

# Chapter 31

## The Applicability of Currently Available Adults ADHD Treatment Tools

**Bader Binhadyan**

*Ministry of Education, Saudi Arabia, & RMIT University, Australia*

**Nilmini Wickramasinghe**

*Epworth HealthCare, Australia & Deakin University, Australia*

### ABSTRACT

*E-mental health services are able to provide tools and services to facilities treatment for many various mental disorders, such as Attention Deficit Hyperactivity Disorder. ADHD is a neurodevelopmental disorder that affect approximately 5% of adults. This paper presents the findings of 12 interviews with psychologist who are specialized in treating adults with ADHD. The interviews emphasis on the use of Information Technology (IT) by psychologists in their treatment of ADHD. The analysis shows that using IT is beneficial for psychologists and patients. However, there are some issues emerged from the findings that could limit the usability of IT.*

### INTRODUCTION

E-health is the most important revolution in healthcare industry since discovery the of modern medicine and vaccines (Sibler, 2003). Within e-health the area of e-mental health (eMH) that is still new and emerging (Binhadyan, Troshani, & Wickramasinghe, 2014; Christensen, Griffiths, & Korten, 2002). Although eMH remains in its early stages, it has great potential to facilitate current mental health services by providing improved early interventions and treatments for different people with different mental issues (Christensen, Griffiths, & Evans, 2002; Lal & Adair, 2014; Musiat & Tarrier, 2014), such as Attention Deficit Hyperactivity Disorder (ADHD).

ADHD is a neurodevelopmental condition, which is characterized by inappropriate levels of inattention, hyperactivity and impulsivity (Barkley & Benton, 2010), which affects approximately 5% of Australian adults (The Royal Australian College of Physicians, 2009). ADHD also causes deficits in

DOI: 10.4018/978-1-5225-0920-2.ch031

## ***The Applicability of Currently Available Adults ADHD Treatment Tools***

the executive functions in the brain of an individual with ADHD (Barkley & Benton, 2010). Although the literature shows that there appears to be great potential for eMH in the context of young adults with mental disorders (Burns, Davenport, Durkin, Luscombe, & Hickie, 2010; Webb, Burns, & Collin, 2008), the majority of eMH programs are mostly targeting mental disorders, such as depression, anxiety and suicidal thoughts (Australian Government, 2012).

This research explores how psychologists see the applicability of IT tools currently available to treatment of ADHD in adults. The research question is “How do psychologists perceive the applicability of current available IT tools to treat ADHD in adult?”

The next section outlines the use of IT in healthcare in general, followed by a definition of e-health and the use of technology in mental health services in general, ADHD in particular. The last part of this section introduces the relevance of ADHD in adults and what current treatments are used.

## **BACKGROUND**

E-health services have abilities that can support countries in meeting challenges currently existing in their health services (Wickramasinghe, Geisler, & Schaffer, 2005). This can be done by providing better access to information and services, managing changes in population health patterns and increasing satisfaction and safety of stakeholders. E-health services cover a wide range of services which includes eMH (Binhadyan et al., 2014; Christensen, Griffiths, & Korten, 2002). eMH is relatively new, and there are exciting outcomes in using technologies among different age groups, for different mental disorders’ preventions, treatments, and interventions (Whittaker et al., 2012).

In addition, eMH services can provide solutions to reduce issues that are preventing people from accessing mental health services or barriers to treatment. Issues arise due to this includes location, time of the services and/or patient, financial matters (Booth et al., 2004) and stigma incurred by seeing a therapist (Burns et al., 2010; Christensen & Hickie, 2010).

Reynolds, Griffiths, and Christensen (2011) claim that eMH services programs can be classified in to two categories:

1. Information, support and assessment web sites: this includes informative website, diagnostics tools and screening methods.
2. Symptom prevention and management programs: these programs are designed to treat or manage specific mental illness such as depression and anxiety.

A review of the list of the online or telephone services that were provided in the eMH Strategy for Australia documents (Australian Government, 2012), the majority of eMH programs are targeting depression, anxiety and suicidal thoughts. Even though roughly one every ten adult Australians suffer from ADHD (The Royal Australian College of Physicians, 2009). This commitment to adoption of technology in Australia makes the country a potentially rich site in which to consider possibilities.

## **ADHD**

ADHD is one of the most common childhood behavioral disorders and can continue through adolescence and adulthood (Fischer, Barkley, Edelbrock, & Smallish, 1990), with between 5% and 10% of the child-

11 more pages are available in the full version of this document, which may be purchased using the "Add to Cart" button on the publisher's webpage:

[www.igi-global.com/chapter/the-applicability-of-currently-available-adults-adhd-treatment-tools/163851](http://www.igi-global.com/chapter/the-applicability-of-currently-available-adults-adhd-treatment-tools/163851)

## Related Content

---

### Security-Aware Service Specification for Healthcare Information Systems

Khaled M. Khan (2010). *Health Information Systems: Concepts, Methodologies, Tools, and Applications* (pp. 1720-1725).

[www.irma-international.org/chapter/security-aware-service-specification-healthcare/49961](http://www.irma-international.org/chapter/security-aware-service-specification-healthcare/49961)

### USE IT: The Theoretical Framework Tested on an Electronic Prescription System for General Practitioners

Ton A.M. Spil, Roel W. Schuring and Margreet B. Michel-Verkerke (2006). *E-Health Systems Diffusion and Use: The Innovation, the User and the Use IT Model* (pp. 147-176).

[www.irma-international.org/chapter/use-theoretical-framework-tested-electronic/9042](http://www.irma-international.org/chapter/use-theoretical-framework-tested-electronic/9042)

### Data Mining-Based Privacy Preservation Technique for Medical Dataset Over Horizontal Partitioned

Shivlal Mewada (2021). *International Journal of E-Health and Medical Communications* (pp. 50-66).

[www.irma-international.org/article/data-mining-based-privacy-preservation-technique-for-medical-dataset-over-horizontal-partitioned/277446](http://www.irma-international.org/article/data-mining-based-privacy-preservation-technique-for-medical-dataset-over-horizontal-partitioned/277446)

### Towards Achieving Semantic Interoperability In eHealth Services

Adel Taweel, Brendan Delaney and Stuart Speedie (2012). *E-Healthcare Systems and Wireless Communications: Current and Future Challenges* (pp. 388-401).

[www.irma-international.org/chapter/towards-achieving-semantic-interoperability-ehealth/60200](http://www.irma-international.org/chapter/towards-achieving-semantic-interoperability-ehealth/60200)

### Ethical E-Health: A Possibility of the Future or a Distant Dream?

Debarati Das, Prasenjit Maji, Goutami Dey and Nilanjan Dey (2014). *International Journal of E-Health and Medical Communications* (pp. 17-28).

[www.irma-international.org/article/ethical-e-health/118219](http://www.irma-international.org/article/ethical-e-health/118219)