2023

How Emerging Adults are Living with Attention Deficit Hyperactivity Disorder (ADHD): A Qualitative Study

Morgan Leger
Worcester State University

Follow this and additional works at: https://vc.bridgew.edu/grad_rev

Recommended Citation
Leger, Morgan (2023) How Emerging Adults are Living with Attention Deficit Hyperactivity Disorder (ADHD): A Qualitative Study. The Graduate Review, 8, 52-63.
Available at: https://vc.bridgew.edu/grad_rev/vol8/iss1/7

This item is available as part of Virtual Commons, the open-access institutional repository of Bridgewater State University, Bridgewater, Massachusetts.
Copyright © 2023 Morgan Leger
How Emerging Adults are Living with Attention Deficit Hyperactivity Disorder (ADHD): A Qualitative Study

Morgan Leger, Master of Occupational Therapy (MOT) Candidate, Worcester State University, mleger@worcester.edu

Abstract: Attention-deficit hyperactivity disorder (ADHD) is a diagnosis characterized by symptoms of hyperactivity, inattention, and impulsiveness. These symptoms present functional challenges that can significantly affect quality of life and occupational outcome. This study employed a qualitative approach to better understand the lived experience of emerging adults with ADHD. More specifically, the approach was used to better understand how these symptoms contribute to occupational balance and quality of life, and how individuals cope with symptoms when they arise. This study included six participants between the ages of 20 and 24 who were medically diagnosed with ADHD. Data was collected via semi-structured interviews and analyzed using NVivo.

The data analysis revealed both commonalities and unique differences characterized by broad themes and subthemes. The themes indicated an overall negative impact on quality of life, the use of diverse learned coping techniques, and compromised occupational participation. The subthemes indicated hyperactivity contributing to positive social experiences, the varying use of medication, and inattention contributing to an atypical amount of time spent per task. These findings among others suggest that emerging adults with ADHD present needs to be addressed within and across the occupational therapy domain and scope of practice. Occupational therapists can provide specialized services to improve the quality of life and occupational balance in emerging adults with ADHD. These findings also have implications for future research, namely studies that expand upon the correlation between awareness of symptoms and the use of coping strategies, as well as the effects of ADHD on memory and sleep quality.

Keywords: ADHD; occupational therapy; attention deficit hyperactivity disorder; quality of life; occupational balance; lived experience; coping.

Introduction

Attention Deficit Hyperactivity Disorder (ADHD) is a prevalent disorder affecting approximately 4.4% of the general population (Lyhne et al. 2021). It is associated with decreased social, educational, and overall occupational functioning (Lyhne et al. 2021). The Diagnostic and Statistical Manual of Mental Disorders criteria for ADHD includes a “persistent pattern of inattention and/or hyperactivity-impulsivity that interferes with functioning or development”
It further states that these symptoms are present in two or more settings, and they “interfere with, or reduce the quality of, social, academic, or occupational functioning” (APA 2022, p. 69).

Emerging adulthood is a phrase coined by Jeffery Jensen Arnett, PhD (Hochberg and Konner 2020). It is defined as a phase of life with distinguishing demographic, social, and psychological features present between adolescence and fully developed adulthood (Hochberg and Konner, 2020). Arnett continues to describe emerging adults as individuals between the ages of 18 and 25, during which they become increasingly economically independent (Hochberg and Konner 2020). There is little research that exists regarding how emerging adults are living with a diagnosis of ADHD, as much of the literature focuses on other age groups (Bjerrum et al. 2017; Goffer et al. 2020; Hupfeld et al. 2018). Although, it is generally understood that heightened challenges are present in work, academic, and other settings (Bjerrum et al. 2017; Goffer et al. 2020; Hupfeld et al. 2018). Difficulties with time and productivity management in those with ADHD may affect occupational participation, but further research is needed to explore this area (Amadou et al. 2013; Cain 2021, Gjervan et al. 2012; Jansen et al. 2017; Lyhne et al., 2020; von Wirth et al. 2022). Furthermore, people with ADHD often present with executive functioning impairments that may impair occupational functioning and participation (SJöwall and Thorell 2022). The purpose of this study was to analyze how emerging adults are living with a diagnosis of ADHD and specifically, its impact on quality of life and occupational balance, as well as how they are coping.

**Review of the Literature**

**The Effect of ADHD Symptoms on Quality of Life**

Quality of life refers to a multidimensional construct that concerns a person’s evaluation of their own life while considering global health, level of functioning, and daily occupations (Agarwal et al., 2012). Across medical settings, quality of life has become an important outcome measure, commonly using assessments such as the health-related quality of life (HRQoL) concept, the quality of life enjoyment and satisfaction questionnaire (Q-LES-Q), and the World Health Organization quality of life scale (WHOQOL-BREF) for measurement (Krauss and Schellenberg 2022; Lucke et al. 2021; Zhang et al. 2021).

Quintero et al. (2019) explored the effect of ADHD on adults and found significant differences in mood symptoms and quality of life between subjects with ADHD and control subjects. Others found that ADHD symptoms negatively impact all subdimensions of quality of life according to the HRQoL and could significantly affect quality of life indirectly via executive functioning and depression/anxiety symptoms (Krauss and Schellenberg 2022; Zhang et al. 2021). A systematic review found that pharmacological treatment and early diagnosis both have a positive impact on functional outcome, long-term prognosis, and quality of life in adults diagnosed with ADHD (Agarwal et al. 2012; Quintero et al. 2019).

**Young Adults Living with ADHD**

There is a need for additional research regarding the effects of ADHD in emerging adulthood as it has been studied less frequently than ADHD in childhood (Krauss and Schellenberg 2022). Living with ADHD symptoms...
can affect multiple areas of daily functioning and living, such as social relationships, academic functioning, and community and workplace involvement (Bjerrum et al. 2017; Goffer et al. 2020; Hupfeld et al. 2018). Goffer et al. (2020) found that college-aged students with ADHD experience significant challenges in occupational performance. Furthermore, a study by Hupfeld et al. (2018) explored how adults with ADHD report living “in the zone,” or more commonly put, in periods of hyperfocus. Studies have reported that adults with ADHD often experience episodes of increased attention or hyperfocus. This is unexpected because inattention is a prominent symptom of ADHD. This study found a significant prevalence of hyperfocus in adults with high reported levels of ADHD symptoms. Further research is needed to explore these findings to gain a deeper understanding of how emerging adults are living with ADHD (Hupfeld et al. 2018).

The Effect of ADHD Symptoms on Occupational Participation
As stated in the literature, ADHD is associated with poor functional outcomes (Amadou et al. 2013; Cain 2021, Gjervan et al. 2012; Jansen et al. 2017; Lyhne et al. 2020; von Wirth et al. 2022). Functionality strongly affects occupational participation, which can be described as one’s status of partaking in various meaningful tasks and activities (Kreider et al. 2019).

ADHD symptoms contribute to impairments in a variety of social domains, such as employment, academia, and overall maintenance of social or romantic relationships (Amadou et al. 2013; Cain, 2021, Gjervan et al. 2012; Jansen et al. 2017; Lyhne et al. 2020; von Wirth et al. 2022). Gjervan et al. (2012) found that adult ADHD was associated with decreased educational attainment and decreased levels of employment. Although further research is needed, the literature indicates a lack of professional collaboration and occupational functioning present for individuals with ADHD in the workplace (Amadou et al. 2013).

A qualitative study by Cain (2021) found that challenges related to each person’s specific lived ADHD experience impacted how they navigate romantic relationships. In academic settings, students with ADHD face challenges in higher education due to various functioning and participation difficulties (Jansen et al. 2017). The literature suggests that students with ADHD often experience challenges with focus and sustaining attention during school related occupations (Jansen et al. 2017). They further state that most challenges arise during traditional teaching methods (Jansen et al. 2017). The literature supports a need for continuous support to establish and maintain healthy daily routines, and that occupational professionals such as occupational therapy practitioners are vital resources who can fulfill the need for continuous occupational support (Lyhne et al. 2020).

Coping Strategies and ADHD
ADHD is commonly related to psychological distress and functional impairments within personal, professional, and social contexts (Barra et al. 2021). ADHD was found to be associated with a low probability of choosing adaptive stress coping strategies and a high probability of choosing maladaptive stress coping strategies (Barra et al. 2021). This behavior causes increased functional impairment and further psychological distress (Barra et al. 2021). These findings
emphasize the importance of utilizing professional support in adults with ADHD and support the use of stress coping strategies as a treatment method for reducing functional life impairment (Barra et al. 2021). Individuals presenting with neuropsychological deficits tend to utilize maladaptive stress coping strategies more often (German 2020). One study controlled for pharmacological treatment and still found that disparities among coping skills play significant roles in the quality of life outcomes in adults with ADHD (German 2020). Thus, pharmacological treatment by itself is not sufficient for treating the overall functional impact of ADHD (German 2020). These findings emphasize the importance of integrating positive coping strategies into the therapeutic treatment of ADHD (German 2020).

Another study investigated fixed and/or growth mindsets of self-regulation and how this can predict an individual’s ability to cope with setbacks and explored the connection between executive functioning impairment and ADHD status (Burnette et al. 2020). Growth mindsets predicted a decreased negative affect, increased efficacy, and less avoidant coping (German 2020). The participants with greater executive functioning impairments as well as an ADHD diagnosis reported weaker growth mindsets of self-regulation (Burnette et al. 2020). It was found that prior to diagnosis and treatment, people with ADHD may develop many different coping skills that they perceived as helpful (Canela et al. 2017). This study, among others, reinforced the idea that effective coping strategies were vital to the self-management of those with ADHD (Barra et al. 2021; Burnette et al. 2020; Canela et al. 2017; German 2020; Kreider et al. 2019).

Summary

ADHD symptoms have significant effects on overall quality of life and functional outcome. Based on the gap in the literature regarding this specific age group, the purpose of the study was to gain a deeper understanding of emerging adults’ life with ADHD by analyzing how it affects quality of life, occupational balance, and how they cope with ADHD.

Research Questions

The following were the research questions explored in this study:

1) How does ADHD affect overall quality of life in emerging adults?
2) How are emerging adults coping with symptoms of ADHD?
3) How does ADHD affect occupational balance in emerging adults?

Method

Research Design

This design was a qualitative study. There were 17 semi-structured interview questions that were asked of each participant.

Participants

A social media post as well as the snowball method were used to recruit participants for this study (Parker et al. 2019). The social media post consisted of a small paragraph introducing and explaining the study. This was accompanied by a digital flyer with the inclusion criteria and researcher contact information.

This study included interviews with six participants. All participants reported having a
diagnosis of attention deficit hyperactivity disorder from a medical professional. The participants were also all within the age range of 20 to 24 years old and could speak and understand English. Participants could participate in this study regardless of whether they were diagnosed with other non-neurocognitive medical conditions. Lastly, the participants had access to a computer or other technology device with the Zoom application, a working camera, and a microphone.

Demographics
Table 1 shows demographic information pertaining to gender, age, education level, and ethnicity. This study consisted of six total participants; (66.6%) were female, and two (33.3%) were male. Participants ranged from 20 to 24 years old. In regard to their highest education level, two participants (33.3%) earned bachelor’s degrees, while four participants (66.6%) earned high school diplomas. More specifically, all participants who had their highest completed education level as high school diplomas were currently enrolled in a four-year college. Five participants, (83.3%) were Caucasian, and one participant (16.6%) was biracial.

<table>
<thead>
<tr>
<th>Participant Number</th>
<th>Age</th>
<th>Gender</th>
<th>Education Level</th>
<th>Ethnicity</th>
</tr>
</thead>
<tbody>
<tr>
<td>One</td>
<td>22</td>
<td>Female</td>
<td>Bachelor’s degree</td>
<td>Caucasian</td>
</tr>
<tr>
<td>Two</td>
<td>24</td>
<td>Female</td>
<td>Bachelor’s degree</td>
<td>Caucasian</td>
</tr>
<tr>
<td>Three</td>
<td>22</td>
<td>Female</td>
<td>High School</td>
<td>Caucasian</td>
</tr>
<tr>
<td>Four</td>
<td>20</td>
<td>Male</td>
<td>High School</td>
<td>Caucasian</td>
</tr>
<tr>
<td>Five</td>
<td>24</td>
<td>Male</td>
<td>High School</td>
<td>Caucasian</td>
</tr>
<tr>
<td>Six</td>
<td>21</td>
<td>Female</td>
<td>High School</td>
<td>Biracial</td>
</tr>
</tbody>
</table>

Procedures
Ethical approval for exempt status for this study was granted by an Institutional Review Board. Participants were interviewed via Zoom. Before completing the interview, each participant was required to read, sign, and return a consent form. The consent forms with participants’ signatures were stored in a locked file cabinet at the department of the researcher’s home institution and will be disposed of after three years.

During the interviews, the researcher read an introductory paragraph followed by the demographic and interview questions. After the interviews, the researcher downloaded the Zoom recordings and transcripts and checked them for accuracy. These transcripts were transferred to the qualitative analysis software called NVivo, where response themes were identified.

Instruments
The researcher created 17 semi-structured interview questions for the purpose of the study. These questions were not modeled after any other study or any other examples directly, however, they could have been influenced by reading research articles in preparation and creation of the literature review. The questions were based on the developed research questions and addressed the impact of ADHD on quality of life and occupational balance in emerging adults, as well as how emerging adults cope with ADHD. Examples of interview questions include, “How has ADHD affected your day-to-day life?,” “How do you cope with symptoms of ADHD when they arise?,” and “How does ADHD interfere with your engagement in meaningful occupations?”
**Data Analysis**

This was a qualitative study that used the NVivo software to analyze the data received from participants’ responses and categorize them into themes and subthemes. There were three themes found: (1) overall negative impact on quality of life, (2) the use of diverse learned coping techniques, and (3) compromised occupational participation. The three subthemes found were (1) hyperactivity contributing to positive social experiences, (2) the varying use of medication, and (3) inattention contributing to an atypical amount of time spent per task. The themes of the study generally address the overall impact of ADHD on quality of life and occupational balance, and how emerging adults cope with ADHD.

**Results**

*Negative Impact on Quality of Life*

All participants reported that living with ADHD had a negative impact on their overall quality of life. Participant six stated, “I struggle more than most to complete everyday tasks,” participant three stated, “if I don’t go, go, go, I almost feel like I am depressed,” and participant two described how they view their diagnosis, stating, “I view it in a negative way. I get down on myself for it.” Participants reported their ADHD symptoms of both hyperactivity and inattention contributed to the negative impact. Many participants used words like “hyper” and “jittery” when describing feelings of hyperactivity, and words like “focus” and “distracted” to describe feelings of inattention.

All participants described particularly negative experiences in traditional academic settings, for example, participant one stated, “I found myself not doing well in academics, because I simply couldn’t focus.” Participant three stated that, “when in the public school system, I had a hard time paying attention and getting work done. I was falling behind a ton.” Participant four reported, “I end up just teaching myself because I wasn’t paying attention. I am having to put double the amount of time into classes to relearn whatever I wasn’t focused on that day.” And lastly, participant six said, “I could not concentrate in school, I did very poorly up until my sophomore year just because I had a lot of trouble paying attention in class, focusing, and I was very, very jittery.”

Participants also mentioned other ways ADHD symptoms negatively impacted their quality of life, with many stating feelings of boredom and frustration. For example, participant two stated that she “gets bored really easily,” and participant four said, “it makes tasks more demanding throughout my life because you have to consciously focus.”

Finally, two of the six participants stated that they experienced negative impacts of ADHD symptoms on memory. Participant two stated, “I forget to do things. Sometimes I have one thing on my mind to do but then something else comes up that seems more important in the moment, so I completely forget about the other task.” Participant one stated, “my memory isn’t the best so other people would get mad that I couldn’t remember things.”

*Positive Social Participation*

When asked about social participation, however, the data revealed a theme among all participants that ADHD symptoms, specifically feelings of reported hyperactivity, aided in social participation. For
example, participant one stated that, “people think that I’m hyper and fun and I am always down to have a good time. And I know that this is because of the ADHD because when I am on my medication I am not as fun,” and participant four stated, “the hyperactivity portion definitely does make you a little more extroverted.”

Techniques and Strategies
All participants stated they had developed techniques and/or strategies to help them cope with ADHD symptoms when they arise. Many of these techniques and strategies were learned by lived experience and some were taught by professionals such as therapists and psychiatrists. Participant one stated, “I write a lot of lists. I learned if I do lists, I can’t do long lists, or else I will see the big list, and I kind of go blank and won’t do anything for the day. I keep it short. I found one template on Amazon that is short and has three priorities and a list of stuff so I can prioritize my days.” Participant two stated, “I do see a therapist now, so she helps me with some techniques, especially when it comes to slowing down my thoughts and trying to be present in the moment.” She went on to say, “Usually when my mind wanders to a certain spot, counting or identifying certain objects in the room helps to slow things down for me,” and when her ADHD symptoms impact memory, she stated, “having alarms on my phone remind me of things I need to get done.” Participant four stated that they cope by making sure they “eat a good breakfast in the morning.” Participant four also reported that time of day influenced the effects of ADHD symptoms, and stated, “I have to do things in the afternoon when I am more awake if I want to focus on them.” Participant six utilizes accessibility services at her school to cope with ADHD symptoms in academic settings, stating, “I am also part of the student disability services at my school, so I’m able to get extra time on tests.”

Two participants also stated that sometimes they are not able to tell when they are experiencing ADHD symptoms, so they are unable to use coping strategies in those moments. Participant four stated, “I feel the irony of it just like when I’m spaced out, I don’t know I’m not in the moment so I can’t actively do anything about it.” And participant five stated, “I don’t recognize that I’m doing it when I’m doing it.”

Medication
All participants took medication to cope with their ADHD symptoms at some point throughout their lives. Participants one, four, five, and six were actively taking ADHD medication at the time of this study. Some medications mentioned were Ritalin, Adderall, Escitalopram, and Concerta. For one participant, medication served to be beneficial for treating ADHD symptoms, although she found other effects of the medication to be unfavorable. Participant one stated, “I am on Ritalin, I have two different prescriptions for that. It works fantastic. Although I don’t really like taking them because I don’t feel like myself when I take them. That being said, sometimes I need to weigh the options. Do I want to be my fun self, or do I want to be focused? It’s kind of a weigh the options type thing.” She also stated, “I don’t want to [take medication]. I want to be able to do my job without the need for medications, but every once in a while I need a quick fix.”

Participants two and three were not currently on medication. There were varying reasons for this.
Participant two reported, “I was on Adderall, but I didn’t like it. It felt like it wasn’t making the difference that I wanted.” And participant three stated, “I noticed when I was on medication it was terrible, like so bad physically and mentally. It was a terrible spiral.”

Compromised Occupational Participation
All participants stated that ADHD compromised their occupational participation. Participant one stated, “I feel like it’s hard for me to balance different occupations.” And participant four stated, “In the morning I would say it cuts my engagement [in occupations] in half.” Many participants reported that they get distracted and skip important tasks. For example, participant one stated, “Sometimes I just skip tasks, leave them for the next day and even into the next week because I want to do other things.” Some participants felt that their ADHD symptoms prevented them from participating in activities that require the ability to focus that they would otherwise want and choose to do. For example, participant one reported that, “when it comes to a book group, I know it’s something I’m never going to be able to do which is kind of frustrating.” And “if something requires me to sit down and focus while I do it, I’m just not going to because I know I can’t.” Participant three reported, “I do notice irritancy when it comes to trying to relax or read a book.”

Another theme that was found among participant responses was that ADHD symptoms also impacted participation in occupations because inattention contributed to an inability to focus on tasks that were in front of them. For example, participant two stated, “I get bored really fast of the thing that I’m doing.” Participant five stated, “If it’s not something that I’m super interested in or I’m pulled to, I can get distracted really easily.” Participant six stated, “there are so many things on my mind that I’m struggling to complete the things I want to do throughout the day.”

Participant three also mentioned that his ADHD symptoms decreased his desire to participate in certain occupations, stating, “[ADHD symptoms] cause me to lose the meaning or the desire to do other things, so it makes a task really heavy. It makes it more difficult than it needs to be because I’m so unorganized and lack attention to what I’m doing.”

Time Spent Per Task
All participants stated that the amount of time they spend per task is influenced by their ADHD symptoms, and this contributed to compromised occupational participation. For example, participant two stated, “I think that ADHD makes it so that I don’t have as much time to do the things that I love, or that I lose motivation to do those other things because I feel so down about the fact that I’m wasting so much time. So, then I feel like I don’t have any time to do anything else and I get almost in a depressed mood.” Participant four stated, “I would say [ADHD symptoms] definitely hinder [time management] because you have to spend more time doing the things that you’re already doing. So, you might not have as much time to try something new.” Participant 6 stated, “I’ll start a bunch of different tasks and I won’t like to finish them all so I think it reduces the amount of time that I can spend on other activities and stuff. I’m sometimes not able to do the things that I want to do because it’s taking me so much longer to complete the task that I have to do.”
Many participants also stated that they have decreased time management skills, for example, participant four stated “There really is no time management. You sit down until enough becomes enough. You’re like, right now I’m going to get this done because I’ve been telling myself to do it. So, time management is just something that goes out the window.” Overall, many participants reported that their ADHD symptoms contribute to the length of time spent per task, and this affects participation in other meaningful occupations.

Summary of Results
Overall, the findings of the study revealed that the quality of life of emerging adults living with ADHD is negatively impacted by the disorder, however, hyperactivity does have a positive impact on social participation. The finding of ADHD’s positive impact on social participation is consistent with a study by Krauss and Schellenberg (2022), who reported an overall negative quality of life in adolescence with the exception of well-being concerning friends/peers. This information provides healthcare practitioners with insight into the quality of life of those with ADHD. It does this while maintaining a strengths-based outlook by addressing the potential positives as well as perceived negatives during treatment.

The study also revealed that people with ADHD use a variety of learned techniques to cope with symptoms of ADHD when they arise. This finding is consistent with many other studies that state patient-reported use of diverse compensatory strategies (Bjerrum et al. 2017; Canela et al. 2017; German 2020). This is relevant to all healthcare professionals because understanding a patient’s individualized coping strategies may aid in developing patient-centered care. It is also essential to consider that self-taught coping strategies may influence the timeline of ADHD diagnosis or contribute to the underdiagnosis of ADHD. The present study goes beyond this and finds that people with ADHD cope with symptoms by taking prescribed medication. However, many people choose to opt out of taking medication for various reasons. Additionally, those with ADHD are not always aware of the ADHD symptoms as they are occurring, which poses difficulty in consciously choosing to use coping techniques. Further research is needed to expand upon the correlation between the awareness of symptoms and the use of coping strategies.

Similar to the findings in other studies, the present study also found that ADHD symptoms
compromise occupational performance (Goffer et al. 2020; Jansen et al. 2017; Lyhne et al. 2020). This was found specifically in relation to the inability to participate in focused activities and the amount of time spent per task. Occupational therapists specifically can be of requisite assistance to those with occupational imbalance as they possess a specified and extensive expertise regarding occupational participation. Continually, this study suggests that it takes longer for those with ADHD to complete work or school-related occupations, which leaves less time to participate in other meaningful occupations they enjoy. This is similar to the finding of Gjervan et al. (2012), who states that ADHD-related problems are most frequent in traditional academic settings.

**Potential Limitations and Future Directions**

One possible limitation of this study refers to the method of participant recruitment. Recruitment materials were posted on the researcher’s own social media pages, and it is possible it was viewed predominantly by the researcher’s social media connections. This could have led to a group of participants that were similar to each other. Another possible limitation is the sample size of this study, as smaller sample sizes may provide a less accurate representation of the population when compared to larger sample sizes. Although this study revealed varying positive and negative experiences, it is impossible to ensure that all relevant participant lived experiences were addressed. Additional research exploring ADHD’s effect on memory and sleep quality may also be helpful to better understand the diagnosis’s impact on quality of life and occupational balance.

**Conclusion**

The findings of this study suggest that emerging adults diagnosed with ADHD have needs to be addressed within and across the occupational therapy scope of practice. Emerging adults with ADHD were found to have compromised occupational balance, use a variety of learned coping techniques to manage symptoms, and the diagnosis was found to have an overall negative impact on quality of life. Occupational therapists can provide a unique and essential outlook on the potential treatment of ADHD and the management of symptoms to improve the quality of life and occupational balance in those diagnosed with the disorder.

**Note on Author:** Morgan Leger is a 23-year-old Master of Occupational Therapy student at Worcester State University. She received her Bachelor of Science in Occupational Studies in May 2022. While earning her undergraduate and graduate degrees, she worked in a psychiatric setting and is passionate about further exploring mental health and health-related quality of life. Her interests include mental health advocacy, occupational therapy’s role in mental health, and pediatric occupational therapy. She completed her thesis under the mentorship of Dr. Joanne Gallagher Worthley, Ed.D., OTR/L. She plans to sit for the NBCOT exam in spring 2024.
References


