

Seriousness and pervasiveness of impairments: Educational, Clinical, Interpersonal

- **Poor School Performance (90%+)**
 - More failing grades
 - Reduced productivity (greatest problem)
 - Lower GPA (1.7 vs 2.6)
 - Grade retentions (42% vs 13%)
 - Lower class rankings (69% vs 50%)
 - Higher rate of suspensions (60% vs 19%) and expulsions (14% vs 6%)
- **Low Academic Achievement (10-15 pt. deficit)**
- **Low Average Intelligence (7-10 point deficit)**
- **Learning Disabilities (10 to 70%)**
 - Reading (15-30%; 21% in Barkley, 1990)
 - Spelling (26% in Barkley, 1990)
 - Math (10-60%; 28% in Barkley, 1990)
 - Handwriting (common but % unspecified)
- **Academic Outcomes**
 - 23% to 32% fail to complete high school
 - 22% vs 77% enter college
 - 5% vs 35% complete college

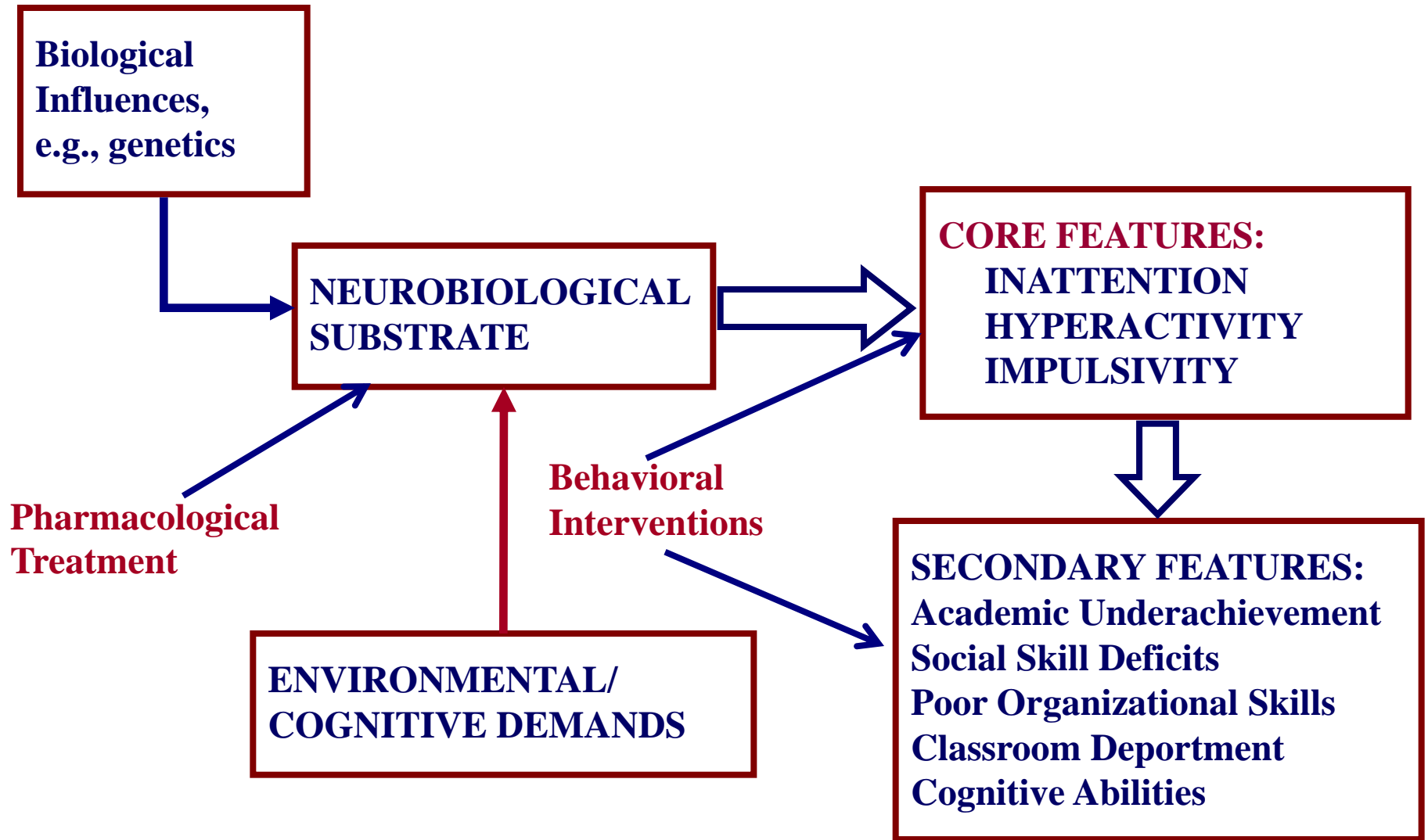
ADHD Cost of Illness (COI) in USA

COI = Educational accommodations
Mental health care
Parental work loss
Juvenile justice system involvement

COI = Mean = **\$14,576** annually per child (Pelham et al., 2007)
Range = \$12,005 to \$17,458

COI = ***\$40.8 billion*** annually (based on assumed 5% prevalence rate and 2.8 million school age children in the United States (National Center for Education Statistics, 2010, enrollment data))

DSM-IV CLINICAL MODEL OF ADHD

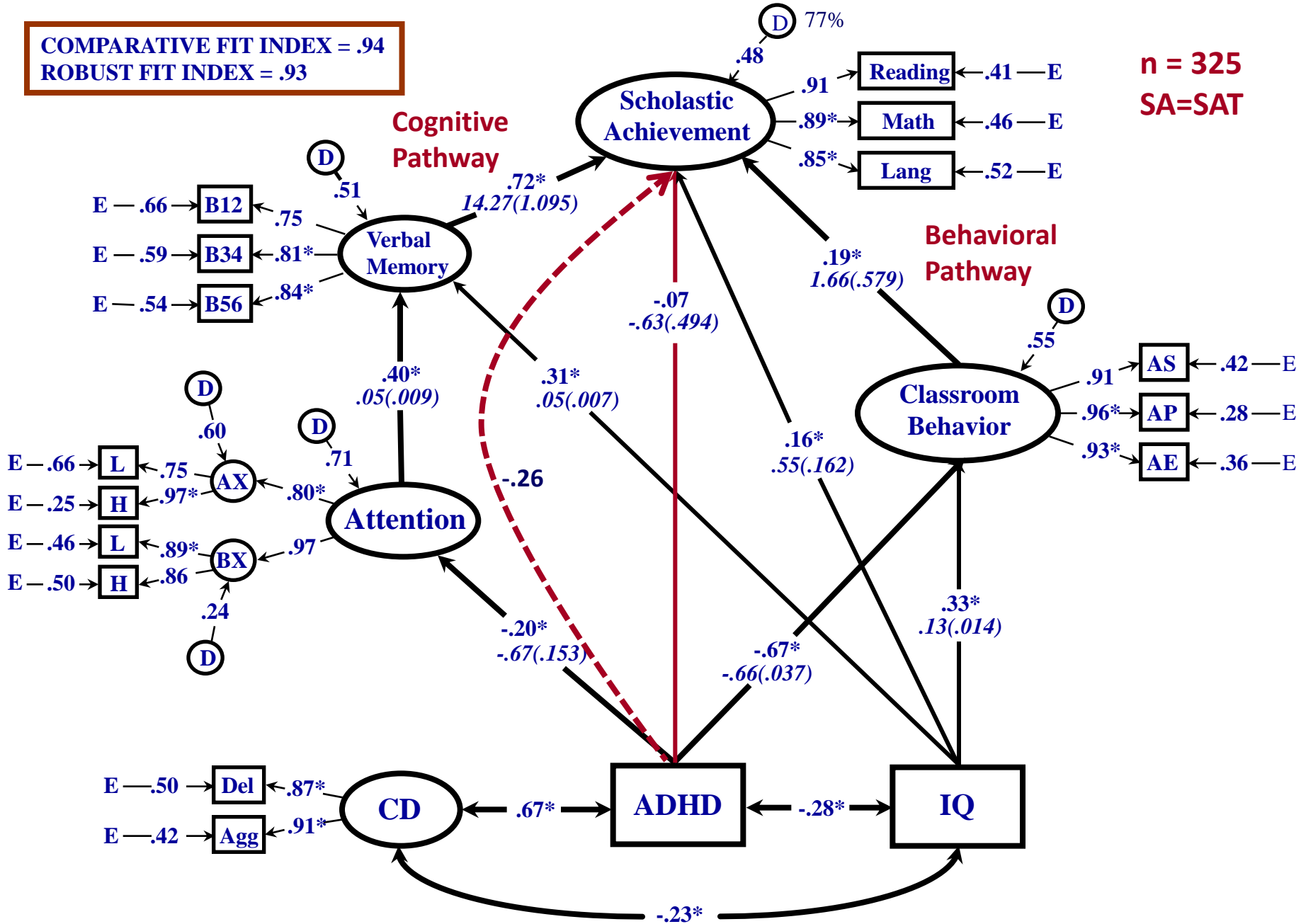


The enigma – why do large magnitude changes in core symptoms not translate into sustainable or generalizable changes in treated children?

- ❑ Pharmacodynamic studies reveal DA and NA activation of cortical-subcortical pathways involving the frontal/prefrontal, temporal lobe, and basal ganglia – areas that play a critical role in executive functions (EFs)**
- ❑ Optimal activation of structures underlying EFs and accompanying arousal is necessary but insufficient to facilitate the development of executive function processes supported by these structures and wide range of behaviors dependent upon these processes**

COMPARATIVE FIT INDEX = .94
 ROBUST FIT INDEX = .93

n = 325
 SA=SAT



Overview of Executive Functions (EFs)

Executive Function (EF): an umbrella term used to describe a broad range of 'top-down' cognitive processes and abilities that enable flexible, goal-directed behavior; and represents the dominant paradigm during the past decade following Dr. Barkley's (1997) seminal theoretical paper in 1997.

Ensuing debate focused on **two alternative models:**

1. EF viewed as a **unitary construct** with interrelated sub-processes.
2. EF viewed as a **componential** model of dissociable EF processes

Accumulating evidence supports an integration of the two approaches (i.e., interrelated sub-processes governed by a domain general executive or attentional controller (e.g., Miyake et al., 2000) emphasizing **3 primary** executive functions:

- **Updating:** the continuous monitoring and quick addition or deletion of contents within one's working memory
- **Inhibition:** the capacity to supersede responses that are prepotent in a given situation
- **Shifting:** the cognitive flexibility to switch between different tasks or mental states

Miyake et al. (2000): 3-factor model of executive function based on SEM

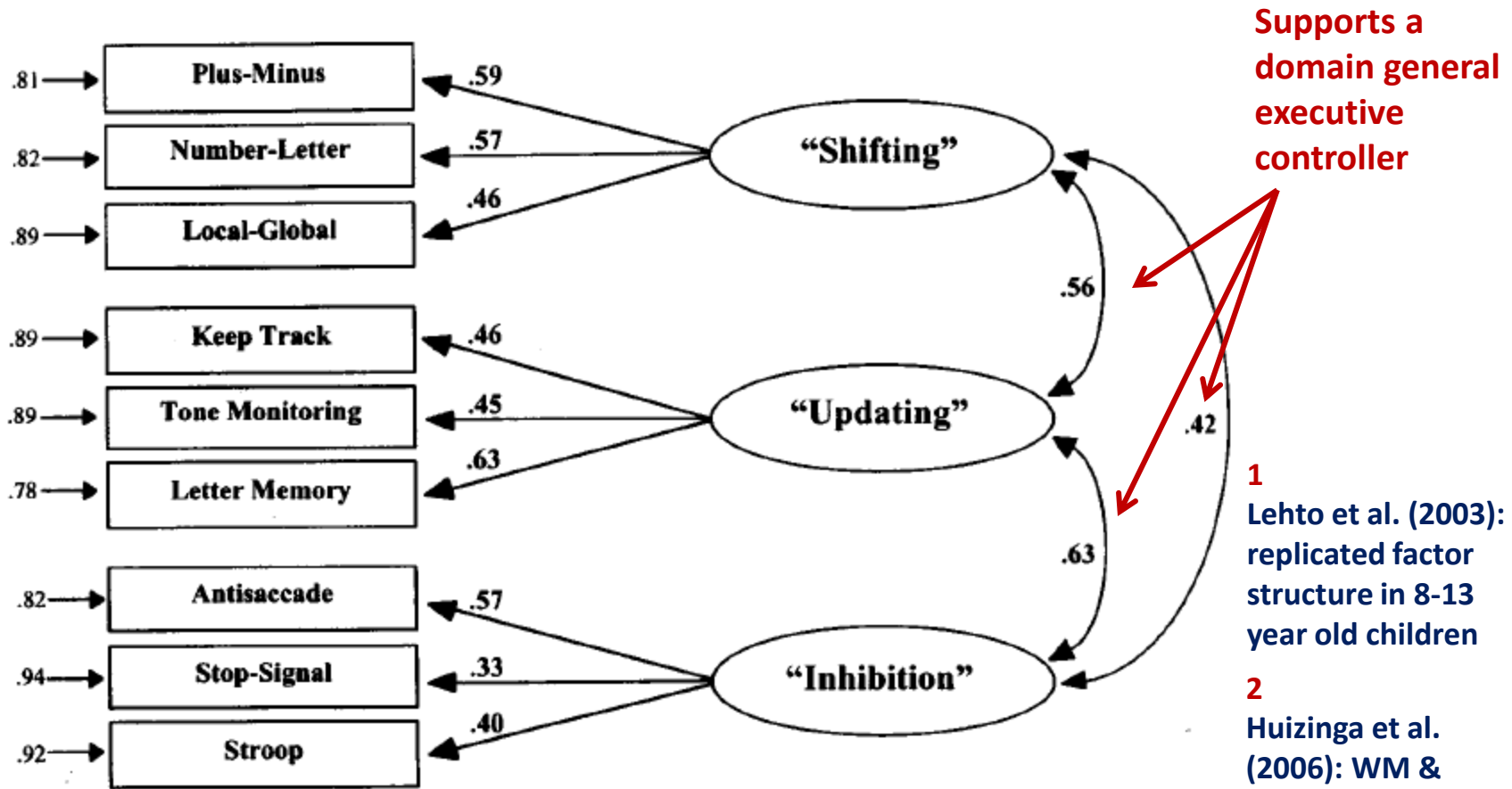
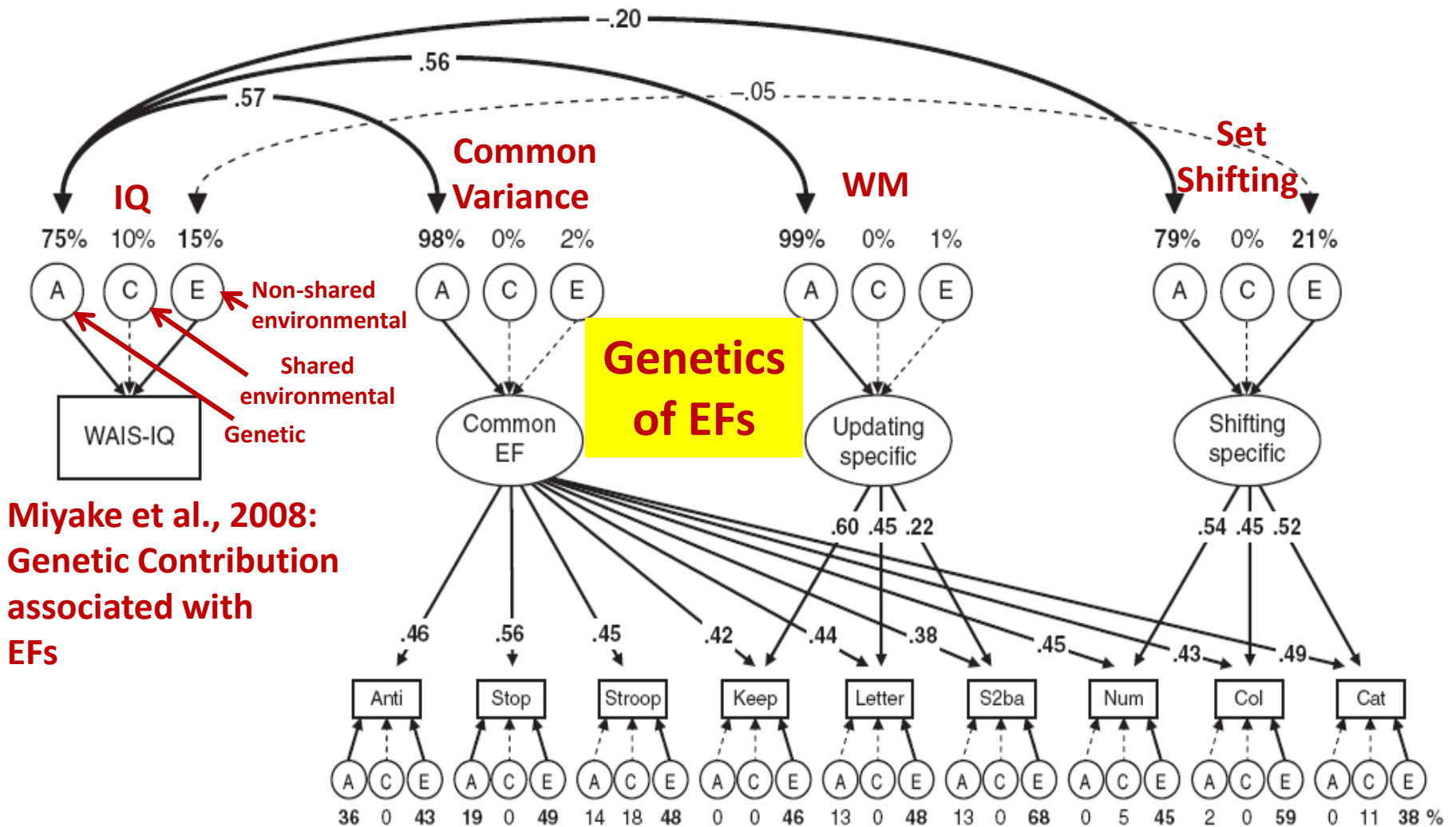


FIG. 2. The estimated three-factor model. Single-headed arrows have standardized factor loadings next to them. The loadings, all significant at the .05 level, are equivalent to standardized regression coefficients (beta weights) estimated with maximum likelihood estimation. The numbers at the ends of the smaller arrows are error terms. Squaring these terms gives an estimate of the variance for each task that is not accounted for by the latent construct. The curved, double-headed arrows have correlation coefficients next to them and indicate significant correlations between the latent variables.

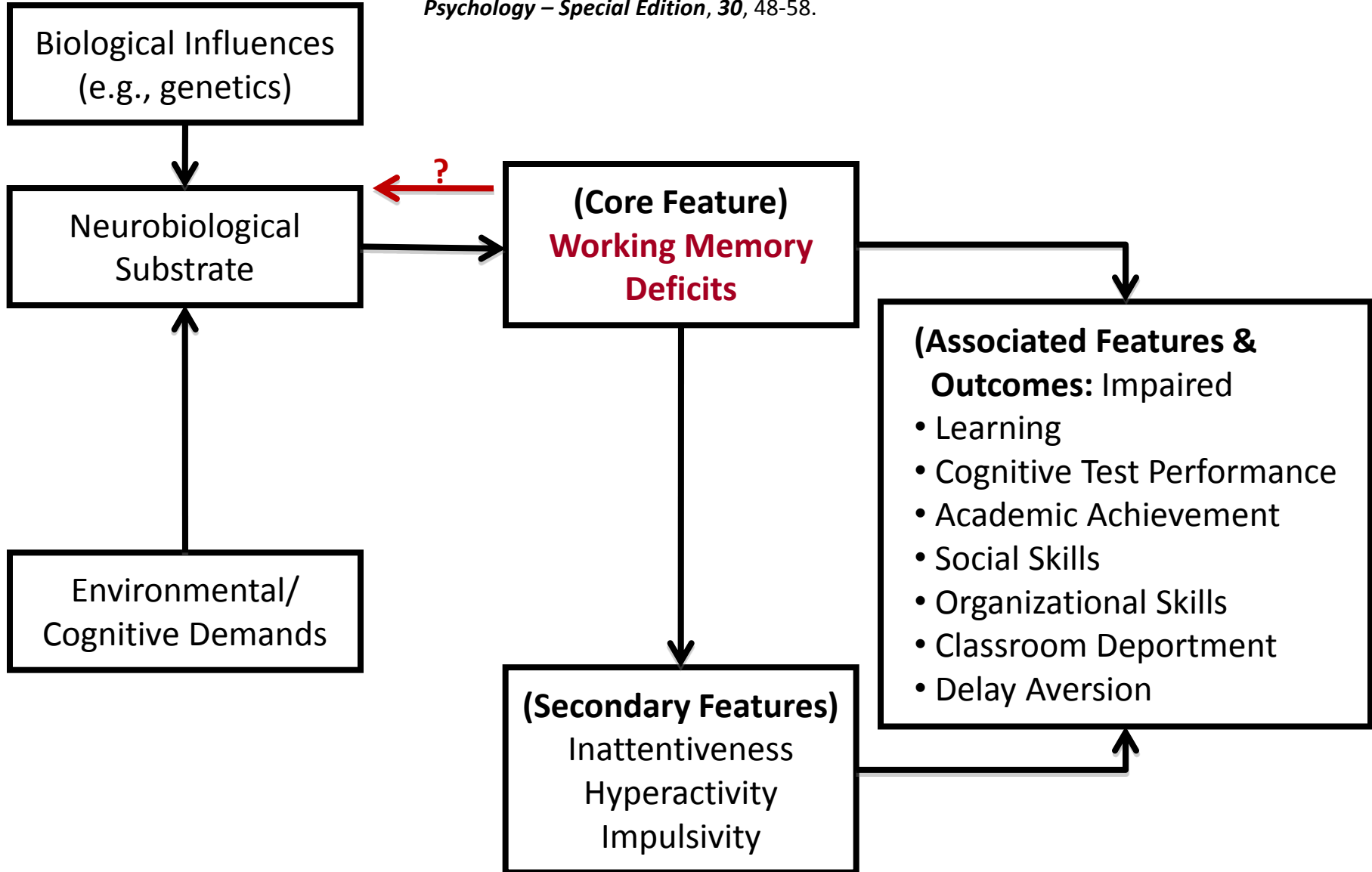


**Miyake et al., 2008:
Genetic Contribution
associated with
EFs**

Figure 7. Nested factors executive function model with Wechsler Adult Intelligence Scale full-scale IQ (WAIS-IQ). Numbers above the ACEs for the latent variables and WAIS-IQ are the percentages of those variables accounted for by genetic and environmental influences. Numbers occluding the double-headed arrows are correlation coefficients. Correlations for components with zero or near-zero variance were not estimated. Numbers occluding arrows are standardized factor loadings. Numbers under the lower ACEs are estimates for task-specific variances. Boldface type and solid lines indicate $p < .05$. Anti = antisaccade; stop = stop signal; keep = keep track; letter = letter memory; S2ba = spatial 2-back; num = number-letter; col = color-shape; cat = category switch.

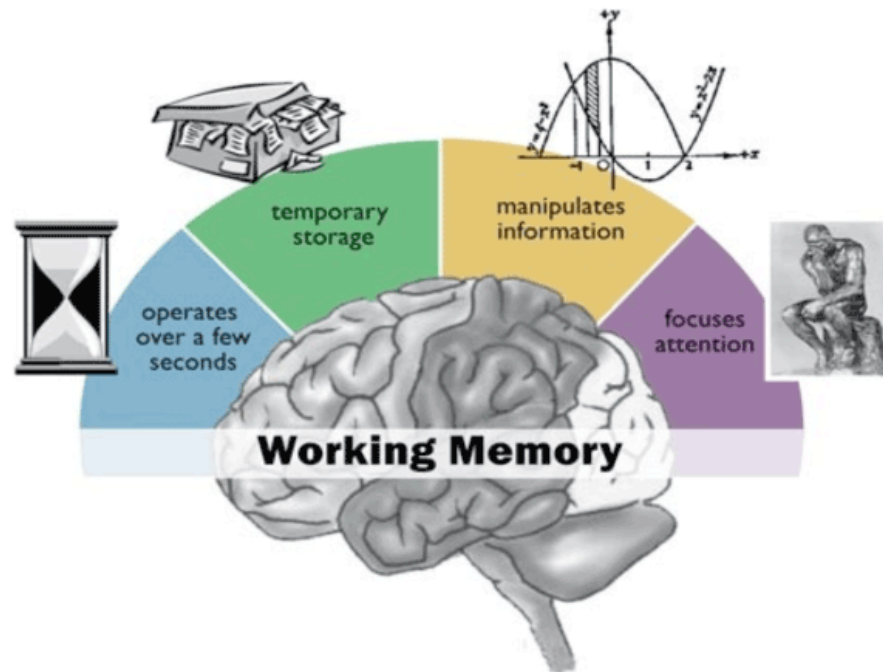
Functional Working Memory Model of ADHD

Rapport, M.D., Chung, K.M., Shore, G., & Isaacs, P. (2001). *Journal of Clinical Child Psychology – Special Edition*, 30, 48-58.

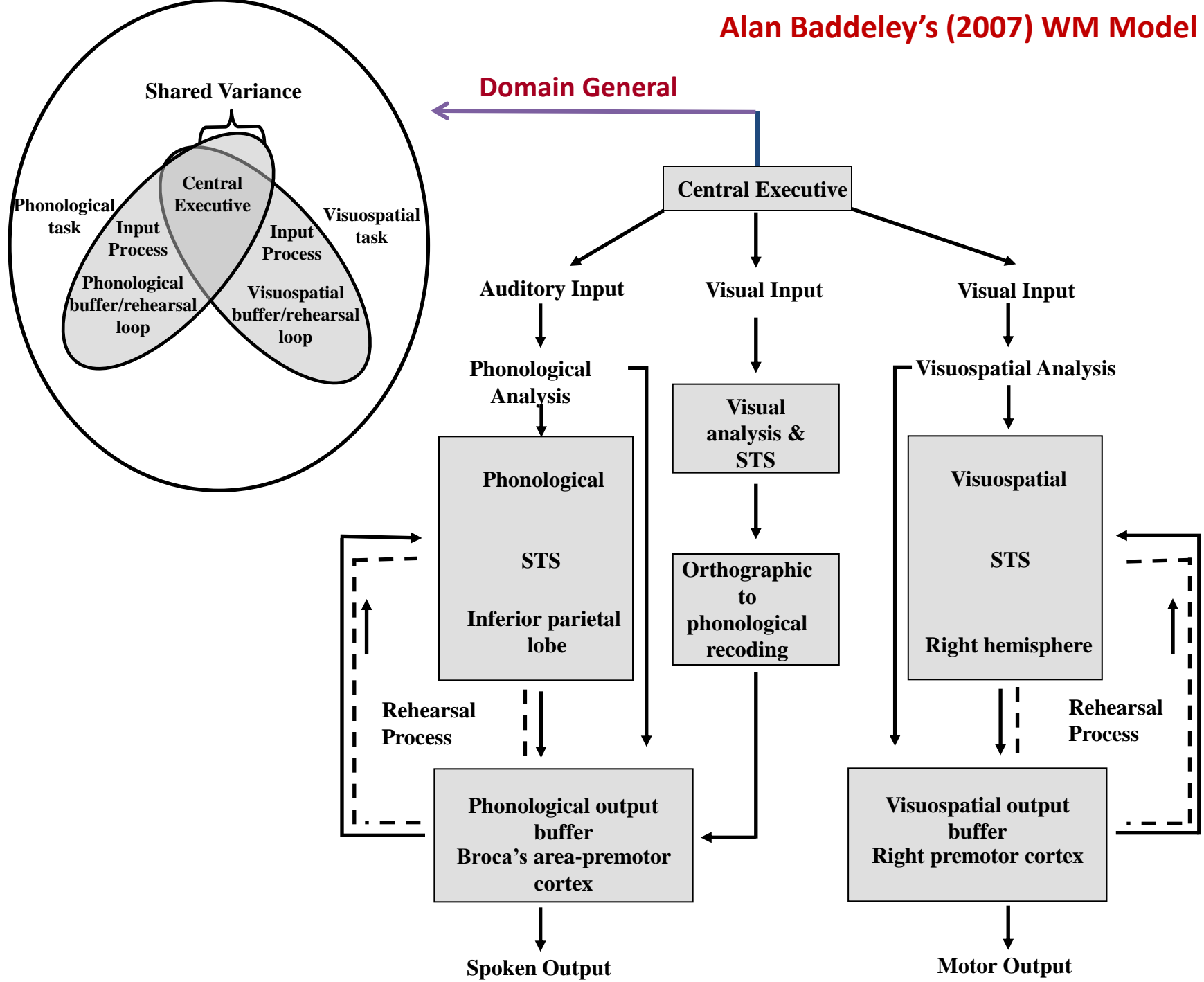


What is Working Memory?

- Working memory is a limited capacity system that enables individuals to store briefly and process information (Baddeley, 2007).



Alan Baddeley's (2007) WM Model



Central Executive Processes: Past Conceptualization

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graph TD; A[Central Executive Processes: Past Conceptualization] --> B(Continuous Updating); A --> C(Manipulation/ Dual Processing); A --> D(Serial Reordering);
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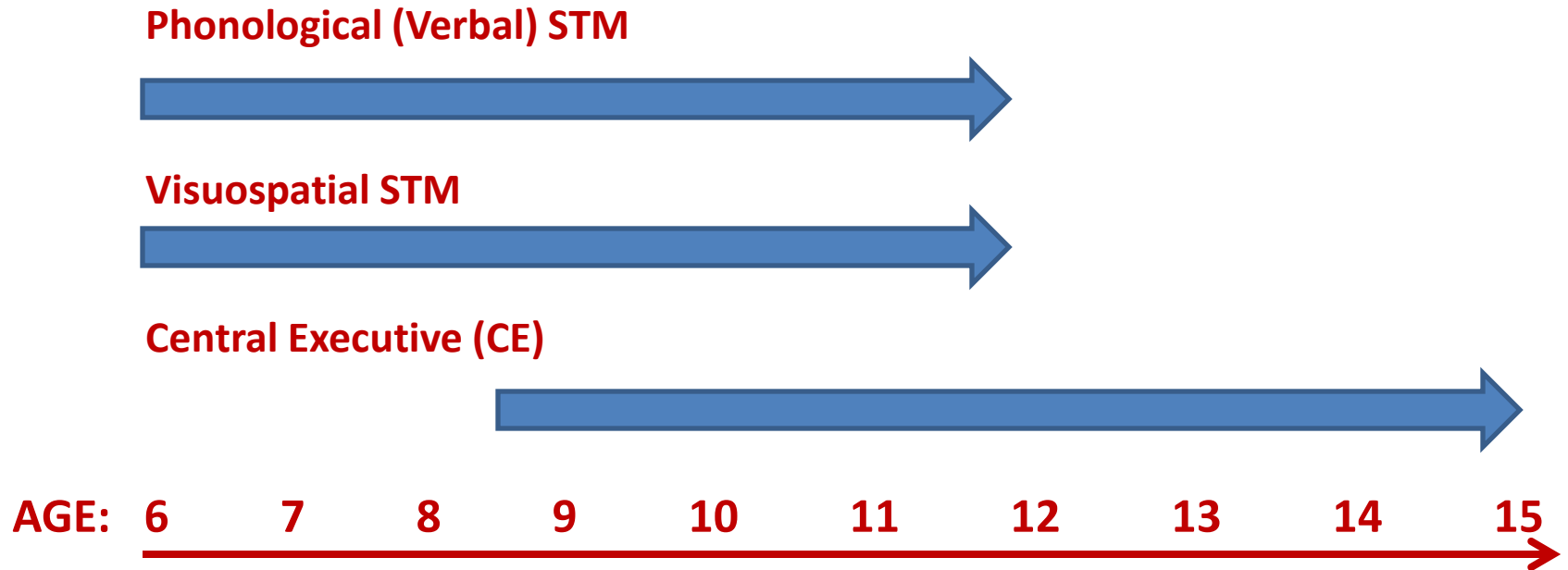
**Continuous
Updating**

**Manipulation/
Dual Processing**

**Serial
Reordering**

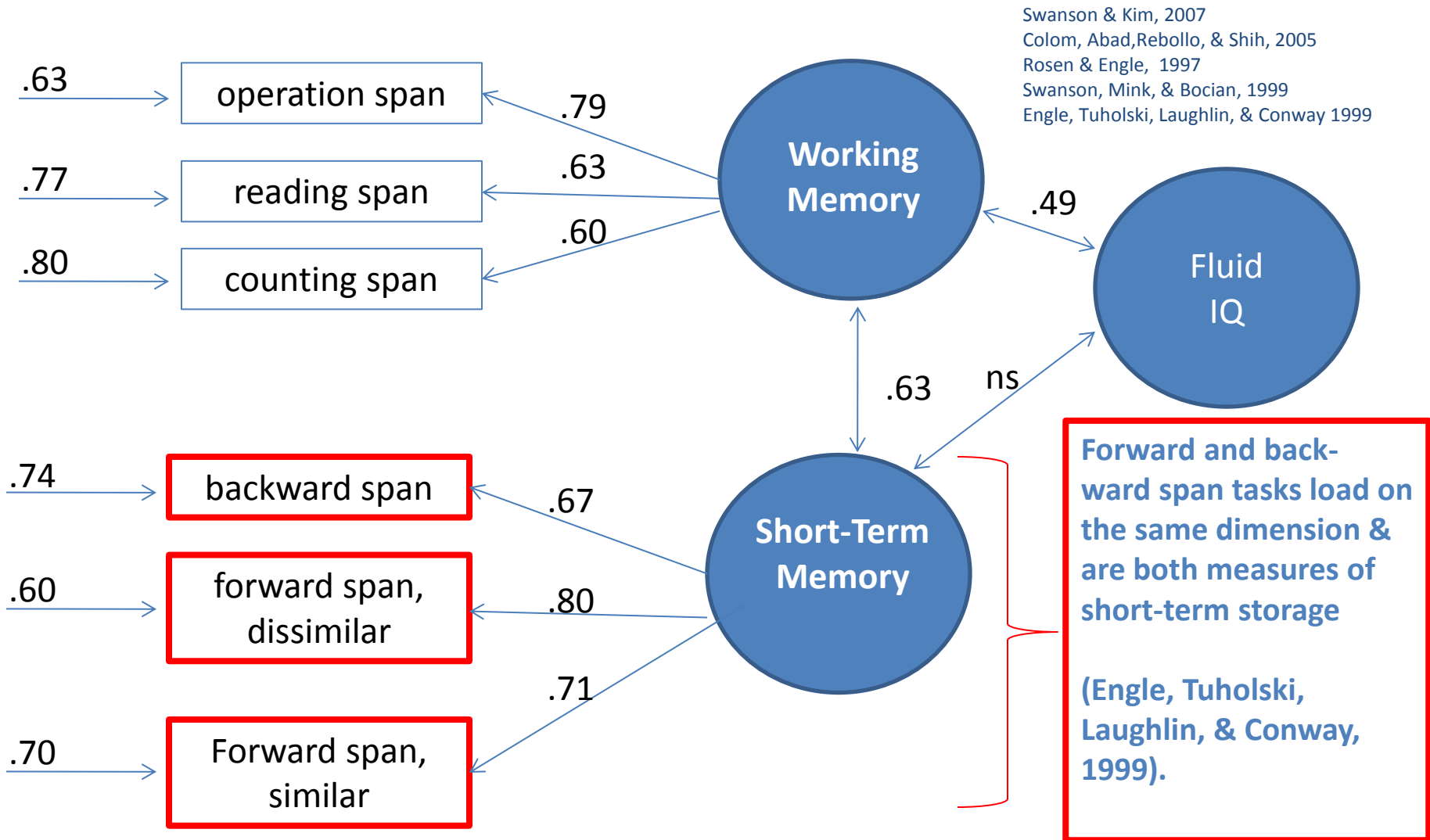
[Baddeley, 2007]

Development of Working Memory in Children: Peak Developmental Periods



Tillman et al. (2011). *Developmental Neuropsychology*, 36, 181-198

Forward and Backward Span Tasks



Working Memory, Short-Term Memory, and General Fluid Intelligence: A Latent-Variable Approach

ENGLE, TUHOLSKI, LAUGHLIN, AND CONWAY

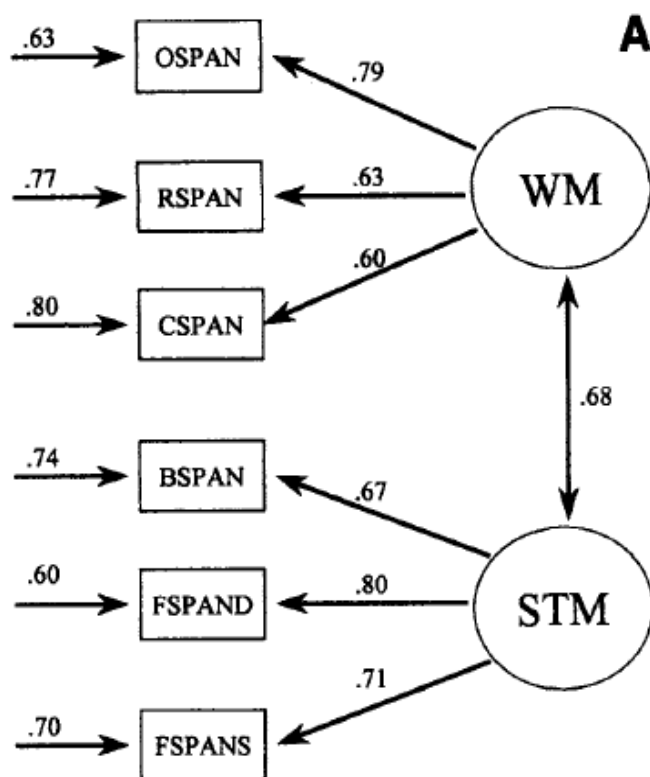


Figure 2. (a) Path model for two-factor model (A_1). All paths are significant at the .05 level. (b) Path model for two-factor model with additional tasks (B_2). Paths significant at the .05 level are indicated by solid lines. OSPAN = operation span; RSPAN = reading span; CSPAN = counting span; BSPAN = backward span; FSPAND = forward span, dissimilar; FSPANS = forward span, similar; KTRACK = keeping track; IFRSM = Immediate Free Recall Secondary Memory; CONTOP = continuous opposites; WM = working memory; STM = short-term memory.

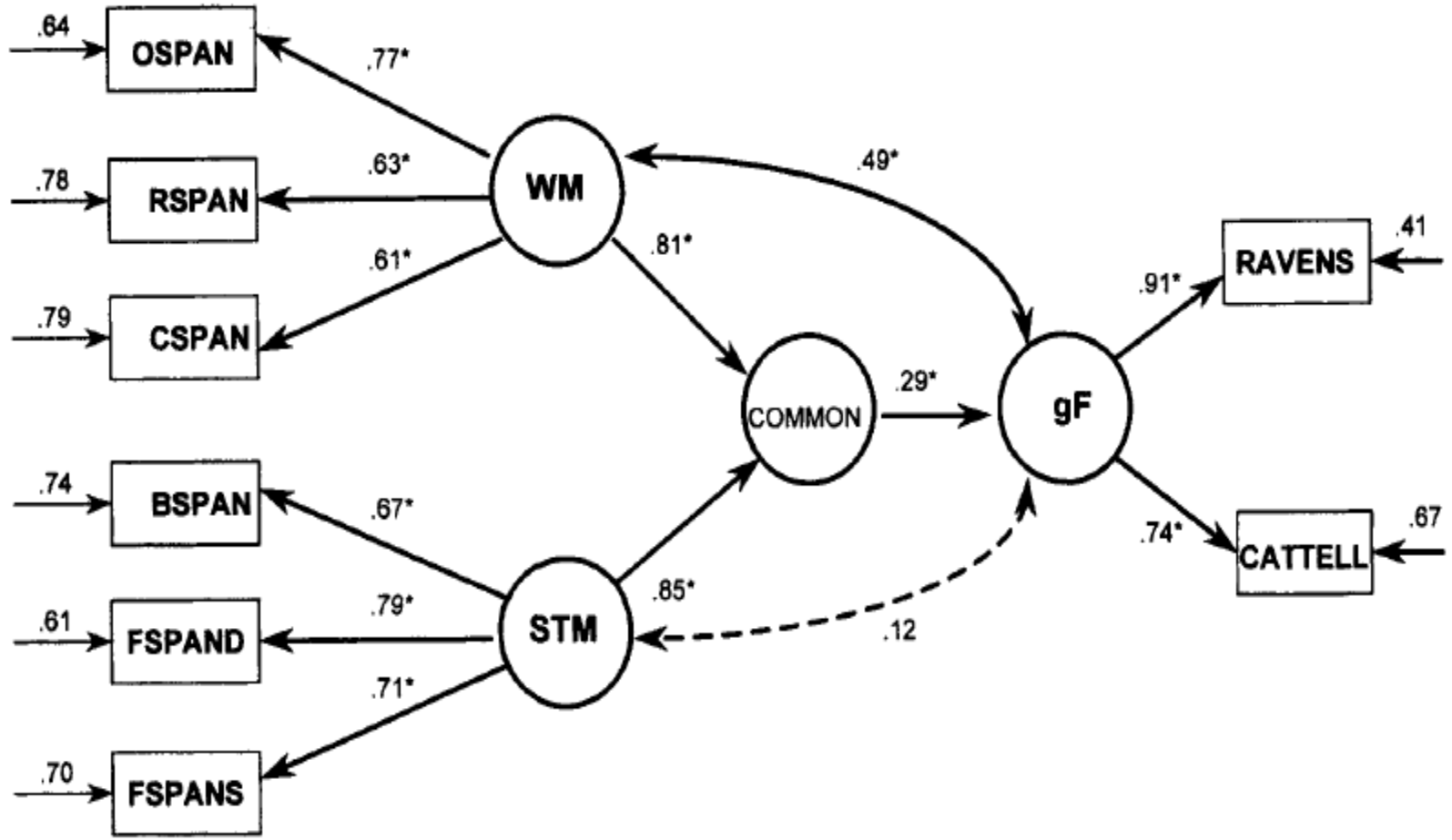


Figure 4. Path model for Model D. Significant paths are indicated by an asterisk. OSPAN = operation span; RSPAN = reading span; CSPAN = counting span; BSPAN = backward span; FSPAND = forward span, dissimilar; FSPANS = forward span, similar; WM = working memory; STM = short-term memory; gF = fluid intelligence.

Higher –order cognitive tasks, skills, and abilities dependent on working memory components

Central Executive

- General fluid intelligence
- Verbal and visual reasoning
- Vocabulary learning
- Literacy
- Arithmetic
- Reading comprehension
- Listening comprehension
- Ability to follow directions
- Note taking
- Writing
- Bridge playing
- Chess playing
- Learning to program computers
- Verbal achievement
- Math achievement
- Lexical-semantic abilities
- Orthographic abilities
- Complex learning
- Motor activity
- Attentive behavior

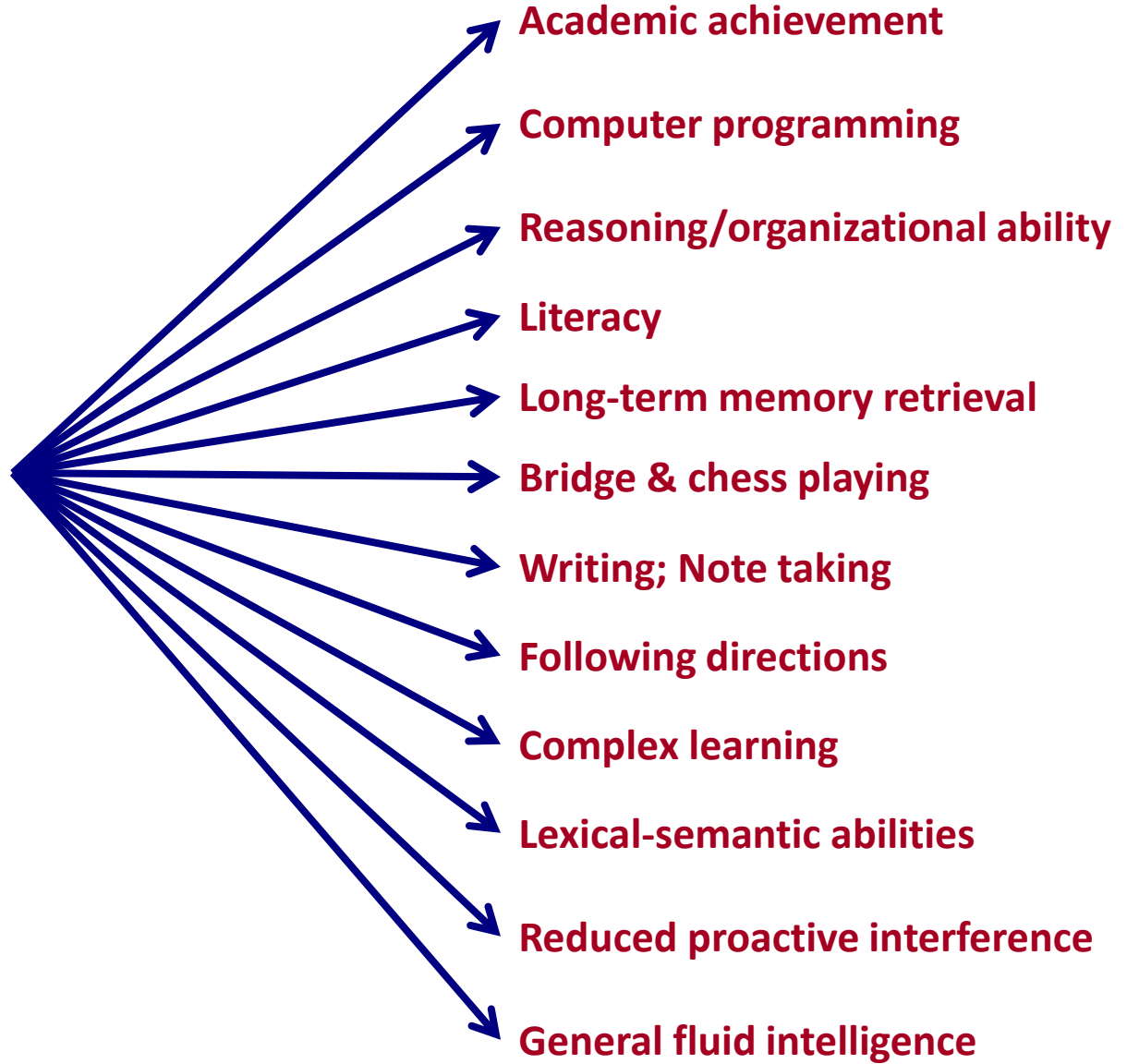
Phonological Storage/Rehearsal

- Verbal reasoning
- Vocabulary learning
- Word recognition
- Verbal achievement
- Math achievement
- Phonological/ syntactic abilities
- Attentive behavior

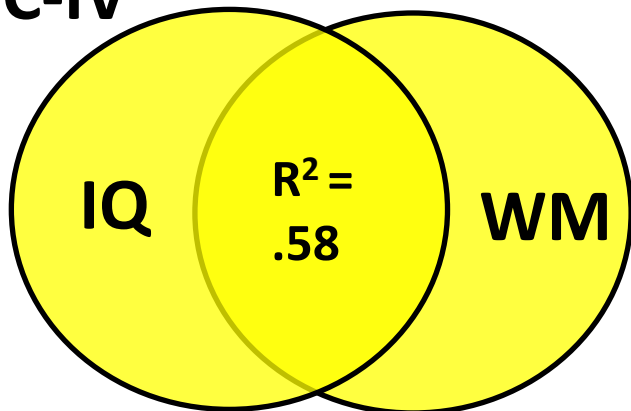
Visuospatial Storage/Rehearsal

- Visual reasoning
- Speech production
- Math achievement
- Attentive behavior

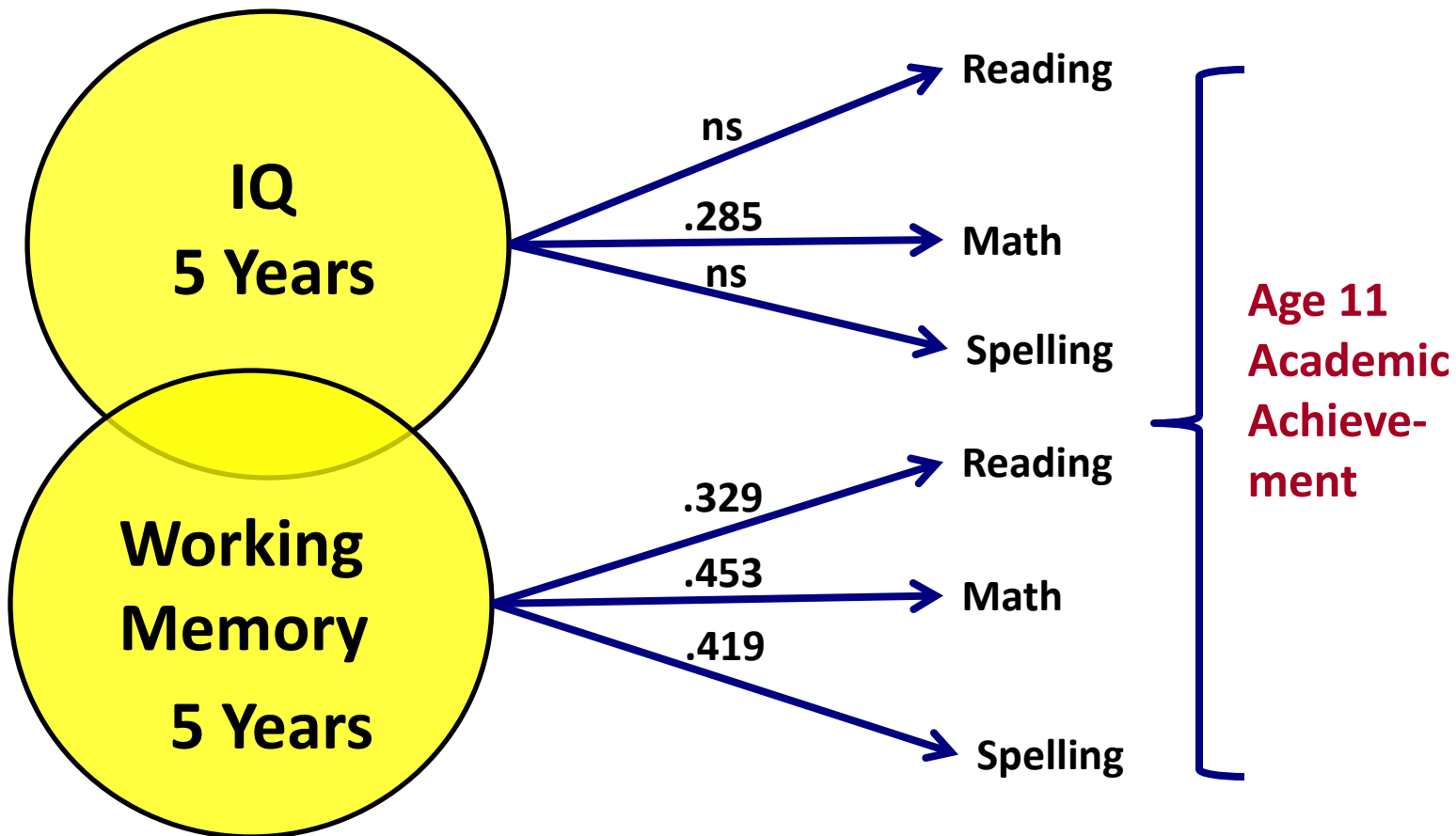
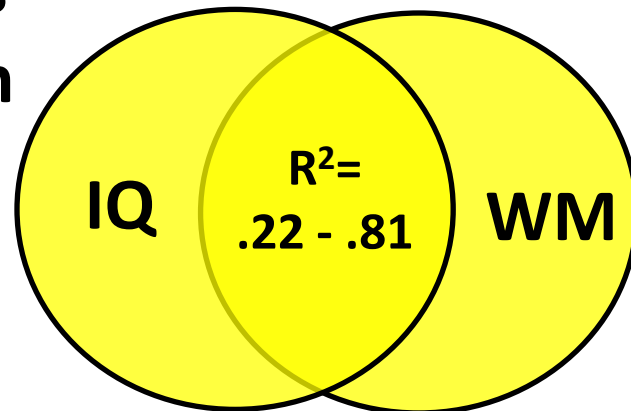
**WM
Capacity**



WISC-IV



Previous Research



Working memory impairments in children with ADHD

	WM Systems		WM Components		
	VS Working Memory	PH Working Memory	VS Storage/Rehearsal	PH Storage/Rehearsal	CE
Meta-analyses					
Martinussen et al. (2005)	--	--	0.85	0.47	0.43-1.06
Willcutt et al. (2005)	0.63	0.55	--	--	--
Brocki et al. (2008)	0.60	0.85	--	--	--
Martinussen & Tannock, (2006)	--	--	0.70	0.04	0.60-1.10
Marzocchi et al. (2008)	1.00	--	0.74	--	

**Trends: (a) Deficits in both systems/all three subcomponents
 (b) Deficits in CE > VS > PH**

Participants and Inclusion Criteria

❑ Diagnostic Procedures

- ❖ Extensive child histories (pre, pari, post-natal; early developmental; medical; educational; psychiatric; parent/family)
- ❖ K-SADS Semi-Structured Clinical Interview, Lifetime Version [parent and child interviewed separately]

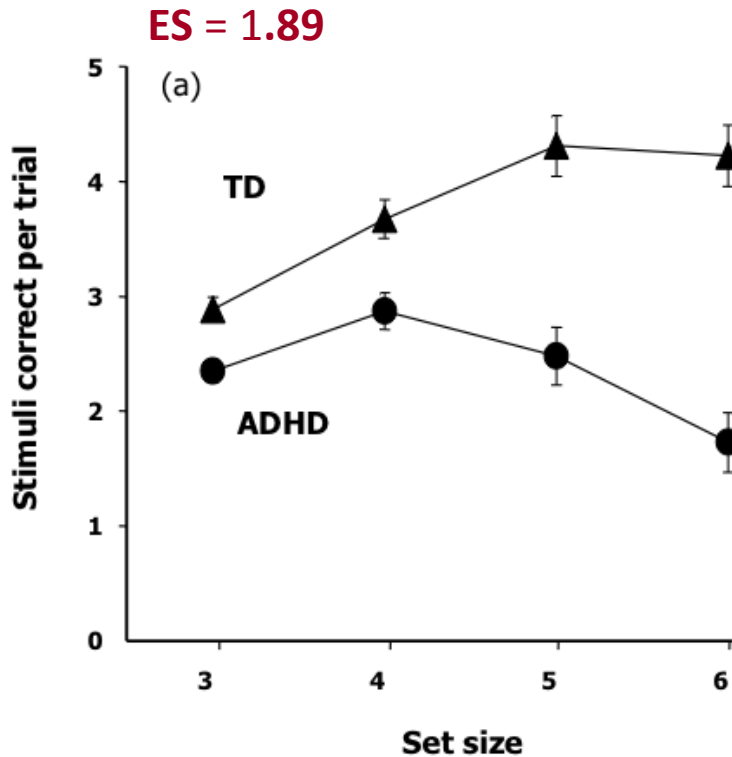
❑ Parent Rating Scales [ADHD factor in clinical range; DSM criteria]

- ❖ Child Symptom Inventory – 4 Parent Form (DSM-IV criteria)
- ❖ Child Behavior Checklist – Parent Form (ADHD factor in clinical range)

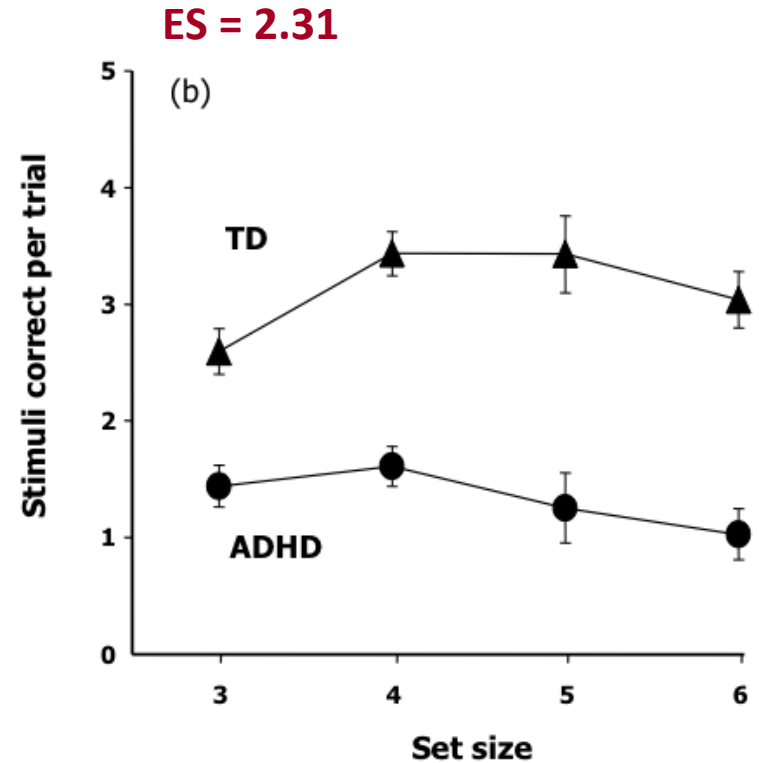
❑ Teacher Rating Scales [ADHD factor in clinical range; DSM criteria]

- ❖ Child Symptom Inventory – 4 Teacher Report Form (DSM-IV criteria)
- ❖ Child Behavior Checklist – Teacher Report Form (TRF)

Phonological and Visuospatial WM Deficits in boys with ADHD



Phonological WM

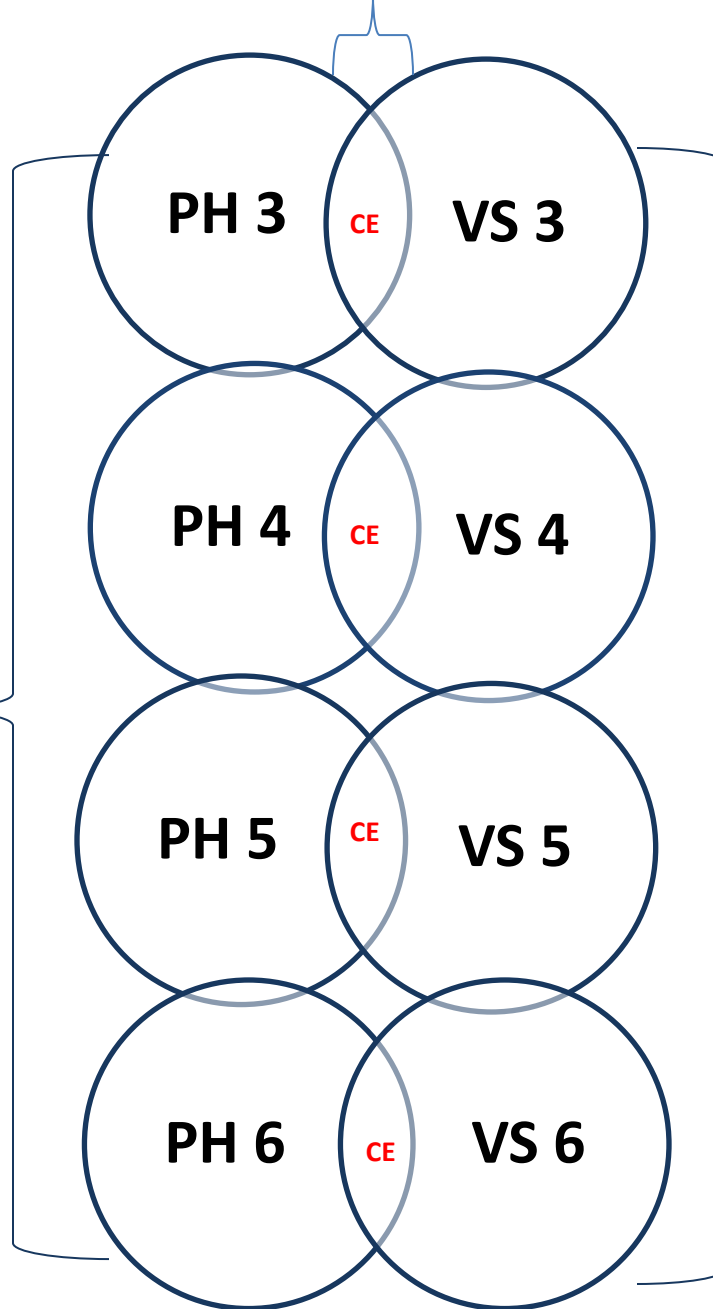


Visuospatial WM

Rappport, Alderson, Kofler, Sarver, Bolden, & Sims (2008).
J of Abnormal Child Psychology, 36, 825-837.

**PH, VS, and CE
Performance
Composite Scores**

CE Performance Composite Score

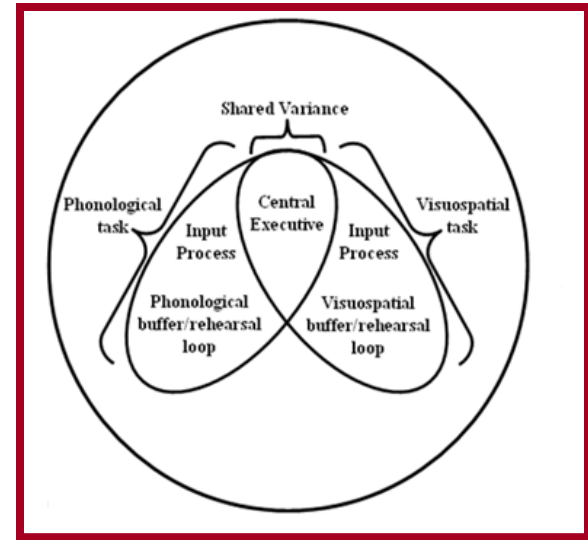


**PH Storage/Rehearsal
Performance
Composite Score**

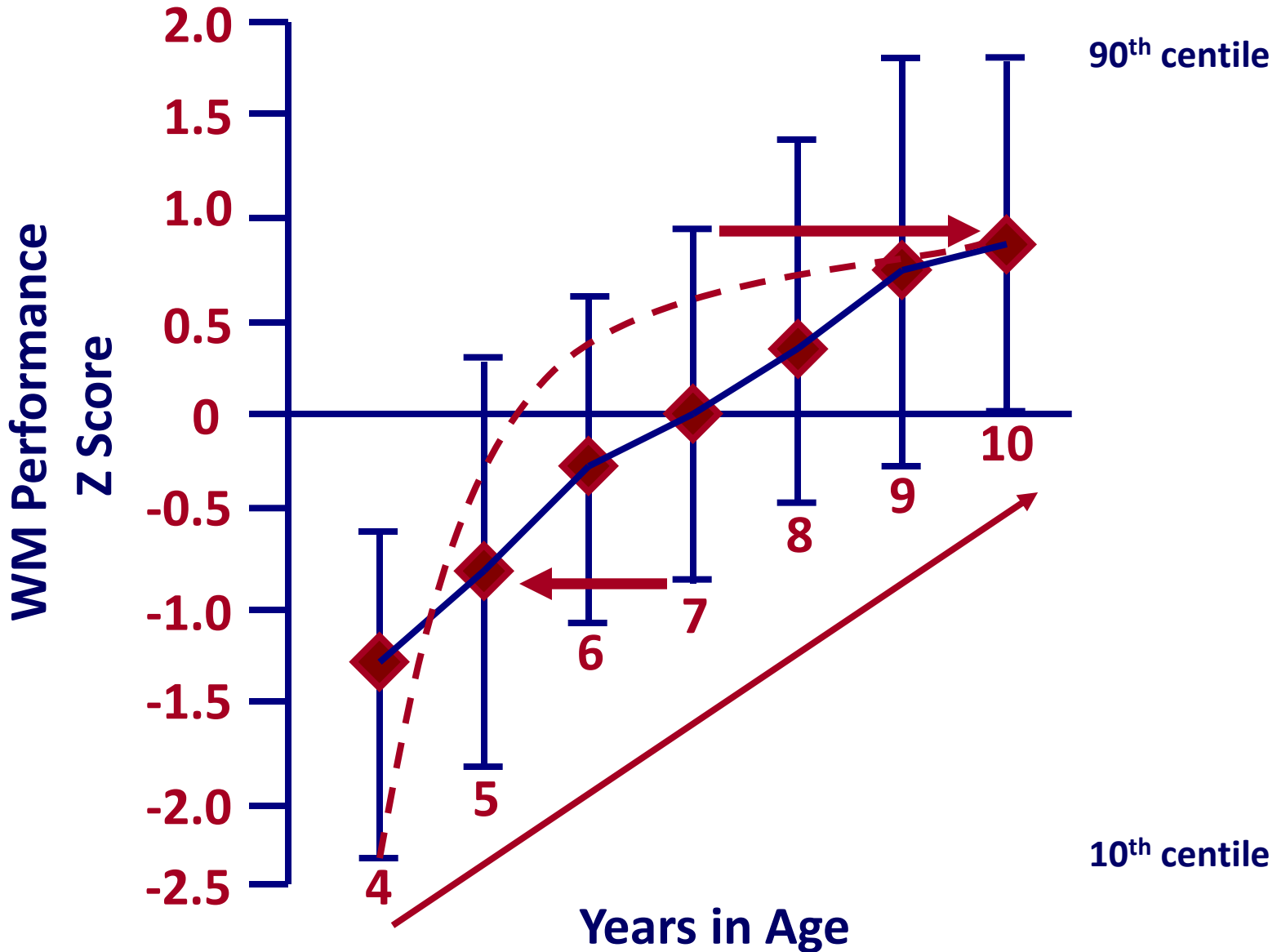
**PH ES = .55
[1.89 w/CE]**

**VS Storage/Rehearsal
Performance
Composite Score**

**VS ES = .89
[2.31 w/CE]**



CE ES = 2.76



[Gathercole & Alloway, 2008]

Central Executive

AGE: 5

Central Executive

Articulatory Rehearsal

Spatial Rehearsal

Articulatory Rehearsal

Spatial Rehearsal

Phonological Storage

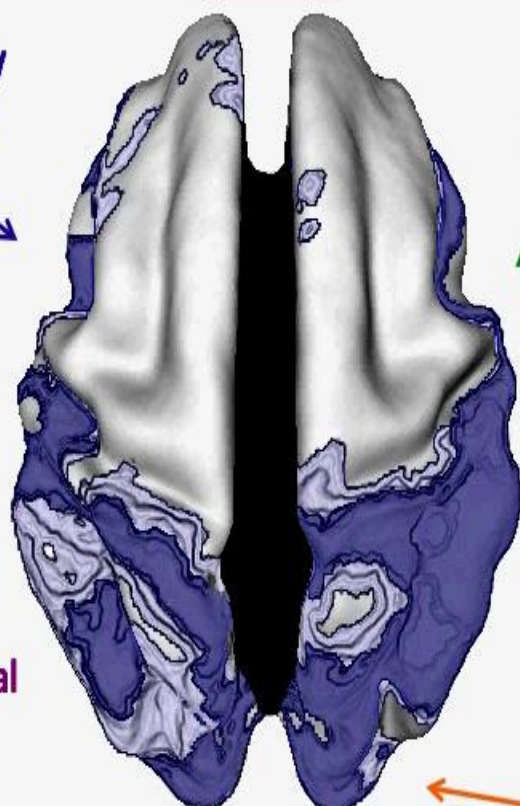
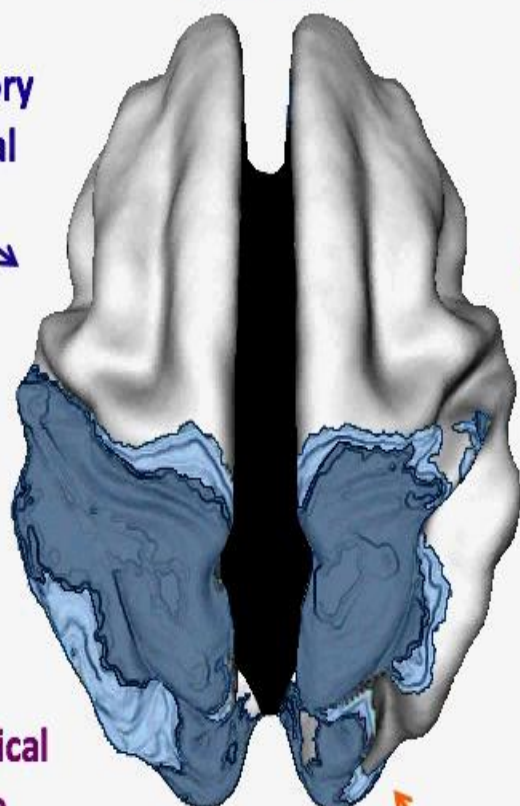
Phonological Storage

Visual Storage

ADHD

Visual Storage

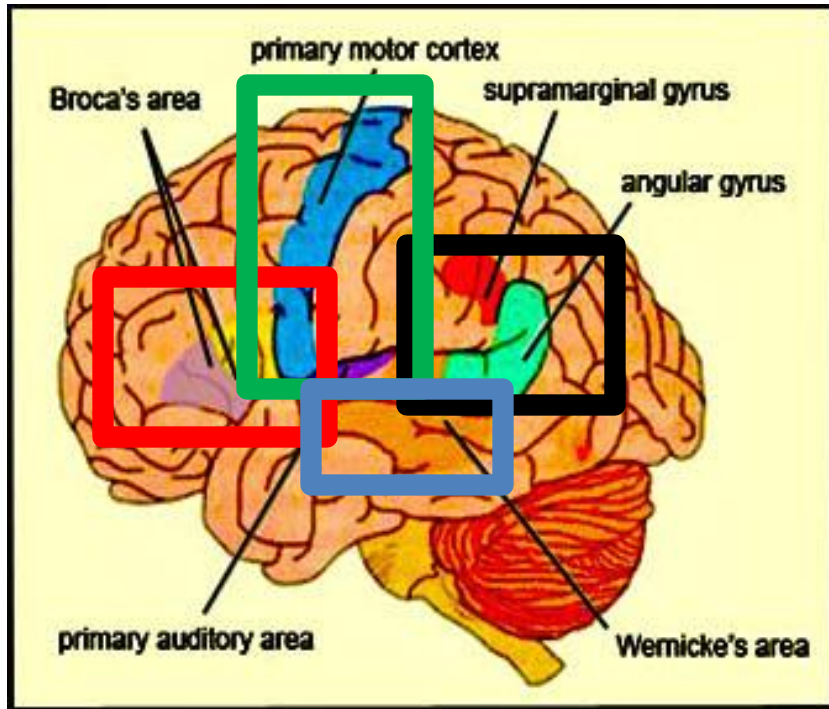
TYPICALLY DEVELOPING CONTROLS



**To what extent do WM
related phonological (PH)
deficits reflect short-term
storage as opposed to
articulatory (covert)
rehearsal deficiencies?**

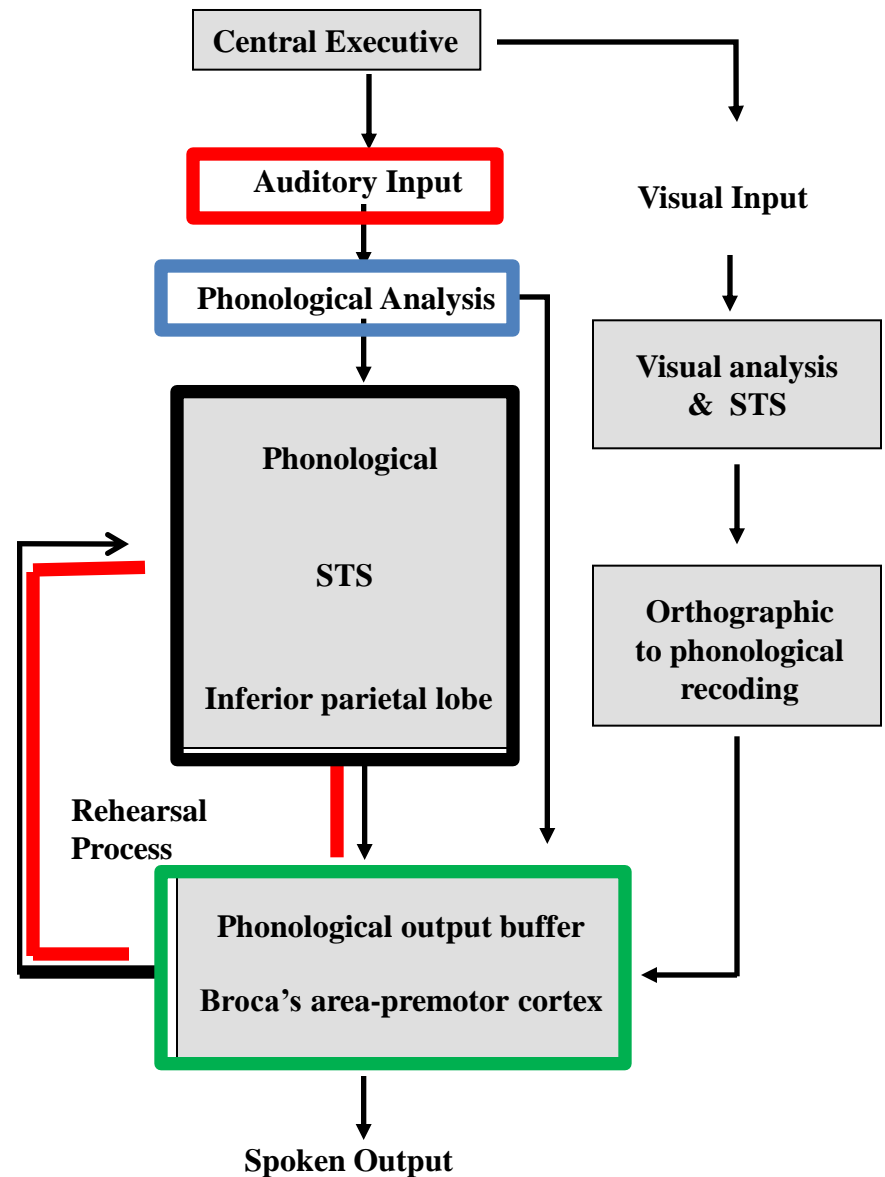
Bolden, J., Rapport, M.D., Raiker, J.S., Sarver, D.E., & Kofler, M.J. (2012). Understanding Phonological Memory Deficits in Boys with Attention-Deficit/Hyperactivity Disorder (ADHD): Dissociation of Short-term Storage and Articulatory Rehearsal Processes. *Journal of Abnormal Child Psychology, 40*, 999-1011.

Phonological Working Memory

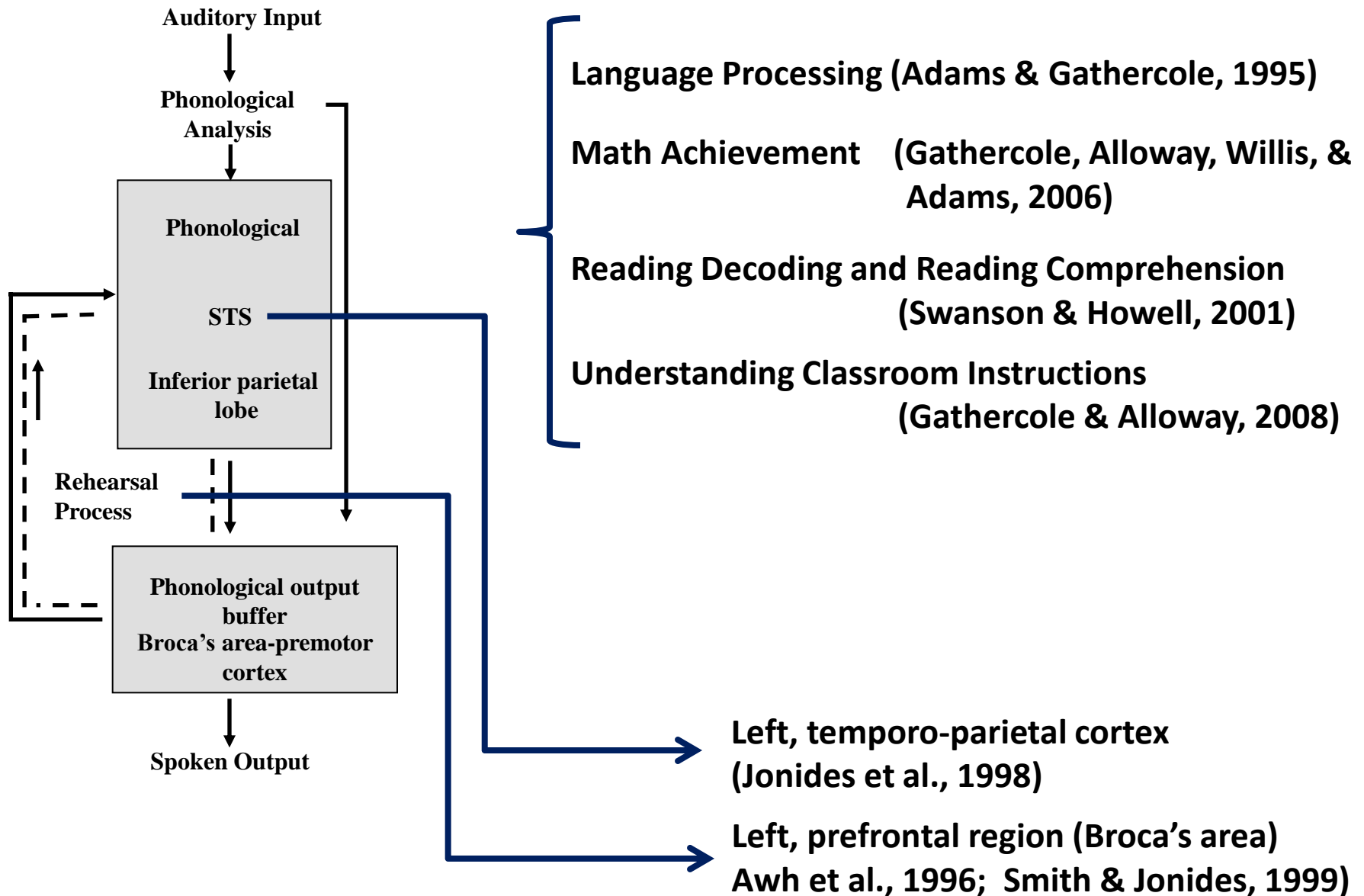


http://docsbrainblocks.com/images/dyslexia_1.jpg

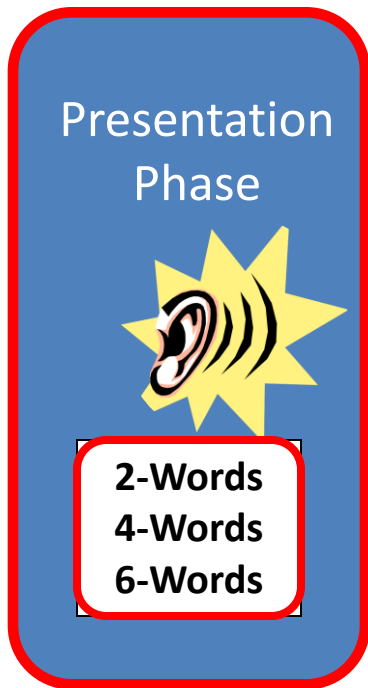
Baddeley, 2007



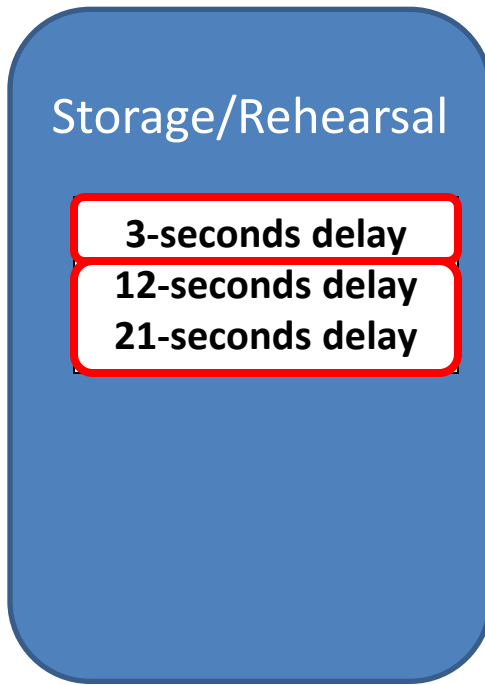
Contribution of Phonological Processing to other abilities



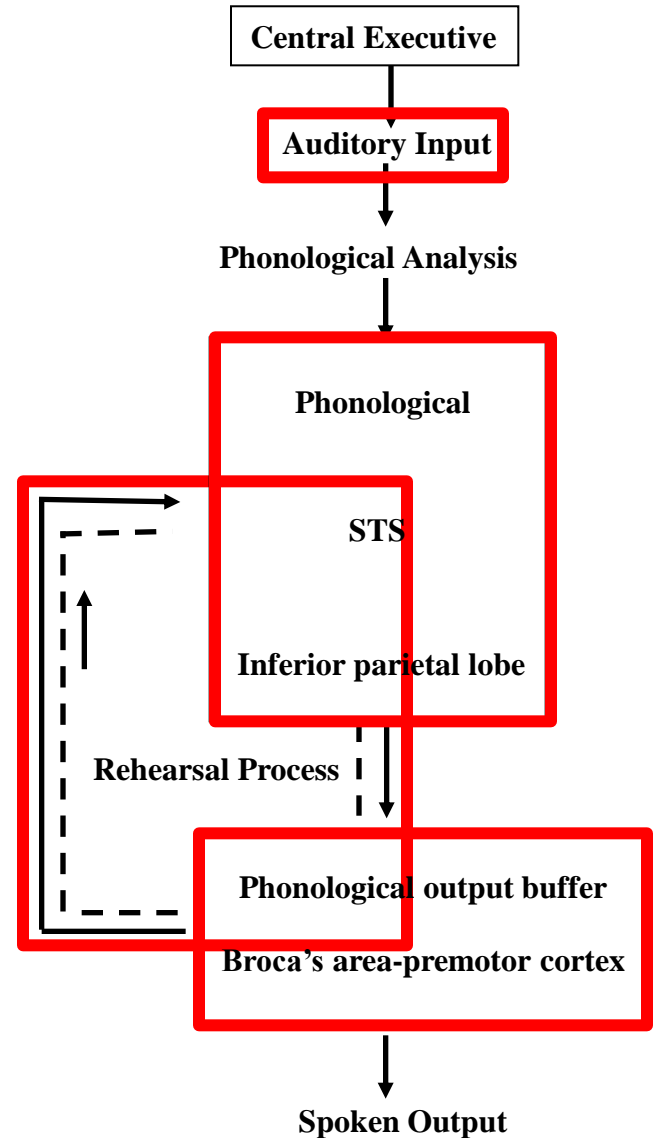
Phonological Memory Task

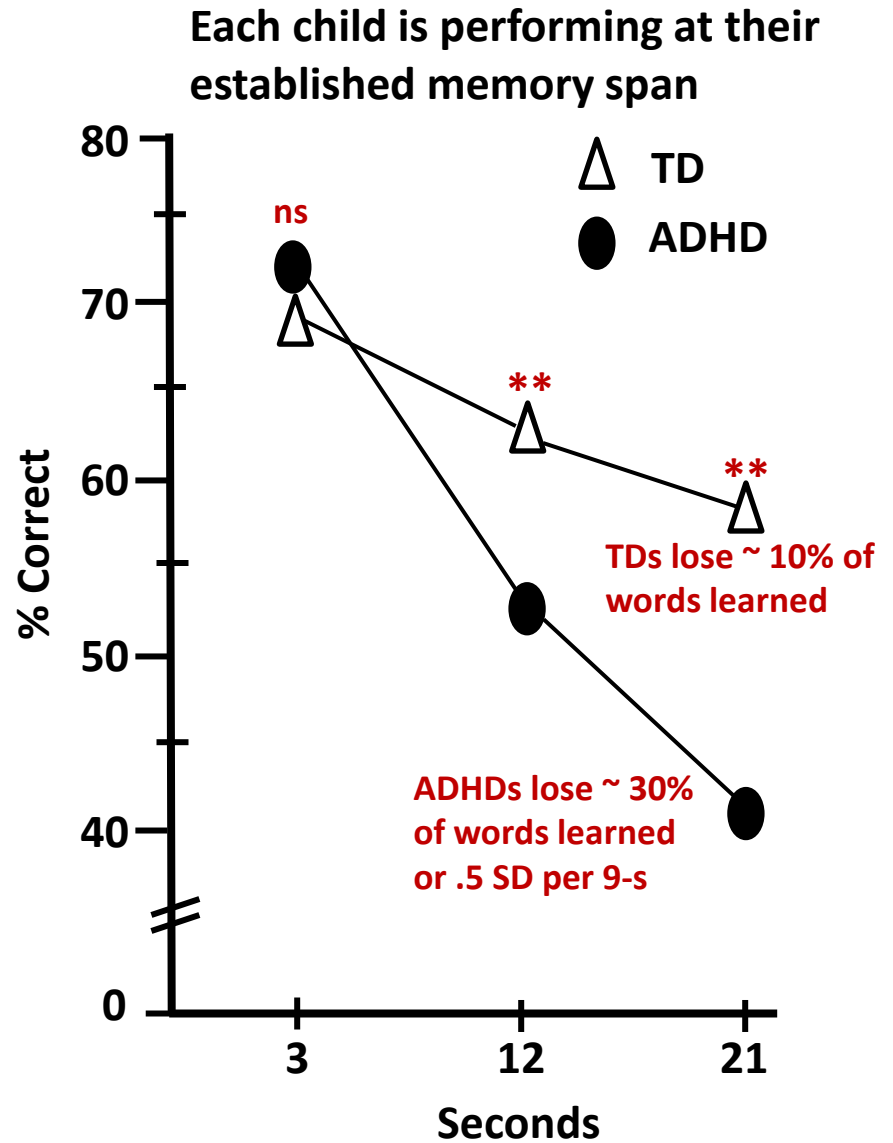
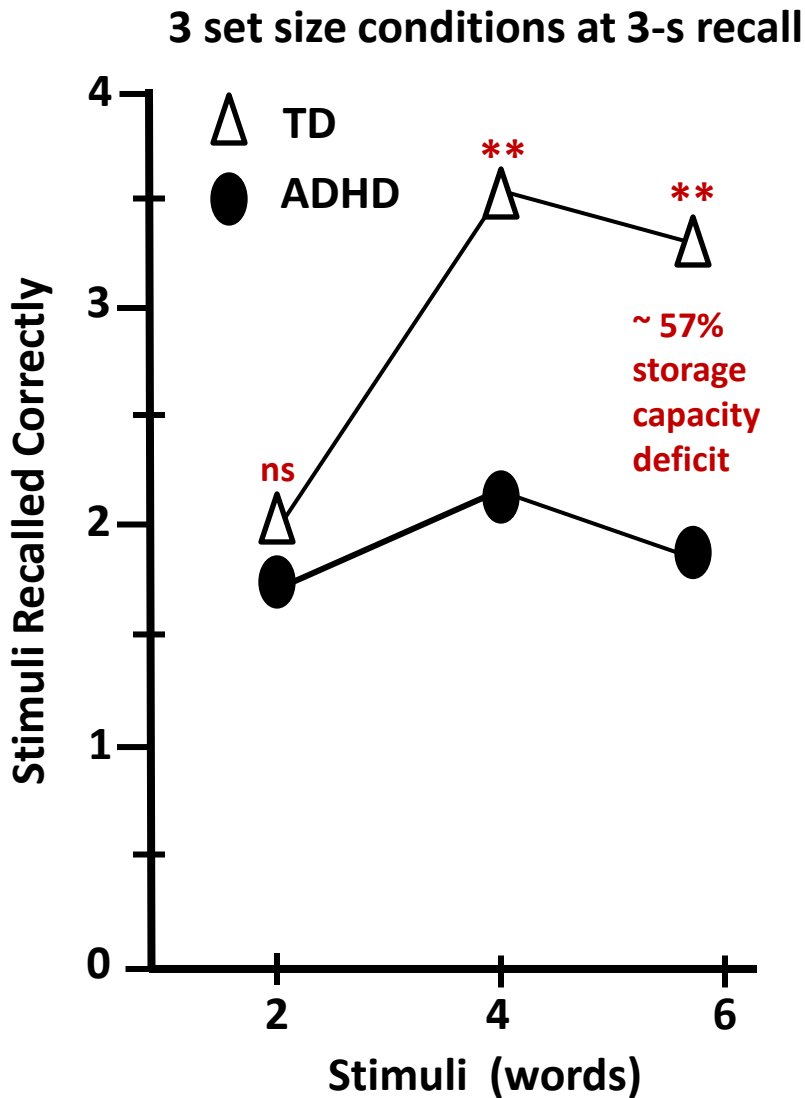


21 distinct trials at each list length



List length set based on each child's span



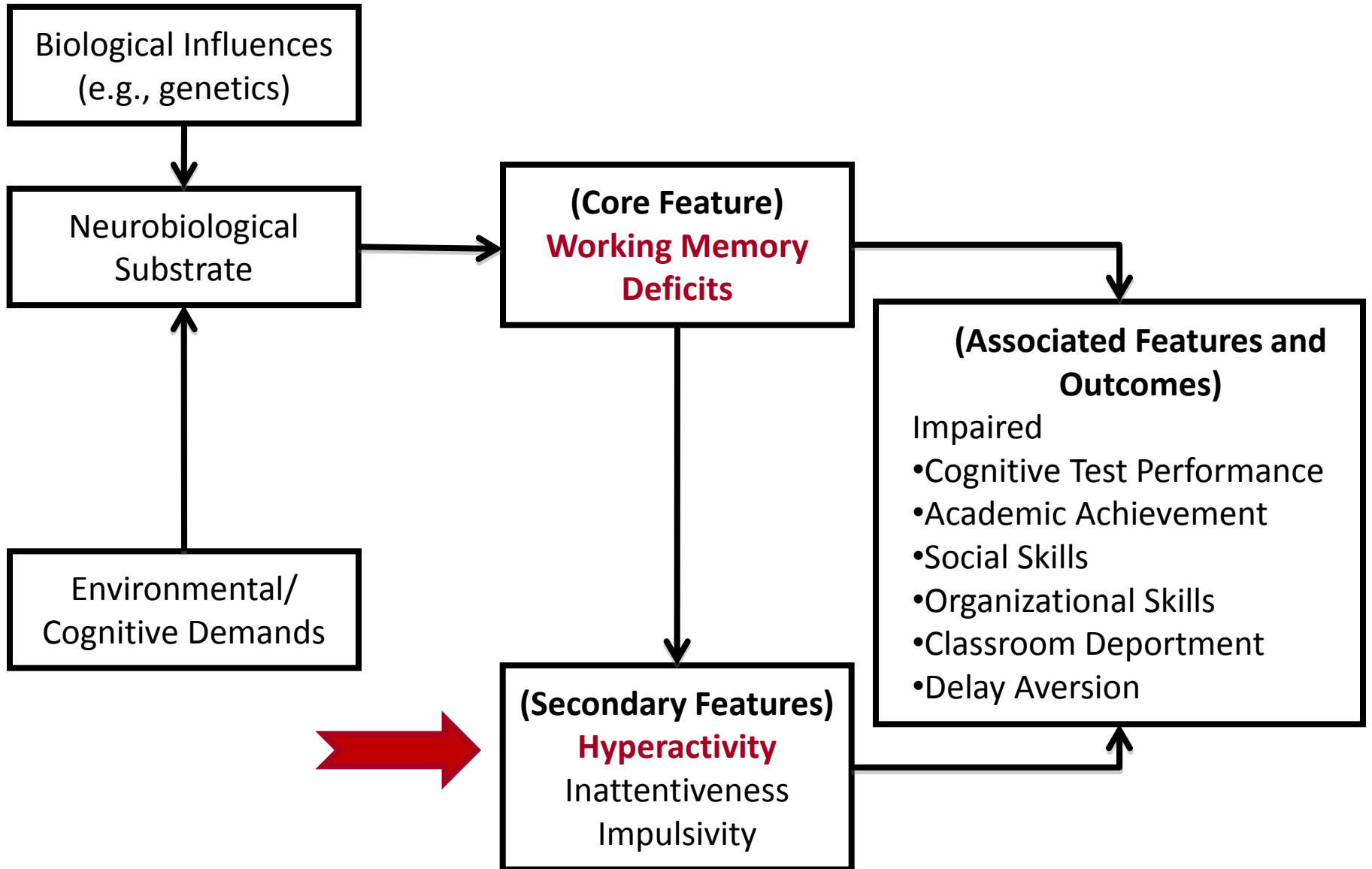


Short-term storage capacity ES = 1.15 to 1.98
 Articulatory rehearsal ES = .47 to 1.02

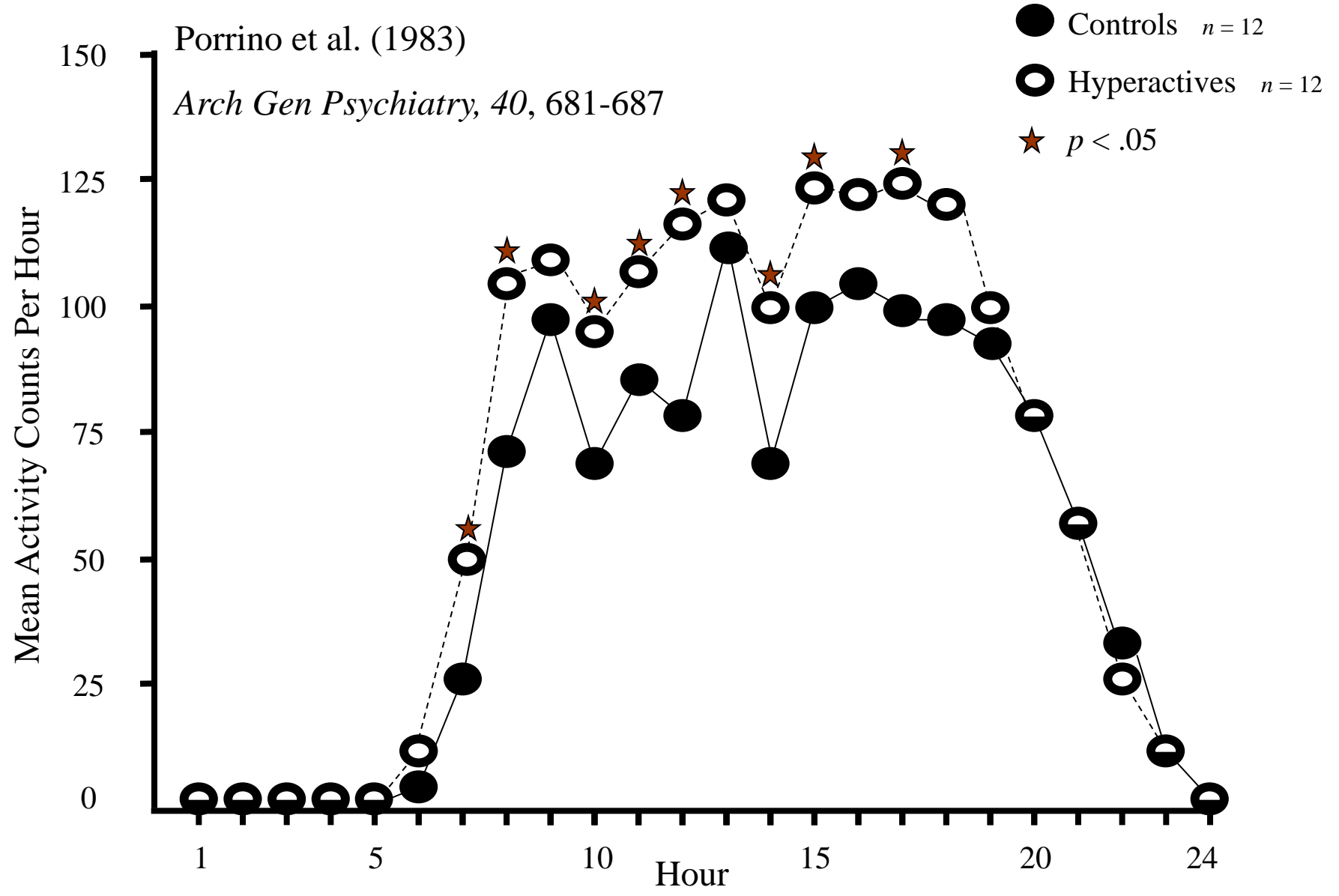
Are components of working memory functionally related to hyperactivity?

Rappoport, M.D., Bolden, J., Kofler, M.J., Sarver, D.E., Raiker, J.S., Alderson, R.M. (2009). Hyperactivity in Boys with Attention-Deficit/Hyperactivity Disorder (ADHD): A Ubiquitous Core Symptom or Manifestation of Working Memory Deficits? *Journal of Abnormal Child Psychology*, 37, 521-534.

Working Memory Model of ADHD



Mean Weekday Hourly Activity Scores



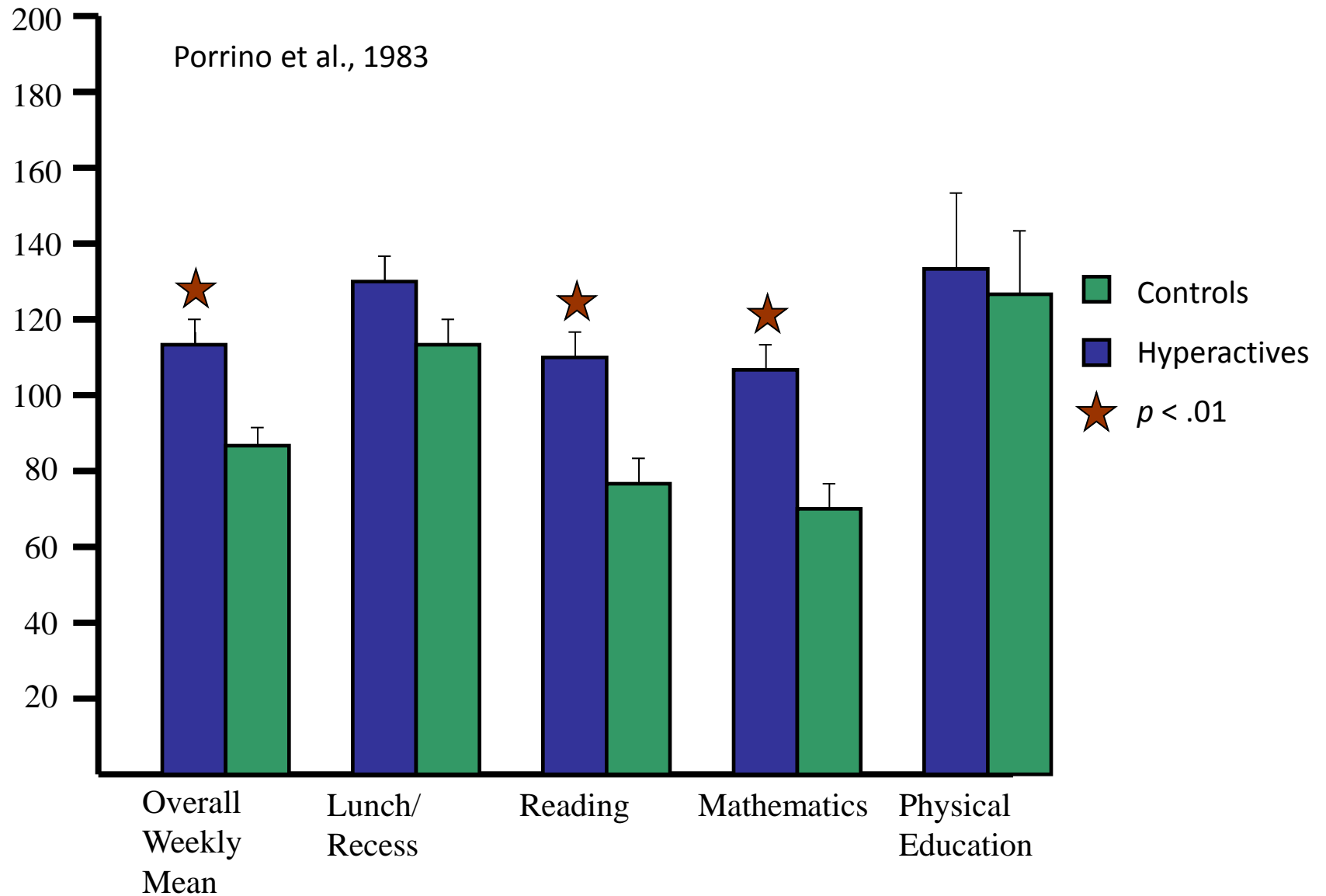
“Little evidence was found, however, to support the hypothesis that hyperactivity is simply an artifact of the structure and attentional demands of a given setting.” p.681

“... a substantial ubiquitous increase in simple motor behavior is a clear characteristic of this group.” p. 685

“In a variety of situations with differing degrees of structure and attentional demand, hyperactives showed consistently higher levels of motor movement than did their normal controls.” p. 686

Porrino et al. (1983). *Archives of General Psychiatry*, 40, 681-687.

Mean Hourly Activity Scores During the Week



DEPENDENT MEASURES AND TECHNIQUES

ACTIGRAPHS

- ❑ Ambulatory Monitoring, Inc. MicroMini Motionlogger®
- ❑ **SETTING: Low PIM Mode [intensity of movement] [Proportional Integrating Measure]**
- ❑ **SAMPLING RATE = 16 samples per second collapsed into 1-minute epochs**
- ❑ **Placement: both ankles; non-dominant wrist**

RECORD	TIME	BEHAVIOR
309	00:08:42.5	E- G-M
310	00:08:44.1	HeadStil
311	00:08:49.2	HeadMove
312	00:08:49.5	G-M Move
313	00:08:49.6	Ch-Swing
314	00:08:49.6	FootMove
315	00:08:49.9	Voc Hear
316	00:08:51.2	Ch- Stil
317	00:08:52.4	VocQuiet
318	00:08:52.8	FootStil
319	00:08:52.8	G-M Stil
320	00:08:55.2	E- G-M
321	00:09:00.9	HeadStil
322	00:09:00.9	E- G-M
323	00:09:09.8	HeadMove

[Orient]	[Head]	[Hands]	[Feet]	[GrossMov]	[ChairMov]	[OutChair]	[Vocal]
1 = Oriented	3 = HeadStil	7 = HandStil	a = FootStil	d = G-M Stil	q = Ch- Stil	p = In-Chair	g = VocQuiet
2 = NoOrient	4 = HeadMove	8 = HandMove	b = FootMove	e = G-M Move	r = Ch-Swing	o = OutChair	h = Voc Hear
z = Break	5 = E-Head	9 = E-Hand	c = E-Foot	f = E- G-M	s = E-Chair	n = E-OutChair	i = E-Vocal

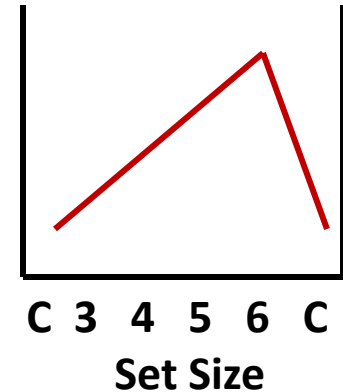


Experimental Design

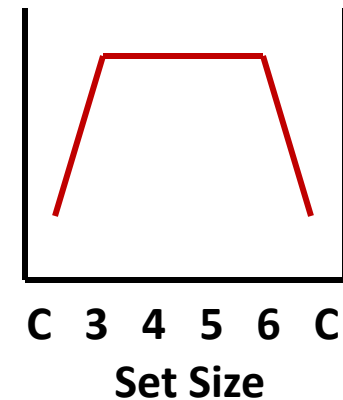
- Phonological WM (21 consecutive trials) at 4 set sizes (3, 4, 5, 6) [programmed using SuperLab 2.0]
- Visuospatial WM (21 consecutive trials) at 4 set sizes (3, 4, 5, 6) [programmed using SuperLab 2.0]
- All tasks administered in counterbalanced order across 4-week Saturday assessment sessions.

Primary Hypothesis

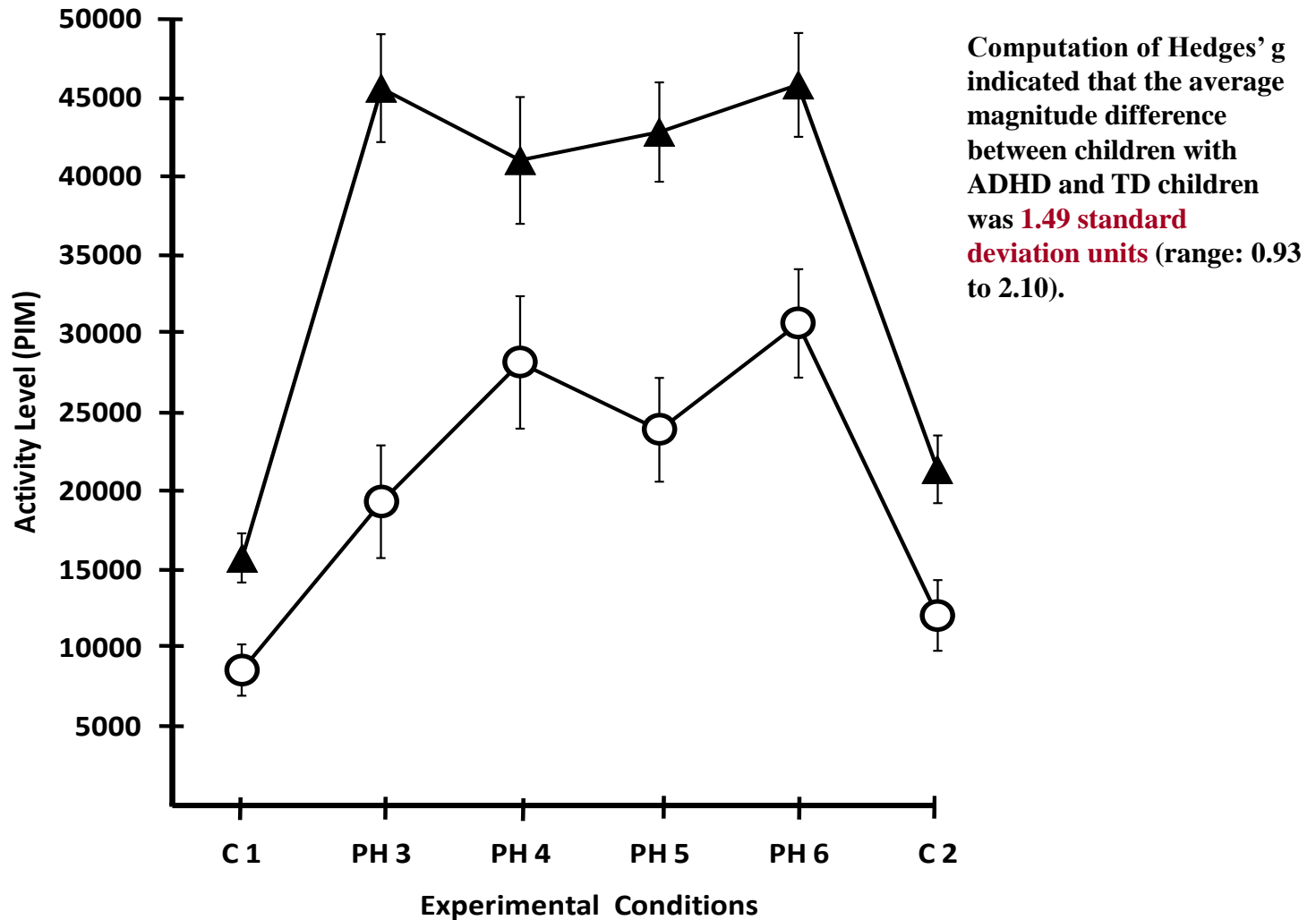
- If activity level is functionally related to PH/VS subsidiary system processes, we would expect movement to vary systematically as greater demands are imposed on the storage/rehearsal systems.



- If activity level is functionally related to Central Executive processes, we would expect movement to increase from control (minimal CE or storage demands) to WM demand conditions, but not vary between set size conditions because no additional demands are placed on the CE when only the number of stimuli increase (i.e., no additional processing demands are imposed).

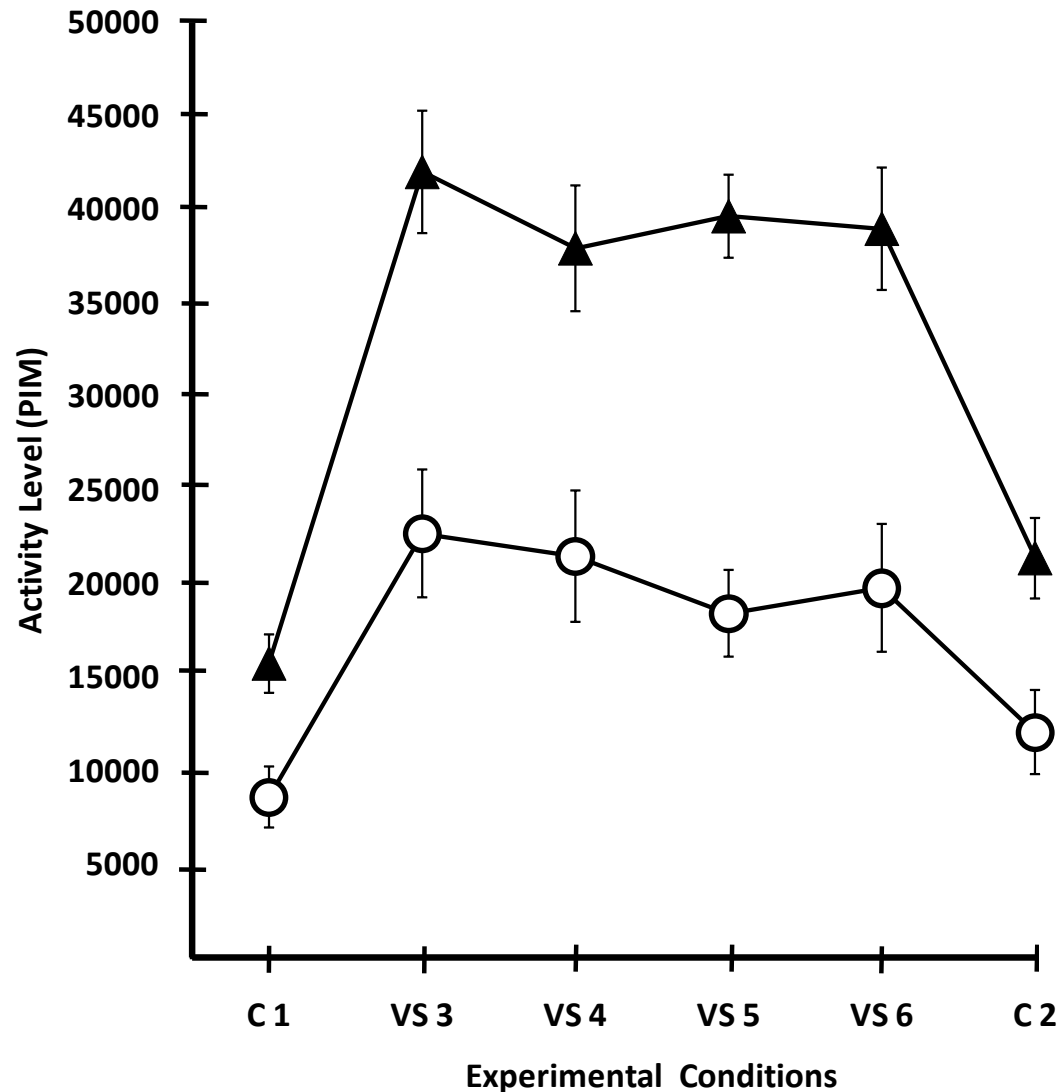


Activity Level Assessed During the PH and Control Conditions



Total extremity activity level (right foot, left foot, and non-dominant hand) expressed in PIM (Proportional Integrated Measure) units for children with ADHD (*triangles*) and typically developing children (*circles*) under control (C1, C2) and four phonological set size (PH 3, 4, 5, 6) working memory task conditions. *Vertical bars* represent standard error.

Activity Level Assessed During the VS and Control Conditions

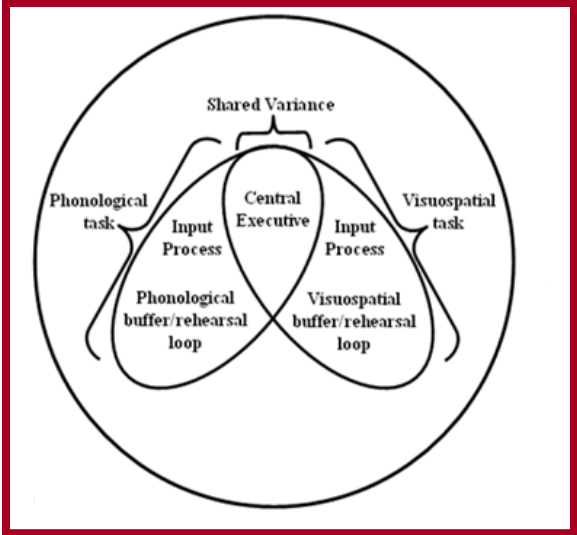
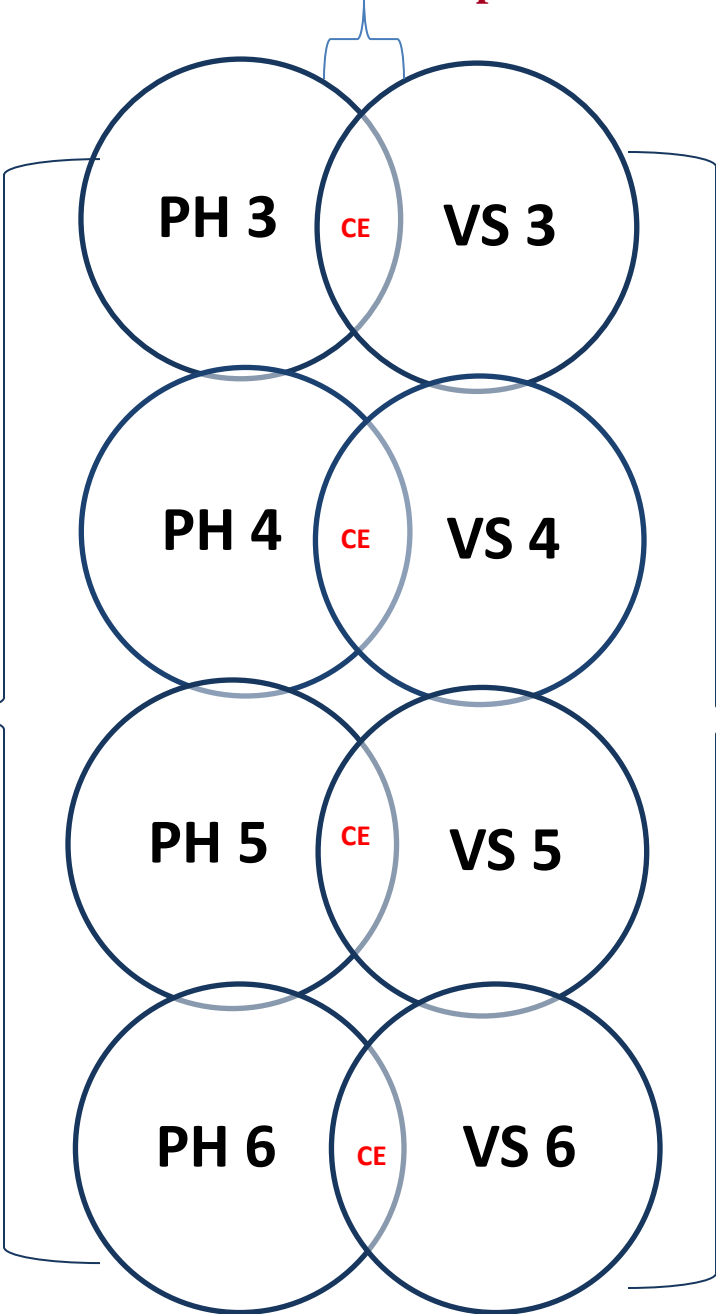


Hedges' *g* effect size indicated that the average magnitude difference in activity level between children with ADHD and TD children during visuospatial WM tasks was **1.83 standard deviation units** (range=1.47 to 2.67).

Total extremity activity level (right foot, left foot, and non-dominant hand) expressed in PIM (Proportional Integrated Measure) units for children with ADHD (*triangles*) and typically developing children (*circles*) under control (C1, C2) and four visuospatial set size (VS 3, 4, 5, 6) working memory task conditions. *Vertical bars* represent standard error.

STEP 1:
PH, VS, and CE
Performance
Composite Scores

CE Performance Composite Score



PH 3
Storage/
Rehearsal

PH 3
Activity
Level

PH 4
Storage/
Rehearsal

PH 4
Activity
Level

PH 5
Storage/
Rehearsal

PH 5
Activity
Level

PH 6
Storage/
Rehearsal

PH 6
Activity
Level

Activity level directly related to PH
Storage/Rehearsal

STEP 2:

**Activity Level Directly
Related to PH and VS
Storage/Rehearsal
Functioning**

Results indicated that PH functioning was **NOT** a significant contributor to objectively measured activity level (average $R^2 = .10$; values ranged from .06 to .21 and were all non-significant with one exception).

Results indicated that VS functioning was **NOT** a significant contributor to objectively measured activity level (average $R^2 = .07$; values ranged from less than .001 to .14 and were all non-significant).

VS 3
Storage/
Rehearsal

VS 3
Activity
Level

VS 3
Storage/
Rehearsal

VS 3
Activity
Level

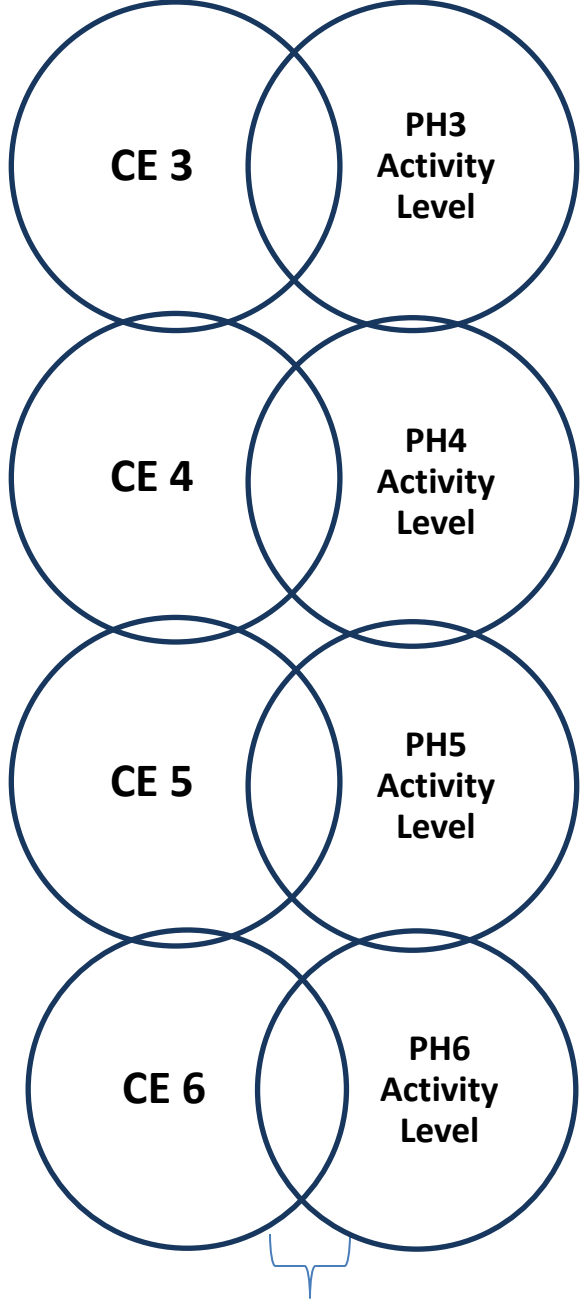
VS 3
Storage/
Rehearsal

VS 3
Activity
Level

VS 3
Storage/
Rehearsal

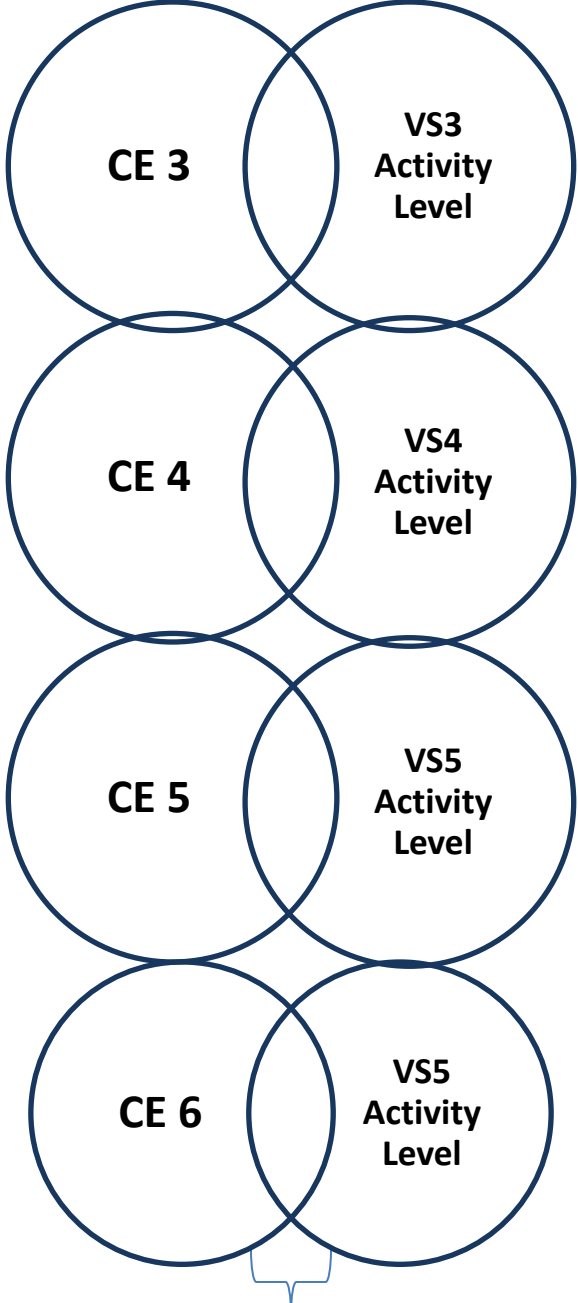
VS 3
Activity
Level

Activity level directly related to VS
Storage/Rehearsal functioning



Results indicated that CE functioning **WAS A SIGNIFICANT CONTRIBUTOR** of objectively measured activity level (average $R^2 = .32$; values ranged from .17 to .61; all $p \leq .04$).

An independent samples t-test on the derived CE-activity level variable indicated a significant between-group difference, $t(21)=7.54$, $p<0.0005$, with children with ADHD evincing higher rates of activity directly associated with CE functioning relative to TD children. Hedges' g effect size indicated that the average magnitude difference between children with ADHD and TD children was **3.03 standard deviation units** (SE=0.60).

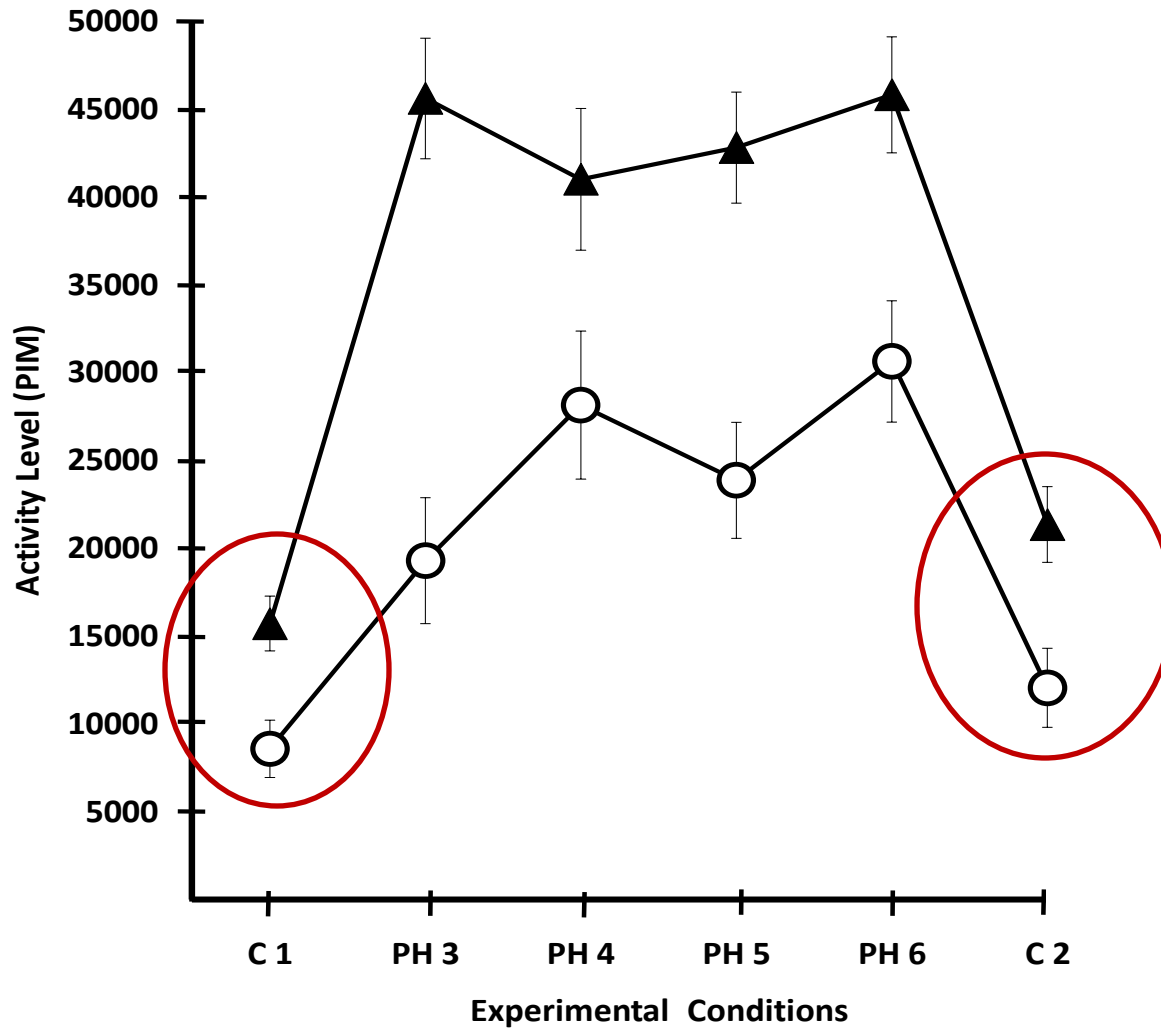


STEP 3:
Activity Level Directly Related to CE Functioning

Activity level during the PH task that is directly related to CE functioning

Activity level during the VS task that is directly related to CE functioning

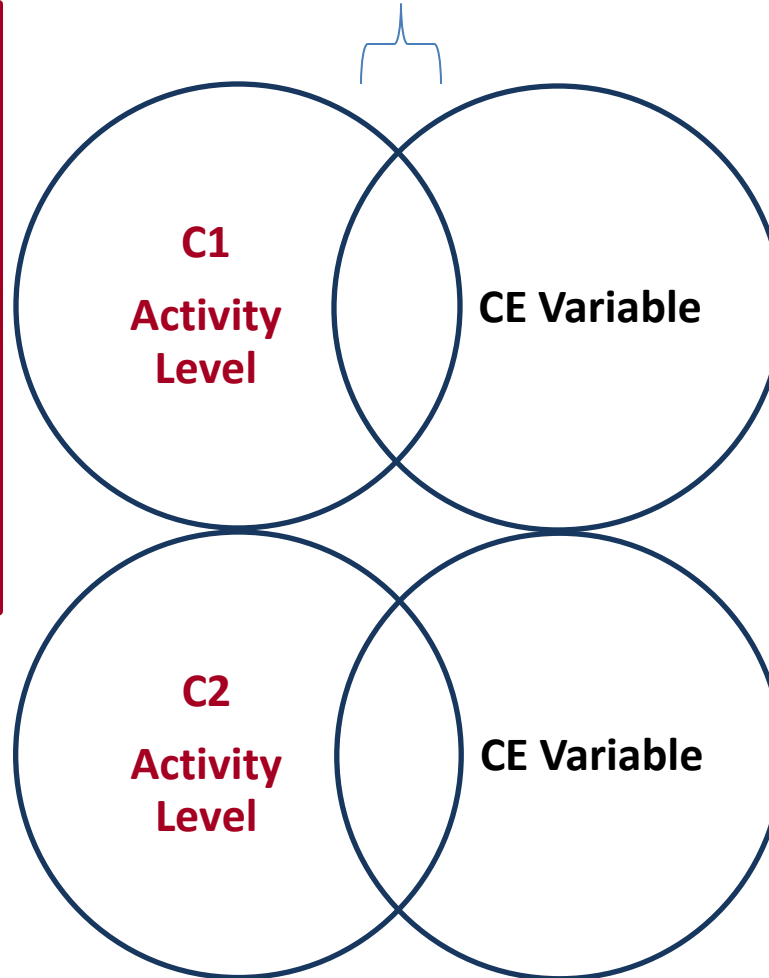
Activity Level Assessed During the PH and Control Conditions



Total extremity activity level (right foot, left foot, and non-dominant hand) expressed in PIM (Proportional Integrated Measure) units for children with ADHD (*triangles*) and typically developing children (*circles*) under control (C1, C2) and four phonological set size (PH 3, 4, 5, 6) working memory task conditions. *Vertical bars* represent standard error.

STEP 4:
Activity Level Assessed During the Control Conditions that is unrelated to CE Functioning

The 2 (group: ADHD, TD) by 2 (condition: C1, C2) Mixed-model ANOVA was non-significant for group, condition, and the group by condition interaction (all $p \geq .52$), indicating that **children with ADHD were not ubiquitously more motorically active** than typically developing children during the clinical assessment after accounting for task-related WM demands.

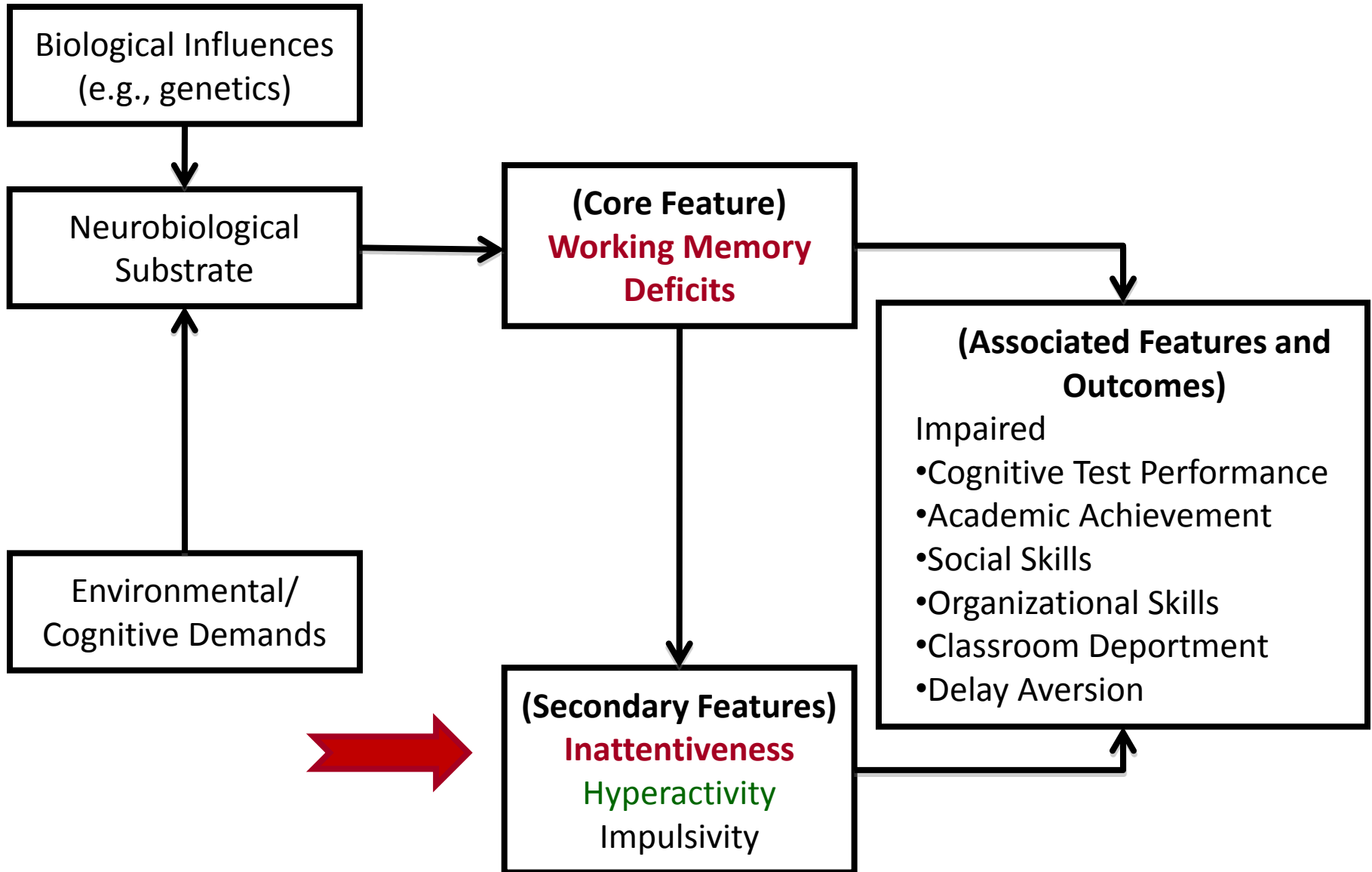


Hedges' g effect size indicated that the average magnitude difference between children with ADHD and TD children was 0.20 standard deviation units ($SE=0.29$), with a **confidence interval that included 0.0**.

Findings Summary

- ❖ **All children** are significantly more active when engage in tasks requiring working memory.
- ❖ Children with ADHD are significantly more active than TDs when engaged in tasks requiring WM.
- ❖ Children with ADHD are **not** significantly more active than typically developing children after controlling for the influence of WM [**not ubiquitously hyperactive**]
- ❖ **Central Executive** functioning (not storage/rehearsal) is functionally related to children's activity level.
- ❖ Differences in children's activity level during WM task may reflect underlying differences in arousal.

Working Memory Model of ADHD



Dependent Measures and Techniques

Noldus Observer

❑ Mutually exclusive Behavioral Codes

❖ Oriented to task

- ❖ Head is directed within 45° vertically/horizontally of the center of the monitor.

❑ Observers

❖ Two coders per tape

❖ Observers pre-trained to exceed 80% agreement

❖ Interrater reliability = .94; Kappa = .88

The screenshot displays the Noldus Observer software interface. At the top is the title bar 'The Observer - Event Recorder' with a menu bar (File, Edit, View, Customize, Data, Tools, Video, Window, Help) and a toolbar. Below the toolbar are three main panels:

- Event Log:** A table with columns 'RECORD', 'TIME', and 'BEHAVIOR'. The current record is 323 at 00:09:09.8, with the behavior 'HeadMove'.
- Monitor - 00:09:08:** A video window showing a person sitting at a desk with a computer monitor, viewed from behind.
- Video Control:** A panel with playback controls (stop, play, fast forward, fast reverse), a 'Play Speed' slider, and a 'Position' slider.

At the bottom is the 'Codes: Behavior' panel, which contains a table of behavioral codes:

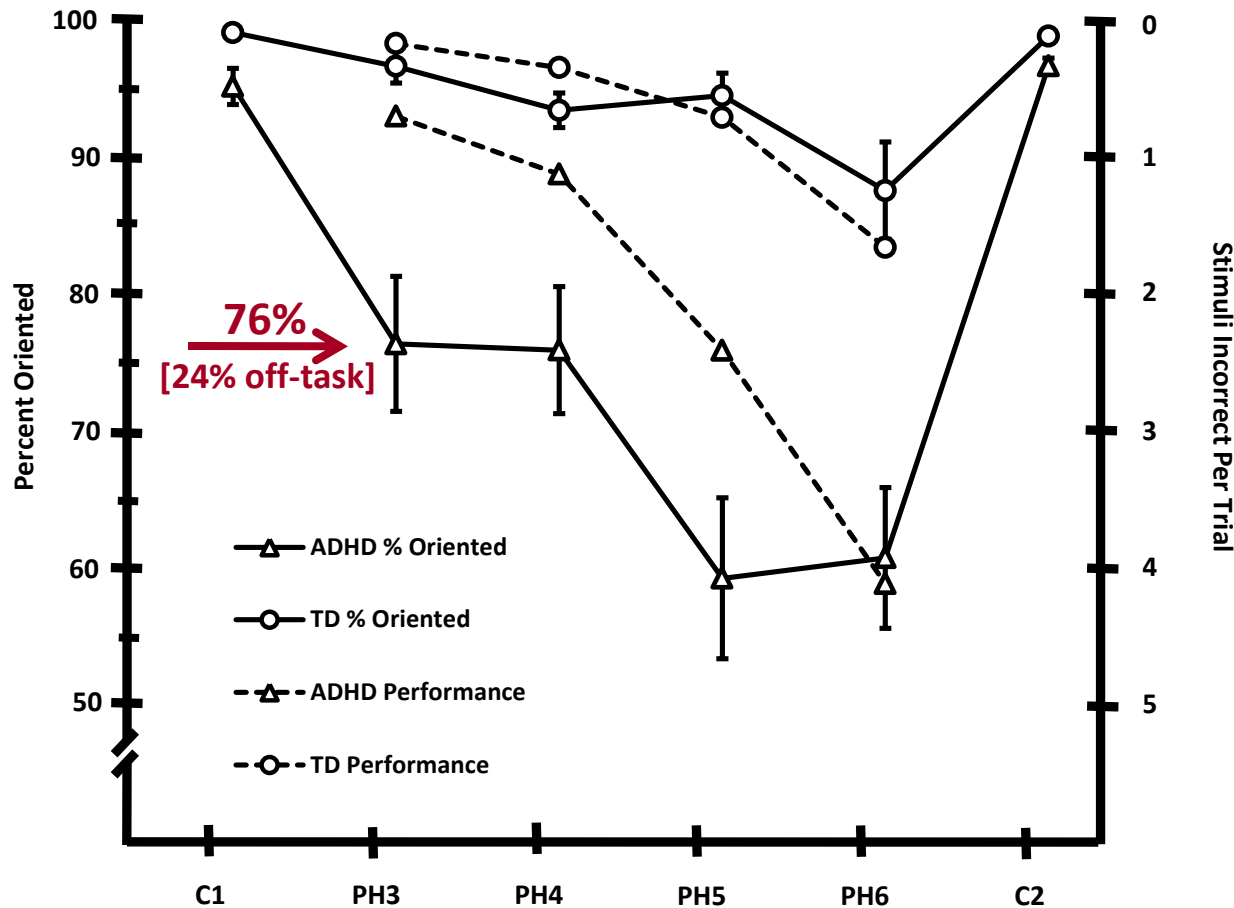
[Orient]	[Head]	[Hands]	[Feet]	[GrossMov]	[ChairMov]	[OutChair]	[Vocal]
1 = Oriented	3 = HeadStil	7 = HandStil	a = FootStil	d = G-M Stil	q = Ch- Stil	p = In-Chair	g = VocQuiet
2 = NoOrient	4 = HeadMove	8 = HandMove	b = FootMove	e = G-M Move	r = Ch-Swing	o = OutChair	h = Voc Hear
z = Break	5 = E-Head	9 = E-Hand	c = E-Foot	f = E- G-M	s = E-Chair	n = E-Ochair	i = E- Vocal

Working Memory and Children's Inattentive behavior

Hypotheses: Inattentiveness may be associated with any of the following deficiencies:

- I. Deficient CE processes [internal focus of attention]**
- II. Exceeding child's storage capacity [STS]**
- III. Deficiencies in both the CE and PH/VS storage capacity**
- IV. Ubiquitous inattentiveness unrelated to WM processes**

Tier I: Attentive behavior and phonological memory load



- Group, set size, and group x set size: all $p < .0005$

- Post hocs:

- TDC > ADHD across all conditions (all $p \leq .009$)

- ADHD: Pre = Post > 3 = 4 > 5 = 6

- TDC: Pre = Post > 3 = 4 = 5 > 6

- Pre = Post ($p \geq .18$)

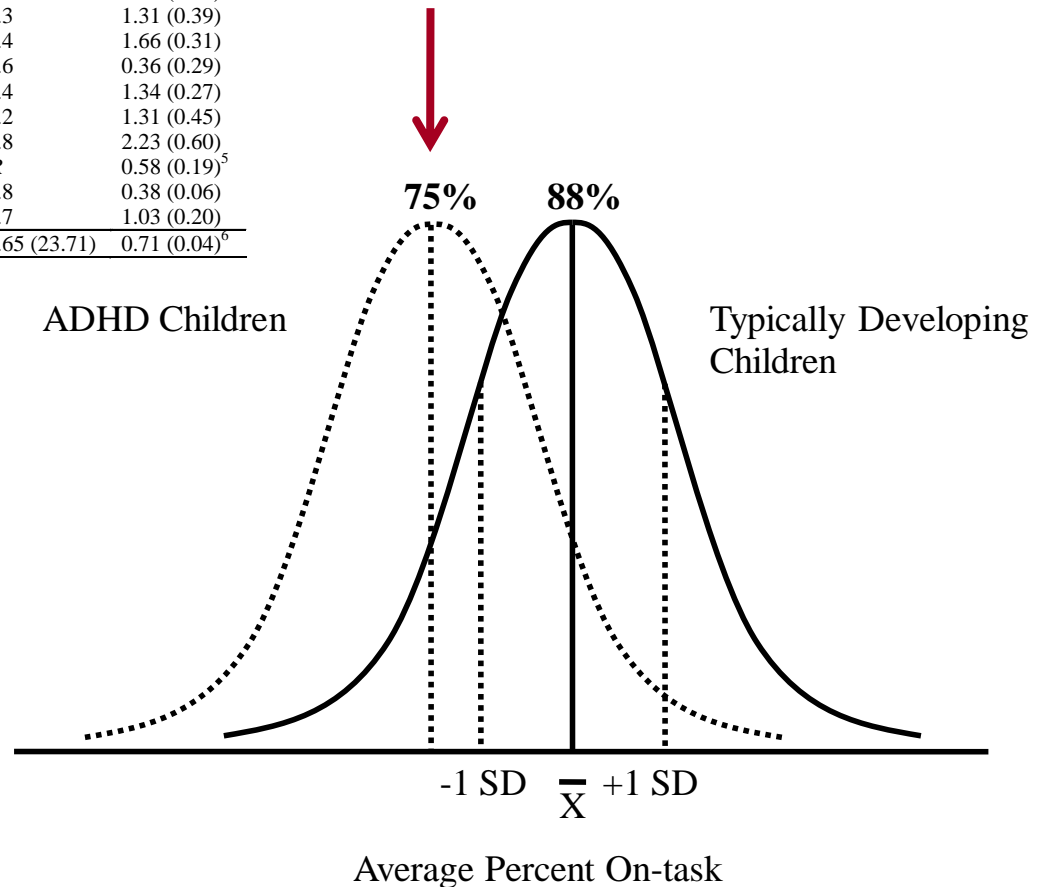
- Hedges' $g = 1.55$ (SE = 0.42)

Table 2. Mean Off-task Rates, Standard Difference Scores, and Effect Sizes in Children with ADHD and Typically Developing Children

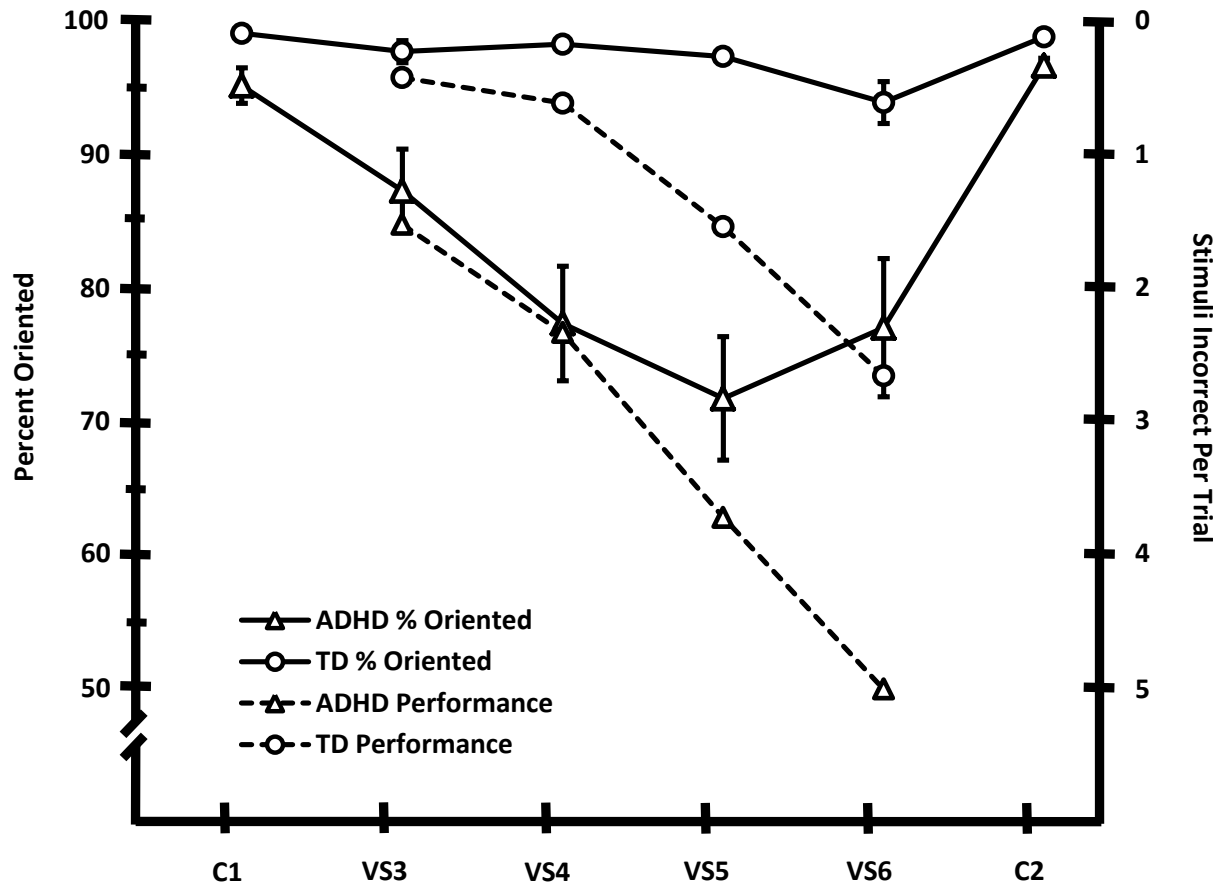
Study	ADHD % Off-task M (SD)	Control % Off-task M (SD)	Std. Diff. Scores (%)	Hedges' g Effect Sizes (Std. Error)
Werry & Quay (1969)	46.3 (12.8)	23 (15.4)	50.3	2.09 (0.53)
Forness & Esveldt (1975)	47.0 (16.5)	34 (12.4)	27.7	0.88 (0.30)
Shecket & Shecket (1976)	NR	NR	NR	0.00 ⁴
Abikoff et al. (1977)	13.1 (10.0)	2.1 (2.6)	84.2	1.50 (0.21)
Campbell et al. (1978)	16.73 (15.15)	12.41 (10.88)	25.8	0.32 (0.35)
Jacob et al. (1978)	15.8 (NR)	10.5 (NR)	33.3	1.41 (0.53) ³
Klein & Young (1979)	39.8 (9.0)	26.6 (5.0)	33.1	1.78 (0.40)
Abikoff et al. (1980)	15.1 (23.4)	4.1 (7.8)	72.8	0.62 (0.19)
Zentall (1980)	15.0 (NR)	7.1 (NR)	52.2	0.45 (0.25)
Abikoff & Gittelman (1984)	17.4 (12.3)	3.5 (6.6)	79.7	1.39 (0.29)
Abikoff & Gittelman (1985)	15.7 (10.4)	2.5 (4.6)	84.1	1.71 (0.31)
Atkins et al. (1985)	NR	NR	NR	0.59 (0.30) ¹
Book & Skeen (1987)	5.11 (4.82)	0.78 (1.47)	84.7	1.21 (0.17)
Cunningham & Siegel (1987)	33.0 (NR)	26.4 (NR)	19.9	0.51 (0.26) ²
Roberts (1990)	39.5 (18.8)	12.9 (20.9)	67.3	1.31 (0.39)
DuPaul & Rapport (1993)	44.26 (16.56)	19.72 (11.56)	55.4	1.66 (0.31)
Lett & Kamphaus (1997)	18.3 (16.5)	12.7 (12.7)	30.6	0.36 (0.29)
Nolan & Gadow (1997)	30.5 (15.9)	13.3 (8.3)	56.4	1.34 (0.27)
DuPaul et al. (1998)	33.0 (19.2)	9.5 (11.9)	71.2	1.31 (0.45)
Skansgaard & Burns (1998)	23.8 (10.3)	4.8 (6.1)	79.8	2.23 (0.60)
Solanto et al. (2001)	NR	NR	NR	0.58 (0.19) ⁵
Abikoff et al. (2002)	10.6 (24.0)	3.3 (13.2)	68.8	0.38 (0.06)
Lauth & Mackowiak (2004)	83.0 (12.0)	70.0 (13.0)	15.7	1.03 (0.20)
Column M (SD) =	28.15 (18.28)	14.96 (16.47)	54.65 (23.71)	0.71 (0.04) ⁶

Kofler, Rapport, & Alderson (2008). Quantifying ADHD classroom inattentiveness, its moderators, and variability: a meta-analytic review. *Journal of Child Psychology & Psychiatry* 49, 59–69.

Best case estimation:
ES = 1.40



Tier I: Attentive behavior and visuospatial memory load



- Group, set size, and group x set size: all $p < .0005$

- Post hocs:

- TDC > ADHD across all conditions (all $p \leq .009$)

- ADHD: Pre = Post > 3 > 4 = 5 = 6

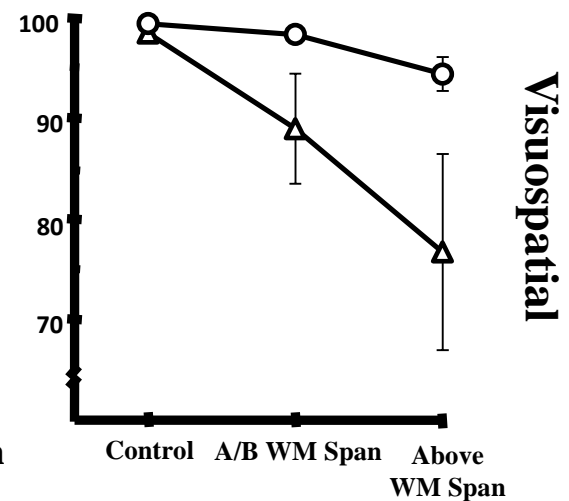
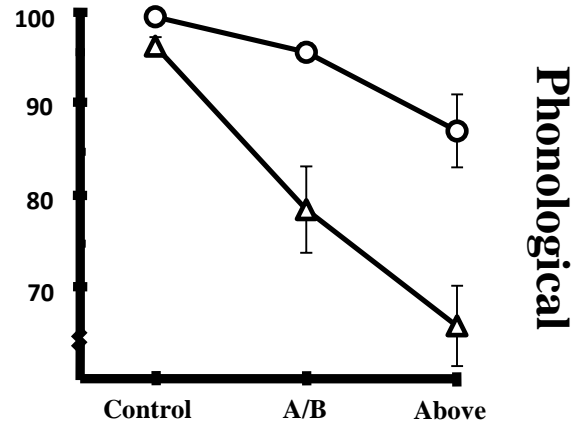
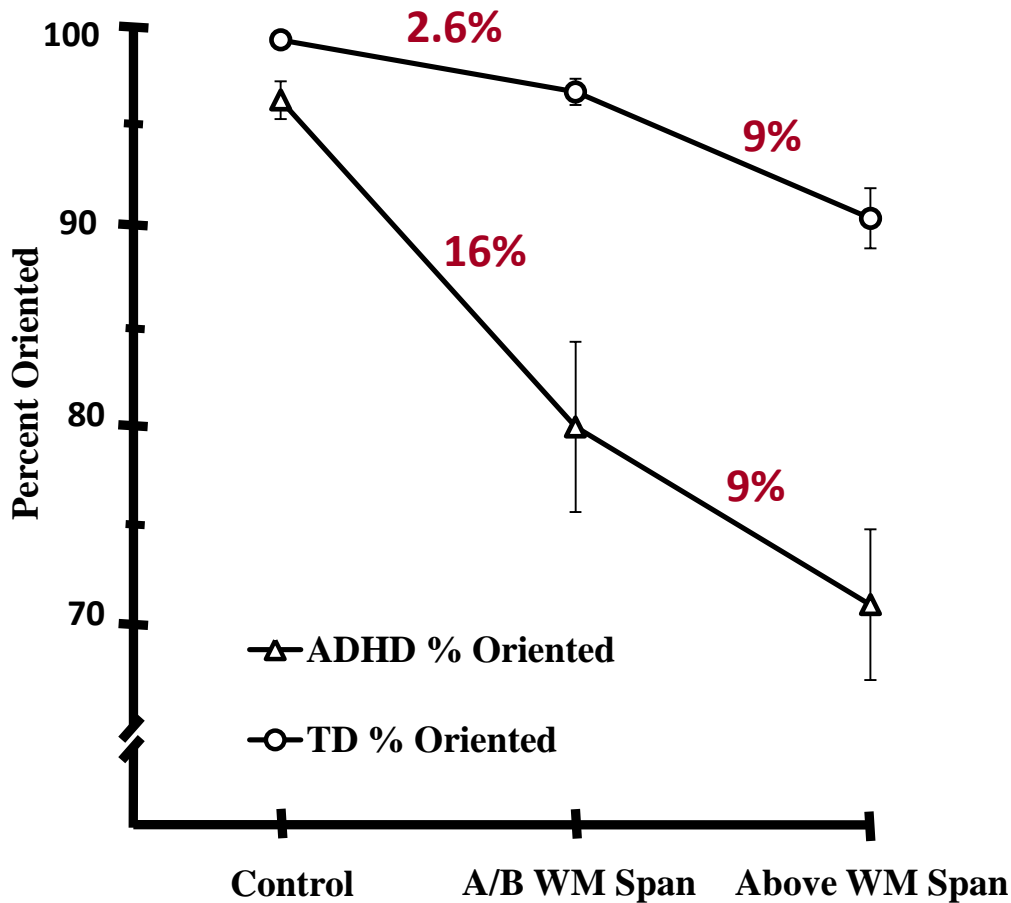
- TDC: Pre = Post = 3 = 4 = 5 > 6

- Pre = Post ($p \geq .18$)

- Hedges' $g = 1.45$ (SE = 0.42)

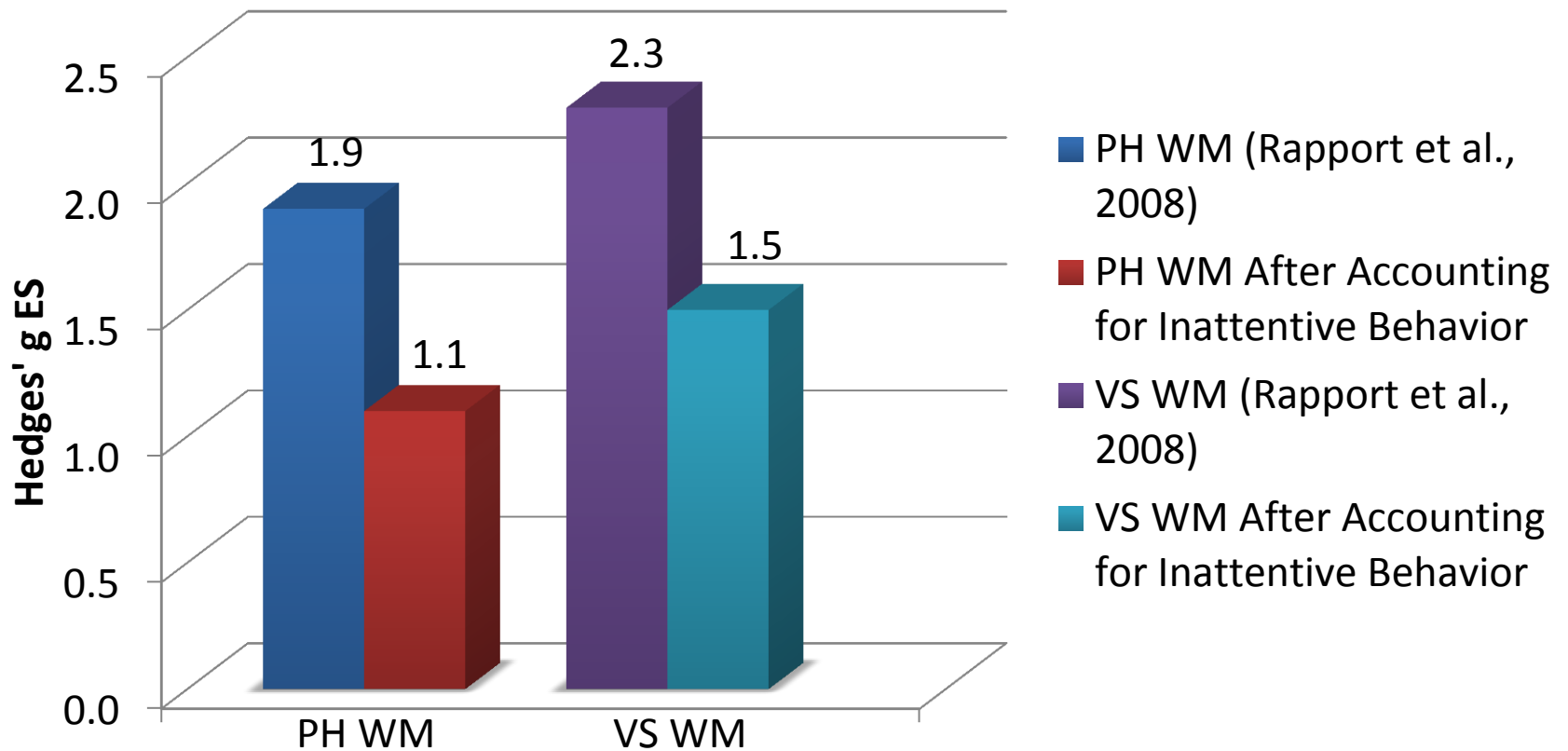
WM Components and Attentive Behavior

[2 (group) x 3 (conditions) mixed-model ANOVA]

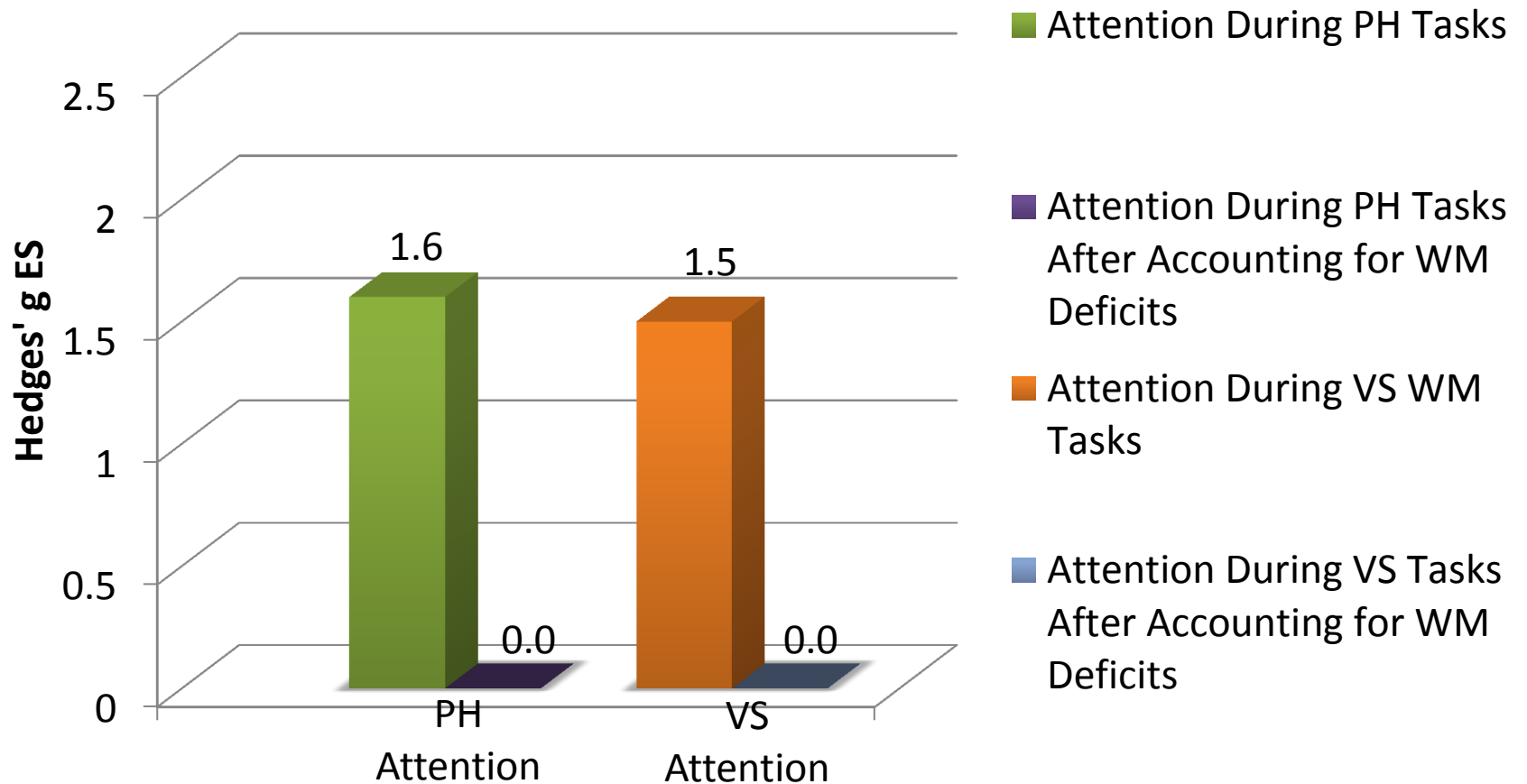


CE:	CE	<	CE	=	CE
S/R:	S/R	≈	S/R	<	S/R
	(S/R Not Overwhelmed)		(S/R Overwhelmed)		

Magnitude of Working Memory Deficits in ADHD



Magnitude of Attention Deficits in ADHD



Summary

- ❖ **Initial inattentiveness in ADHD reflects underlying deficits in CE processes – most likely the internal focus of attention**
- ❖ **Exceeding WM storage capacity results in similar rates of inattentiveness in children with ADHD and typically developing children**
- ❖ **WM deficits remain after accounting for between-group differences in inattentiveness.**
- ❖ **Between-group inattentiveness differences are no longer significant after accounting for WM differences**

Internal Focus ?? ←
 LTM interaction ?? ←
 Divided attention no ←

ES=2.76

Central Executive

Auditory Input **yes**

Visual Input **yes**

Visual Input **yes**

Phonological
Analysis

??

Visuospatial Analysis ??

Phonological
ES=.55
STS
Inferior parietal
lobe

Visual
analysis &
STS

Visuospatial
ES=.89
STS
Right hemisphere

Orthographic
to
phonological
recoding

yes

**Rehearsal
Process**

Rehearsal
Process

??

Phonological output
buffer
Broca's area-premotor
cortex

Visuospatial output
buffer
Right premotor cortex

Spoken Output

Motor Output

**Deficient WM systems/
subsidiary systems &
processes**

