanisms, paving the way for smoother integration into the school unit. Through the collective efforts of teachers, parents, and the state, children with ADHD can gain the confidence needed to

overcome obstacles and thrive academically and socially. In the spirit of promoting inclusive education, it is essential to recognize the unique strengths of people with ADHD and celebrate the diversity they bring to the learning environment.

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