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Module Content Development

P2. Educational Program and Educational Materials

Project Number: 2024-1-CY01-KA210-ADU-000253720



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Module 5. Emotional Regulation, Behaviour & Social Inclusion

Module Aim

The aim of this module is to develop learners understanding of emotional regulation with ADHD and its impact on behavior and social inclusion. The module explores how emotional dysregulation influences adaptive behavior, decision-making, and interpersonal relationships, and how targeted interventions—such as self & social learning, art, drama, and inclusive practices—can support emotional well-being, positive behavior, and meaningful social participation.

Learning Objectives

By the end of this module, learners will be able to:

1. Explain the role of emotional regulation and dysregulation in ADHD, including its neurological basis and its emotional, behavioral, and social consequences across childhood, adolescence, and adulthood.
2. Identify the behavioral and social impacts of emotional dysregulation, such as impulsivity, rejection sensitivity, problematic behaviors, peer rejection, and risks of social exclusion.
3. Analyse the relationship between emotional regulation, adaptive behavior, and social inclusion, recognizing protective and risk factors within educational, family, and peer environments.
4. Apply evidence-informed intervention strategies—including Self & Social approaches, art, drama, and inclusive practices—to support emotional regulation, positive behavior, and social participation in children with ADHD.

Introduction

Emotional regulation is a crucial skill as by managing emotions, influences behavior and capacity for social inclusion. Effective emotional regulation brings appropriate behaviors and stronger social connections. In case of neurodevelopmental deficit, stress and negative self-feeling and loneliness as far as the behavior is problematic and there is absence of social



relationships. The ability to manage emotions effectively is a cornerstone of healthy behavioral functioning.

Emotional regulation plays a pivotal role in developing and maintaining healthy interpersonal relationships and fostering social inclusion.

- **Enhanced Social Interactions:** Individuals who can effectively regulate their emotions communicate more clearly, respond to others with empathy, and navigate social challenges with grace and patience. This makes them more pleasant to be around and facilitates positive social interactions. Disruptive behaviors can lead to social rejection from peers, whereas positive social skills foster peer acceptance and friendships.
- **Positive impact:** When children successfully manage their emotions, they are better equipped to navigate social situations, build friendships, and feel a sense of belonging.
- **Negative impact:** Difficulty with emotional regulation can result in behaviors that alienate peers, leading to social exclusion. For example, children with persistent challenging behaviors may experience social-emotional delays that make it difficult to function in a classroom setting without intervention.
- **Risk of Social Exclusion:** Conversely, difficulties with emotion control can increase the probability of being exposed to adverse peer experiences, such as social rejection and exclusion. For example, a chronic reliance on expressive suppression (hiding emotions) can interfere with the development of close bonds because it prevents the display of natural emotions that signal relational interest.
- **Impact of Dysregulation on Relationships:** Severe emotional dysregulation can make maintaining stable relationships difficult, leading to conflicts, misunderstandings, and a sense of isolation.



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UNIT 1: Emotional, behavioral and social impact of ADHD

1.1. What is Emotional Dysregulation?

Emotional dysregulation is common in people with ADHD due to a combination of factors, including executive function deficits, impulsiveness, hyperactivity, stress, comorbid disorders, and medication side effects.

Emotional dysregulation refers to difficulty in controlling and regulating emotions as they lead to intense or unpredictable events that seem blown out of proportion and even snowball into a complete meltdown.

Here are some examples of what emotional dysregulation in ADHD might look like:

- Experiencing intense emotions, like anger outbursts or high anxiety



- Crying in response to a variety of feelings, even happiness
- Having mood swings and unpredictable emotions
- Having a low tolerance for frustrating situations
- Being unaware of the feelings of other people
- Difficulty soothing and calming yourself
- Focusing mainly on the negative
- Becoming overly excited

1.2. Emotional dysregulation and behavioral impact

Emotional dysregulation is a common feature of ADHD that can lead to behavioral impacts like mood swings, impulsive actions, intense emotional outbursts, and difficulty returning to a calm state. These behavioral impacts include irritability, poor social skills and a high sensitivity to rejection (Rejection Sensitive Dysphoria). The condition can affect various aspects of life, contributing to relationship problems, anxiety and depression.

Lifestyle adjustments can benefit the child. One way to start is to follow a simple to-do list with 4 important day-duties. Engaging in appropriate sports, listening to calming music and following social rules step-by-step, can help regulate emotions and provide a necessary pause before reacting.

1.3. Emotional dysregulation and social impact

Emotional dysregulation can impact the social life of children with ADHD.

This is often due to challenges like poor behavioral control, low frustration tolerance and intense, unpredictable emotional reactions which can result in social rejection, conflict and difficulties in maintaining relationships. They may also be more likely to affiliate with deviant peer groups if they experience continuous social rejection.

Negative childhood experiences, such as emotional neglect, which can be the case in children with ADHD, have been linked to higher incidences of emotional dysregulation in children, further contributing to difficulties with emotion and social regulation later in life.



UNIT 2: Emotional and behavioral characteristics

2.1. Controlling and managing emotional responses

A common symptom of ADHD, is characterized by difficulty in controlling and managing emotional responses. This can manifest as intense mood swings, low frustration tolerance, anger outbursts or being easily overexcited or overwhelmed. It results from differences in brain function and can impact relationships, school, and work, but can be managed with therapies like cognitive behavioral therapy, and sometimes medication in more serious cases. This does not mean the child is intentionally misbehaving or lacks motivation; rather, it reflects how the ADHD brain processes emotions, stress, and self-control.

Why this happens

1. **Brain development:** In children with ADHD, key brain areas responsible for emotional regulation develop differently or more slowly, particularly: the amygdala and the frontal cortex, which are involved in emotional reactions and regulation. The connection between these areas is less efficient, meaning emotional reactions are often stronger, faster, and harder to stop. As a result, children with ADHD may:
 - react before thinking
 - experience emotions more intensely
 - struggle to calm down once upset
2. **Stress Sensitivity and Emotional Overload.** Children with ADHD are often more sensitive to:
 - sensory input (noise, movement, crowds)
 - emotional demands
 - changes in routine
 - criticism or perceived rejection



Repeated stress throughout the day can accumulate, resulting in emotional explosions at home or school, especially when the child finally feels safe. This explains why some children “hold it together” at school but experience intense emotional reactions afterward.

How Parents Can Help Prevent and Reduce Emotional Dysregulation:

- Being able to identify and acknowledge the child's emotions.
- Learn the child's emotional triggers.
- Develop strategies for de-escalating a situation when the child feels overwhelmed.
- Therapy: Self & Social Intervention can help manage emotional symptoms.
- Seek Professional Support When Needed. In more severe cases, medication for ADHD can help regulate emotions

Key Message for Parents

Emotional dysregulation in ADHD is neurological, not intentional. With understanding, structured support, emotional coaching, and inclusive interventions, children can develop the skills needed to manage emotions, improve behavior, and build healthy social relationships.

2.2. Behavioral Characteristics of ADHD

Behavioral characteristics of ADHD include inattention, hyperactivity, and impulsivity. Inattention can manifest as carelessness, difficulty focusing, and disorganization, while hyperactivity includes fidgeting and excessive movement. Impulsivity often appears as interrupting others, acting without thinking, and having trouble waiting turns.

Inattention

- Making careless mistakes
- Difficulty sustaining focus or staying on task
- Appearing not to listen when spoken to directly
- Being easily distracted
- Being forgetful in daily activities



- Trouble organizing tasks and activities

Hyperactivity

- Fidgeting, tapping, or squirming
- Difficulty sitting still, for example, in class or during meals
- Running or climbing in inappropriate situations
- Feeling restless
- Talking excessively
- Trouble playing or working quietly

Impulsivity

- Blurting out answers before questions are completed
- Difficulty waiting for one's turn
- Interrupting or intruding on others
- Acting without considering the consequences, which can include more accidents and injuries
- Difficulty controlling frustration or anger



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2.3. Behavioural treatments

There are two kinds of behavioural treatments that can help kids with ADHD. While the treatments don't change the symptoms of ADHD, they do teach parents in collaboration with their kids how to manage them. Some kids and parents follow Self & Social behavioral treatment which usually is enough to keep their ADHD symptoms under control. Others with more severe characteristics might need to take medication as well.

The first type of behavioral treatment focuses on helping children manage impulsive behaviors. This is often achieved through drama-based activities, where children and parents participate together. Through role-play and guided interaction, parents learn simple and effective ways to respond to challenging behaviors such as tantrums, refusal to follow instructions, or emotional outbursts. Parent training programs emphasize consistency, positive reinforcement, and clear consequences to encourage appropriate behavior and emotional self-control.

1. Responding to Tantrums Through Co-Regulation

Example:

When a child has a tantrum after being told “no,” the parent stays calm, lowers their voice, and gets to the child’s eye level. Instead of arguing or giving in, the parent says:

“I see you’re very upset. Let’s take three slow breaths together.”

Once the child is calm, the parent briefly explains the limit and offers a choice:

“You can calm down here with me or take a short break and come back.”

This teaches the child that emotions are accepted, but impulsive reactions are guided toward calmer responses.



The second kind of behavioral ADHD treatment, Children are encouraged to describe their day from the morning onward, recognizing that they may forget details or struggle to sequence events. During this process, they also learn to identify and express their feelings. Behavioral training can help kids build skills to stay on top of schoolwork and manage responsibilities at home. A learning specialist can help kids practice using tools like checklists, planners, and reward charts to make plans and stay on task.

The above mentioned treatments for ADHD may seem like a lot of work at first for both parents and kids. However, there's a lot of evidence that they lead to better outcomes. Kids with more extreme behavior problems do especially well.

UNIT 3: Social Inclusion and Social Participation

3.1. Social Inclusion and the Challenges Children with ADHD Face

Social inclusion refers to a child's ability to participate in social activities, form friendships, and feel accepted and valued by others. For children with ADHD, social inclusion can be especially challenging—not because they lack interest in friendships, but because ADHD affects how they understand, respond to, and manage social situations. Many children with ADHD want to connect with others but struggle with social cues, emotional regulation, and impulse control, which can lead to misunderstandings, conflicts, or rejection by peers. Over time, repeated negative social experiences may affect a child's confidence, self-esteem, and emotional well-being.

Parents play a key role in protecting their child from social isolation by understanding these challenges and actively supporting social participation.

Common Social Challenges in Children with ADHD

- **Difficulty reading social cues**

Children may miss facial expressions, tone of voice, or unspoken social rules (e.g., when to wait, when to stop talking), which can lead to awkward or inappropriate responses.



- **Unstable or short-lived friendships**

A child may make friends easily but struggle to maintain them due to impulsivity, emotional outbursts, or difficulty compromising.

- **Social rejection or exclusion**

Children with ADHD may be labeled as “too loud,” “too impulsive,” or “too emotional,” which can lead to exclusion by peers or frequent conflicts at school.

- **Internal challenges**

Difficulties with working memory may cause children to forget rules of games, social commitments, or instructions, leading to frustration for both the child and peers.

- **Misunderstandings**

Other children—and sometimes adults—may misinterpret ADHD-related behaviors as intentional or rude, increasing the risk of rejection even when the child is trying their best.



Image source: FreePik



3.2. Factors That Support Social Inclusion

Although social inclusion can be challenging, there are protective factors that significantly improve a child’s chances of positive social participation. Parents can actively support these factors at home, at school, and in the community.

- **Peer support**
Encouraging even one or two positive peer relationships can make a major difference. Quality of friendship is more important than quantity.
- **Reassurance of self-worth**
Children with ADHD need to feel valued and accepted, especially after negative social experiences. Feeling understood at home builds emotional resilience.
- **Inclusive environments**
Children thrive in environments that are flexible, structured, and accepting—such as inclusive classrooms, sports teams, art groups, or drama activities.
- **Inclusive education**
Schools that use flexible teaching methods and adapt expectations help children with ADHD participate more successfully in both learning and social life.
- **Balanced adult support**
While adult guidance (teachers, assistants) can be helpful, parents should be aware that excessive adult presence may unintentionally limit peer interaction. The goal is **supported independence**, not isolation.

3.3. Practical Strategies for Parents to Improve Social Inclusion

Parents can actively teach and support social inclusion through everyday experiences, guided practice, and collaboration with schools.

1. Prepare Children for Social Situations

Before playdates, school events, or group activities:



- explain what will happen
- review simple social rules (taking turns, asking before joining)
- practice responses through role-play or drama

This preparation reduces anxiety and impulsive reactions.

2. Address Peer Biases Through Collaboration

Work with teachers and schools to:

- promote understanding of ADHD
- encourage inclusive classroom practices
- reduce labeling or punishment-based responses

Changing the environment is often as important as supporting the child.

3. Teach Emotional Repair, Not Perfection

Help children learn how to:

- apologise
- repair mistakes
- rejoin activities after conflict

Social success is built through learning, not avoiding mistakes.

4. Encourage Strength-Based Participation

Support activities where the child feels competent:

- sports
- art
- music
- drama



Success in these areas builds confidence and improves peer acceptance.



Conclusion

This module emphasized the importance of emotional regulation in supporting positive behavior and social inclusion for children with ADHD. Emotional challenges are rooted in brain differences, not in a child's or parent's effort. With understanding, structure, and consistent support, parents can help their children develop emotional control, improve social skills, and feel included. Creating supportive and inclusive environments allows children with ADHD to build confidence, relationships, and a sense of belonging.



Further reading

Resource name	Type	Link
ADHD and behavior problems	Paper	https://childmind.org/article/adhd-behavior-problems/
Emotions and your child with ADHD	Website	https://raisingchildren.net.au/adhd/social-emotional-wellbeing/adhd-emotions/adhd-emotional-regulation-kids-teens
The influence of ADHD on social skills. Sorry, I missed this!	YouTube	https://www.youtube.com/watch?v=OZ-3hfsmVVI

Final Assessment Quiz

Answer the following questions to check your understanding of the key concepts and practices from this module. Select the correct answer or mark True/False as indicated.

1. A boy with ADHD who prefers not to have eye contact, means:

- A. He is born impolite
- B. His parent have not brought him up with good manners.
- C. He can't have eye contact.
- D. He is afraid of others.

Correct Answer: C

2. Why do children with ADHD often struggle with emotional regulation?

- A. Because they choose to misbehave
- B. Because they lack motivation to behave well
- C. Because of differences in brain development affecting emotional control
- D. Because parents do not set enough rules

Correct answer: C



3. Which parental strategy best supports a child during an emotional outburst?

- A. Giving long explanations and lectures
- B. Ignoring the child completely
- C. Staying calm and helping the child regulate emotions together
- D. Punishing the child immediately

Correct answer: C

4. Social inclusion for a child with ADHD happens only

- A. after pressure from the state.
- B. after having dog and cat at home.
- C. when eventually he/she participates in an individual sport and gradually joins a small or big team.
- D. Social inclusion is not needed.

Correct Answer: C



CASE STUDIES

Module Number:	Module 5
Case Study 1 Title:	Behavioural regulation & Social Inclusion
Exercise Objective:	Parents, teachers, and guardians will guide children in group activities, promoting cooperation, adherence to game rules, and positive social interaction.
Characters:	“S”: daughter, 9 years old, her mother, her father
The Challenge/Problem:	“S” is a bright and polite young girl with ADHD, predominantly inattentive type, who often stays silent, avoids eye contact, and has no friends. She rarely initiates conversations and spends much of her time playing with her dog or her mother’s mobile phone, often eating excessive chocolates. At home, tension is common, as her mother—also diagnosed with ADHD—frequently quarrels with her.
The story:	Despite these challenges, “S” is clever, obedient, and shows basic social skills, though she struggles with organization, personal care, and processing sensory stimuli, making it difficult for her to engage with others for long periods. For several years, her parents sought professional help, including psychologists and speech therapists, and she practiced martial arts, but progress was slow. At school she had very poor academic presence. When she went to I-PAIDIs offices, after clinical observation, they focused on boosting her self-confidence, attention, social skills, and family cooperation. Structured routines at school and home, short study breaks, group activities like dance, and reward-based reinforcement helped her begin managing emotions, reducing reliance on mobile devices and chocolates for comfort. Parents, teachers, and guardians were encouraged to facilitate shared activities with “S” and her peers, helping her practice cooperation, follow game rules, and engage socially in a structured way. With guided support from her parents and therapists, she gradually learned to engage with peers, participate in team activities, and express herself more confidently. Over time, these interventions not only improved her attention and behavioral skills but also fostered emotional regulation and social inclusion, allowing “S” to feel more connected, understood, and valued both at home and in her broader social environment.

Exercises

Answered by learners individually

Individual exercise 1:

Exercise/Question	Answer
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What were the key factors contributing to the challenge in case study 5.1?	S is predominantly inattentive type, who often stays silent, avoids eye contact, and has no friends eats many chocolates. Her mum has ADHD too.
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Individual exercise 2:

Exercise/Question	Answer
How can family involvement improve outcomes for a child with ADHD like "S"?	Active family involvement provides consistent support, reinforces positive behaviors, reduces conflicts, which helps the child feel secure and included.

Individual exercise 3:

Exercise/Question	Answer
Which is the way for the child with ADHD to succeed in the social inclusion?	Structured social activities, positive reinforcement, guided peer interactions, and supportive family

Answered by learners in a group (2+ people)

Group exercise 1:

Exercise/Question	Answer
Which are the 2 primitive goals that helped "S"?	Improving self-confidence and Developing social skills

Group exercise 2:

Exercise/Question	Answer
Give 2 extra suggestions for "S" intervention apart from the ones mentioned	Dances with specific steps as a hobby and exercise. Mindfulness and relaxation exercises

Group exercise 3:

Exercise/Question	Answer
Why are structured routines important for "S"?	Structured routines help her manage attention, reduce anxiety, and provide predictability, which supports emotional regulation.

Module Number:	Module 5
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Case Study 2 Title:	Emotional & Social Deficit with hyperactivity
Exercise Objective:	Parents/teachers/grandmother will develop the comprehension of each feeling and its presentation to others for positive communication.
Characters:	"A": son, 7 years old, his mother, his father & his grand mother
The Challenge/Problem:	He speaks without eye contact; he has no friends; he eats chocolates and sweets; he continually plays with his digital equipment without speaking...when he stops playing, he is hyperactive
The story:	<p>"A" is a nice boy with blond hair, polite, nice looking and clever! He is hyperkinetic by moving all the time without purpose. When he meets his father every 2 months, as his father lives far (parents are divorced), they communicate for just a little longer. Although he practices martial arts for the last 2 years, he was negative about playing with others and had social skills only at the beginning of the practice. At home, he played with the smartphone and started studying at 8pm. When there was a need for a break, his mother shouted at him as she couldn't understand the son's difficulty and needs. His parents asked for help from a developmental psychologist and a therapist. After the appropriate testing and the clinical observation, a growing interest was evaluating in family history of ADHD, mental health conditions and cortical activation. The preferable techniques are:</p> <ul style="list-style-type: none"> i) Spontaneous expression at Dramatherapy or Animal Play with non-verbal communication (Animal play involves participants embodying animals through movement, sound, and behavior. This can occur in therapeutic, educational, or play-based settings.) ii) Discussion with child's individual experience iii) Rewards upon task completion iv) Parental cooperation with the therapist.

Exercises

Answered by learners individually

Individual exercise 1:

Exercise/Question	Answer
What were the key factors contributing to the challenge in case study 5.2	He has no friends; he doesn't share positive feelings with others; he continually plays with his digital equipment...when he stops playing, he is hyperactive. His mum doesn't know how to handle his ADHD.



Individual exercise 2:

Exercise/Question	Answer
How was the parental reactions?	At home, he was playing with the smartphone and started studying at 20.00. When there was a need for a break, his mother shouted at him as she couldn't understand the son's difficulty and needs."

Individual exercise 3:

Exercise/Question	Answer
How can the parent help a 7 year old child, when there is emotional and social deficit added with hyperactivity?	The intervention techniques to the behavioral aspects of ADHD consisted of team games with 1 or 2 rules at the beginning in the neighborhood. Discussion with child's individual experience and give rewards.

Answered by learners in a group (2+ people)

Group exercise 1:

Exercise/Question	Answer
List 3 ways to overcome this challenge using the tools and solutions from this module.	1.Spontaneous expression at Dramatherapy or Animal Play with non-verbal communication 2. Discussion with child's individual experience 3.Rewards

Group exercise 2:

Exercise/Question	Answer
Which were the 2 major difficulties?	Hyperactivity and late night routines

Group exercise 3:

Exercise/Question	Answer
What key behavioral characteristics indicated that the child was at risk for ADHD?	The child showed hyperactivity along with emotional and social difficulties.



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