



PROBLEMS OF LANGUAGE DEVELOPMENT IN CHILDREN ATTENTION DEFICIT HYPERACTIVITY DISORDER (ADHD)

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Abstract

The purpose of this study is to provide an overview of language development in children with ADHD. Researchers use literature study research methods. The data that has been collected is then analyzed qualitatively with the Miles and Huberman model. Some of the problems in language development in children are ADHD, namely, not responding to questions or statements addressed to them, the focus of attention last for a short period, absence of eye contact when communicating, often answering in inappropriate context questions, and a lack of understanding of the explanation of the material that has been submitted by the teacher. In addition, phonological errors are also a problem experienced by ADHD children such as problems when pronouncing the last letter in words, pronouncing words, removing or changing phonemes, and removing phonemes when speaking. Language development in ADHD children also has disturbances in the delivery of speech intent, is less able to carry out conversations with a complete structure, does not pay attention to whether the interlocutor has the same knowledge or information as him, often makes ambiguous sentences, pragmatic language development in ADHD children has not yet developed well.

Keywords: *problems, language development, pragmatics, phonology, ADHD*

1. Introduction

A language is a communication tool that is used as an expression of one's feelings, emotions, and expressions towards the environment around them. Talking about language cannot be separated from language development which is influenced by many things, both internal and external factors. Differences in language development in children, both in form and structure, are strongly influenced by certain cultural and social backgrounds. Language development can also be said to be one of the most important factors in children's growth and development, because through language children try to understand, receive information, and express their ideas either receptively or expressively (Fitriyani et al, 2019).

Language development in children can be said to be problematic or have language disorders if the use of language is not like their peers. Language disorders can be divided into two, namely receptive and expressive language disorders. Receptive language disorder is a disorder in which a person has difficulty understanding messages conveyed by others. Furthermore, an expressive language disorder is a disorder in which a person experiences problems in expression and responding to the interlocutor (Wiyani, 2014).

One of the language disorders seen in ADHD children, ADHD disorders begin to be felt when a person is a toddler. ADHD cases are most often encountered when children are at school age. ADHD disorder continues to increase until adolescence by 60 to 80% and in adult life by 40% (Lola et al., 2019). The same thing was also stated by Honkasilta et al (2016) ADHD is a neurodevelopmental disorder that manifests the main symptoms, namely less attention from family, hyperactivity, and impulsivity. ADHD can affect individuals throughout their lives in various areas of life (education, social life, etc.). In addition, The symptoms of ADHD are also known as symptomatic disorders in the human brain. The disorder can be seen from the symptoms of children who are inattentive or hyperactive so that their growth and development are hampered (Abdullah et al., 2018). Even children with ADHD experience language acquisition problems, compared to their peers in terms of the appearance of the first word and using shorter sentences (Al-Dakroury, 2018).

Language disorders in ADHD children can be seen from a study conducted by Darmawati & Nuryani (2020) which examines pragmatic language in ADHD children. The results of their research indicate that children suffering from ADHD have problems in several developments, one of which is the development of pragmatic language. ADHD children cannot focus on a conversation, have difficulty formulating utterances, cannot formulate utterances with a good syntactic structure, tend to ignore responses or questions from interlocutors, and do not prioritize aspects of shared knowledge in communication. Furthermore, research conducted by Pujiati & Dien (2018) regarding language disorders in children with ADHD, the results of their research show that language disorders experienced by student X are about phonological and pragmatic problems. The factor that causes student X to experience language disorders is that he has ADHD characteristics and was born prematurely.

Research conducted by Hawkins et al (2016) on language problems and ADHD symptoms showed that ADHD children experience pragmatic language difficulties and are weaker related to difficulties in using language structures. Comorbidity between behavioral symptoms and pragmatic language. The symptom of ADHD is difficulty controlling behavior and language skills so that it can describe problems with important brain functions. Language problems in children with ADHD occur in phonological processes. Sady et al (2013) conducted a study on language disorders in children with ADHD, The results showed that children who had ADHD were usually late in language development. However, there was no clear difference in the language skills of children with symptoms of ADHD and those in the control group. These children have difficulty managing language semantically, pragmatically, and expressively. What can distinguish the child entitled ADHD from the child in the control group is their age to master the ability to accept language or receptive language skills.

The existence of these various problems makes researchers interested in researching language development in children with ADHD. Therefore, this study aims to describe and explain the problems of language development in children with Attention Deficit Hyperactivity Disorder (ADHD) and several actions that can be taken in the handling of children with ADHD.

2. Literature Review

The following are some of the theories used as a basis for conducting research.

2.1 Language Development

Language development is one of the most important factors in a person's life, because through language a person will be able to interact, understand, understand, and exchange information with one another. It is also through language that the development of a child can be seen and assessed, toddlers, adolescents, adults, and parents will have different stages of language development. Therefore, it is also through that someone can judge whether that person is classified as a toddler,

adolescent, adult, or parent. In addition, through language development, a person can also assess whether someone experiences speech delays or other language disorders if the language development in that person is not the same as their peers.

Language development is one of the most important developments for children, because, through language, children try to understand the world, receive information, and express their ideas. Language in children is applied in two ways, namely receptive language (listening) and expressive language (speaking). Children develop language skills which include phonological abilities, morphological abilities, semantic and pragmatic syntax. Phonological language ability means the child's ability to sound out language symbols. Morphological development is related to word construction. Syntax development is related to the arrangement of sentence structures. Semantic development is related to meaning. Pragmatic development is related to how the previous elements can be used in communication (Darmawati & Nuryani, 2020).

2.2 Attention Deficit Hyperactivity Disorder (ADHD)

ADHD children are children who have trouble concentrating to receive lessons from their teachers, especially the inability to focus and keep their attention on one thing. Some behaviors that look like; tend to act carelessly, are easily offended, forget school lessons and homework, have difficulty doing assignments at school or at home, difficulty in listening, difficulty in carrying out some commands, daydreaming, often slip up in speech, do not have high patience, often make noise, convoluted Confusing conversations, and interrupting and interfering in other people's conversations are other common forms of behavior that characterize ADHD (Amalia, 2018).

Although all children will display hyperactive and impulsive behavior, those who experience ADHD behavior disorders will be more severe and will occur with a greater frequency than children without ADHD (Hartingsih, 2013). In addition, children with ADHD show a significant relationship between attention deficit disorder and hyperactivity with their learning achievement. The inability of ADHD children to concentrate for a long period of time has an impact on their ability to understand and receive information related to lessons conveyed by teachers in learning activities (Lalusu et al, 2014). Some actions that can be done for children with ADHD are to do treatment through behavior that includes strategies based on antecedents-change. Given that children with ADHD have a high hyperactivity rate when compared to normal children, it is necessary to take therapeutic measures to reduce hyperactivity in children with ADHD (Wilens & Spencer, 2010).

3. Methodology

The method used in this research is a literature study. This research was conducted by reading literature sources to obtain the necessary data in the form of language development problems in ADHD children and actions that can be taken to treat ADHD children, such as data sources from books, scientific journals, e-books, websites, and other sources. This is because the literature study is related to the study of theories and other references related to values, culture, and norms that develop in the social situation studied (Sugiyono, 2012: 291). The data that has been collected is then analyzed qualitatively with the Miles and Huberman model which is carried out interactively and continuously to completion which is described in four stages. The four steps include data collection, data reduction, data presentation, and concluding/verification.

4. Findings and Discussion

ADHD is a disorder characterized by symptoms of inattention, hyperactivity, and impulsivity that can affect individuals in various areas of life such as education and social life. Even someone with ADHD experiences language acquisition delays. The following is some information about

language development problems in children with ADHD and some actions that can be taken in dealing with ADHD children obtained from literature studies or literature studies by reading library sources.

4.1 Language Development Problems in Children With ADHD

4.1.1 Inability to Focus

ADHD children experience several language disorders due to their inability to focus. ADHD diagnosis has long been associated with language difficulties in children, the likelihood of children with ADHD having a diagnosis of language disorders is higher than children without ADHD (Al-Dakroury, 2018). Children with ADHD do not respond to questions or statements made to them so that children with ADHD seem like they don't hear when spoken to. The focus of attention of ADHD children shifts to other objects when spoken to, ADHD children are only able to maintain the focus of their attention for a short time. This shows that the ability of ADHD children is classified as underprivileged because the focus of their attention is easily distracted. This problem is characterized by the absence of eye contact when communicating.

4.1.2 In Learning

In learning at school, ADHD children often answer inappropriate questions in the context of the questions the teacher asks them. This also has an impact on the lack of understanding of ADHD children regarding the explanation of the material that has been presented by the teacher, given that ADHD children find it difficult to concentrate (Davidson, 2010). The low ability of ADHD children in terms of learning occurs as a result of the inability of ADHD children to maintain their level of focus over a long period. High levels of hyperactivity in ADHD children also have an impact on the low ability of ADHD children to concentrate, whereas as we know that to be able to understand and understand the subject matter delivered by the teacher, high concentration is needed so that the material explained is easy to accept and understand.

4.1.3 Error in the Phonological Aspect

Phonological errors are also a problem experienced by ADHD children such as problems when pronouncing the last letter in a word, pronouncing words, removing or changing phonemes, and removing phonemes when speaking. Phoneme pronunciation errors can be seen from / f / which is pronounced / p / even though the two consonant pronouncements have differences, this error can occur because the speaker makes pronunciation easier which is influenced by internal factors, namely speech delay. Language development in children with ADHD also has problems in the delivery of speech intents. Even though ADHD children are classified as being able to convey the purpose of their speech when they get a response from their interlocutor, ADHD children do not respond anymore, so the information obtained by the interlocutor about ADHD children's speech is classified as incomplete (Green et al, 2013).

4.1.4 Not paying attention to shared information

In the context of a conversation, ADHD children do not pay attention to whether their counterparts have the same knowledge or information as him, so that children with increased symptoms of inattention and hyperactivity or also known as ADHD have complete knowledge about pragmatics but the problem is in the executive skills needed to apply them in the social context (Hawkin et al, 2016). Children with ADHD are able to tell simple stories, but the syntactic structure that is built is still not intact. Children with ADHD can tell stories without the subject but directly explain the predicate.

The conversations carried out by ADHD children do not pay attention to who the conversation actually is, whether to peers, parents or to people smaller than themselves, resulting in ADHD children having conversations about parental children's games when they should handle the problem with friends peers. Children with ADHD also have conversations about younger children's schoolwork when those who should be able to handle only their parents or peers. Given that speakers

in conducting conversations pay attention to shared knowledge so that the objectives of the conversation can be carried out properly, speakers can convey the information they want to convey, and the interlocutor understands and understands the information conveyed by the speakers.

4.1.5 Inability to understand verbal messages that are not supported by body movements

Children with ADHD better understand messages verbally conveyed by gestures than verbal messages that are not supported by body movements. In addition, ADHD children also do not understand messages if the messages are conveyed using foreign vocabulary. Children with ADHD also often make ambiguous sentences that make it difficult for the interlocutor to understand the meaning of the sentences being conveyed. This shows that children with ADHD have not been able to use a coherent syntactic structure, which causes multiple interpretations.

4.1.6 Pragmatic language development in ADHD children is not well developed

Pragmatic language development in ADHD children is not well developed because they speak a speech that the interlocutor cannot understand. Children who have ADHD symptoms experience low language skills, especially pragmatic abilities. Pragmatic language ability is the human ability to process language in social interactions both verbally and nonverbally. Pragmatic language skills pay attention to context elements in the form of environment, speakers, speakers, circumstances, and so on outside the language structure. Children with ADHD symptoms find it difficult to make sentences and manage language in discourse. They experience disturbance to interact socially using language according to context (Staikova et al, 2013).

In the pragmatic field, ADHD children are not able to understand a conversation in the context of the conversation. This causes ADHD children to often have conversations only according to their wishes, ADHD children can talk about what they are going to do but when the focus is divided when they see children playing ball, the conversation that initially discusses the actions they will take turns to a conversation about games. ball. This also applies when the other person asks a child with ADHD, when the other person asks a child ADHD, there are two possibilities that the child with ADHD will do. The first possibility is to briefly answer questions from the interlocutor, and the second possibility is that answering questions from the interlocutor does not fit the context of the conversation or it could even be that the ADHD child does not ignore the questions asked by the speaker to him. This can be due to the very low level of focus in children with ADHD.

4.2 Ways that can be done to treat children with ADHD

Some ways that can be done to deal with ADHD children are to provide free playtime to ADHD children, remembering that these children have hyperactive behavior, therefore parents should allow ADHD children to release all their energy. This is done with the aim that the level of hyperactivity in children with ADHD does not increase. Next, determine the appropriate action in dealing with and disciplining children with ADHD such as making certain rules at home as a parent who has a child with ADHD. Another way that parents can handle hyperactivity in children with ADHD is to invite these children to exercise together. The level of hyperactivity in these children can be utilized in a more positive way by doing sports. Doing sports together can also strengthen the closeness or closeness between parents and children. In addition, parents can also distract hyperactive children by giving toys to the child, for example in crowded situations or in public places, parents can give toys in the form of balls to children so that the child focuses on the ball given. As parents or educators such as teachers who have ADHD children, they can consider not giving such complicated tasks to ADHD children, given that ADHD children need special treatment, unlike children in general. Therefore, it is necessary to pay attention to what tasks can be given to children with ADHD disorders (Sari & Afifatu, 2020).

To train the level of focus in ADHD children can also be done by creating a comfortable room and away from distractions, given that ADHD children have a high level of hyperactivity when

compared to normal children in general. Furthermore, giving clear instructions without being verbose can be done by parents and teachers to make ADHD children understand the instructions given. One of the most important things is patience, both for parents who have children with ADHD or for educators who teach children with ADHD. Given that children with ADHD have high levels of hyperactivity, avoid yelling even though it is very difficult to handle the child, and do not punish children with physical punishment because it will cause the level of aggression in children to increase, especially those related to emotions in ADHD children.

It is no less important to do as parents who have ADHD children must be able to understand and understand the abilities and desires of the child. If a child with ADHD prefers sports, parents must facilitate and support the child in his/her favorite field. Do not force your will on children with ADHD, normal children cannot be forced to like things they don't like, especially children with ADHD disorders. This shows that parents should not be selfish and must act wisely. Parents also should not cover up the condition of ADHD children to the school for reasons of shame and so on. Parents must speak honestly about the condition of children with ADHD so that the school, especially teachers, as educators, can take appropriate action in educating and guiding the child, for example by taking appropriate learning approaches for ADHD children. The next way that can be done is by doing therapy to reduce and reduce the level of hyperactivity in children with ADHD. Parents as people who play an important role in children with ADHD should consult their related doctor as soon as possible and seek therapy immediately (Zaviera, 2007: 39-43).

There are several therapies that can be used to treat children with ADHD such as playing puzzle therapy which is believed to improve children's concentration and memory, behavior modification therapy such as time outs which is a way of eliminating negative situations in children by giving them time to think more calmly. regarding what he has done, medical therapy which is usually in the form of administering several kinds of drugs to help focus attention and control aggressive behavior, the "back in control" therapy program was developed by Gregory Bodenhamer, this program is based on a system based on rules so, it does not depend on the child's desire to obey. This program is more likely a training program for parents who are expected to create a system of rules that apply at home so that it can change children's behavior. Furthermore, music therapy can be done in various ways, namely singing, creating songs, playing musical instruments, and listening to music. Music therapy affects the mood of the listener subject to be more positive and can reduce the level of depression they experience (Prasetya et al, 2018: 87-90)

In addition, increasing the creativity of children with ADHD can be done through 3 literacy models, namely the multisensory literacy model, the play therapy model, and the personal-social guidance model. These models were chosen because they can optimize their sensory modalities, children can focus more on learning, self-potential can be further developed, and can train memory that can reduce ADHD symptoms. A multisensory literacy model that uses methods, media, and materials can ensure optimal stimulation to all of the child's senses and learning will be more effective, because it combines several learning styles, trains and develops the potential of the child that each person has, provides experiences to children, involving children maximally in understanding and understanding a concept through physical activities such as experiments, observation, and active discussion, which can reach every child's learning style. Furthermore, a play therapy model that can effectively stop ADHD symptoms, train the ability to defend certain objects, increase children's concentration, and can be used to introduce rules and control behavior. Finally, the pattern of personal-social guidance in mentoring children with ADHD is that guidance is more effective and produces results because guidance is carried out individually, where one mentor is one ADHD child. In addition, this method can increase knowledge and train memory and concentration in children with ADHD (Putra, 2018).

5 Conclusion

Some problems in language development in ADHD children are obtained from literature studies or library research by reading literature sources, namely, ADHD children do not respond to questions or statements addressed to them, are only able to maintain the focus of their attention in a short time, not the presence of eye contact when communicating, in school learning ADHD children often answer not in accordance with the context of the questions asked by the teacher, the lack of understanding of ADHD children towards the explanation of the material that has been delivered by the teacher. In addition, phonological errors are also a problem experienced by ADHD children such as problems when pronouncing the last letter in words, pronouncing words, removing or changing phonemes, and removing phonemes when speaking. Language development in ADHD children also has problems in the delivery of speech intentions, ADHD children are classified as less able to carry out conversations with a complete structure, do not pay attention to whether the interlocutor has the same knowledge or information as him, the syntactic structure built is still not intact, ADHD children also oftentimes make ambiguous sentences.

Some ways that can be done to deal with ADHD children are to give ADHD children freedom of playtime. Next, determine the right actions in dealing with and disciplining children with ADHD such as making certain rules at home as a parent who has a child with ADHD. Another way that parents can handle hyperactivity in ADHD children is to invite the child to exercise together. In addition, parents can also distract hyperactive children by providing toys. As a parent or educator such as a teacher who has a child with ADHD, you can consider not giving such a complicated task to a child with ADHD. To train the level of focus on children with ADHD can also be done by creating a comfortable room and away from distractions. Next, provide clear instructions without being verbose. One of the most important things is patience, both for parents who have children with ADHD or for educators who teach children with ADHD. Given that children with ADHD have high levels of hyperactivity, avoid yelling even though it is very difficult to handle the child, and do not punish children with physical punishment.

It is no less important to do as parents who have ADHD children must be able to understand and understand the abilities and desires of the child. Parents should not be selfish and must act wisely. Parents also should not cover up the condition of ADHD children to the school for reasons of shame and so on. Parents must speak honestly about the condition of ADHD children so that the school, especially teachers as educators, can take appropriate action in educating and guiding the child. The next way that can be done is to do therapy to reduce and reduce hyperactivity levels in ADHD children. Parents as people who play an important role in children with ADHD should consult their doctor as soon as possible and seek therapy immediately. In addition, increasing the creativity of children with ADHD can be done through 3 literacy models, namely the multisensory literacy model, the play therapy model, and the personal-social guidance model.

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