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An Exploration into the impact of ADHD on university student's experiences, investigating reoccurring themes from childhood to early adulthood

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Declaration

DECLARATION

I hereby declare that this dissertation is the result of my own independent investigation under the supervision of my tutor. The various sources to which I am indebted are clearly indicated. This dissertation has not been accepted in substance for any other degree, and is not being submitted concurrently for any other degree.

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Thirdly, my friends, through all the tears, the laughter the breakdowns the dramatic 'I just can't do this' you also encouraged me to never give up, always told me off for not being organised and always stayed positive when I needed it the most thanks for always being there

Finally I dedicate this dissertation to my brother Roddy Kohn , the relationship I have with you is very much like my relationship with this dissertation long, never ending, always stressful but ultimately not worth the experience without it.

Abstract

There are no statistics as of the exact numbers of individuals with ADHD attending university in the United Kingdom, however, the fact that universities offer support for these individuals suggest it is prevalent. The aim of this study will be to explore the impact ADHD has on students' experience of university with a further investigation into any re-occurring themes from childhood. As this study focused on the individuals experiences a thematic analysis was used. The analysis produced three main themes with six sub themes altogether. The results from this study support the previous literature surrounding the impacts of impulsivity on risk behaviours and friendships also, inattentiveness surrounding time management. Re-occurring themes were highlighted among individual experiences of friendships. Recommendations for future research include larger participant samples and a focus on hyperactivity impact on social and academic tasks.

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Chapter 1: Introduction

According to the Diagnostic and Statistical Manual – 5 (DSMV), Attention Deficit Hyperactivity Disorder (ADHD) is classed as a set of persistent behavioural patterns that interfere with development or functioning (Diagnostic and statistical manual of mental disorders, 2013). The cause of ADHD is considered to be complex, evidence suggests that it is a mixture of environmental and genetic influences (Caci et al., 2014; Fischman & Madras, 2005). The focus of current studies has centred greatly around the neurobiology of ADHD. Recent evidence now indicates possible associations between ADHD and structural, neurotransmitter and functional alterations (Proal, 2011; Valera, Faraone, Murray & Seidman, 2007). Due to the roots of this condition lying in behavioural patterns and there being no knowledge of its biological cause, there has been much debate historically regarding the appropriate age of onset and diagnosis and the specific symptoms of the condition (Lo-Castro, D'Agati & Curatolo, 2011). Diagnosis of ADHD presents multiple problems as there are many other disorders that share similar symptoms. For example, Operational Defiance Disorder (ODD) shares five symptoms with ADHD, this has historically led to some children being misdiagnosed (Vanheule, 2014). Another major reason given for misdiagnosis is the higher likelihood of those with ADHD also suffering from another psychiatric condition. Research conducted on children with ADHD and reports from psychiatrists indicate a higher level of multiple or comorbid diagnosis (Caron & Rutter, 1991; Kadesjo & Gillberg, 2001). Currently the most favoured form of treatment for ADHD is medication. However, other forms of treatments include Cognitive Behavioural Therapy, the aim being to identify the poor patterns of behaviour and try to change them (Vance, Winther & Rennie, 2011). Unfortunately, due to the numbers of those diagnosed with ADHD and the cost of therapy, it is not always possible to offer the amount of therapy that would be considered beneficial,

despite practitioners arguing that both would be the best course of treatment for children (Vance, Winther & Rennie, 2011).

ADHD is the most prevalent disorder in children in the UK with 5% currently carrying a diagnosis (NIMH, 2017). The diagnostic process involves identifying the symptoms as categorised by the DSMV, these are; inattentiveness, impulsivity and hyperactivity (Diagnostic and statistical manual of mental disorders, 2013). These behaviours have been shown to have a direct negative impact on academic and social activities (Biederman et al., 2006). The impact inattentiveness has on an individual usually revolves around academic activities such as; not completing a task before moving on to another activity, being easily distracted, forgetful and struggling to organise activities (Diagnostic and statistical manual of mental disorders, 2013). There is a vast pool of research that has been conducted on the effects of ADHD on education. Despite research showing average or above average intelligence for these individuals, academic attainment can be negatively impacted (Caci et al., 2014). Biederman et al., (2004), studied the academic impairment of children and adolescence with ADHD. The results from their study indicated that those with ADHD had a higher risk of academic functioning being impaired. This is supported by Barry, Lyman and Klinger, (2002), whose study on children's academic performance produced results indicating that children with ADHD performed lower than their peers in mathematics, reading and writing. The researchers highlight the point that this underperformance among these individuals was not due to their intelligence, the results also indicated the behaviours that fall under the inattentiveness symptom of ADHD were higher in those whose academic grades were lower (Barry, Lyman & Klinger, 2002).

This impact on academic attainment has been shown by multiple studies to continue through to higher education such as college and university. Heiligenstein et al., (1999) reported that University students with ADHD had lower academic grades than their peers. These findings

are supported by Blase et al., (2009) whose study also produced the same results showing students with ADHD having a lower grade point average than their peers. However, Heiligenstein et al., (1999) study sourced the participants from students who had been attending student support services, the researchers highlight how these findings should not be generalised to the whole community of students with ADHD. As they were seeking help for difficulties they were facing in regard to their academic attainment, these results could also be considered to be biased (Heiligenstein, Guenther, Levy, Savino & Fulwiler, 1999). However, there are inconsistencies in the findings surrounding this particular area. Studies such as Sparks, Javorsky & Philips, 2004 and Wigtil & Henriques, 2015, indicated no differences in grade point averages between students with ADHD and those without. Not only are the findings inconsistent, but there is a major lack of qualitative research done in this area. This does not give an opportunity to explore the individual's feelings toward the impact of their ADHD on their experiences in higher education.

Furthermore, these studies only considered inattentiveness to be the symptom impacting on academic attainment whereas there are other symptoms that may impact other areas of life, thus affecting academic attainment (Hodgkins, Brod & Asherson, 2011). Impulsivity has been seen to have an impact on this. Impulsivity, as a symptom, can manifest itself in many different ways (Hodgkins, Brod & Asherson, 2011). One detrimental manifestation is its impact on the increase of risk behaviours. This refers to such activities as, drug misuse, binge drinking and risky sexual behaviours (Molina & Pelham, 2003). The relationship between increased impulsivity in those with ADHD and substance use is not altogether clear. Reports from some longitudinal studies, such as that of Mack, (2009) indicated that there was a higher use of alcohol, tobacco and drugs among adolescents with ADHD. However, there was no indication this made them more susceptible to substance addiction, or that this was the result of higher impulsivity (Mack, 2009). In fact, although there have been reviews on the

influence of impulsivity and drug use that indicate a strong link between the two, this is not always the case with ADHD (Iacono, Malone & McGue, 2008). One major suggestion posed by Hechtman & Weiss, (1986) was that certain drugs were used more by adolescents and adults with ADHD due to medical reasons. Self-reports indicated that when, for whatever reason, their ADHD medication is taken from them some chose to self-medicate with Marijuana or alcohol (Hechtman & Weiss, 1986). The research however, is divided greatly between cause and effect (Hechtman & Weiss, 1986). The majority of studies looking into the impact of impulsivity in regard to risk behaviours use mainly qualitative research methods. The majority also only focus on adolescence. Adolescents usually still live with parents or carers and therefore their risk behaviour will be somewhat limited, however, there are no explorations into the impact of impulsivity in young adults living away from their parental restraints for the first time such as university students. This is a gap in the research that this study will look into further.

Impulsivity can play another role in regard to risk behaviours. Studies also indicate a strong link of these symptoms impacting on social interactions and the formation and retention of friendships (Hakkaart-van Roijen et al., 2007). Research does show a higher peer rejection rate among those diagnosed with ADHD (Hakkaart-van Roijen et al., 2007). The negative effects of this rejection have suggested that there is a higher possibility of forming friendships with deviant groups and taking part in more risky behaviours (Normand et al., 2013).

However, studying the effects of friendship on developmental outcomes in adolescence is very complex (Normand et al., 2013). There is some debate surrounding the impact of friendships on risky behaviours. A small pool of studies such as Normand et al., 2013 & Glass, Flory & Hankin (2010) have produced results indicating that, those with ADHD who do achieve positive strong friendships, still partake in risky behaviours such as substance use. Research strongly indicates a link between ADHD and poorer communicative abilities (Ian

Meltzer, Dogra, Vostanis & Ford, 2010). This has been shown to affect the way in which these individuals communicate with their peers, usually displaying hostile behaviour, being commanding and self-centred and conducted in an intrusive manner (Ian Meltzer, Dogra, Vostanis & Ford, 2010). Although these interactive behaviours are seen in younger children it is more commonly witnessed in adolescents, where communication between peers becomes more advanced and requires a different set of skills (Glass, Flory & Hankin, 2010). A review of the studies conducted on this particular area indicate that by the time these individuals reach early adolescence they are 70% less likely to have obtained close friendships (Normand et al., 2013). A lack of strong friendships or friendship satisfaction among those with ADHD during adolescence years, has been linked with lower self-esteem and school involvement along with increased anxiety and depression (Normand et al., 2013). There have been very limited studies conducted on friendship formation in adulthood, results from the small pool of data, however, are very congruent with their findings. A study using focus groups in Europe indicated that adults with ADHD reported higher impulsive talking, irritability and inattention during social interactions causing more misunderstandings (Brod, Pohlman, Lasser & Hodgkins, 2012). These results are supported by the European Lifetime Survey that strongly indicated an association between ADHD and impaired social functioning (Pitts, Mangle & Asherson, 2015).

Saracoglu, Minden & Wilchesky, (1989) studied self-efficacy and self-esteem in students with various learning disabilities (LD's) during the transition period from school to university. Their results indicated these were poorer in this particular group of students compared with those without LD's (Saracoglu, Minden & Wilchesky, 1989). However, they discovered that LD's could not predict adjustment to university life, as the results showed much better adjustment in some of the participants than others (Saracoglu, Minden & Wilchesky, 1989). Although there was no further explanation for possible reasons of better

adjustment in this study, these findings, despite their age, are still supported by more recent studies. Griffin and Pollak (2009) produced results showing that self-opinion of individuals' neurodiversity played a major role in self-esteem and their expectations for achievement in university. Those that viewed themselves as having a deficit had poorer opinions of themselves, lower self-esteem and their expectations for academic attainment at university were lower. However, those who were more accepting of their neurodiversity and were able to identify the strengths and weaknesses of their specific disorder were more positive toward their abilities in university and their self-opinion (Griffin and Pollak, 2009). In addition to these findings, due to the use of a thematic analysis, the researchers were better able to gain deeper knowledge of earlier life experiences. They discovered there were shared themes across the sample regardless of the type of LD the individuals had. This showed that all reported difficulties in younger years with peer relationships, academic attainment and preferred styles of learning. There is very limited knowledge surrounding the specific impact ADHD has on the university experience. These studies do not indicate any specific disability but rather attempt to incorporate them all. Due to the high comorbid rates of ADHD and learning disabilities these results can give general indications of possible expectations of the impact of ADHD on the university experience. In fact one study using qualitative research methods focussed on the impact of ADHD in university and specifically on ADHD symptoms and the impact this had on the individual's persistence whilst at university. The results indicated those whose symptoms were more prominent had stronger negative impact on academic adjustment, study skills and decision making, with inattentiveness as a predictor for the above (Norwalk, Norvilitis & MacLean, 2008).

Due to the behaviours that lie within impulsivity and inattentiveness such as difficulty switching from task to task, procrastination, obsessing over specific areas and ignoring more important academic tasks to highlight a few, these can impact negatively on the ability of

these individuals getting to further education and when they do get there achieving a degree level qualification can become problem (Biederman et al., 2006). A study conducted in the US looked at the likelihood of students with ADHD obtaining a degree compared to those without ADHD. The results from this study showed that ADHD students were significantly less likely to achieve a degree level qualification (Biederman et al., 2006). The researchers speculated that a possible reason for this was their inattention and the behaviours that fell under this category such as managing large workloads and organisation (Biederman et al., 2006). There is very little research done in the UK regarding the numbers of students attending university with ADHD, however, there is much research conducted in America. In America statistics indicate that between 2 and 8% of students attending university in the USA have ADHD (Weyandt, Linterman & Rice, 1995). All universities in the UK offer support for students suffering with ADHD, this support can include; studies skills sessions, one to one tutor support, free counselling services and specific sessions to help with organising time and finances, extra time in exams and for assignments (Chew, Jensen & Rosén, 2009). Despite the help on offer statistics indicate that only 40% utilize the help (Chew, Jensen & Rosén, 2009). Research from surveys indicate the main reason given by these individuals for not utilizing these helpful tools is not wanting to be given anything more than everyone else as they feel it is unnecessary or are afraid of the stigma attached to their diagnosis (Chew, Jensen & Rosén, 2009).

Despite ADHD being one of the most researched psychiatric disorders, previous research is limited. This could be due to the historical beliefs that children with ADHD would 'grow out' of their symptoms. It is now universally acknowledged that ADHD persists throughout adolescence and adulthood. The previous literature indicates the negative impacts ADHD has on academic attainment and social experiences. The evidence from the studies focusing on learning difficulties indicate links between neurodiversity, low self-opinion, academic

attainment and low self-esteem. This group of students and in fact individuals are heavily underrepresented in the research world. There are no statistics as of the exact numbers of individuals with ADHD attending university, however, the fact that universities offer support for these individuals suggest it is prevalent. For these reasons, the aim of this study will be to explore the impact ADHD has on students' experience of university with a further investigation into any re-occurring themes from childhood. By conducting a thematic analysis it will provide data in respect of personal experiences with the hope of finding strong themes that will indicate where more help can be given to these individuals.

Chapter 2: Method

2.1 Design

As the aim of this study was to explore the experiences of individuals, the method design for this study was qualitative.

2.2 Sample

This study consisted of 4 participants aged between 20 and 24 currently studying an undergraduate degree. One interview was conducted over the phone, two were conducted over Facetime and the final interview was conducted in the participant's house. The previous literature and research question provided a focus for the sample selection. This led to the development of the inclusion criteria. Only those with recognised psychiatric diagnosis of ADHD and currently studying in university were appropriate for the study. An advert was placed on Facebook (see appendix A) and on the UK Attention Deficit Hyperactivity Disorder webpage. This snowball sampling allows access to specific groups that would otherwise be potentially hard to access (Browne, 2005). All participants had attended different universities, studying different courses and had different severity levels of their condition. In order to keep anonymity, all participants have been given pseudonyms.

2.3 Ethical considerations

Approval of ethics for this project was given by the university's ethics board with the project reference number 10135. The participants were informed of their rights to withdraw from the study and have their data withdrawn at any time up to three weeks after the data was collected. In addition, before the interviews took place all participants signed and dated the information sheet and consent form. Recordings and transcripts were saved securely and anonymously to a secure device. Information of support groups available to them were also

given to participants should support have been needed due to feelings of distress from the subject of the interviews.

2.4 Materials

The materials used in this study included a participant information sheet (appendix B), a participant consent form (appendix C) and an interview schedule draft that was developed whilst reading through the previous literature. A final interview schedule was produced after an initial trial of questions (see appendix D). A recording device was used during the interviews.

2.5 Procedure

Participants took part in individual semi-structured interviews. These interviews took place over the phone, facetime and face to face in one of the participant's homes. The interviews lasted approximately 25 minutes each, with each being recorded. Some initial questions were asked to give some context to the information (appendix D). Using the recordings the interviews were then transcribed for the analysis to take place. After transcription, to meet ethical guidelines, all recordings were transferred onto a secure laptop and deleted from the recording device.

2.6 Data Collection

Using the previous literature, a semi structured interview schedule was designed to include questions that focused on particular areas of interest. These consisted of; diagnosis, early friendships, university life, risky behaviours and self-feeling in regard to university. The guidelines developed by smith (2007) were used to ensure valid data was collected from the interviews and that researcher bias was reduced. This was executed by asking open ended questions, neutral questions and non-leading questions. In order for there to be clarity between the researcher and participant no medical or academic terms were used during the interviews (Smith, 2007). In order to facilitate this further, the interviews included probes

such as, question: ‘Were there any issues you came across in regard to time management?’

Probe: ‘If so how have you dealt with them?’ Probe: ‘Do you believe this may have affected your experience?’. These probes allowed for further detail to be uncovered surrounding the experiences of these participants.

2.7 Method of Analysis

A widely used method of analysis for qualitative data is ‘thematic analysis’ (Roulston, 2001).

Defined by Braun and Clarke (2006) as ‘the method for identifying, analysing and reporting themes within data’ (Braun & Clarke, 2006, p. 6). The process used in thematic analysis

involves encoding qualitative information from interview transcripts (Boyatzis, 1998).

Thematic analysis focuses on reports of individuals’ experiences and events. As the aim of this study was to explore individuals’ real life experiences of university, this method was the most appropriate. Braun & Clarke break the analysis into smaller, simpler stages which help guide the analysis process during the study. The initial stage was to transcribe the recordings of the interviews using the transcription convention given by Jefferson (2004). In order for the researcher to become familiar with the data set the transcriptions were re-read several times to support the analytical process. The next stage was to code any important points that lie in the data-set these were recorded in the margins. The third stage involved grouping the initial recordings and then placing them into relevant themes. The fourth stage involved a review of these themes, checking their relevance and disregarding those that weren’t relevant. The fifth stage of this analysis process involved refining the existing themes by checking them against the stories given and checking they reflect this (Braun & Clarke, 2006). Finally, the themes were then ready to be written as part of a report with quotes from each transcript to support them (Braun & Clarke, 2006).

Chapter 3 Results

3.1 Overview

From the data collected by the transcripts three main themes and six sub-themes were identified. The first is ‘University Experience’ including the sub themes ‘Comparison/feelings of experience’ and ‘Self-opinion’. The second is ‘Friendships’ with the sub themes, ‘Early Experiences’ and ‘University experiences’. The final theme ‘Managing Life at University’ with the sub-themes ‘Risky Behaviour’ and ‘Time Management’ (see appendix), these all are displayed in thematic map below.

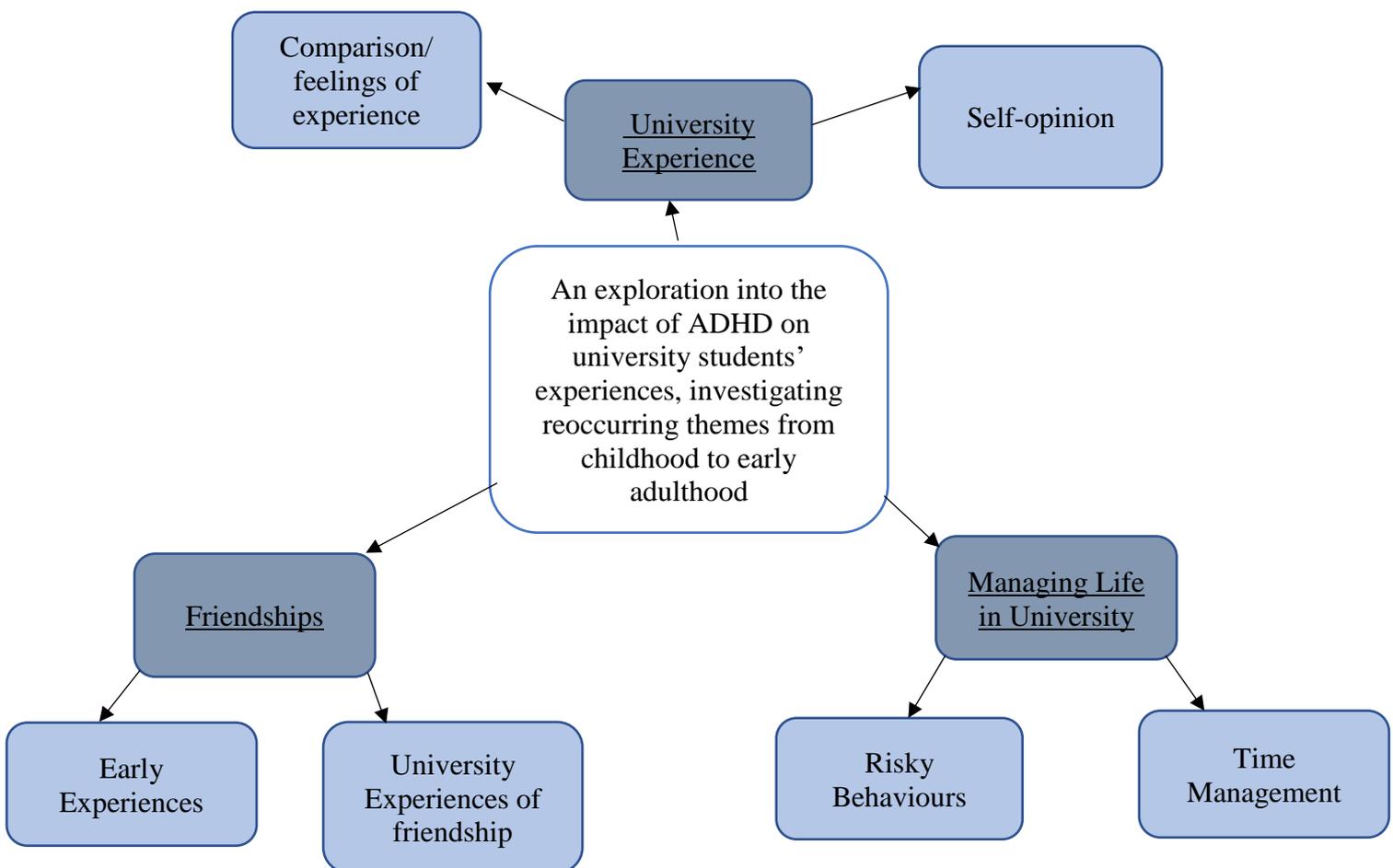


Figure 1. Thematic map

3.2 Friendships

This theme explored the overall experiences of making friendships whilst in an academic environment, focusing on the ease of forming friendships, the role the participants felt they played in these relationships, the type of friendships they experienced and the meaning and the duration of these friendships.

This theme includes two sub themes. The first sub theme is ‘Early life friendships’, exploring participants experiences of making friendships whilst at school, the difficulties they faced and how this experience effected their feelings of friendships at this point in their life.

The second Sub-theme, ‘Formation of friendships in university’, focused on the participants experiences of making new friends in the university environment and any similarities in the dynamic of these friendships.

Participants highlighted their difficulties in forming or retaining friendships, comparisons were expressed during interviews of previous relationships and present ones.

Early Life Friendships

This sub-theme looks into the early peer relationships formed by the participants. It provides an insight to the impact the participants felt this had on their experience of school life, their communication and dynamic of these friendships and their overall feelings surrounding them. Friendships during this time of life are important, many children are party to bullying whilst at school which can cloud the opinion of the overall experience. Two out of the four participants expressed poor feelings toward their time at school and mentioned how they had faced bullying, when asked questions surrounding their experience of making friends.

“I kind of hung around with the group that was always getting into trouble but they would just bully me and get me to do stuff to make them laugh” (Danny 1:22-24)

“I like () got bullied quite a lot people found me quite annoying.” (Sammy 1:21-22)

Not only did these participants struggle with bullying but this ultimately led to the ending of their friendships, Danny explains “those friendships ended quite quickly”

Despite all four participants experiencing forming friendships in school differently, all four indicated strong signs of combativeness in their friendships, discussing how their behaviour had effected this. All four participants also explained how they felt that this behaviour increased and was extremely prominent during their adolescence and older years.

“I argue with people a lot more now than when I was younger but I was really quick to anger or get upset when I was younger like my teenage years were really bad” (Sammy 1:43-44)

Three of the participants believed the explanation for their combativeness in their friendships was due to a lack of control over their emotions, experiencing extreme anger. All three express feelings of loss of control and believe their reactions to be unwarranted.

“people used to think I was quite aggressive when I would speak to them like I used to lose my temper quickly so I’d be having a joke with someone then I’d just loose it for something small.” (Fran 1:26-27)

The evidence indicates patterns of behaviour throughout the participants in regard to their early experiences of relationships, despite having different experiences in regard to the ease of forming friendships, all four have expressed combative relationships, slight aggression and the majority feel like they had no control over the expressed extreme reactions. Although two of the participants indicated that the difficulties in their friendships impacted negatively on their experience of school, the other two did not express the same opinion therefore it is challenging to take a conclusive opinion based on these results regarding the impact of friendships on the school experience.

Socializing in University

This sub theme focusses on the participants experiences of socializing and forming new friendships at the beginning of university and more current friendships they have formed. Three of the participants expressed difficulties in forming new friendships at the start of university, with the two who had expressed similar experiences from school their appeared re-occurring themes of behaviours and thoughts, the participants expressed how they felt others perceived them now and the similarities they felt were there from childhood friendships.

“after the first few weeks I struggles to make friends like again I think people found me annoying” (Sammy 2:81-82)

Despite the majority experiencing initial issues at the beginning of their university experience all of the participants explained that as time has gone on they have experienced good friendships. All four participants felt that these friendships were now more meaningful in comparison to old ones, explaining how they believed them to be more mature, sharing deeper connections with people. Some of the participants also highlighted their combativeness was still evident in their new formed friendships but that they had found friends to be more accepting of this.

“I’d say I’ve probably developed deeper friendships in general” (Sigmund 3:149-150)

“like they love me and my annoyingness and argumentative personality” (Sammy 2:94-95)

The results indicate that the majority of the participants faced challenges in forming new friends at the beginning of their university experience. The results highlighted the presence of previously discussed behavioural patterns, such as aggression and being argumentative, still being evident in their relationships now. This suggests re-occurring themes from earlier in their lives. Despite evidence of friendship formation during university being negatively impacted to begin with, all of the participants attained what they described as stronger and

more mature friendships expressing more positive experiences now that they are older. This would suggest that the negative impact occurs at the beginning of forming friendships but not during these friendships after the relationships had been established. There was very little evidence of negative impacts on friendships throughout the already established ones they have.

3.3 Managing life in university

This theme looks into specific areas that may have an impact on the participants' university experience. This theme explores the participants' experiences of managing their outside life as well as their academic life during their time in university.

The first sub-theme explores the challenges the participants face with their 'time management', having to manage your own time and juggle multiple deadlines is part of everyday life in university, it requires organisation and attentiveness, the results indicated that all four participants had similar experiences in regards to this.

The second sub-theme explores 'risky behaviours', these include alcohol use and substance use. This theme focuses on how the participants manage their self-control and the impact they feel this has had on their experiences.

The impact of time management focuses on how this may have affected them in regard to university specifically,

Impact of Time Management

All four participants expressed difficulties with their time management, especially highlighting the impact this had on their academic attainment and their stress levels. All participants discuss challenges with juggling multiple tasks that are outside of university and how this can impact on the ones they have to juggle in university.

“I would say time management is a real issue and it effected so much of my first year like grades showing up to lectures like meeting with friends too it kind of spreads over every part of my life” (Sammy 2: 96-98)

“I am a member of the rugby society as well and I’m actually the head of finances so like I have to manage my time carefully but something always suffers because of it and it can be really stressful it takes all of the joy out of stuff.” (Sigmund 3: 129-131)

The majority of participants discuss the reasons behind these issues suggesting that it is an inability to know how much time a task will take and how much attention they will need to give it. The participants describe increased stress levels due to this especially when closer to a deadline. They also take responsibility, the majority explain these behaviours as if it was something they could control and not something that they naturally struggle with.

“I’m so bad at giving myself enough time like I’ll underestimate how much I actually have to do and how long it will take” (Fran 2:67-68)

The results indicate that time management is a common factor that all the participants have suffered with during their time at university. From these results the suggestion of the impact of this is their poorer academic attainment, adding unnecessary stress and leading to negative impact on social life.

Risky Behaviours

The sub-theme risky behaviours explore the participants self-control, especially focusing on the impact this has on their drinking habits and possible drug use. All of the participants discuss how their self-control has affected their drinking habits and behaviours whilst at university.

“yeah so I have a real problem not going overboard so like during freshers I like smashed it you know like I went hard I drank a lot so much more than at home.” (Sammy 3:142-143)

All of the participants expressed that they felt they had no self-control, the majority explained how they felt this lack of control was due to no parental guidance or restrictions anymore.

“I started drinking more when I got to uni I guess because I have more freedom but I get carried away like I have quite an addictive personality” (Danny 2: 96-99)

The results indicate that the participants impulsivity had elevated since joining university.

The impact of this was increased alcohol and drug use, the majority explained that they felt this was a problem that they struggled to control leading the majority of them to stop going out and socialising. Having an impact on their social experiences of university life.

3.4 University experiences

This theme explores how the participants feel toward their experiences of university in regard to the differences they faced compared with their peers and exploring their self-esteem and efficacy during the experience compared to how they felt prior to university. Two sub-themes were discovered. The first was self-opinion, exploring participants own opinions of themselves during this experience. How these opinions had changed and what had impacted them the most

Self-opinion

This sub-theme explores particular experiences of university effected their own opinion and self-esteem. The majority of participants discussed how their poor social experiences has a negative impact on their self-esteem at the begging of university.

“Mainly like the work and I guess in the beginning umm the friends and stuff like I really struggled at the beginning, my self-confidence defiantly took some knocks like throughout this experience” (Fran 2:44-46)

All of the participants mentioned their academic grades having an impact on their self-opinion, with the majority explaining that there self-opinion relates to their grades however,

the majority expressed more positivity toward this and explained how this has enhanced their self-confidence overall.

“as my grades have got better and things are getting better I think the experience has helped” (Sigmund 4:176-177)

The results indicate a strong link between self-opinion and their academic performance, all four of the participants expressed feelings of happiness when they had achieved a perceived good grade in a certain module. Although there were mild expressions of negative opinion in regard to poorer results all of the participants explained how overall it had no negative impact on their experience of university.

Comparisons of experience

This theme explored the participants’ feelings toward their peers overall experience compared to their own. All four participants strongly insisted that their peers’ experience of university was easier than theirs.

“like personally I think it does I think it’s so much harder like when you have ADHD because like even when I go to lectures like I’m not really there” (Sammy 4:174-175)

All of the participants highlighted the specific areas they felt their ADHD negatively impacted on compared to their peers. All four showed signs of distress when talking about this particular area and the majority got quite passionate. They all explained how they had been accused of being lazy when they have a medical diagnosis.

“like my friends get stressed but like I have all the added stuff of knowing that this stuff is just so much harder I guess which I know sometimes people say it sounds like a cop out but umm yeah that’s how I actually feel” (Danny 4:192-194)

All of the participants believed their experiences differed drastically from their peers, with particular mention of the impact their symptoms had on conducting academic work. This was something they all felt strongly about. They all explained how they felt that their peers didn’t

really take their diagnosis seriously making accusations of laziness and leading the majority of participants to be flippant regarding their own struggle toward the end of these conversations.

3.5 Summary of Results

The themes highlighted within the transcripts identified particular behavioural patterns that negatively impacted on academic, social and the personal experience of university for these participants. Although the participants expressed inattentive and impulsive behaviours having at times a negative effects on time management and risk behaviours, it is clear that the participants have managed to find some coping strategies and self-restraint. The majority described positive feelings in regard to themselves and their experiences. However, the results do highlight areas of concern such as opinions of their diagnosis and the importance of others opinions of their ADHD. This is an area that could be looked into further in order to develop education among all students thus creating an accepting and open environment.

Reflexive

Before conducting this study I already had a personal attachment, as my younger brother who is currently attending university has been diagnosed with ADHD. This was the main reason for this investigation, this may have caused certain biases toward my focus of the study. Due to the issues I know he has experiences this may have biased the questions that I used in this study along with my interpretation. Before completing my interview questions, I had already read in depth the literature surrounding this topic and had some indication of the challenges that those with ADHD suffer from, possibly causing a bias in regard to what I expected to see in my results or even noting more those descriptions that were similar to the previous studies and my brothers experience.

When typing out my question for my interview plan, I tried to keep an open mind relating the questions to some of the gaps in the previous literature and the areas that had been indicated

as a possible issue but again, due to my previous knowledge of my brothers struggles in university this may have come out in the choosing of the type of questions I asked. As I was going through the transcripts coding I attempted to keep an open mind and look at the participants as separate from any previous presumptions I may have regarding the impact ADHD may have had on their experiences in university. To rectify these biases in future research I would change the structure of my interview to allow for more freeing answers, instead of basing the questions solely on the areas I believed to be impacted, better worded questions could be used to gather more in depth and personal experiences.

Chapter 4: Discussion

Despite the acknowledgment, supported by a vast amount of recent research, that ADHD symptoms are prevalent and heavily impactful on the life activities of adults (Barkley, Fischer, Smallish & Fletcher, 2002), there is still a very limited pool of research being conducted in this area. Especially in regard to university students with ADHD. Although the prevalence of ADHD among university student in the UK is not known, the statistics from the United States indicate that there is a significant number of individuals with ADHD attending university (Weyandt, Linterman & Rice, 1995). The previous literature discusses and analysis the impact of inattentive and impulsive behaviours on multiple day to day tasks. The majority of literature indicate how social and academic functions are impaired due to these behaviours. Due to the nature of the university experience this study attempted to explore individual experiences in order to gain a deeper insight into the interrelationships at play in this environment. Furthering the depth of the investigation by looking into past experiences to explore possible re-occurring themes.

The previous research that has been conducted suggests that the behavioural symptoms of ADHD have a serious impact throughout an individual's life (Ian Meltzer, Dogra, Vostanis & Ford, 2010). However, very little research has been conducted on the management of these behaviours during adulthood, even less focusing on individuals with ADHD in university. The findings from this study showed strong indications of new found independence exacerbating impulsivity leading to risky behaviours.

In the theme 'friendships', the results indicated re-occurring themes relating to difficulties in making friends whilst at school and whilst at university. All of the participants discussed having combative relationships with their friends, explaining that they displayed aggressive

behaviour and were quite quick to anger and react to this emotion. This is congruent with the previous literature suggesting that this behaviour from early childhood onward is common in those with ADHD. (Brod, Pohlman, Lasser & Hodgkins, 2012).

The participants all explained their behaviour as a symptom of their ADHD, indicating an awareness of the symptoms of ADHD impacting on social aspects of their lives. The descriptions of these experiences of friendships indicated behaviours strongly linked by the previous literature to impulsivity (Hakkaart-van Roijen et al., 2007). This supports the understanding that the behaviours that fall under the impulsive category are still prominent in later life and have a negative impact on social situations (Normand et al., 2013). Despite this, there was no expression from the participants that they felt this had impacted negatively on their overall experience of university, or indeed no strong relationship to lowered self-esteem as contradicting the results from Normand et al., (2013).

Impulsive behaviours were also expressed in regards to alcohol use and substance use linking in with the likelihood of these individuals partaking in risky behaviours. This supports the previous literature discussed by Iacono, Malone & McGue, (2008) All of the participants noted a lack of self-control and there were some indications of their new-found independence playing a role in this. This links with the previous literature surrounding the challenges these individuals face when they are solely responsible for their behaviours (Biederman et al., 2006). In this case, unlike in the friendship theme, all of the participants linked these risky behaviours as having some adverse effect on their academic and social experiences whilst in university. The relationship between independence and impulsive behaviours appears strong among these particular participants. This could be useful for universities; possible new support systems could be devised, such as peer support from older students in order to ease the transition without individuals feeling like they are losing their independence.

The results also indicated strong links with behaviours related to inattentiveness having a negative impact on the participants' experiences of university. All of the participants expressed difficulties with managing their time in regard to academic work, attending classes and social obligations. This links in with the previous literature indicating poor organisational skills (Diagnostic and statistical manual of mental disorders, 2013). All of the participants linked their poor time management as having a negative impact mainly on their academic performances this supports the results from Heiligenstein et al.,(1999) and Blase et al (2009) studies. None of the participants mentioned utilising possible resources from the university to help with this. This correlates with previous findings surrounding fear of asking for help and guidance. Due to the detrimental effect all of the participants expressed in regard to this, it would be wise for future studies to identify specific reasons for these individuals not utilising tools provided by the university in order to guide these individuals in the future.

None of the participants in this study indicated that academia had a big impact on their self-esteem. Rather their description of self-opinion was positive in regard to the experience of university. All of the participants showed signs of great inner awareness of their condition, these results can be linked with those of Griffin and Pollak (2009). – Awareness of neurodiversity positive impact. Participants did explain how certain grades affected their mood more than their self-opinion explaining how when they had a bad grade their self-esteem would lower temporarily however, when obtaining a good grade, it would be raised. None of them expressed any long-lasting feelings of low self-esteem or depression throughout their experience. Future research could compare students without ADHD and their self-feelings in regard to academic attainment in order to clarify if there is a stronger link among those with ADHD.

The evidence from this study strongly highlighted the participants feelings that their experiences in university differed greatly to their peers. They displayed negative feelings

toward this particular situation expressing how it was challenging to see how easy they felt their peers had it whilst at university. This is an important finding as it is unique no other studies have performed a qualitative study producing participants own feelings of comparison to their peers in university. The expression of their difficulties in coming to terms with the difference I experience was very animated. Future studies should focus on this especially. Possibly involving these individuals in how these feelings can be elevated slightly. The main differences expressed were in regard to their inattentive and impulsive behaviours expressing how they felt they had to work so much harder than their peers to perform simple tasks such as getting to lectures on time. More in depth questioning about the specific areas in which these individuals feel are different to their peers could lead to better support systems in university and better tailored tools to those with ADHD.

Due to the difficulties in finding participants with ADHD who were currently studying in university the sample size for this study is very small. Conducting a study on a larger scale with more participants in different stages of their degree could give more solid a broader results. In addition to this future researchers could look into the hyperactivity of ADHD. This study did not choses to focus on it due to small pool of candidates that were available however, this would be an important area to focus on in the future as this could be contributing by, working in tandem with either one of the other symptoms, to negative impacts and difficulties in performing tasks.

In conclusion the current study provides a novel in depth insight into the individual experiences of students with ADHD. Previous literature has neglected to focus specifically on this group of individuals. They are underrepresented. However due to the acknowledgement of ADHD persisting into adulthood, this are should become a key focus in order to discover strategies that will enable these individuals to attend further education and be able to enjoy the experience.

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Appendices

Appendix a

Advert placed on facebook for recruiting participant

My name is Rhian Kohn, I am a third year psychology student in Cardiff Metropolitan University. I am currently conducting a study looking into the experiences of university students with ADHD. To take part in this study you must have an official diagnosis of ADHD and are either currently in university or have attended. The study will involve an interview that will take roughly 30 minutes. This can be done over skype if you are not based in Cardiff. The interview will include questions regarding your experiences during university as a student with ADHD. If you are interested in taking part please e-mail me on Rhian.kohn91@gmail.com .



Title of Project: The experiences of university students with ADHD: A thematic analysis

Participant information sheet

The study

Research indicates that students in university with learning difficulties struggle with self-esteem and feel that their experience does differ from their peers (Griffin & Pollak, 2009). The few studies focusing on university students with ADHD concentrate mainly on academics (Wolraich, 2005). It is suggested that the possible reason for a lack of research in this area, could be due to individuals with ADHD previously being less likely to attend university (Wolraich, 2005). However, with the growing number of students with ADHD studying at university it is important that this group of students feels represented. This study will look into the non-academic experiences of University students with ADHD, with particular focus on self-opinion, increased impulsivity and risky behavioural patterns.

What would happen if you agree to participate?

Participants will take part in semi-structured interviews individually; these interviews will take place in a secure room in the university with prior permission, or alternatively over skype. They will approximately last for 30 minutes. The interviews will be recorded for later analysis.

Exclusion criteria

Only those with an official ADHD diagnosis, who have attended university are able to this part in this study.

You must be over the age of 18 to participate in this study.

Potential Risk

Some of the questions may evoke emotional responses.

If you feel you need further support relating to issues raised in the interview, please refer to the following support websites:

Support groups around the UK: <https://aadduk.org/help-support/support-groups/>

Cardiff specific: <https://www.netmums.com/se-wales/local/view/support-groups/special-needs-adhd/cardiff-adult-adhd-support-group>

Potential benefits

The benefits to this study is to focus on an area that has never been studied before, this could produce an insight for universities into these individuals experience.

Withdrawal, anonymity and confidentiality

Participants will be able to withdraw from the study if they wish at any point prior to or during the interview. If consent is withdrawn during the interview, then the recording will be stopped and deleted at that time. Participants may also withdraw from the study for 4 weeks after the interview has been completed. All Information given will be kept confidentially, when the interview ceases the information recorded will only be shared between the participant and the researcher. Each interview will be given a unique code this will also be given to the participant this way if the participant wishes to receive a copy of the transcript after the interview, and/ or withdraw their data. This will protect anonymity further. If the participants give their consent to use the data, then the data will be immediately removed from the recording device as soon as the transcript documents have been written up. The sound documents will be uploaded to a password protected laptop and be kept in a folder that will also be password protected that is only accessible to the researcher. No names shall be asked at any point during the research. If the participant mentions their name or any others during the interview, these names shall be changed to false ones during the transcription process.

Appendix C
PARTICIPANT CONSENT FORM

Reference Number:

Participant name or Study ID Number:

Title of Project: The experiences of university students with ADHD: A thematic analysis

Name of Researcher:

Participant to complete this section: Please initial each box.

1. I confirm that I have read and understand the information sheet for the above study. I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily.

2. I understand that my participation is voluntary and that I am free to withdraw at any time before leaving the experiment, without giving any reason.

3. I agree to take part in the above study.

Signature of Participant

Date

Name of person taking consent

Date

Signature of person taking consent

Appendix D – Interview schedule

Interview plan

Diagnosis

- Would you say school was an enjoyable experience for you? Why?
- How old were you when you were diagnosed with ADHD?
- What were your feelings about your diagnosis?

Early friendships

- Can you describe your early relationships with people in school?
(do you feel you struggled making friends)
- What role do you feel you played in your social circle i.e comedian, leader etc..
- Did you feel with that sometimes the relationships your friends uh can be quite combative?

University

- How long have you been in university for?
- How did you feel about going to university? (living on your own for the first time?)
- Was there anything in particular you were concerned about before you went?

- Were there any issues you came across in regard to time management? Probe: If so how have you dealt with them? Probe: Do you think this may have effected your experience?
- What was your experience of friendships and socializing when you came to university?
- Do you notice any changes to your friendships at home?
- How do your relationships in university compare to the ones you formed previously?

Changes in substance use

- Do you notice a change in your drinking habits since you have come to university?
Prompt (can you describe these changes?)
- Have you tried any recreational drugs since coming to university? How did this occur (peer pressure etc) how did you feel about this experience?
- Have you noticed a change in your behavioral patterns on nights out since joining university?
(If yes ask for description)

feeling in regard to university

- Have you noticed any changes in your self opinion since you came to university?
- What part of this experience do you feel has had an impact on your opinion of yourself during this experience?
- Do you feel your experience of university differs from your peers due to your diagnosis?
(if so how?)
- Is there anything you believe the ADHD may have helped with during your time at university? (hyper focus?)

Appendix d

Interview plan

Diagnosis

- Would you say school was an enjoyable experience for you? Why?
- How old were you when you were diagnosed with ADHD?
- What were your feelings about your diagnosis?

Early friendships

- Can you describe your early relationships with people in school?

(do you feel you struggled making friends)

- What role do you feel you played in your social circle i.e comedian, leader etc..
- Did you feel with that sometimes the relationships your friends uh can be quite combative?

University

- How long have you been in university for?
- How did you feel about going to university? (living on your own for the first time?)
- Was there anything in particular you were concerned about before you went?

- Were there any issues you came across in regard to time management? Probe: If so how have you dealt with them? Probe: Do you think this may have effected your experience?
- What was your experience of friendships and socializing when you came to university?
- Do you notice any changes to your friendships at home?
- How do your relationships in university compare to the ones you formed previously?

Changes in substance use

- Do you notice a change in your drinking habits since you have come to university?

Prompt (can you describe these changes?)

- Have you tried any recreational drugs since coming to university? How did this occur (peer pressure etc) how did you feel about this experience?
- Have you noticed a change in your behavioral patterns on nights out since joining university? (If yes ask for description)

–feeling in regard to university

- Have you noticed any changes in your self opinion since you came to university?
- What part of this experience do you feel has had an impact on your opinion of yourself during this experience?
- Do you feel your experience of university differs from your peers due to your diagnosis?
(if so how?)

- Is there anything you believe the ADHD may have helped with during your time at university? (hyper focus?)

Word count declaration

Abstract	137
Introduction	2405
Method	834
Results	2593
Discussion	1276
Total (excluding abstract)	7108