

# Action Plan:

## Creating Equitable Access to ADHD Care in Canada

Developed in partnership with:



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## Overview

Attention Deficit Hyperactivity Disorder (ADHD) is one of the most common childhood psychiatric disorders in Canada and can lead to various negative impacts across the lifespan into adulthood<sup>1</sup>. Individuals with ADHD have greater difficulty their academic and employment pursuits as well as their social and family relationships.

ADHD is a childhood-onset, neurodevelopmental disorder<sup>2</sup> characterized by deficits in the regulation of attention and behaviour that cause impaired executive function<sup>3</sup> with an estimated prevalence of 5 - 9% for children and adolescents<sup>4</sup> and 3 - 5% for adults worldwide<sup>5</sup>. ADHD is a chronic condition; only 15% of children with ADHD show remission of symptomatic and functional impairment in adulthood<sup>6</sup>.

The consequences of untreated ADHD are far too great to ignore. It is a serious mental health disorder contributing to marked impairment through a lifespan. However, it can be successfully treated with improvement in outcome and reduction of mental health consequences and costs.

Treatment for ADHD should consist of timely assessment and diagnosis, early intervention, and treatment tailored to individual need. An emphasis should be placed on psychoeducation and skill-based programs to teach individuals coping strategies to help prevent further comorbid disorders such as generalized anxiety disorder, depression and substance use disorder.



*Access to reliable, quality mental health care has never been more important, yet, too many Canadians are still unable to get the help they need when they need it most.*

***Prime Minister Justin Trudeau, May 3, 2021***

We believe collaboration between government, educational institutions, professional associations, mental health and addictions organizations, individuals and their families are needed to support Canadians.

We are calling for the Government of Canada to create an expert advisory group to support this collaboration. The group would guide specific actions designed to improve the long-term outcomes of individuals with ADHD. These actions are organized according to three key pillars:

- The first pillar addresses the needs of families. Actions here include the creation of ADHD-specific resources along with improving access to ADHD-trained health care professionals.
- The second pillar is focused on medical and mental health practitioners. As partners, we would seek to see ADHD made a clinical competency for practice licensure as well as improve access to training and ongoing support in evidence-based ADHD assessment and treatment.
- The third pillar is aimed at supporting educators. We call for ADHD specific curriculum in early childhood education and child and youth worker programs. The actions in this pillar would also support the implementation of workshops and resources to help teachers and better support students with ADHD.

## Impact

Children with untreated ADHD are at risk for accidental injuries, educational underachievement, and difficulties with socializing<sup>7</sup>. Adolescents are at risk for early onset substance use, delinquency and teenage pregnancy<sup>8</sup>.

While many adults fail to reach their full potential with studies showing an increased risk for substance use disorders, accidental injuries,

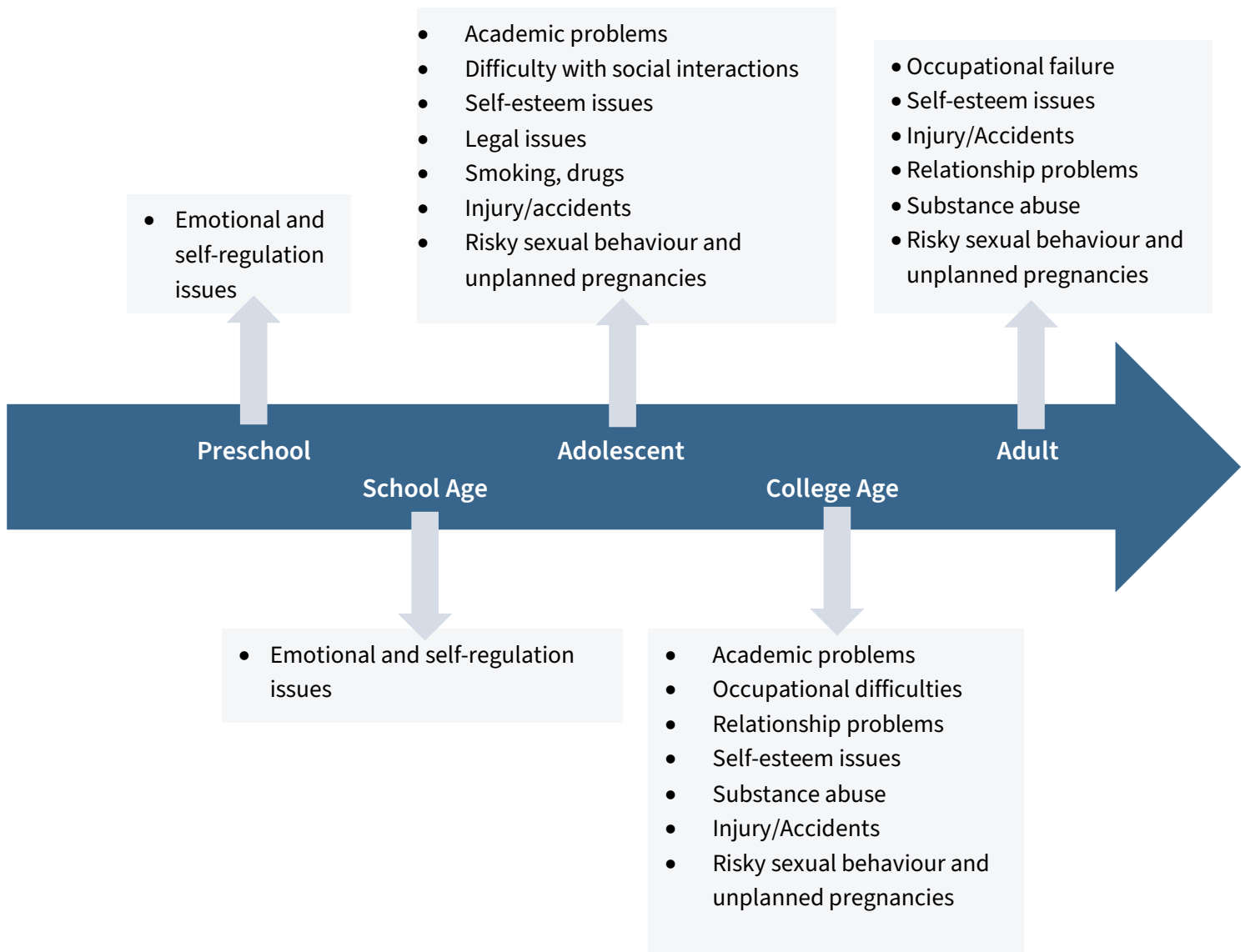
unemployment, gambling, low quality of life, suicide and premature death<sup>9</sup>. It is well documented that many individuals who are incarcerated have a diagnosis of ADHD<sup>10</sup>.



*I have recently been diagnosed with ADHD by a psychologist and we are trying to find a psychiatrist to help manage my medications. My primary care physician says there is no ADHD psychiatrist in my province and he doesn't know much about ADHD.*

***Patient in New Brunswick***

ADHD is also associated with significant morbidity and mortality. People with ADHD are at an increased risk for a range of significant health issues including obesity, asthma, allergies, diabetes, hypertension, sleep problems, psoriasis, epilepsy, sexually transmitted infections, abnormalities of the eye, immune disorders, and metabolic disorders<sup>11</sup>.



Furthermore, ADHD is associated with other comorbid psychiatric disorders. Research shows that approximately 44% of children and 80% of adults have at least one comorbid psychiatric disorder; the most common being anxiety, mood disorders, and substance use disorder<sup>12</sup>. Individuals with ADHD also present with higher rates of additional neurodevelopmental

disorders, such as Autism Spectrum Disorder, Dyslexia and Dyscalculia which can complicate life further<sup>13</sup>.

## Cost of Unmet Care Needs

In Canada, and globally, ADHD is underrecognized, underdiagnosed<sup>14</sup> and undertreated<sup>15</sup>. Adults with ADHD face difficulties obtaining assessment and treatment due to the lack of trained clinicians and the mistaken belief that this is a childhood disorder and/or requires specialty care.

***The costs of untreated ADHD to the Canadian taxpayer are enormous when compared to the cost of providing proper treatment.***

Studies of economic burden show that ADHD costs society hundreds of billions of dollars each year, worldwide. A systematic review of 19 U.S. studies of hundreds of thousands of people found that ADHD was associated with overall national annual costs from \$143 to \$266 billion, mostly associated with adults (\$105 to \$194 billion). Costs borne by family members of people with ADHD ranged from \$33 - \$43 billion<sup>16</sup>. While specific data is lacking on the impact of ADHD to the Canadian economy, extrapolation of American data suggests that Canada bears a sizable cost from a disorder that can be managed.

## Benefits of Accessing Care

There are effective medication and psychosocial (e.g. lifestyle and parent training) treatments available for ADHD which markedly change the usual trajectory of illness and impairment. With appropriate treatment, it is never too late to address these challenges and effect changes that can reverse negative impacts<sup>17</sup>.

Treatment with ADHD medications reduces a range of negative outcomes, such as injuries from accidents, substance use, depression, suicide, and criminal activity<sup>18</sup>. Despite concerns about the use of stimulants in those affected by ADHD, studies show that adverse effects are mild and manageable with appropriate care<sup>19</sup>. Importantly, studies have shown that early medication treatment of ADHD, prior to puberty, markedly diminishes risk for substance use disorder<sup>20</sup>.

Building medical<sup>21</sup> and mental health practitioners (MMHPs) confidence and reducing stigma towards ADHD requires robust education to meet the assessment and treatment needs of individuals with ADHD<sup>22</sup>. ADHD-specific education and training has been inadequately and inconsistently provided in Canadian health programs<sup>23</sup>. There is a significant need for access to adequately trained MMHPs in rural and remote regions yet there are no programs seeking to fulfill this need<sup>24</sup>. In addition, access to resources for individuals, families and educators enables them to navigate ADHD challenges that contribute to functional impairment and comorbid disorders.

The **Action Plan to Create Equitable Access to ADHD Care** presented below addresses the needs of individuals with ADHD through the development of adequate education and training for families, medical and mental health practitioners, and educators. The goal is to better the long-term outcomes of individuals with ADHD. This will in turn reduce the incidence of comorbid psychiatric disorders that exacerbate impairment or disability, and result in significant cost to the individual and society. Successful treatment is attainable and life changing for those impacted by ADHD.

Three distinct yet interconnected **pillars** form this Action Plan:

**Pillar 1:**

**Empower** families and individuals with resources and education to better recognize, understand, and manage ADHD




**Pillar 2:**

**Educate** medical and mental health practitioners in an evidence-based approach to ADHD assessment, diagnosis and treatment across the lifespan

**Pillar 3:**

**Support** educators with knowledge to better understand and support their students with ADHD

# Action Plan

 <p><b>Pillar 1</b></p> <p>Empower families and individuals with resources and knowledge to better recognize and understand ADHD and to access care</p>	 <p><b>Pillar 2</b></p> <p>Educate medical and mental health practitioners (MMHPs) in an evidence-based approach to ADHD assessment, diagnosis and treatment across the lifespan</p>	 <p><b>Pillar 3</b></p> <p>Support educators with knowledge to better understand and support their students with ADHD</p>
<p><b>Action 1</b></p> <p>Develop ADHD resources to help manage ADHD for individuals with ADHD and family members.</p>	<p><b>Action 1</b></p> <p>Require medical schools and other MMHP educational institutions to include ADHD as a clinical competency for practice licensure.</p>	<p><b>Action 1</b></p> <p>Ensure ADHD education is a curriculum requirement for all teacher training programs.</p>
<p><b>Action 2</b></p> <p>Provide equitable access to ADHD-trained MMHPs.</p>	<p><b>Action 2</b></p> <p>Ensure all MMHPs can access training and ongoing support in ADHD assessment and treatment.</p>	<p><b>Action 2</b></p> <p>Equip educators with knowledge and resources to support students with ADHD and comorbid disorders.</p>



## Pillar 1:

### Empower families and individuals with resources and knowledge to better recognize and understand ADHD and to access care

Individuals and families need to know that ADHD is a common neurodevelopmental condition and be able to recognize the signs and symptoms. Families should be aware that ADHD can seriously impact a child or adolescent's education and social functioning. However, the right support, school accommodations and appropriate treatment, can change the life trajectory of an individual and prevent many of the consequences of unmanaged ADHD. Parents and individuals should not feel stigmatized by ADHD.

#### **Action 1: Develop ADHD resources for individuals with ADHD and family members**

Very few programs and services exist in Canada to address the needs of individuals with ADHD and their families. Individuals and families need access to credible ADHD information and resources so they can better understand and treat the disorder.

#### **We recommend the immediate development of the following resources:**

- **A toolkit (in various languages and formats)** to assist in early recognition of ADHD. Parents/caregivers, children, adolescents, and adults need access to information on signs, symptoms, assessment, and treatment. Understanding that ADHD can impair one's life trajectory would encourage many to engage in effective management.
  - Programs such as psychoeducation workshops and, skill-based programs, for individuals and families to learn more about ADHD and develop the skills necessary to manage symptoms and improve daily functioning.

- **Workshops** for families to learn about ADHD challenges and ADHD management skills. Gaining this knowledge would enable them to champion their family member's success and address challenges of their own.
- **Support groups** that provide a network for individuals and families to discuss shared concerns, seek answers, support, and tips on navigating the health care system.
- Robust **screening** for mental health and learning challenges must become routine at every periodic child visit.

*Note: The Centre for ADHD Awareness Canada (CADDAC), is a small, charitable organization that could champion efforts to create accessible ADHD-specific resources if given the funding to take on this mandate. CADDAC's mission is to improve the lives of Canadians affected by ADHD through awareness, education and advocacy.*



*We are struggling with our current family doctor as he has told us he's not very experienced with ADHD and it is overwhelmingly difficult to get treatment from him. Based on my daughter's symptoms and psych-ed evals from school, he felt the diagnosis was clear, but has little to offer in way of support with medication and symptom management. **Parent of patient in British Columbia***

## **Action 2: Provide equitable access to ADHD-trained MMHPs**

One of the biggest obstacles individuals and families affected by ADHD face is the inability to access an ADHD assessment and treatment. The lack of qualified health care professionals available to assess and treat ADHD has resulted in wait times of up to 1.5 years in certain parts of the country<sup>25</sup>. Early intervention is recognized as a key element for reducing the risk of poor long-term outcomes. ADHD Practice Guidelines recommend a comprehensive, collaborative and multimodal approach to treating ADHD. Combining pharmacological with psychosocial

interventions is recommended as the optimum approach to address the core symptoms of ADHD and teach the skills necessary to be successful in life<sup>26</sup>.

**We recommend rapid implementation of the following:**

- **Access to timely assessments.** People with ADHD need access to trained MMHPs who can conduct affordable ADHD assessments, whether they live in urban centers or more remote regions.
- **Accessible and affordable ADHD treatment** for all Canadians. This should include not just medication but also evidence-based psychosocial support such as coaching, behavioural management and parent training.

*Note: CADDRA - the Canadian ADHD Resource Alliance is a national non-profit association that endeavors to create equitable access to ADHD care through their mission to support health professionals in the assessment and treatment of ADHD through education, the Canadian ADHD Practice Guidelines, online assessment tools, advocacy and research.*

**Key Partners to Succeed**

- Centre for ADHD Awareness Canada (CADDAC) - to support families and individuals
- CADDRA - Canadian ADHD Resource Alliance - to support healthcare professionals
- Individuals with ADHD and supporting family members



## Pillar 2:

### Educate Medical and Mental Health Practitioners (MMHPs) in an evidence-based approach to ADHD assessment, diagnosis and treatment across the lifespan

Mental health literacy is a key clinical competency for primary care clinicians and specialists. A review of studies across Australia, Europe, the United States and Canada found that general practitioners may be reluctant to provide ADHD assessment, treatment and referral due to controversy around medicalization, stigma, and labeling.

A Canadian study found that nearly twice as many practitioners cited low comfort and skill for diagnosing ADHD compared to diagnosing mood disorders. Levels of comfort and skill for ADHD diagnosis or treatment were positively associated with specialist training, continuing medical training and negatively related to beliefs that ADHD is connected with family stress, and that ADHD assessment is difficult and subjective<sup>27</sup>.

Early recognition of childhood mental health disorders and timely intervention

reduce the impact on our most vulnerable citizens. Given the high costs of ADHD to both the health care system and society at large, it is paramount that we prioritize the training of primary care clinicians to manage ADHD. Robust screening for mental health and learning challenges must become routine at every periodic child visit.



*I have done some research and am positive I have ADHD, but I would like to have a professional assessment done. However, I am not sure where to go or what to do as it is not covered under OHIP and I do not have the resources to pay \$500 or more for an assessment. Patient in Ontario*

Clinicians trained in pediatric mental health provide cost savings in the form of fewer emergency room visits<sup>28</sup>, reduced admissions to hospital and decreased length of hospital stays and lower hospital wait times<sup>29</sup>.

### **Action 1: Require medical schools and other MMHP educational institutions to include ADHD as a clinical competency for practice licensure**

While ADHD is taught in the Canadian medical curriculum, it is not given sufficient emphasis<sup>30</sup>. A robust education in the functional and psychiatric impairments of ADHD with a proportionate number of examination questions to ensure that students are accountable for this knowledge would be a giant step towards MMHP awareness. ADHD should be afforded equal weight with depression, schizophrenia and similarly impairing mental health challenges.

#### **We recommend implementation of the following:**

- Significantly **expand** education in the functional and psychiatric impairments of ADHD, its assessment and treatment in MMHP training institutions to ensure, ADHD receives equal emphasis in the curriculum as other mental health conditions
- **Mandate** questions on ADHD in final licensing examinations for MMHPs.

### **Action 2: Ensure all MMHPs can access training and ongoing support in evidence-based ADHD assessment and treatment**

ADHD needs to be recognized as a real and impairing disorder that can be successfully managed in primary care. Easily accessible and accredited programs could educate clinicians in managing this very treatable disorder while new technology and tools could assist in the process. Access to expert opinions via all access points i.e. telemedicine, e-consults, family health teams or office consultations would be reassuring to primary care clinicians when managing ongoing care through the lifespan.

#### **We recommend immediate allocation of funding for:**

- Ongoing medical education of ADHD addressing the needs of different groups of MMHPs
- New tools and technology to assist in the assessment process
- Expert support through e-consults or telemedicine for frontline clinicians
- Psychosocial supports (e.g. psychologists, therapists, social workers) that complement medical care and support individuals and families

## Key Partners to Succeed

- CADDRA - Canadian ADHD Resource Alliance
- Association of Faculties of Medicine of Canada
- College of Physicians and Surgeons of Canada,
- College of Family Physicians of Canada,
- Canadian Nurses Association
- Canadian Association of Social Workers



*I was referred to an ADHD clinic in Niagara which is no longer accepting referrals. Is there a list of trusted specialists? Are there any such directories for adult ADHD in Canada, or should I just google to find someone?*  
**Patient in Ontario**



## Pillar 3:

### Support educators with knowledge to better understand and support students with ADHD

School can be a challenging for students with ADHD. Executive functioning impairments can make it difficult to succeed. It is well documented that children diagnosed with ADHD suffer from problems in daily life functioning as well as difficulties in school<sup>31</sup>. Classroom challenges mainly include academic underperformance which often persist into middle and high school. Adolescents with ADHD have lower grades, are more likely to be suspended or expelled, fail a class, and have higher rates of absenteeism<sup>32</sup>. Studies show 26% of students with ADHD have failed or repeated a grade and 32.2% do not graduate high school<sup>33</sup>. Because of the difficulties in high school, only 30% of students with ADHD go on to university with only 15% completing a four-year degree<sup>34</sup>.

Many educators still believe that ADHD is a disorder of “bad behaviour”, when in fact it is a complex neurodevelopmental disorder that significantly impacts learning. Many parents and medical professionals strongly believe this lack of understanding of ADHD in the school system directly impacts the mental health and well-being of students with ADHD. Many students with ADHD are repeatedly ridiculed and judged for much of their childhood. This in turn contributes to high rates of anxiety, depression, and substance use disorder as adults.

To reduce stigma and misconceptions about ADHD, educators need access to up-to-date research on ADHD and how it impacts learning. A UK study reported substantial behavioral and academic benefits from simply providing teachers with brochures containing information about ADHD and advice on effective teaching strategies<sup>35</sup>. Educators play an important role in a shaping a child’s life, therefore it is imperative educators recognize the signs and symptoms of a child struggling academically to keep up with their peers.

## Action 1: Ensure ADHD education is a curriculum requirement for all teacher training programs

### We recommend that:

- Faculties of Education champion a robust mental health curriculum incorporating ADHD as a required competency for teachers.
- Colleges update their curriculum to incorporate ADHD education into Early Childhood Education (ECE) and Child and Youth Worker (CYW) programs. Early recognition of symptoms, understanding impairments, and implementing strategies to support children will create an environment where children can reach their full potential.

## Action 2: Equip educators with knowledge and resources to support students with ADHD and comorbid disorders

### We recommend the introduction or expansion of the following:

- Ongoing educator workshops to learn strategies, approaches, and best practices in engaging and teach children with ADHD.
- ADHD specialists available in all school boards to help schools implement strategies and accommodations in the classroom.
- Assistive technology tools and software to help children with ADHD excel in school.



*I'm hoping to get some information on what resources are available for my son (4) who has severe ADHD. He's essentially only been offered medications and at this point which have either had adverse or limited effect. We are having to pick him up early from school daily because of his aggression. Parent of patient in Ontario*

## Key Partners to Succeed

- [Canadian School Board Association](#)
- [Association of Canadian Deans of Education](#)
- Ministries of Education
- Faculties of Education
- [Canadian Teachers Federation](#)
- [Canadian Union of Public Employees](#)

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- Volition, planning, and purposive, goal-directed, or intentional action
  - Inhibition and resistance to distraction
  - Problem-solving and strategy development, selection, and monitoring
  - Flexible shifting of actions to meet task demands
  - Maintenance of persistence toward attaining a goal
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*This action plan was authored by key stakeholders and clinicians through collaboration with CADDAC, CADDRA, and CanReach. Coordination support, through a third-party consulting company, was funded by Takeda Canada Inc. The authoring parties did not receive financial support from Takeda Canada Inc.*