

# Attention Deficit / Hyperactivity Disorder (ADD/ADHD)



## Information Pack for students

### Definition of a Disability

The Equality Act (2010) replaced the Disability Discrimination Act (2005) in providing protection and legal rights for disabled people. It uses the following definition of disability:

*“The Act defines a disability as a physical or mental impairment which has a substantial and long-term (i.e. has lasted or is likely to last for at least twelve months) adverse effect on a person’s ability to carry out normal day-to-day activities.”*

More information on the Act can be found at

[http://www.direct.gov.uk/en/DisabledPeople/RightsAndObligations/DisabilityRights/DG\\_4001068](http://www.direct.gov.uk/en/DisabledPeople/RightsAndObligations/DisabilityRights/DG_4001068)

### What is Attention Deficit / Hyperactivity Disorder?

Attention deficit / hyperactivity (AD/HD) disorder is a condition that affects those parts of the brain that control attention, impulses and concentration, and can occur with or without hyperactivity.

AD/HD develops in early childhood and is most commonly noticed around the age of 5. Research suggests that 80% of children diagnosed with AD/HD continue to experience symptoms during adolescence and 67% continue to have symptoms into adulthood.

The symptoms of AD/HD (impulsivity, hyperactivity and inattention) are not seen to the same degree in all people diagnosed with the condition. As a result, clinicians recognise three types of people with AD/HD:

- The predominantly hyperactive-impulsive type.
- The predominantly inattentive type.
- The combined type (which make up the majority of AD/HD cases), both inattentive, hyperactivity, and impulsive.

There is also a fourth type, which does not fit into any of the above three categories and which healthcare professionals classify as 'AD/HD not otherwise specified'.

(Adapted with permission from the University of Cambridge)

## **What causes AD/HD?**

There is no single indisputable cause of AD/HD. Research suggests that neurobiological factors play a role due to changes in parts of the brain involved with 'executive functioning' (responsible for impulse control and concentration amongst other things). Genetic and environmental factors are also thought to be important, although AD/HD is not considered to be caused by poor parenting.

Diagnostic approaches and treatment interventions should take into account the inevitably complex transactional relationships between the range of biological, psychological and social factors affecting the individual and their experiences.

## **Diagnosis and treatment**

There are a number of mental health conditions with similar symptoms to AD/HD. Therefore, although self-report checklists and other measurement instruments are widely available on the internet, these are best interpreted by healthcare professionals working within the context of a multidisciplinary mental health team who have expert knowledge and training in AD/HD.

Referral for a specialist assessment is made via your General Practitioner. However, you can contact the Disability Advisory Service if you would like to talk through your concerns (contact details available at the end of this guide).

A team of specialists are usually involved in the process of obtaining a diagnosis and making decisions regarding medical treatment or therapeutic interventions. Although medication is considered to be a first-line treatment for adults with AD/HD, other psychological interventions such as group or individual cognitive-behavioural

therapy (CBT) may also be recommended (NICE guidelines are available from [www.nice.org.uk/CG072](http://www.nice.org.uk/CG072)).

### **What does AD/HD mean for students?**

People with AD/HD may demonstrate **strengths** in particular areas:

- Highly creative, original, and inventive.
- Able to contribute well to discussions and debate.
- Intuitive and intelligent.
- Highly energetic, enthusiastic and motivated for particular tasks.
- An ability to see ‘the bigger picture’.
- Good strategic thinking and problem-solving skills.
- Risk taking behaviours can lead to discoveries that might not have otherwise been made.
- Determined to succeed and hardworking.

However, students may also encounter particular **difficulties** or **barriers** in relation to their learning and overall university experience:

- Becoming ‘locked into’ an activity – obsessing over particular subjects or details to the detriment of other work, difficulty switching between tasks.
- Intolerance of boredom and frustration, impulsivity, and a search for activities with high stimulatory value – can lead to risky behaviours that are not conducive to effective study (or wellbeing), may overlook potential outcomes or consequences.
- Procrastinating – putting off the start of important activities and falling behind with work.
- Organisation – losing or forgetting things, managing the overall workload, failure to plan ahead.

- Disorientation – difficulty getting to new places on time, getting lost.
- Timekeeping – misjudging how long it will take to complete tasks (despite previous experience).
- Meeting deadlines for assignment/coursework submission.
- Attendance – genuinely forgetting to go to lectures/tutorials, and missing other important medical or social appointments.
- Distraction – hypersensitivity to surroundings and external stimuli (particularly problematic in libraries and large exam halls).
- Difficulty ‘paying attention’ or staying focussed in general – impaired short-term memory and poor attention span make it difficult to follow instructions and discussions during lectures.
- Noticeable restlessness and fidgeting during long lectures or examinations – distracting for the individual and other students.
- Prioritising workload and getting a good balance between social and academic activities.
- Extracting the most relevant and salient information to include in essays, including of too much or too little information.
- People with AD/HD can at times seem impatient and their behaviour inappropriate or unpredictable, leading to interpersonal tensions.
- The correlation between AD/HD and other specific learning difficulties (such as dyslexia) may further compound any academic difficulties.
- May find it difficult to listen carefully to what others have to say and be prone to interrupt or talk excessively during lectures/tutorials.
- Inconsistent or unpredictable presentation – people experience ‘good days’ and ‘bad days’, leading others to falsely conclude that the individual should be able to somehow better control things. Criticism and lack of understanding are damaging to self-esteem, potentially further undermining their ability to study or strategies for coping.

### **What support is available at university?**

- Sessions with a specialist study skills tutor or mentor to help develop strategies for managing the effects of their AD/HD on their studies (and vice versa).

- Note taking support during lectures.
- Specialist software or equipment, such as a digital recording device.
- Examinations arrangements such as extra time, a separate room, and rest breaks – more information can be found at:  
[www.ox.ac.uk/students/shw/das/exams](http://www.ox.ac.uk/students/shw/das/exams)

Medical evidence from a specialist, General Practitioner and/or College Doctor is required in order to access support. The Disability Advisory Service can advise on how to obtain this information (contact details below).

## **Funding**

Information about the Disabled Students' Allowance (DSA) which is used for funding study support provision (as detailed above) can be found at:

[www.ox.ac.uk/students/shw/das/funding](http://www.ox.ac.uk/students/shw/das/funding)

[www.direct.gov.uk/en/DisabledPeople/EducationAndTraining/HigherEducation/DG\\_10034898](http://www.direct.gov.uk/en/DisabledPeople/EducationAndTraining/HigherEducation/DG_10034898)

## **Contact information**

The **Disability Advisory Service (DAS)** will be able to discuss with you specific strategies that might help you cope as effectively as possible whilst studying at the University. Contact details are available at the end of this guide.

### **Oxford University Student Union (OUSU)**

Thomas Hull House, New Inn Hall Street, Oxford, OX1 2HU.

Vice-President (Welfare):

Tel: 01864 (2) 88461. Email: [welfare@ousu.org](mailto:welfare@ousu.org)

Web: [www.ousu.org/welfare](http://www.ousu.org/welfare)

OUSU also has an active Student's with Disabilities campaign group, which works to raise awareness of disability issues in the University.

### **University Counselling Service**

Tel: 01865 270300.

Website: [www.ox.ac.uk/students/shw/counselling](http://www.ox.ac.uk/students/shw/counselling)

Email: [reception@counserv.ox.ac.uk](mailto:reception@counserv.ox.ac.uk)

### **Useful websites and sources:**

- The DfES Working Party on DSA Assessment, 2004
- The University of Cambridge, 'Information for Students with Specific Learning Difficulties' (2007- 2008):  
<http://www.admin.cam.ac.uk/univ/disability/practice/pdf/spld0708.pdf>
- NICE guidelines for the diagnosis and management of ADHD in children, young people and adults (2008): [www.nice.org.uk/CG072](http://www.nice.org.uk/CG072)
- Adult Attention Deficit Disorder – UK (includes details of regional specialists who may be able to provide a diagnosis):  
[www.aadd.org.uk](http://www.aadd.org.uk)
- National Attention Deficit Disorder Information and Support Service:  
[www.addiss.co.uk](http://www.addiss.co.uk)
- UK organisation devoted to helping those living with ADHD:  
[www.simplywellbeing.com](http://www.simplywellbeing.com)
- UK organisation run by and for people with Dyspraxia, AD(H)D, Asperger Syndrome, Autism and Dyslexia: [www.danda.org.uk](http://www.danda.org.uk)

- ADD/ADHD online information: [www.adders.org](http://www.adders.org)

**Disability Advisory Service**

**E-mail:** [disabililty@admin.ox.ac.uk](mailto:disabililty@admin.ox.ac.uk)

**Website:** [www.ox.ac.uk/students/shw/das](http://www.ox.ac.uk/students/shw/das)

**Tel:** +44 (0)1865 280459

**Fax:** +44 (0)1865 289830