Self-reported adult ADHD symptoms among college students

MAJOR FINDINGS:

The researchers used results from the Adult ADHD Self Report Scale (ASRS) to estimate the prevalence of self-reported attention-deficit/hyperactivity disorder (ADHD) symptoms compared to clinical diagnoses among college students. Students were divided into three groups: those with no ADHD diagnosis, those with an ADHD diagnosis but not currently taking any medication to treat it, and those with an ADHD diagnosis and taking medication to treat it. The students who had not been diagnosed with ADHD reported the fewest symptoms on the ASRS, and those who had been diagnosed and were being treated reported the most. Ten percent of the students who had never been diagnosed with ADHD reported high levels of ADHD symptoms (an ASRS score ≥ 9). Inattention symptoms were reported most commonly than hyperactivity symptoms in all three groups of students.

Practice and Policy Suggestions: “Identifying individuals at high-risk for ADHD who may benefit from a comprehensive clinical assessment is valuable since ADHD treatment might mitigate a variety of negative outcomes prevalent in young adults, including substance abuse and dependence, poor academic and occupational functioning, and antisocial behavior.”
About the College Life Study (CLS)

The CLS is a longitudinal study of 1,253 college students at a large, public, mid-Atlantic university. This study is one of the first large-scale scientific investigations that aims to discover the impact of health-related behaviors during the college experience. Any first time, first-year student between 17 and 19 years old at the university in the fall of 2004 was eligible to participate in a screening survey. The researchers then selected students to participate in the longitudinal study, which consisted of two-hour personal interviews administered annually, beginning with their first year of college. A full description of the methods used is available.¹ Inherent to all self-reporting research methods is the possibility for response bias. Because the sample is from one large university, the ability to generalize the findings elsewhere is uncertain. However, response rates have been excellent and attrition bias has been minimal.

For more information about the study, please visit www.cls.umd.edu or contact Amelia M. Arria at the University of Maryland School of Public Health at aarria@umd.edu.