

# Depiction of Experience in Parents of Children with ADHD Learn to Play with Their Child

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**Abstract**—Children learn most play behavior by watching, playing with, and even being guided by others. This is especially for children with ADHD (attention deficit hyperactivity disorder) who will probably need even more help than most children to get the most out of play. Hyperactivity is a pattern of behavior in a person who shows a silent, uncontrollable, uncaring, and impulsive attitude (acting at will). The purpose of this study is to explore the experience of parents of children with ADHD by learning to play with their children. This research using qualitative methods. The data collection tool in this research is the interviews schedule. The result from 6 participants shows that the majority of parents introduce many games or activities. A problem arises in co-parenting children such as a direct conflict and less knowledge of how to interact with ADHD children. The interaction between parents and children with ADHD tends to remind, threaten, and punish.

**Keywords**—*experience, learn to play, children with ADHD, school-age children*

## I. INTRODUCTION

Parents with children who have a lot of energy and look very physically active sometimes feel worried about their child's growth and development. Most of them suspect their children are included in the category of hyperactive children / ADHD (Attention Deficit and Hyperactivity Disorder). A thorough examination by a Child Development Doctor or Child Psychologist is required to find out more about this. According to Nash and Leventhal a child can be diagnosed as having ADHD at least when the child is 3 years old. These examinations include medical examinations, clinical interviews, rating scales given to parents and teachers, and behavioral observations [1].

ADHD or Attention Deficit Hyperactivity Disorder is a disorder in brain development that causes sufferers to become hyperactive, impulsive, and difficult to focus. According to Millichap [2], ADHD is a neurobiological disorder, and not a disease that has a specific cause. Peters and Douglas in Goldstein [3] describe "attention deficit hyperactivity disorder" (ADHD) as a disorder that causes individuals to have a tendency to experience problems with concentration, self-control, and the need to always seek stimulation. Barkley [4] explains that ADHD is an obstacle to regulating and maintaining behavior according to regulations and the consequences of the behavior itself. Barkley et al. [5] describes ADHD as an inability to inhibit, not an inability to pay attention in themselves. Children with ADHD (1) are unable to withstand disturbances: inattention, (2) unable to control thinking or impulsiveness, (3) unable to control actions or hyperactivity.

According to the DSM-IV (APA 1994), ADHD is a unit of three sets of inattention, hyperactivity, and impulsivity [5]. DSM-IV [6], describes ADHD as a disorder that can be detected before the child is 7 years old. ADHD is divided into 3 subtypes, namely the predominant type of inattention, the predominant type of hyperactivity/impulsivity, and the combined type characterized by inattention and high levels of hyperactivity-impulsivity [7]. The exact causes of ADHD remain unclear, but there are likely multiple causal pathways involved [8]. Research indicates that ADHD has a genetic component and has a high degree of heritability [9]. Although "bad" parenting is likely not a cause of the disorder, parenting can have an impact on both the trajectory of the disorder within a child as well as affect treatment outcomes for ADHD [10,11].

ADHD is estimated to affect 3.4% of the world's population of children and young adults. ADHD is the third most common mental illness after depression and anxiety disorders. About 50% of children with ADHD continue to experience ADHD symptoms in their teenager and adulthood. The severity of ADHD is determined based on impairment in social and academic or occupational functioning as mild, moderate, and severe [12,13]. An earlier diagnosis will benefit children in receiving early therapy so that impaired social function can be minimized. In some cases, environmental restructuring and behavioral therapy are required [12–14].

According to Bradley and Golden, in Nevid [7] ADHD is the most common psychological problem. The disorder is estimated to affect 3% to 7% of school-age children, or about two million American children [7]. This disorder is a hereditary psychiatric disorder and is estimated to have been inherited by 76% [15]. Grainger states that there are two types of hyperactive behavior [16]. First, Oppositional Defiant Disorder or resistance behavior disorder, which includes weakness, disobedience, aggression, destructiveness, anger, and lying. And second, Attention Deficit Hyperactive Disorder, which includes children whose attention control is weak.

According to Nash and Leventhal, children's attention span is different for each age, even at 1 year old, the attention span is only about 1 minute when playing with one toy. At a higher age, his attention span will increase by about 1-3 minutes per year. This attention is an ability that needs to be trained and will develop according to the child's age. The condition of ADHD itself, according to research, is caused by a neurological function disorder that is influenced by congenital factors. While other things, such as children often using gadgets, watching TV, or parenting, are not the main factors. However, this can be a factor that increases a child's risk of developing ADHD.

Parents who know about the condition of their child who has ADHD, might feel devastated, confused, and afraid. Every parent, of course, always wants the best conditions for their children. In several community forums of ADHD parents, some of these parents were initially difficult and devastated to accept the condition of their child's limitation, especially if the parents also experienced social rejection for their children. This phase becomes a very important stage for parents who can influence the child's further development. Children can feel their parents' pessimism, when they accept their child's condition. This condition can affect the growth and development of children because the family should be the first environment that can accept children. In this case, it can be seen that the role of parents is very influential on children's education because parents are the first and main teachers for children [17].

Parents often do not know what to do with their children, so they always compare their children with other children of the same age who are developing normally. Some of these parents are not even aware that their child suffers from ADHD. According to Judarwanto [18], if ADHD symptoms are

detected early, it will be easier to direct the parenting pattern of children with ADHD. Early detection of ADHD disorders that are carried out early, especially at school age, is very important to minimize the symptoms and consequences that arise in the future. If ADHD is not detected early and received adequate therapy, the consequences will be very vast, in other words, inhibiting the stages of psychosocial development of children, causing failure in academic, social and low self-esteem [19,20]. Early detection of ADHD must involve several levels of society such as medical personnel, teachers, and parents [18].

Children with ADHD are not only facing the problem of rejection but also face barriers in various aspects of social functions with their same age friends [21]. The deferment in social development experienced by children with ADHD is related to the child's inability to perceive social cues and nonverbal messages that exist in social contexts. Therefore, parents must be able to care for and accompany ADHD children with extra patience and energy. Children with ADHD tend to choose aggressive responses to deal with social situations. As a result, the environment often rejects children with ADHD, which is also caused by the child's low social skills. The emergence of an aggressive response could affect mutual relations between parents and their children. Therefore, in order that ADHD children can grow and develop optimally, parents need to understand their behavior. Based on the background above, this research aims to describe the experiences of ADHD parents and their children when they interact in daily life while playing at home.

## II. RESEARCH METHODS

The majority of previous research on ADHD has involved quantitative methods and has largely focused on diagnostic practices [22], parenting styles [23,24], child care [25] and child behavior [26]. The approach used in this research is phenomenology, where the researcher collects data from individuals who had personally experienced the phenomenon to be studied. Qualitative research tends to lead to research that is naturalistic phenomenological and ethnological research, as well as interpretive, using interpretations that involve many methods in examining the research problem. The phenomenological approach describes certain phenomena as life experiences, namely; intuitive, analytical, and descriptive stages. Sampling in this study using the purposive sampling technique.

This study took a sample of parents who have ADHD children. These parents are members of a community of parents of ADHD children. The number of participants in this study was 6 parents who had ADHD children. Interviews were conducted online via the Zoom cloud meeting device. The interview guide was in the form of semi-structured questions to help the researcher keep the questions in line with the research objectives. Parents were initially asked to "Tell us a little about how your children are doing at home". If encouragement is needed to initiate further conversation, open-ended questions such as "How did you feel after learning that your child has ADHD?". Interviews were digitally recorded and transcribed.

All participants were given a pseudonym to ensure confidentiality.

The data analysis technique refers to the opinion of Miles and Huberman [27], which includes data reduction, data exposure/categorization and drawing conclusions. This analysis and research are in the form of content analysis, namely categorizing research results based on meaning.

### III. RESULTS OF THE RESEARCH

Based on interviews with 6 participants, the results showed that in general, parents' knowledge about ADHD disorders varies. Some of the parents have not recognized the behavioral characteristics of ADHD, how to manage and raise ADHD children, and the appropriate treatment for ADHD children.

The results of open interviews with parents or research participants showed the following results:

- My son has ADHD and until now he still doesn't understand when someone is talking to him. He is able to follow when spoken to, but does not really understand what is being said and sometimes gets angry when he is always being asked.
- My child has a hard time concentrating. Especially if he only learns by listening. He must see or someone with a visual child type.
- When my child does homework or if I give him homework myself, he would take a long time to do it, sometimes still doodling or looking here and there. He could actually do it; it just took quite a while.
- My first child has ADHD. It was only when he was 6 years old that I found out that he had ADHD, which is when he started kindergarten also because he looked very different from his friends. At the age of 2 years, he was able to speak fluently, he was very talkative, he asked all the things and his curiosity was very high. Until now, he still likes to be angry if his wishes are not obeyed.
- My child is hyperactive and has a hard time listening to what other people have to say. When he was told

something, he seemed to understand but still did the forbidden thing. I was getting tired, emotional, and sometimes wanted to cry. He is also always rude to his younger sibling, always messing things up in the house and just doing what he wants as he pleases.

- If my child is not fierce, but he likes to be busy alone. He was busy running and jumping. Likes to scream, really likes to play with toothpaste, even sometimes the soap he uses when taking a bath alone, would definitely get messy in the bathroom.

From the statements of the participants above, it can be seen that the feelings of parents were different from each other, especially after parents find out that their child has ADHD. According to Hidayati [28], ADHD parents, in addition to having to deal with their psychological feelings, also have to face various external views. Most parents experienced shock mixed with sadness, worry, anxiety, fear and anger when they first hear that their child has been diagnosed with ADHD. Parents of children with ADHD felt anxious about the future of their children because their children have deficiencies [29]. Mothers who have ADHD children tend to withdraw from the environment when they find their children humiliated by others, as a result of the hyperactive behavior displayed by their children, to the appearance of signs of anxiety when the mothers talked about their children's difficulties [30]. This situation tends to cause parents, especially mothers, to get tired quickly, easily angry, frustrated, and easily explode when dealing with the attitudes and behavior of their children.

The responses shown by these parents are based on the fact that it is not easy to accept the fact of having an ADHD child. From the results of interviews with the participants, it was found that at first the parents did not believe what was happening but over time the parents could accept it. According to Kubler-Ross [31] in this situation, parents experience stages of denial, anger, bargaining, depression, and acceptance.

From the results of semi-open interviews with the parents, the following results were obtained:

TABLE I. RESULTS OF INTERVIEWS WITH RESEARCH PARTICIPANTS

Participants	Complaints	Positive Attitude
A	My child with ADHD is more easily anxious and discouraged. In addition, he is prone to psychosomatic disorders, such as headaches and stomachaches. Especially if he is disappointed, then he would be easily get emotional.	I acknowledged the limitations or the condition of my children, whatever they are, God has given me the trust to take care of them.
B	My child tends to be stubborn and gets angry easily if his wishes are not fulfilled immediately. My child is also not easily adjusted to the environment.	I often give praise if my child eats well.
C	My child has difficulty communicating reciprocally. He tends to be busy with himself and does not easily respond to the person he is talking to appropriately.	I asked the teachers' cooperation at school so that the teachers could understand my child's condition.
D	My child is often seen as naughty and sometimes experiences rejection from his friends. My child often feels depressed. Sometimes when I was irritated by my child's action, I often get annoyed.	I always supervise children, give criticize and sometimes give a little punishment. I apply consistent discipline, and always monitor their (children) behavior.

Table 1. Cont.

E	My child often refuses and rebels when there is tension between me and my child. I often feel depressed and the (our) home situation becomes uncomfortable.	I provide sufficient space for children's activities to channel their excess energy and invite them to do physical activities, such as jogging, cycling, and playing around the house.
F	My child loves to talk. He talks a lot, but what he is talking about is not very clear.	I try to raise my child's confidence and always encourage him to communicate.

In the table 1 above, it can be seen that parents have complaints against their children, but on the other hand, the parents are also trying to be able to help their children. Limited knowledge about ADHD makes parents less likely to be aware of the ADHD symptoms exhibited by their children. They consider the child's hyperactivity and lack of concentration to be normal. Related to the limited knowledge of parents about the characteristics of ADHD, parents often seek information about ADHD children from their characteristics, so they can handle and understand their children's feelings better and understand their wants and needs.

Hyperactive behavior in ADHD is related to how the children are active and interact with their friends. Parents often experience communication barriers with their children. Parents should be able to understand that the failure of socializing everywhere could develop a negative self-concept in children. Children will feel that they are bad, always fail, incapable, and rejected. The development of ADHD children will be more optimal if they could get a special place and the right treatment. The role of parents is very important for educating or dealing with ADHD children to influence the behavior of ADHD children and change them for the better and in control.

Participant A tries to be able to accept his child's situation, even though they are often involved in emotional interactions with their child. The child has a delay in speaking and walking, the child's emotions are difficult to control. Children cannot be independent and there are still obstacles in treating children with ADHD. The child's development is slow, and it is difficult to concentrate causing a sense of worry and unable to leave the child unattended. In addition, concerns over the stigma from society on the behavior or character displayed by their children make parents more protective. Participant A tries to build the character and behavior of children from the family that begins with self-acceptance. They realize that acceptance of children in the family is important in child development. Accepting a child's natural condition with all its advantages and disadvantages becomes a very important stage for the next child's development.

Participant B has to deal with his child who likes to throw things when he was angry and liked to go here and there. Some efforts are made by participant B such as looking for information through some medias, like internet that related to the knowledge of their child's illness. Their knowledge about ADHD was obtained from various sources would make them always take time every day to just talk and do activities with their children. They give both verbal and non-verbal rewards in the form of praise and gifts if their children show positive behavior. Children are also often given attention and praise, if the children show positive behavior. Children can feel the

optimism of parents when they accept their child's condition and believe that they can do the best for their family's future.

Participant C cooperates with his child's teacher at school, such as information that his child is not able to follow lessons like other children at school. Parents also always work with therapists/psychologists to do therapy. The goal is to perfect the process of growth and development of ADHD children so that they become better. With the help of a therapist or psychologist, parents will find it easier to monitor or control the behavior of ADHD children and know what they should do for the proper handling of ADHD.

Participant D provides high and consistent discipline to his child. They explain to the child that there will be consequences if he does something the child should not do. If the child persists in doing so, the child will accept the consequences that he already knows. Participant D always cooperates consistently with the partner to achieve the settled goals. They try to help their children to plan, organize, control their desires, and complete tasks. They provide extra guidance so that their children can slowly develop their abilities little by little.

Participant E stated that they often spend time with their children by doing physical activities, such as walking around the neighborhood, cycling, or exercising. They realize that taking care of children with ADHD is highly dependent on the involvement and support of parents in improving the success of the child's independence, it would be difficult to achieve if the parents rarely spend time with their children. Children's independence is the main hope of all participants. The independence in question is the ability of ADHD children to help themselves in everyday life.

Participant F stated that he always treats his child with love and patience even though the child's attitude and behavior were very annoying. Communication barriers with their children are carried out with high intensity. Although the children often have difficulty communicating or follow instructions, careless, and lazy. In addition, the child has difficulty remembering things in daily activities and often loses their things, such as toys. At first, it is very difficult to deal with the child's behavior, but they would realize that if they don't have a lot of patience, it will trigger their anger and (unconsciously) will yell at their child that could build the negative effect on that child and make it difficult for the child to concentrate.

#### IV. DISCUSSION

Children with ADHD may have trouble paying attention, have trouble controlling impulsive behavior, or be overly active. ADHD children also have troubled relationships with others, and perform poorly in school. Knowing the

characteristics of ADHD children will help parents to immediately get treatment, or at least the knowledge to deal with it. One of the knowledges that ADHD parents must have is how to interact through games with their children, such as exercising. As stated by Herbowo [32], that if you have a child with ADHD, the child should be recommended to do physical activity because they are hyperactive. These children can be invited to exercise, so that excess energy can be used and, in the end, can make children calmer. Activities carried out are moderate-intensity activities, such as cycling or light walking or vigorous-intensity activities, such as running. As explained by Tanoyo [33], that ADHD children will have no difficulty in focusing attention when doing something they like.

The explanation above proves that various approaches can help parents to manage ADHD. In the play area, parents can invite their children to play, as well as do play therapy. Through the play area, parents can help their children to develop or improve various skills, such as running, cycling, playing ball, or other activities. Through these games, parents can build and maintain relationships with their children and at the same time can monitor the level of ADHD that their children have. On the other hand, parents can develop constructive ways to respond to behaviors that can result from ADHD.

Children with ADHD usually have self-focused behavior. They have difficulty when asked to pay attention, even when someone is speaking directly to them. The lack of focus on ADHD children can cause them to avoid activities that take a long time. They also often interrupt others while they are talking or playing. They can't sit still and are always trying to get up and running around and looking restless.

During playtime, these children often have difficulty waiting for their turn while playing games with other children. They often seem to have difficulty controlling their emotions. They can have angry outbursts at the inappropriate time. Anxiety can make it difficult for children with ADHD to play quietly or maintain composure in recreational activities.

## V. CONCLUSION

Based on the results of the research, it can be concluded that parents' knowledge of ADHD tends to be good and the psychological response of parents to the presence of their children is to accept the existence of the ADHD child. Some of the child's behaviors that often appear, such as children being very active, doing things without thinking more deeply, always needing to be warned, not listening, forgetting what was just told two minutes ago, and acting arbitrarily even though they have been warned repeatedly not to do it. Children are taught to cooperate by involving people around, such as teachers, therapists or people in their environment. This cooperation is very important because when raising children with ADHD, parents need a large amount of energy to accommodate their children's needs. During the playtime, parents can improve the relationship and interaction between parents and children and at the same time increase concentration in ADHD children.

The implication of this research expected the parents to be able to provide physical activity to their children, the activities of which are favored by children so that they can make children interested. Parents should provide examples and is capable of rebuke when the child looks less focused and do other activities. In addition, parents should have more frequent discussions with teachers or therapists on children's development, so that they are able to create discipline in harmony, be it at home or at school.

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