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Research Paper

The facilitators of experience of parenting the children with attention deficit hyperactivity disorder



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ABSTRACT

Objective: The purpose of this research is to investigate facilitating factors in dealing with parenting challenges of 18 parents who have children with attention-deficit/ hyperactivity disorder.

Methods: The research is a qualitative study. The context includes all parents referred to the Mofid psychiatric clinic of the Children's Medical Center in Tehran. The purposive and accessible sampling method was employed. Data was collected through semi-structured interviews like the preliminary questions (1- What were your initial reasons for consulting a child psychiatrist? Please describe your experience in the doctor's office. Interviewee number 3: "The teacher and school counselor recommended that we see a psychiatrist"), main questions (1- What problems or challenges are you facing in your relationship with your child? What strategies are you adopting to deal with these challenges? Interviewee number 4: "I have accepted that many of my child's behaviors are unintentional and influenced by illness, and I must have more patience and tolerance towards them). Moreover, the qualitative data analysis of the study also utilized thematic analysis.

Results: The findings showed that there are six main factors from the parent's point of view to overcoming the challenges related to their children: 1- Drug treatment, 2- Parents' personality traits, 3- Parents' awareness, 4- Parents' interaction and cooperation, 5- Lack of secrecy, 6- teachers and trainers' roles.

Conclusion: Therefore, parent awareness workshops about children's behavior and participation in parenting sessions, as well as parents' lack of secrecy and interaction with school, are the solutions that can be useful in facilitating overcoming parenting challenges.

1. Introduction

The definition of ADHD remains the same in DSM-5-TR in comparison to DSM-5. More specifically, it is stated that "ADHD is a neurodevelopmental disorder defined by impairing levels of inattention, disorganization, and/or hyperactivity-impulsivity. Global statistics indicate that 4% of children in the world suffer from ADHD (Reale & Bonati, 2018). Reports in Iran show that the prevalence of attention-deficit/ hyperactivity disorder is higher than

global statistics, and the index is 12.89 (Bayat et al., 2022). The symptoms of this disorder include inattention, impulsive behavior and hyperactivity, which are usually seen in children (Martin et al., 2019). These symptoms disrupt the child's functioning in many aspects, such as home, school and social relationships. Reports show that more than 60% of ADHD children have these symptoms into adulthood (Faraone et al., 2006).

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In most cases, children with this disorder have problems such as stubbornness with others, learning problems, disobedience to parents and behavioral problems (Kieling et al., 2010). Adolescents with ADHD, in addition to using drugs earlier, are always exposed to academic failure, severe social problems and behavioral disorder symptoms more than others (Kratochvil et al., 2009). Also, psychological damages such as social delinquency, drug misuse, and becoming a simple worker are more common in adults with ADHD than healthy people (Biederman et al., 2012). Parents who have children with ADHD are more prone to parenting challenges than other parents, and their families face many problems. Attention deficit hyperactivity disorder (ADHD) and other similar disorders, such as bipolar disorder and obsessive-compulsive disorder (OCD), can significantly impact family relationships, society and academic performance (Malehmir et al., 2023). A study conducted by Allahyari (2021) investigated the impact of Acceptance and Commitment Therapy (ACT)-based education on mothers with children diagnosed with attention deficit hyperactivity disorder (ADHD). The findings revealed that ACT-based education significantly reduced anxiety and improved self-regulation among these mothers. Additionally, the study observed decreased anger levels and enhanced emotional self-regulation among the participating mothers. Tancred and Greif (2015), in a cross-sectional study, concluded that drug treatment, mother-child relationship, and mother's regularity are the best predictor variables for family adjustment. Also, teaching parenting skills to parents of children with ADHD was among the strategies provided by the researchers of this study. Thus, the correct relationship between parents and children with ADHD has a significant contribution to controlling the disease. Contrary to educational problems, high arousal and lack of concentration can be associated with negative tensions between parents and children with ADHD (Evans et al., 2020). Despite the lasting effects of parents on their own children, one should be careful that the child's behavior and temperament can also affect parenting (Chronis -Toscano et al., 2013). Children with ADHD usually show a high level of activity, low attention and a wide range of impulsivity. They are more prone to destructive activities than their peers in the school and home environment (Roy et al., 2017). Also, in preschool, they are aggressive, have low social skills, and have a poor ability to adapt to changes compared to peers (Deault, 2010). In addition, children with ADHD ignore their parents' requests and usually fight with their siblings and friends. They disturb

neighbors and cause negative emotions in their teachers (Breux & Haroy, 2019). Because of this and the wrong behaviors of children with ADHD, their parents experience a wide range of social distress (Modesto et al., 2008). Reports show that parents of children with ADHD are more likely to experience stress and lack of confidence in their parenting skills than other parents (Margari et al., 2013). In addition, the incorrect use of parenting methods causes the severity of problems and negative and destructive reactions from the children (Fenesy & Tehwliy, 2019). Since the parenting styles of parents are affected by their cultural context and the difference in parenting styles between different societies and groups is due to cultural differences in cognitions, educational values and the meaning of parenting components, the challenges of parenting are also different in the societies and cultures (Crockett et al., 2010). On the other hand, it should be noted that the relationship between parents and children in families that have children with ADHD is noticeably different from other families. The literature review shows that studies in the field of parenting challenges can be classified into three general categories: 1. Examining parenting challenges in parents with various disorders such as neurological and mood disorders like borderline personality, hyperactivity or severe mental disorders (Zalewski et al., 2015), 2. Examining parenting challenges of parents who have children with various diseases (Hall & Graff, 2010; Whittingham et al., 2016) and 3. Examining parenting challenges of parents at different ages of children or special social/family conditions, such as parenting challenges in immigrant families or after the death of another child in the family (Buckle & Fleming, 2011; Salami et al., 2020). Therefore, the present research is in the second group of topics. Therefore, according to the fact that the present study considers the importance of parents' relationships with these children and examines facilitating factors in dealing with parenting challenges in parents who have children with attention deficit/hyperactivity disorder, on the other hand; according to research carried out in the country, which mostly had a limited approach and no direct research on this topic was available, in this research we intend to answer the question that what the facilitating factors in dealing with the challenges of parenting in parents who have children with attention deficit/hyperactivity disorder are? It is also necessary to mention that the current study was qualitative, and like other qualitative studies, it was exposed to the risk of bias by the researchers. This study prevents possible biases by following the principles of qualitative research, coding by two separate people, and evaluating codes done by

specific experts. On the other hand, considering that all the participants in the current research were selected from the parents who went to Mofid Children's Medical, Educational and Therapeutic Center, a government hospital, their social, economic and cultural characteristics may impact the identified components. Therefore, generalizing the results of this study to families with children who have ADHD with different cultural, social and economic characteristics should be done carefully.

2. Materials and Methods

The current research, in terms of methodology, is qualitative research with a thematic analysis approach to the lived experience of the participants. *Qualitative studies* emphasize deep understanding, elegance, complexity, and study findings. The data of this research was obtained through semi-structured interviews with parents of children with ADHD. The statistical population of the study includes all parents of children with ADHD who were referred to the child and adolescent psychiatry clinic of Mofid Children's Hospital to follow up on the treatment process of their children. The sampling method was purposeful and available. This research implemented the interview text as soon as possible, and the audio files were typed into text after each interview. Primary codes centered on a central concept were placed within a subclass. Then, the subclasses were reviewed several times and compared based on similarities and differences, and the classes and themes were formed. The sampling in this research was done using a purposeful and accessible method, and the criteria for inclusion in the sample group are as follows. First, the current research protocol was proposed and approved by the research ethics committee of Shahid Beheshti University of Medical Sciences before conducting the study. Then, the research objectives are explained to the parents, and if they are satisfied with the written consent, the parents are included in the study. By setting the entry criteria and reaching data saturation, a sample group of 18 parents of children with ADHD was formed.

The interview questions are as follows. Opening question: 1- What were your initial reasons for consulting a child psychiatrist? Please describe your experience in the doctor's office.

Introductory questions: 1- What impact has your child's ADHD diagnosis had on your family? 2- Briefly describe a day you spend with your child, focusing on the challenges you typically face.

Transition questions: 1- Describe your experience with the support from those around you (family, school, and community) following your child's

ADHD diagnosis. 2- Have you experienced stressful situations due to your child's condition in your family or community? If yes, please explain. 3- Have you ever received negative feedback from those around you (in the family, school, or community) about yourself or your child? Please explain.

Key questions: 1- What problems or challenges do you face in your relationship with your child? What strategies do you adopt to address these challenges? 2- What problems or challenges do you face about your child's education? What strategies do you adopt to address these challenges? 3- What social challenges do you face with your child (at home, school, or community)? What strategies do you adopt to address these challenges? (Social challenges in this question refer to problems that the child may encounter in their social relationships with family members, friends, and classmates, and addressing these may pose a challenge for parents) 4- What specific economic challenges do you face about your child? 5- What challenges do you face with your child in medical centers, counseling centers, pharmacies, etc. (in general, health system-related centers)?

Consolatory question: 1- What responsibilities do you undertake in raising your child that parents of non-ADHD children are not required to do? 2- What helps you and your family cope with the negative experiences resulting from your child's condition? Open question: 1- Do you have any other concerns about your child that have not been mentioned in the questions? If yes, please explain.

The approach of this research is qualitative, and its analysis method was conducted through thematic analysis. The qualitative data analysis process was carried out according to the steps suggested by Granhime and Landman. In this way, the interview text was implemented as soon as possible in the present study, and the audio files were typed as text after each interview. Primary codes centered on a central concept were placed within a subclass. Then, the subclasses were reviewed several times and compared based on similarities and differences, and classes and themes were formed.

Reliability and Validity

Semi-structured interviews: In order to conduct interviews with the cooperation of the head of the psychiatry unit of Mofid Children's Hospital, the researcher settled in the psychiatry clinic and interviewed the parents who came to follow the treatment process of their children with ADHD. To ensure the validity and reliability of the research, four evaluation criteria were used: credibility,

transferability, dependability (reliability), and verifiability. Credibility refers to the truthfulness of the descriptions and findings of the research. It is the degree of trust in the truthfulness of the findings for the research participants and the context in which the research was conducted. In this research, in order to achieve reliability, some techniques such as conducting interviews by two people in parallel and exchanging information during data collection, coding by two people and using another coder in order to ensure the same point of view of the coders and appropriateness categories, providing data analysis and its results to the experts and professors as well as to the interviewees in order to confirm the selected categories, continuing the interviews until encountering duplicate data and reaching the saturation limit, taking continuous notes during the research and self-review were used during the process of data collection and analysis. Reliability refers to the degree of repeatability of data by other people. This concept replaces the concept of reliability in the

quantitative field. To increase the reliability of the research, all the details related to the research field were accurately described. Verifiability means an effort to achieve the objectivity index in the research; for this purpose, in this study, raw data, all notes, documents and recorded interviews were kept for subsequent reviews. Transferability, a substitute for external validity in quantitative research, means the ability to generalize the results to other areas and fields.

3. Results

18 parents of children with ADHD who visited the psychiatric clinic in Mofid Children's Hospital to follow the treatment process of their child were selected. On average, 333 minutes of interviews were recorded, each lasting 18.5 minutes. More details about the parents participating in the interview are presented in Table 1. In order to maintain the confidentiality of the information, a code was assigned to each of the conducted interviews.

Table 1. Information about people participating in the interview

Patient	Education level of the interviewees	Interviewees	Interview code
A 16-year-old boy	Elementary	Mother	1
A 6-year-old boy	Bothe B. A	Mother and father	2
A 12-year-old boy	Diploma	Mother	3
A 14-year-old boy	Illiterate	Mother and father	4
A 7-year-old boy	B. A	Mother	5
A 7-year-old boy	Diploma	Mother	6
A 7-year-old boy	Diploma	Mother	7
A 9-year-old boy	Diploma	Father	8
Two boys, 6 and 9	Diploma	Mother	9
A 6-year-old boy	Diploma	Mother	10
A 10-year-old boy	Illiterate	Mother	11
A 6-year-old boy	B. A	Mother	12
A 10-year-old boy	Diploma	Mother	13
A 9-year-old boy	Diploma	Mother	14
A 5-year-old boy	Diploma	Mother	15
A 9-year-old boy	Diploma	Mother	16
A 9-year-old boy	Diploma	Mother	17
A 9-year-old boy	Diploma	Mother	18

The content analysis of the interviews conducted regarding the facilitating factors for overcoming parenting challenges led to the identification of six main factors: 1- Drug treatment, 2- Parents' personality traits, 3- Parents' awareness, 4- Parents'

interaction and cooperation. , 5- The lack of secrecy and 6- teachers and trainers' role. As you can see in Table 2, these factors are the facilitating factors in overcoming parental challenges of parents who have children with ADHD from the parents' view.

Table 2. The facilitating factors in overcoming parental challenges of parents who have ADHD children

Evidence	Code weight	Sub-categories	Categories	Theme
After taking the medicine, my child's educational condition improved, his concentration increased and he does his schoolwork (interview 3) At the beginning of the year, the school principal said that I should take my child to a non-profit school, he cannot study in a regular school. Now, after the treatment my child is one of the best students in the school (interview 5). When he takes medicine, he does his homework and is more focused (interview 17).	9	Increasing concentration and academic progress after taking the medicine	Drug treatment	The facilitating factors in overcoming parental challenges
Before taking the medicine, he had bad and dangerous behaviors. He couldn't get along well with children, especially younger ones. But now he is great (interview 6).	5	Behave control		
His teacher was very effective in his educational improvement. He understood my child's situation and was persistent (interview 3).	1	The school teacher's understanding and persistence	Teachers and trainer's role	
I have accepted that many of my child's behaviors are unwanted and affected by the disease, and I should be more patient with him (interview 4). We should be more patient than other parents and spend more time with our children (interview 5). Hyperactive children need more control and care than others; they should be treated with more patience (Interview 6).	3	Patience	Parents' personal features	
Since I have been participating in parenting courses, my relationship with my son has improved, although it has not completely improved, but it is noticeably better than before (Interview 4).	1	Attend parenting sessions	Parents' awareness	
In the beginning, I was not aware of my son's behavior and I used to beat him because of his bad behavior. Over time, I realized that beating is not effective. I try to be more calm and patient (interview 8).	1	Understanding the characteristics of hyperactive children		
Since I have informed my family and my husband about my child's problem, they have been more patient and supportive towards me and my child (Interview 12).	1	Informing the family and others about the child's condition	Lack of secrecy	
Recently, my husband has helped me more. When he is at home; he takes care of my child and his needs, and I have time to rest. Sometimes he arranges short trips that are very effective. Since my husband is more supportive, I am more relaxed and the situation has improved a lot (interview 5).	1	Accompanying parents and helping each other in raising children	Interaction and cooperation of parents	
Arguments between my husband and I aggravated my son's nervousness. Since we have reduced the arguments or not letting our child know about our problems, his condition has also improved (interview 17).	1	Keeping children out of parental conflicts		

As you can see in Table. 2, the category obtained from the interview of parents, drug treatment can be a facilitating factor in overcoming the challenges of parenting. The sub-categories show that children's concentration increases due to taking medicine, ultimately leading to educational progress. The interviewee states:

"After taking the medicine, my child's educational condition improved, he focused more, and he does his schoolwork." (Interview #3, mother)

Another said, "At the beginning of the year, the school's principal said I should take my child to a non-profit school; he cannot study in a regular school. Now, after the treatment, my child is one of the best students at school." (Interview #5, mother). Also, another participant stated: "When he takes medicine, he does his homework and concentrates more."

(Interview #17, mother).

Behavior control was another sub-category of drug treatment to facilitate overcoming parenting challenges. Interviewee number 6, mother said:

"Before taking the medicine, he had bad and dangerous behaviors. He did not get along with children, especially younger ones. But now he's great."

Teachers and coaches were the second category of facilitating factors in overcoming parenting challenges. According to the interviewees, the understanding and consistency of the school teacher are considered under the category of teachers and trainers. One of the participants believed:

"His teacher was very effective in improving his academic condition. He understood my child's condition and was persistent..." (Interview #3, mother).

The third category from the parent's point of view is their own personality traits, which can be improved under the patience category. (Interview #4, parents).

"I have accepted that many of my child's behaviors are unwanted and affected by this disease, and I should have more patience and tolerance towards him." Another participant, like participant number 4, believed:

"Hyperactive children need more control and care than others; they need to be treated more patiently" (interview #6, mother). The other also stated:

"We should be more patient than other parents and spend more time with our children..." (interview number 5, mother). Another facilitating factor that parents expressed was parental awareness. One of the sub-categories of facilitating and creating awareness among parents is participation in parenting sessions. Interviewees number 4 believed:

"Since I have been participating in parenting a course, my relationship with my son has improved. Of course, it has not improved completely, but it is noticeably better than before."

The second subcategory of parents' awareness was recognition and awareness of the characteristics of hyperactive children. (Interview #8, father) stated:

"In the beginning, I was not aware of my son's behavior and I used to beat him because of his bad behavior. Over time, I realized that beating is ineffective, so I try to be calmer and more tolerant."

Parents stated that lack of secrecy is another factor that makes it easier to overcome parenting challenges. Under this category, informing the family and surrounding people about the child's condition effectively reduces secrecy. One of the participants said:

"Since I have informed my family and my husband about my child's problem, they have been more patient and supportive towards me and my child..." (Interview #12, mother).

The last category, according to parents, is the interaction and cooperation of parents regarding solutions to overcome the parenting challenge. Accompanying parents and helping each other raise a child is the other sub-category extracted. A participant believed: "Recently, my husband has accompanied me more. When he's at home, he cares for my child, and I have time to refresh. Sometimes, he arranges short trips that are very effective. Since my husband is more supportive, I feel calmer, and things have improved greatly" (interview #5, mother).

Also, keeping children away from parental disputes was another sub-category of parental cooperation. A mother said:

"Conflicts between my wife and I aggravated my son's nervousness. Since we have reduced the arguments and we don't allow our child to be aware of our problems, his condition has also improved..." (Interview #17, mother).

4. Discussion and Conclusion

ADHD is one of the most common behavioral disorders in children, with prevalence estimates worldwide ranging between 2 to 7 percent, and an average of approximately 5 percent, according to studies (Sayal et al., 2018). Research in Iran indicates a relatively higher prevalence of ADHD among preschool-aged children and students. Specifically, the overall prevalence of ADHD in preschool-aged children in the city of Mashhad has been estimated at 12 percent (18 percent in boys and 6.7 percent in girls) and in Neyshabur at 12.5 percent (Abdollahian et al., 2004; Moradi et al., 2008). The relatively high prevalence of ADHD in the country and its impact on parents and family structure have led us to qualitatively investigate the parenting challenges from the perspective of parents of these children.

The present study aims to examine facilitating factors in dealing with parenting challenges of parents who have children with attention-deficit/ hyperactivity disorder. In this research, parents were asked to recount their experiences of the factors that solved parenting difficulties. The content analysis of the answers led to the identification of 6 main facilitating factors: drug treatment (14 codes), personality characteristics of parents (3 codes), parental awareness (2 codes), interaction and cooperation of parents (2 codes), lack of secrecy (1 code) and the role of teachers and trainers (1 code). Trying drug treatment results were consistent with the results of Kayani (Kiyani et al., 2020). Studies show that 60 to 80 percent of individuals with ADHD respond positively to medication treatment (Keilow et al., 2018). A way that receiving drug treatment on time improves their child's educational performance, and also parents admitted that their children did not engage in dangerous and inappropriate behaviors after taking the medication. However, before taking the medication, they had unpleasant behaviors. Gerdes et al. (2010) and Alizadeh (2012) stated that when parents learned more about this disease and their children took medicine, their stress decreased significantly, which is consistent with the results of the research. Therefore, it can be said that, to a large extent, drug treatment controls and improves the behavior of children with attention-deficit/ hyperactivity disorder. However, the shortage of Ritalin medication in pharmacies,

especially during certain times of the year, was one of the challenges mentioned by some parents (Interviews 5, 6, and 17).

Additionally, some parents pointed to problems such as difficulty in scheduling appointments at public hospitals and the absence or scarcity of effective public treatment centers in smaller towns. Given the high cost of psychiatric and psychological services in the private sector, the overcrowding of patients in public healthcare facilities, particularly in a referral hospital like the specialized children's hospital that accepts sick children from all over the country, is inevitable. Addressing this issue requires comprehensive policy-making in the country's health system and the establishment of public treatment centers capable of providing psychiatric and counseling services to children and adolescents with ADHD and their families in different provinces. In this study, parents stated that personality traits like patience helped them deal with parenting problems. The results of this study were in line with the research of [Karbalai Hossein Shalbaf et al. \(2022\)](#), [Madani and Pournemat \(2019\)](#) and [Mirnasab et al. \(2009\)](#). They found that parent-child empathy, mutual trust, devoting time, and patience with their children prevent the occurrence of injuries and conflicts caused by virtual space for parenting. Therefore, parents should be extremely patient with their children's problems and be able to face them with patience and empathy.

Another factor that parents introduced as an important factor in facilitating the difficulties of parenting children with ADHD was awareness. The present findings were consistent with the research of [Ramezani et al. \(2018\)](#) and [Karbalai Hossein Shalbaf et al. \(2022\)](#). Many behavioral problems of children with ADHD are because of their different emotional characteristics. Most parents do not have a correct understanding of their children's characteristics and special emotional needs. For this reason, they mistakenly interpret many of the child's behaviors as stubbornness and negativity. Increasing parents' awareness about their children's special emotional needs can help increase mutual acceptance and reduce behavioral problems. Participating in parenting sessions along with necessary therapeutic interventions is useful and effective. The majority of parents of children with ADHD believe that the methods used to control their children are not effective, and they want to learn new skills with high motivation ([Fermand, 2016](#)). Also, [Sadat Jafari et al. \(2011\)](#) found that positive parenting programs and meeting participation influence relationships between mothers and children with ADHD. Parents' interaction

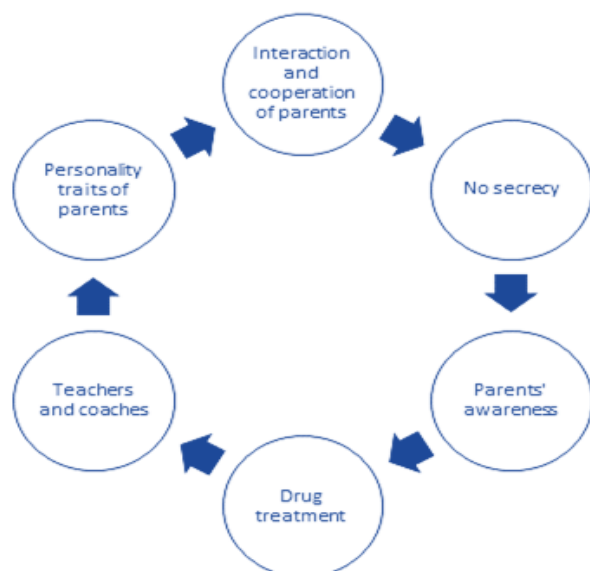
and cooperation, along with receiving the necessary information about the child's illness and how to control and manage it, were other factors that helped parents. For example, in interview number 17, the mother believed that the child's behavioural symptoms improved by creating a friendly atmosphere at home and keeping the child away from parental conflicts.

Additionally, a study ([Mosleh & Khosravi, 2023](#)) found that the communication styles of parents with children with ADHD can yield beneficial results. In [Ramezani et al.'s study \(2018\)](#), capabilities such as adaptability, respect for parents, cooperation and family participation were reported as factors affecting positive parenting. Therefore, parents must have the utmost patience and understanding regarding their children's issues and be able to approach them with patience and empathy.

The parents' lack of secrecy about the child's illness was another factor facilitating the challenges, which is in line with the results of [Rezaeefard \(2021\)](#). They concluded that people with high resilience, lack of obsession, depression, anxiety and the characteristics of empathy, hope, sense of belonging, and high self-esteem behave in a better way than children suffering from ADHD disorder. It shows the belonging and empathy between parent and child and awareness of the family and surrounding people about the child's condition and its acceptance. Interviewee #12 stated that since I informed my family and wife about my child's problem, they have been more patient and supportive towards me and my child. Overall, it can be said that the informed approach of those around the child, including parents, relatives, teachers, and school officials, can effectively reduce the child's tensions and establish a higher-quality relationship between the child and those around them. The last facilitator in the current research is the interaction and cooperation of parents. The results of this research align with the findings of [Bahmani and Alizadeh \(2013\)](#), who stated that parent training programs lead to a better understanding of the nature of parent-child interaction and ultimately improve the parenting of children with attention-deficit/ hyperactivity disorder. Therefore, accompanying parents and helping each other in raising their children and keeping them away from parental conflicts play an important role in overcoming the obstacles of raising children with ADHD.

Overall, the current research showed that drug treatment is the most important facilitator for parents in dealing with parenting challenges. Many of the behavioral and academic problems of a child with ADHD are resolved after taking effective medication

regularly, and the child's management becomes easier for the parents and the school. After that, informing the parents and teaching the correct parenting methods along with the parents' interaction and cooperation in dealing with the child with ADHD were the most important effective factors in overcoming the problems. Also, teachers and the school workforce can try to understand the problem and help to improve the child's educational and psychological condition. Informing the family, relatives, and surrounding people about the child and better understanding of the problem and conditions is an effective step to overcome the parenting challenges of parents with children with ADHD disorder. Considering that the sampling method in the present research has been purposeful and accessible, samples were randomly selected from among parents of children with ADHD who had been referred to the hospital. The high age range resulted from the randomness of the selections and can be considered one of the research limitations. Additionally, the absence of female samples in the current study is attributed to the higher proportion of male referrals to the hospital.



Picture1. An important model in facilitating factors to overcome the challenges of parenting

Research suggestion

It is suggested that future studies using the categories identified in the current research would be a tool to quantitatively investigate the facilitating factors for parenting challenges of parents who have children with ADHD in different parts of the country and use on a large scale. In this way, the frequency and extent of parents' involvement in the mentioned challenges in different parts of the country are determined, and the existing shortcomings are revealed. It is suggested that due to the academic outcomes resulting from attention

deficits in these children, future studies should examine this challenge with separate educational centers. Also, research should be conducted to explore teachers' behaviors with students who have ADHD. Additionally, due to the lack of opinions on the role of nutrition from the participants' perspectives, future research should investigate this aspect for a better understanding of the data. Moreover, to identify facilitating factors for parenting and improving parent-child relationships in children with ADHD, not only parents but also the children themselves should be examined in qualitative research. With targeted efforts to solve these problems, it is possible to manage children with ADHD effectively and educate useful people in society.

5. Ethical Considerations

Compliance with ethical guidelines

All ethical principles are considered in this article. The participants were informed about the purpose of the research and its implementation stages. They were also assured about the confidentiality of their information and were free to leave the study whenever they wished, and if desired, the research results would be available to them.

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Authors' contributions

All authors have participated in the design, implementation and writing of all sections of the present study.

Conflicts of interest

The authors declared no conflict of interest.

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