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Critical Issues: Is Attention-Deficit/Hyperactivity Disorder (ADHD) a Real Disorder? Date of Submission:
ADHD is one of the most controversial disorders that involve, teachers, authors, policy makers and scientists. Schetchikova identifies ADHD as an epidemic not only in the United States but also across the world. In reference to the National Institute of Health in Washington, DC, approximately five percent of all American children have been detected to have ADHD. Schetchikova (2002) notes that children diagnosed with ADHD have been treated with central nervous system stimulants. ADHD is a disorder whose primary symptoms include impulsiveness, hyperactivity and inability to sustain concentration (Schetchikova, 2002).
DeChillo (2011) asserts that Attention Deficit Hyperactivity Disorder would be better considered a problem in the self-willed dominance of attention rather than a disorder to pay attention. According to DeChillo (2011), people should not generalize every idiosyncrasy of human behavior and nature as an illness that needs to be medicated. It seems that individuals feel better when science names something that triggers discomfort in us as an illness.
ADHD is one of the most researched chronic disorders among children. Inattention and hyperactivity typify ADHD. There are several diagnostic forms which are based on clinical presentation that seek to describe the child’s behavior better. Numerous generic studies have identified associations with ADHD. Schetchikova (2002) asserts that studies have indicated that it is a heritable disorder and that the disorder arises from the amalgamation of genes which affect dopamine transporters. However, researchers have not identified what goes on in ADHD. Though neuroimaging and genetic studies have revealed an association with ADHD, this does not represent it as a neurological disorder.
In reference to DeChillo (2011), although biological factors may play a role in challenges a child faces in school work, a majority of children with this behavior do not have a biological deficit. The restlessness and daydreaming of the children is a similar trait and behavior to normal and healthy children when bored, trapped by situations or when not engaged. DeChillo (2011) notes that children with ADHD have shown few difficulties in activities they find appealing. For instance, they show signs of concentration when taught by a charismatic teacher. ADHD is not a deficit in thyroid but rather a deficit in the control over attention. However, adults once diagnosed with ADHD have shown characteristics of this disorder.
Schetchikova (2002) seems to have presented the idea well, but there is a lack of evidence to support that ADHD is a disorder. DeChillo (2011) has presented the argument well and presented some strong facts to support the argument.
I agree with DeChillo (2002). According to the facts presented, ADHD is not a disorder. Arguably, there is no allegation of a gene for a psychiatric condition has stood the test of time. Though there are many theories advanced towards this topic, there is no distinct neurological, genetic or biological etiology for mental disorders. Contemporary research for instance by Glenmullen have shown that ADHD is a heterogeneous disease caused by multifaceted connections of environmental and genetic factors and cannot be replicated precisely using genetic theory alone.
References
DeChillo, S. (2011, February 15). When the Diagnosis Is A. D. H. D. New York Times. Retrieved February 15, 2011,
Schetchikova, N. V. (2002, July). Medical V. Chiropractic Perspective and Theory. Children with ADDH. Retrieved July 2002, from http://www. chiro. org/pediatrics/FULL/adhd\_part1. shtml