

Helping Students with ADHD Navigate the Challenges of College Life

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Acknowledgements

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TRAC

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ADHD Rating Scale-5

(DuPaul, Power, Anastopoulos, & Reid, 2016 – Guilford Press)

CBT for College Students with ADHD: A Clinical Guide to ACCESS

(Anastopoulos, Langberg, Besecker, & Eddy, 2020 - Springer)

Impact of ADHD on College Student Functioning

Why study college students with ADHD?

“After all, aren’t they a high functioning subgroup of the ADHD population, who did well enough in high school to get into college?”

Research Literature

- Interest in college students with ADHD less than that devoted to children and adults but on the rise in recent times
- Disproportionate amount of research focused on students 4-year vs. 2-year colleges
- Tremendous methodological variability across studies – e.g., ADHD diagnosis, comorbid diagnoses, year in college, treatment status
- Although ADHD recognized as a life span condition, only one study to date focused on developmental progression during college



TRAC Project

Trajectories Related to ADHD in College

5-year Study Funded by NIMH Grant (R01-MH094435)

Arthur D. Anastopoulos, Ph.D. (Lead PI)

George J. DuPaul, Ph.D. (PI)

Lisa L. Weyandt, Ph.D. (PI)

Year 1 Findings

Despite equivalent estimated levels of intelligence, significant ADHD vs. Comparison group differences evident in Year 1

- ▶ Higher rates of co-occurring psychiatric conditions
(Anastopoulos et al., 2016, *JCCAP*, doi: 10.1080/15374416.2015.1105137)
- ▶ Poorer performance on CPT & self-report EF measures
(Weyandt et al., 2016, *Neuropsychology*. <http://dx.doi.org/10.1037/neu0000326>)
- ▶ Lower grade point average & study skills
(Gormley et al., 2016, *JAD*, doi: 10.1177/1087054715623046)
- ▶ Lower self-reported overall quality of life
(Pinho et al., 2017, *JAD*, <https://doi.org/10.1177/1087054717734645>)

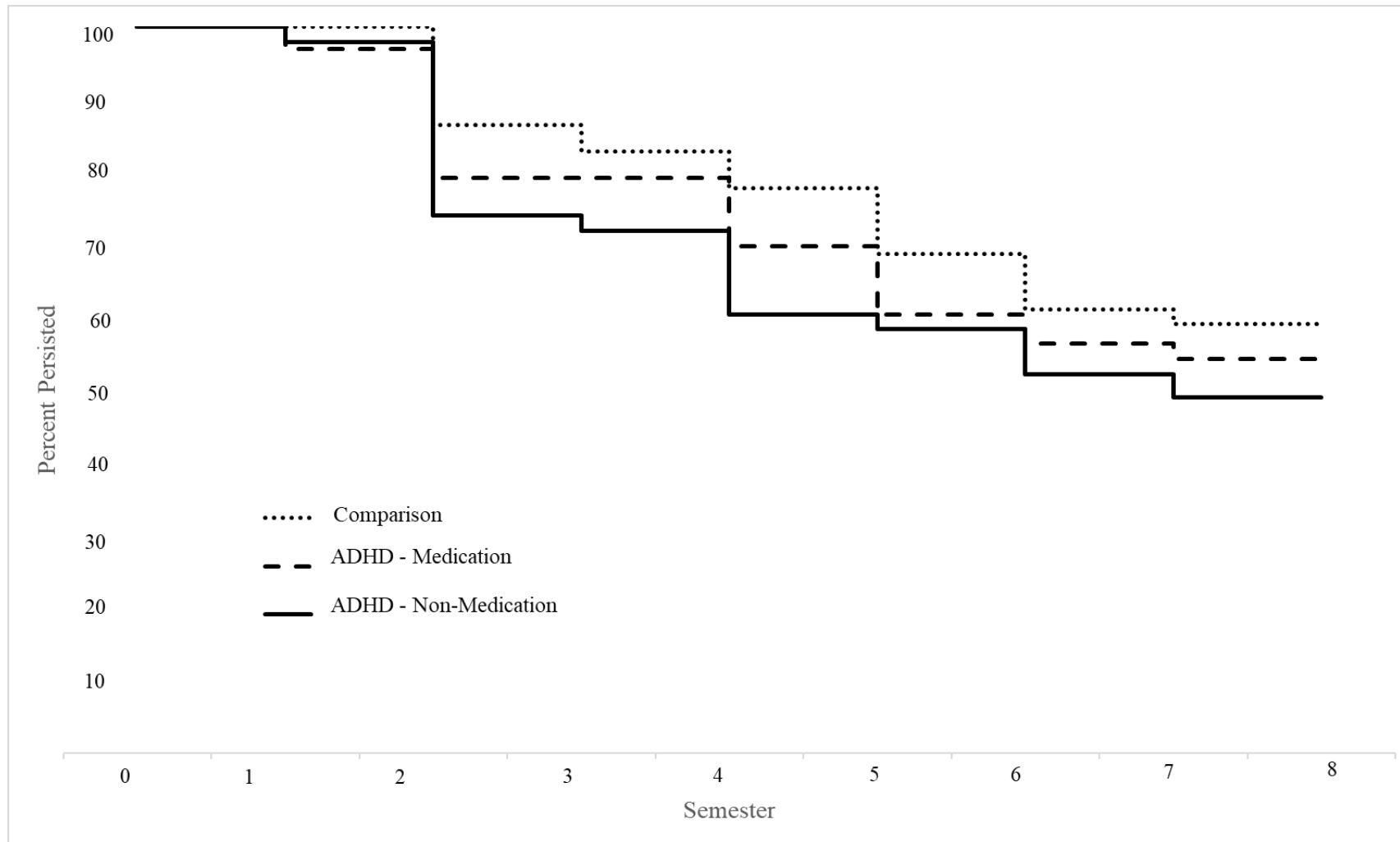
Overall Comorbidity

	ADHD (%)	Comparison (%)
Any Comorbid	55.0	11.2
2+ Comorbid	31.8	4.0

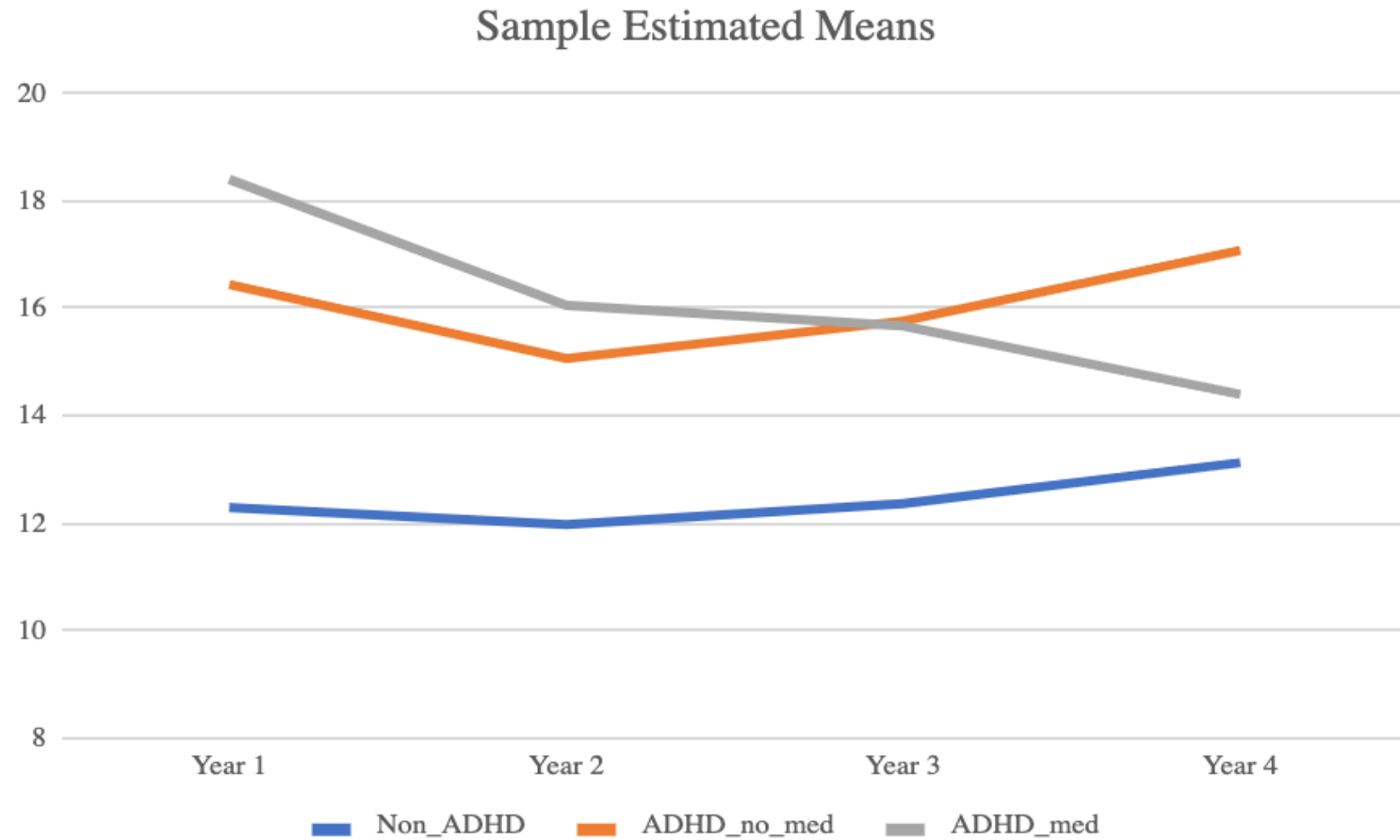
ADHD
Knowledge &
Maladaptive
Thinking:
Year 1
(unpublished)

	ADHD <i>M</i>	Comparison <i>M</i>
ADHD Knowledge	23.85	20.58
ADHD Cognitions	61.83	44.07

Survival analysis (retention rates) across 8 semesters



Changes in risky sexual behavior



Relative to non-ADHD Peers, College Students with ADHD

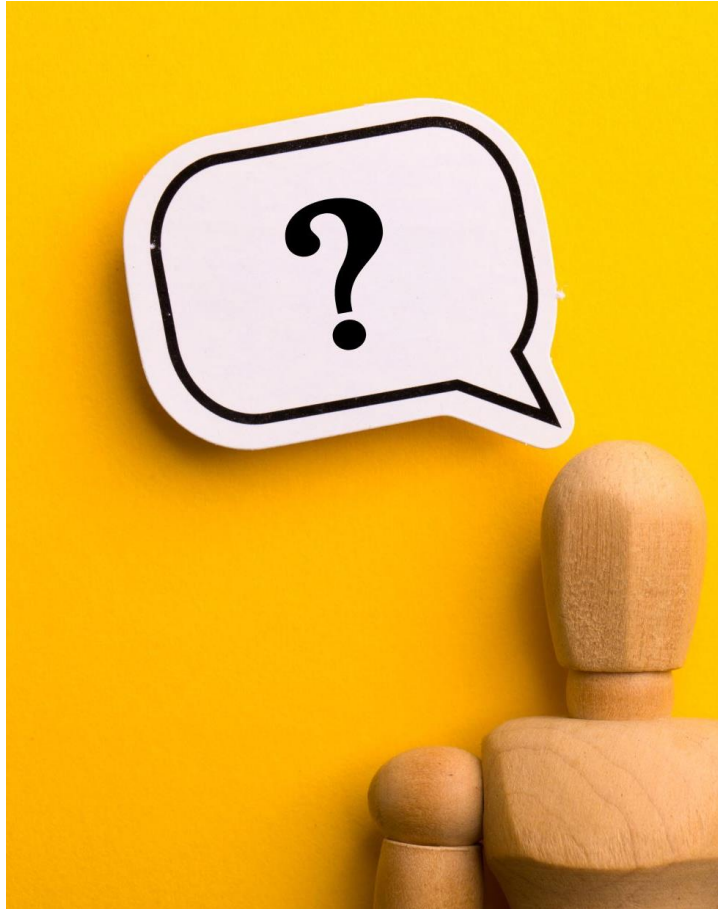
- ❑ Use less effective study strategies, have lower GPAs, withdraw from more courses, more often placed on academic probation, more often switch colleges, take longer to finish, less likely to graduate (Barkley et al., 2008)

→ *Institutional concern re: graduation & retention*

- ❑ Display executive functioning deficits, co-occurring psychological disorders (e.g., depression, anxiety), relationship difficulties, risky sexual behavior, overall lower quality of life, inadequate knowledge of ADHD, higher rates of maladaptive thinking

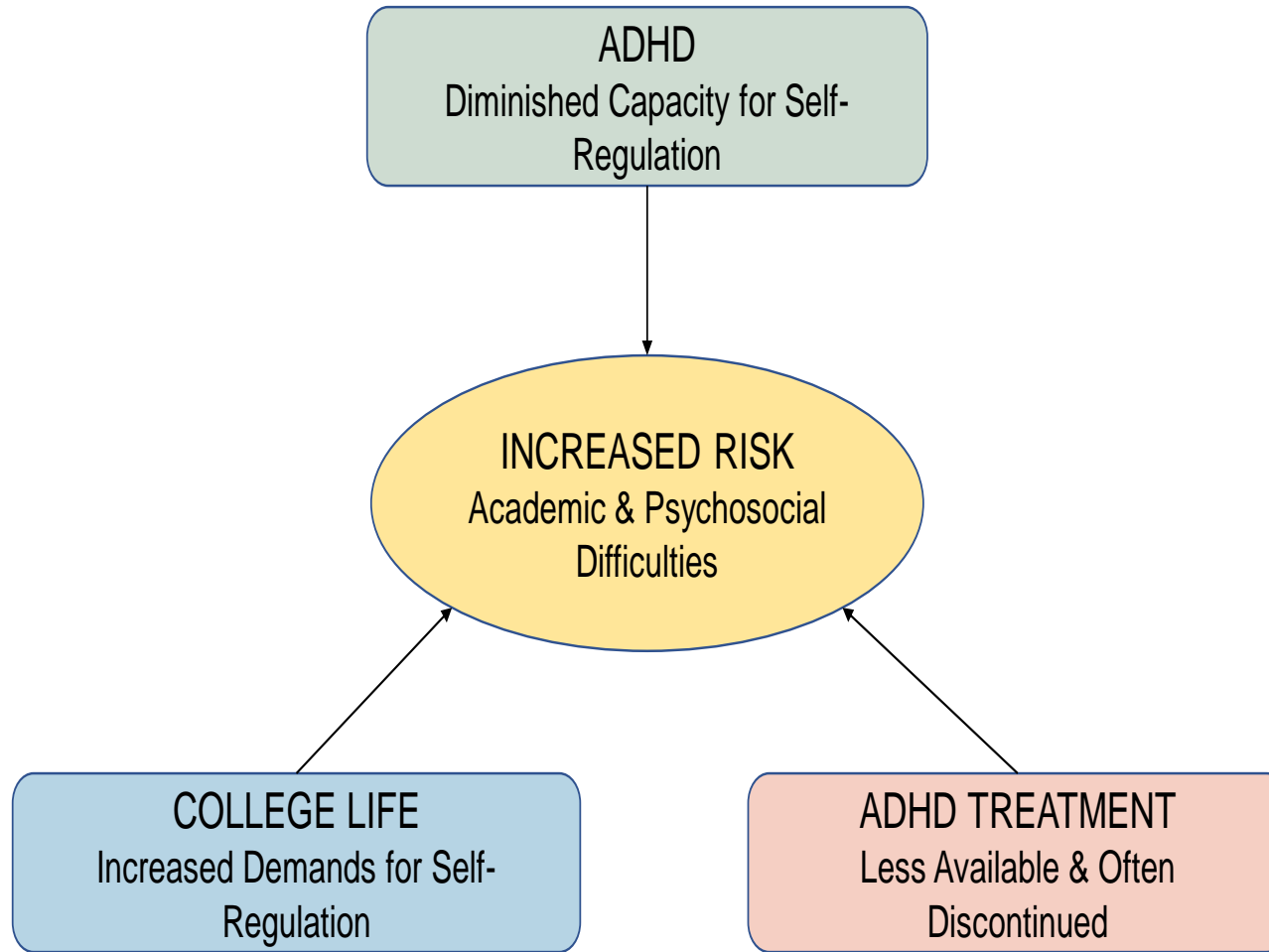
→ *Public health & economic significance*

→ *Possible link to negative adult ADHD outcomes*



Conceptually speaking, how might these difficulties arise?

“Perfect Storm”



Prior to Entering College

- ▶ Treat any & all conditions that co-occur with ADHD
- ▶ Be aware that impact is not just educational
- ▶ Gradually shift responsibility from control by parents to control by self
- ▶ Increase scope of responsibility (beyond educational)
- ▶ Provide developmentally appropriate, evidence-based knowledge of ADHD
- ▶ Teach developmentally appropriate organization, time management, & planning skills
- ▶ Keep an ear out for negative, self-defeating thinking

Managing ADHD During College



Is there a support service or treatment, which by itself, can fix every ADHD-related problem?

ADHD Impact Summary

College students with ADHD perform significantly less well than their non-ADHD peers across multiple functional outcome domains

Differences evident as early as first year of college, persist across all 4-years; although gap does not widen, it also does not close

May not be receiving treatment services and campus supports necessary for improving functioning while in college

Entering post-college adult years at a distinct disadvantage relative to their non-ADHD counterparts

Increased risk for long term negative outcomes (psychopathology, substance use, occupational, legal) reported for adults

Increased physical health risks

Commonly Used Support Services & Treatments

Disability Accommodations

- Extended time on exams, audio-recorded classes, priority registration
- Primary mechanism by which campuses assist students with ADHD
- Seldom used because disclosure of disability status required
- Produce minimal long-term benefits, do not directly address co-occurring executive functioning deficits/psychological disorders (Antshel et al., 2014; Lewandowski et al, 2015).

ADHD Medication

- Effective, safe for children/adults, understudied in college students
- Promising results from one medication trial (DuPaul et al., 2012)
- Additional clinical trials needed to address efficacy, safety, and concerns regarding risk for misuse, abuse, and diversion

Coaching

- Can improve executive functioning (e.g., organization, planning, time management (Prevatt & Yelland, 2015))



Psychosocial Approaches

- Limited number of studies, small samples, diagnostic rigor lacking, narrow range of outcomes, follow-up assessment seldom used (see review by He & Antshel, 2016)
- Based on a wide array of conceptual approaches including cognitive-behavioral therapy (CBT), dialectical behavior therapy (DBT), mindfulness-based cognitive therapy, self-monitoring, and organization/time management/planning (OTMP)
- Inconsistent findings due to conceptual and methodological variability across studies

Bottom Line

When used alone, commonly used treatments and support services can be helpful but do not fully address the multiple needs of college students with ADHD.

Reversing the Perfect Storm

Update	Diagnostic status via a psychological evaluation that is comprehensive and rigorous
Provide	Provide continuity of treatment during transition
Adopt	Adopt a multi-modal evidence-based intervention strategy
Explore	Thoroughly explore available campus & community resources
Implement	Implement additional psychosocial treatment & pharmacotherapy as needed

ACCESS

*Accessing Campus Connections &
Empowering Student Success*

Overview

- ▶ Based on Cognitive-Behavioral Therapy (CBT) principles delivered via psychoeducational, coaching, and other support strategies, not psychotherapy
- ▶ Gives students with ADHD the knowledge and skills necessary to successfully manage new responsibilities that arise in college
- ▶ Developed programmatically over a period of several years
- ▶ Initially tested in an open clinical trial
- ▶ Subsequently tested in a multi-site randomized controlled trial
- ▶ Published research findings lend empirical support to efficacy
- ▶ Published manual with step-by-step practical guidelines for implementation

Unique ACCESS Features

- ❖ Simultaneous rather than sequential delivery of treatment components
- ❖ Greater amount and depth of ADHD knowledge to give students a developmentally appropriate understanding of their own ADHD
- ❖ Simultaneous delivery of group treatment and individual mentoring to facilitate acquisition and mastery of new knowledge and skills
- ❖ Semester-long Maintenance Phase to facilitate transition to independent functioning after participation in ACCESS ends

ACCESS TIMELINE

Active Phase

8 weekly
90-minute
group
meetings

8 -10 weekly
30-minute
mentoring
sessions

Maintenance Phase

One
90-minute
booster group
meeting

4 - 6
30-minute
mentoring
sessions

Active Phase Group

- Increase knowledge of ADHD, increase use of behavioral strategies, & increase adaptive thinking
- Increase access to campus resource units



Active Phase - Group

	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8
ADHD Knowledge	Primary Symptoms	Causes	Assessment	School & Daily Functioning	Emotions & Risk-Taking	Medication Management	Psychosocial Treatment	Long-Term Outlook
Behavioral Strategies	Campus Resources	Planners & To-Do Lists	Getting Organized	Attending Classes	Effective Studying	Long-Term Projects	Social Relations	Long-Term Goals
Adaptive Thinking	Basic Principles	Maladaptive Thinking	Adaptive Thinking	Managing School Work	Handling Emotions	Adhering to Treatment	Social Relations	Relapse Prevention

Guest Speakers

- ▶ Goal is to help students make better use of campus resources
- ▶ Campus support staff attend group meetings to describe services available from their units (e.g., Disability Office, Student Health, Counseling, Writing Center, Career Counseling)
- ▶ 2 - 3 presentations given during early weeks of Active Phase
- ▶ Limited to 1 speaker per group during first 20-30 minutes of meeting



Active Phase Mentoring

- ❖ To monitor and fine-tune what the student learned in group
- ❖ To work collaboratively with the student to identify and monitor attainment of goals
- ❖ To assess the student's need for disability accommodations and other support services

MAINTENANCE PHASE

Goals

- To help students maintain skills and knowledge acquired during Active Phase
- To provide semester-long opportunity to increase mastery

Structure

- Single group meeting takes place early in semester
- 4 – 6 mentoring sessions conducted across semester as needed
- Reduced number of sessions facilitates transition from weekly support and guidance to independent functioning

Group Booster Session

Purpose & Timeline

- Focuses on reviewing and refining knowledge and skills acquired during the Active Phase
- Affords opportunity for students to reconnect with other members of their group
- Typically scheduled early in new semester to facilitate academic planning
- Used to identify barriers to success and ways to remove such barriers

Group Leader

- Reminds students to reconnect with their mentors
- Prompts students to connect with needed campus support units
- Ends session on a positive note by asking students to reflect on progress made and to identify what knowledge, skills, and strategies were most helpful



INDIVIDUAL MENTORING SESSIONS

Objectives

- To fine tune knowledge & skills acquired during Active Phase
- To help students make the transition to greater independence by encouraging them to take on increasingly greater responsibility for what happens during and between sessions



Timeline

- Scheduling of 4 – 6 sessions is flexible and driven primarily by student preferences
- Includes an initial Maintenance Phase Mentoring Session, up to 4 Mid-Maintenance Phase Mentoring Sessions, and a Final Maintenance Phase Mentoring Session

OBJECTIVES & DESIRED OUTCOMES

Increased
ADHD Knowledge,
Behavioral Strategies,
Adaptive Thinking



Improved
ADHD Symptoms,
Executive
Functioning,
Emotional Functioning



Improved
Academic, Personal,
Social, Vocational
Functioning

Research Support for ACCESS

*For additional information about the following clinical trials,
please visit our research website at: <https://accessproject.uncg.edu/>*

Initial ACCESS Project

- ❖ Made possible through involvement in College STAR grant awarded to East Carolina, UNC Greensboro, & Appalachian State, funded by Oak Foundation, Glaxo-Smith Kline, and consortium of Greensboro private foundations
- ❖ From 2011-2015, ACCESS was conceptualized, developed, refined, and pilot tested in an open clinical trial involving 88 undergraduate students at UNC Greensboro



Open Clinical Trial Findings

- ✓ Large increases in ADHD knowledge, behavioral strategy use, and adaptive thinking skills
- ✓ Significant reductions in overall severity of ADHD symptoms
- ✓ Improvements in executive functioning
- ✓ Increased use of disability service accommodations
- ✓ Persistence of improvements throughout Maintenance Phase, 5-7 months after active treatment started

Anastopoulos, A.D. King, K.A., Besecker, L.H., O'Rourke, S.R., Bray, A.C., & Supple, A.J. (2020). Cognitive-behavior therapy for college students with ADHD: Temporal stability of improvements in functioning following active treatment. *Journal of Attention Disorders, 24*, 863-874.

Anastopoulos, A.D. & King, K.A. (2015). A cognitive-behavior therapy and mentoring program for college students with ADHD. *Cognitive Behavioral Practice, 22*, 141-151.

Randomized Controlled Trial (RCT)

- Multi-site clinical trial in collaboration with Dr. Joshua M. Langberg (Co-PI) at Virginia Commonwealth University
- Funded by a 4-year (2015-2019) \$3.2 million Goal 3 Efficacy grant (R305A150207) from the Institute of Education Sciences, U.S. Department of Education
- Five cohorts recruited over five consecutive semesters from Fall 2015 – 2017
- Randomly assigned 250 students to either immediate ACCESS or Delayed ACCESS
- Outcome data collected at: Pre-active treatment, mid-active treatment (Immediate only), post-active treatment, post-maintenance phase, & 6-month follow-up (Immediate only)

Summary of RCT Findings

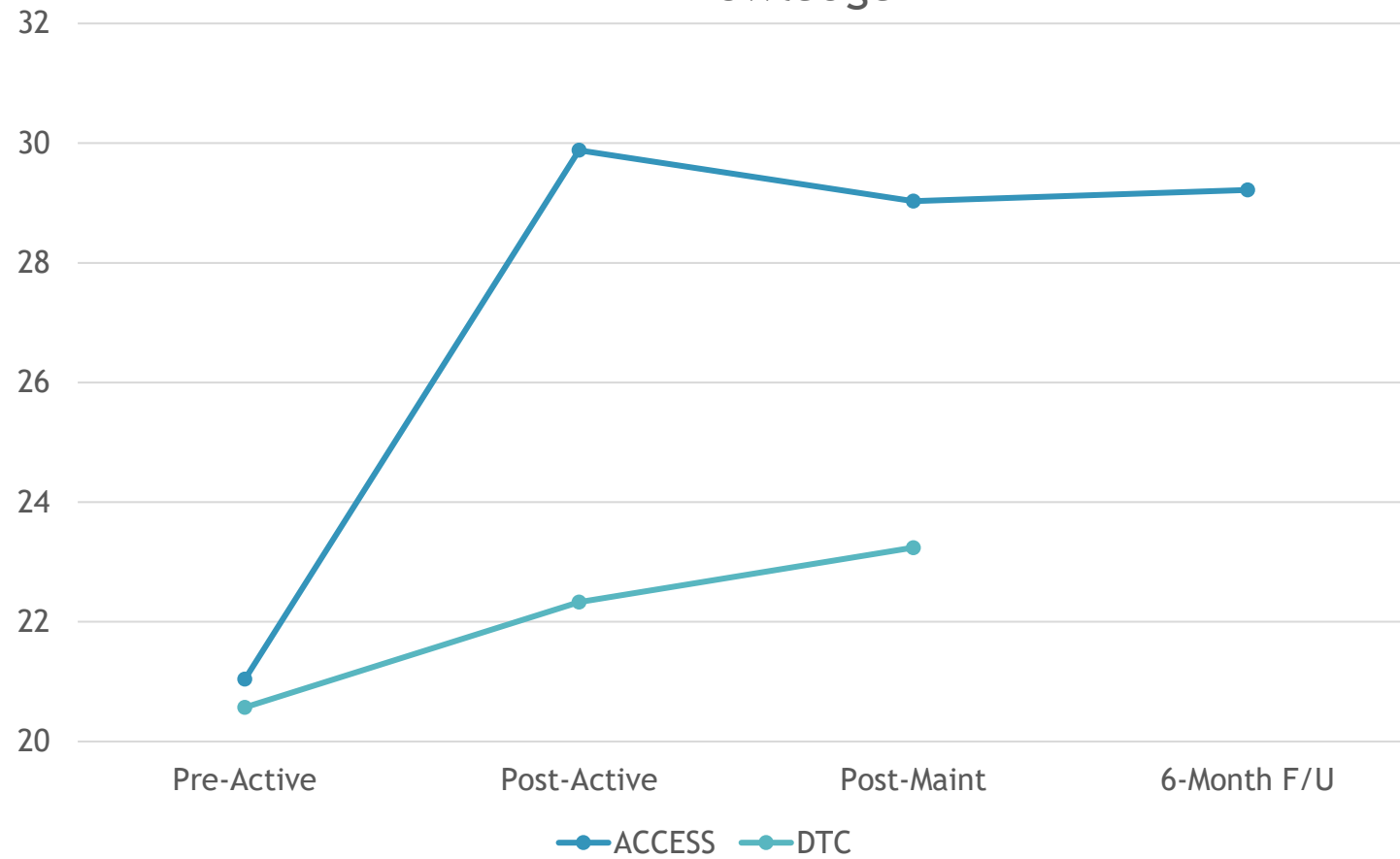
- ✓ High level of engagement – approximately 85% completed program
- ✓ Increased ADHD knowledge, behavioral strategies, & adaptive thinking skills
- ✓ Significant improvements in ADHD inattention symptoms & executive functioning
- ✓ Increased use of academic learning and study strategies
- ✓ Improved daily life functioning & general well being
- ✓ Significant associations between change mechanisms & functional outcomes
- ✓ Greater use of campus-based disability service accommodations
- ✓ Depression and anxiety symptoms stabilized
- ✓ Improvements persist 6 months after participation in ACCESS ends

Anastopoulos, A.D., Langberg, J.M., Eddy, L.D., Silvia, P.J., & Labban, J.D. (2021). A randomized controlled trial examining CBT for college students with ADHD. *Journal of Consulting and Clinical Psychology*, 89, 21-33.

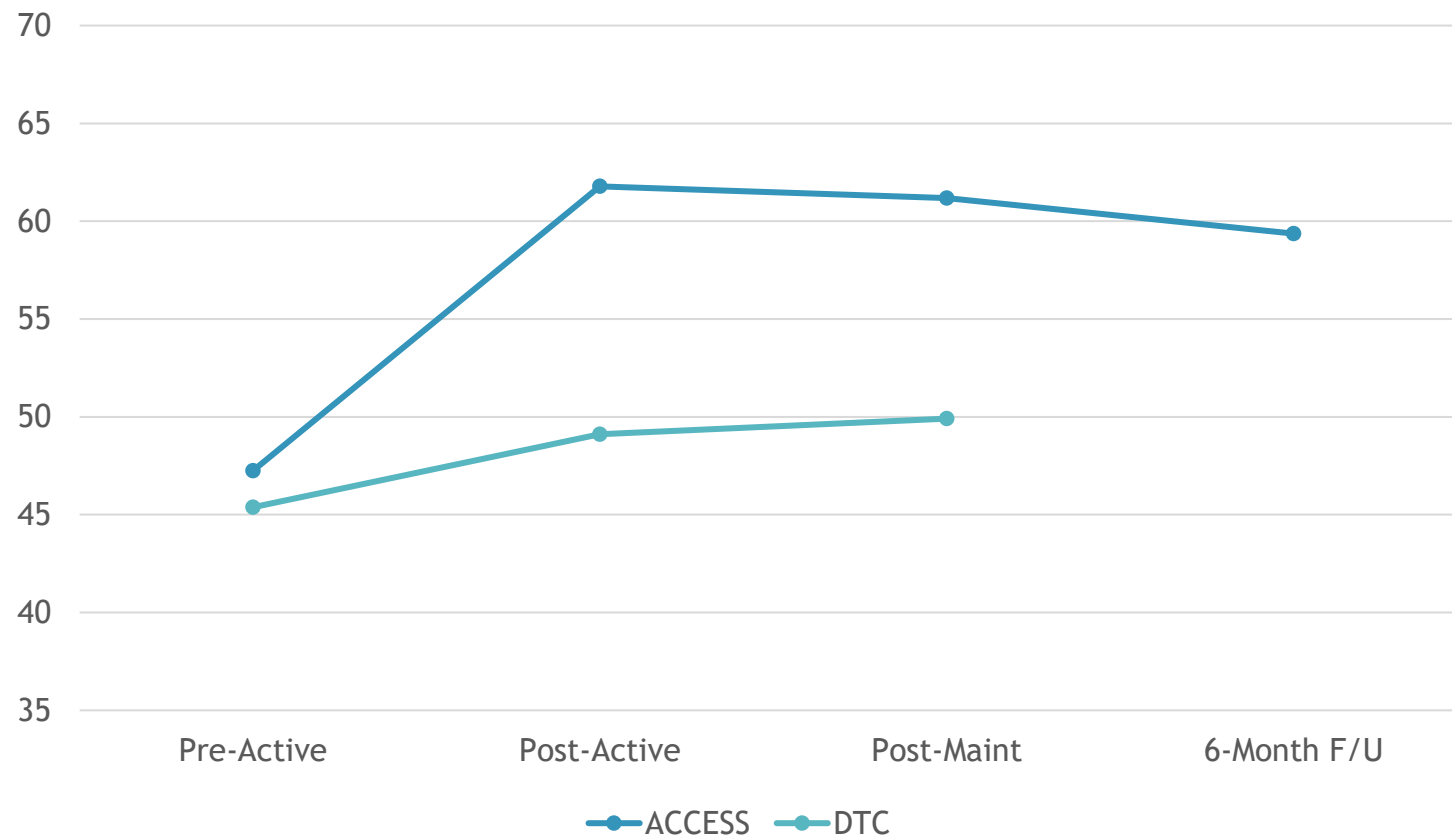
Eddy, L.D., Anastopoulos, A.D., Dvorsky, M.R., Silvia, P.J., Labban, J.D., & Langberg, J.M. (2021). An RCT of a CBT intervention for emerging adults with ADHD attending college: Functional outcomes. *Journal of Clinical Child and Adolescent Psychology*.
<https://doi.org/10.1080/15374416.2020.1867989>

Langberg, J.M., Dvorsky, M.R., Silvia, P., Labban, J. & Anastopoulos, A.D. (2022). Clinical change mechanisms in the treatment of college students with ADHD: Trajectories and associations with outcomes. *Behavior Therapy*; <https://doi.org/10.1016/j.beth.2022.11.003>

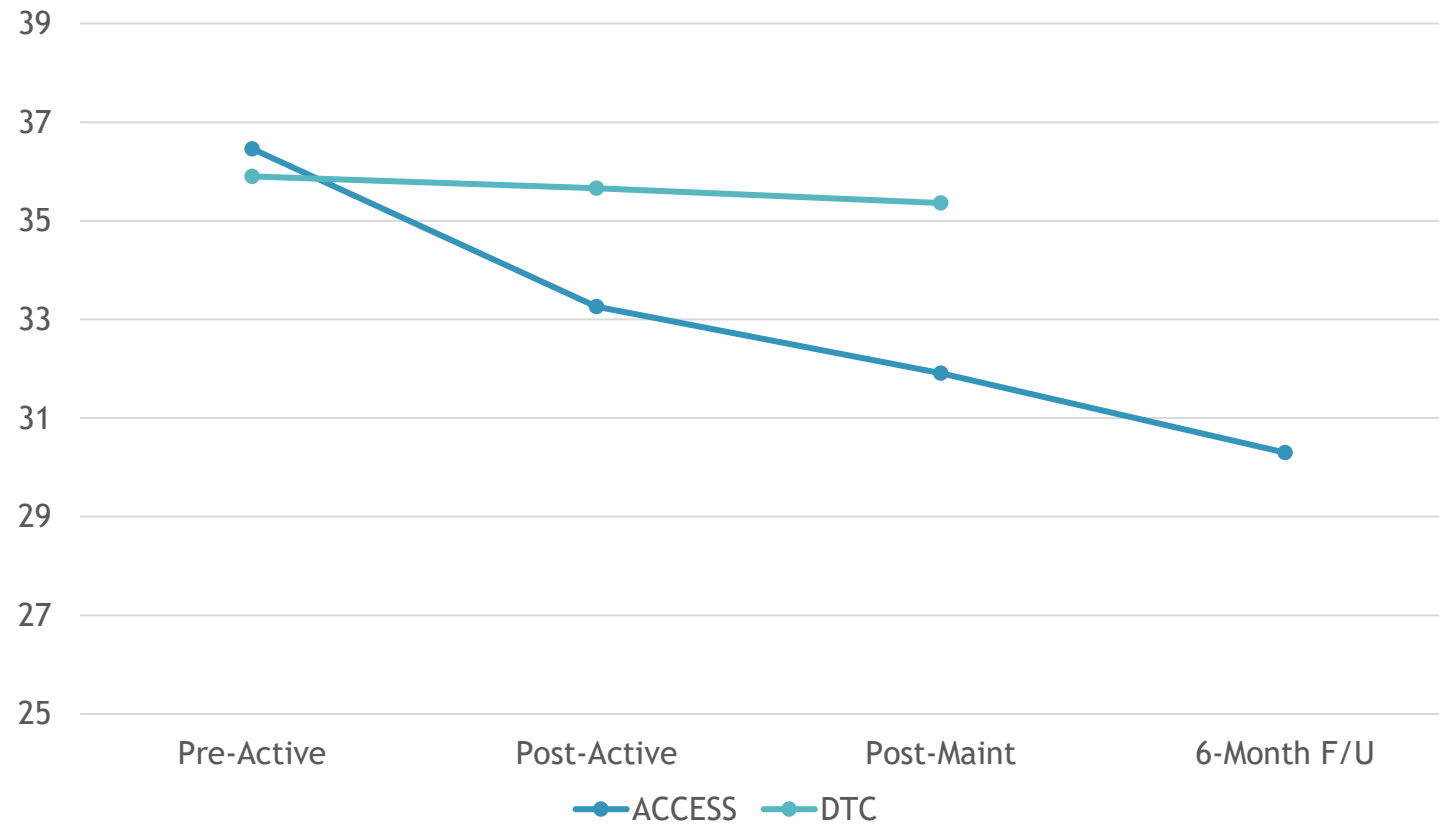
ADHD Knowledge



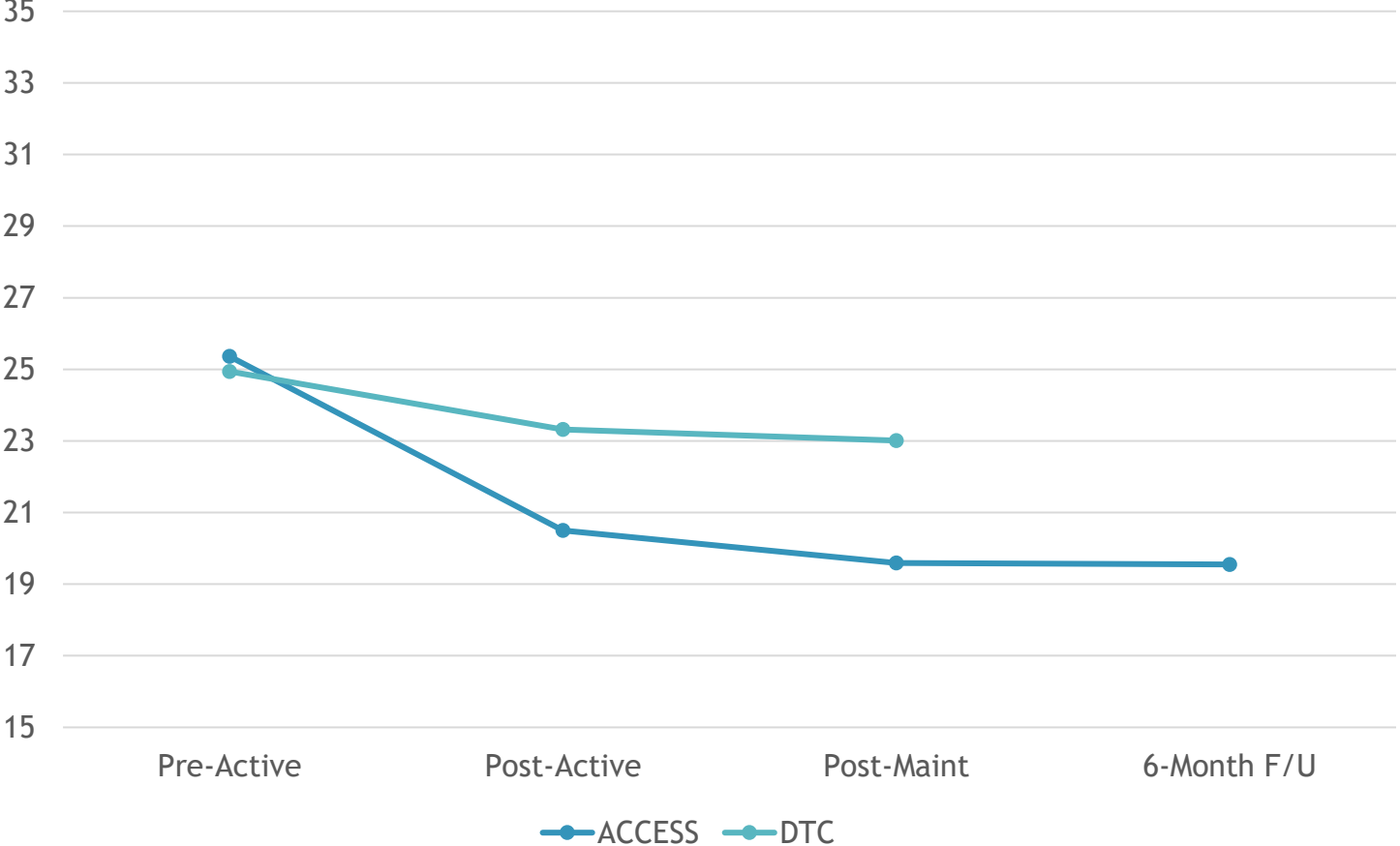
Behavioral Strategies



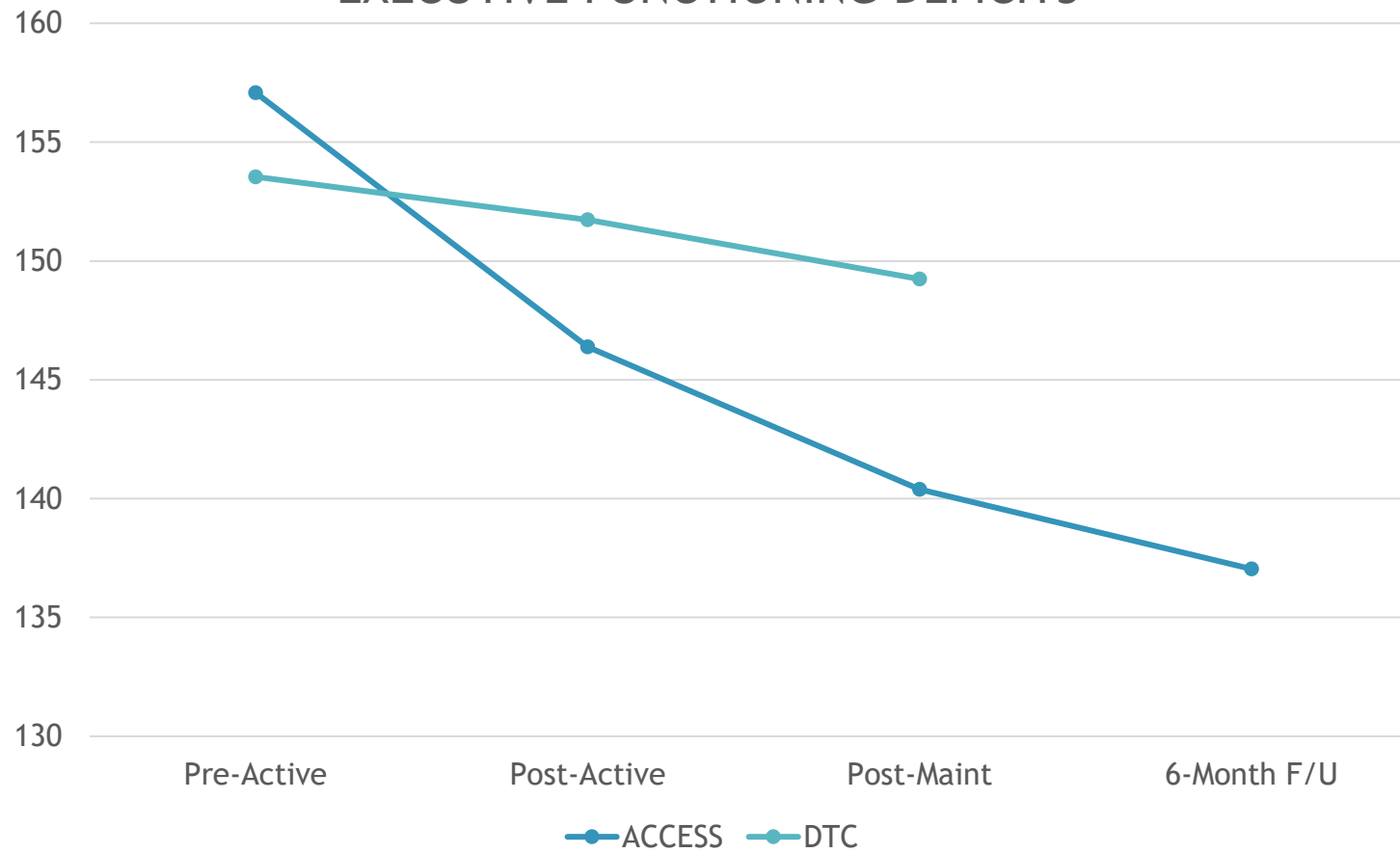
Maladaptive Thinking



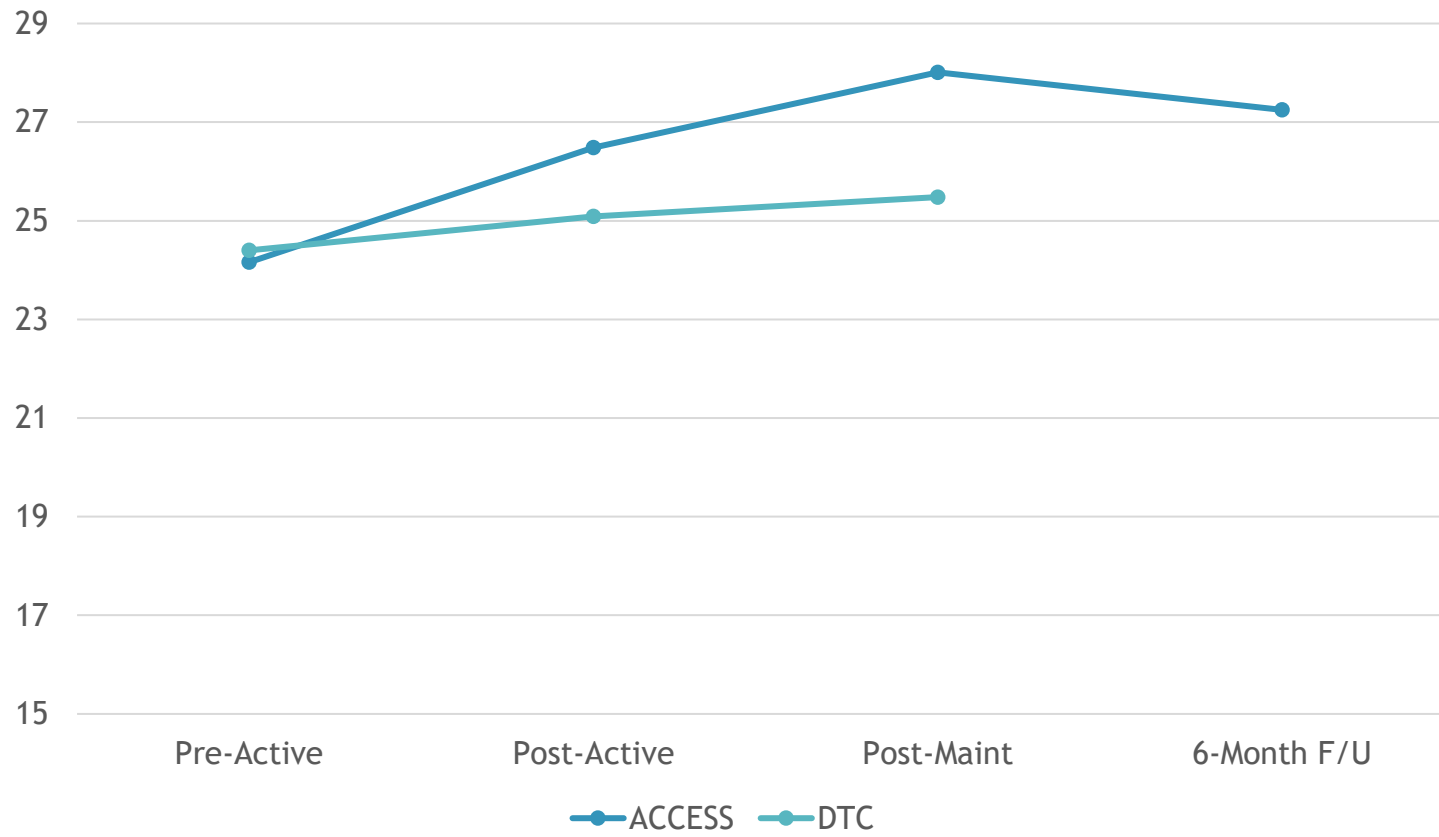
INATTENTION



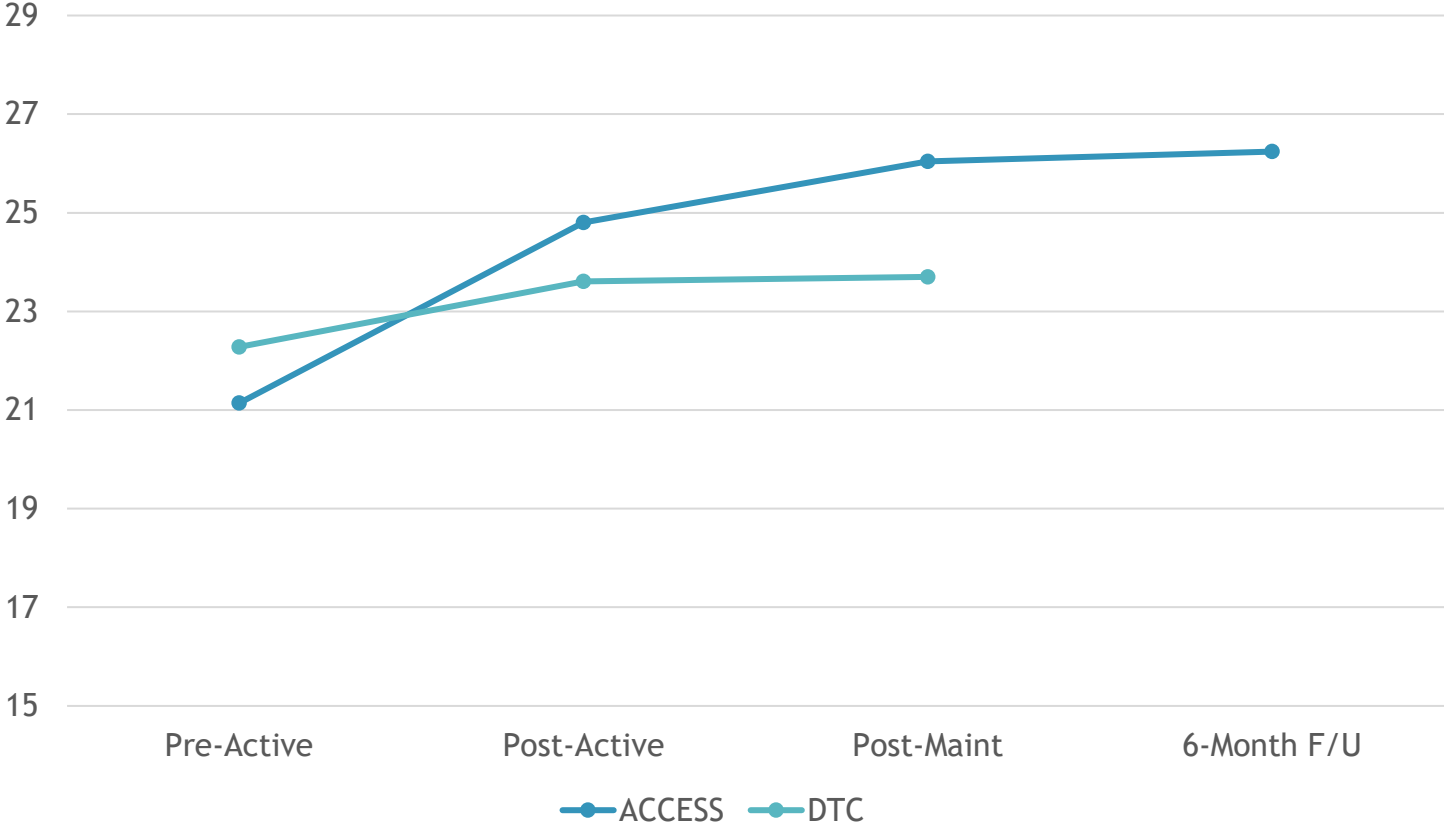
EXECUTIVE FUNCTIONING DEFICITS



MOTIVATION



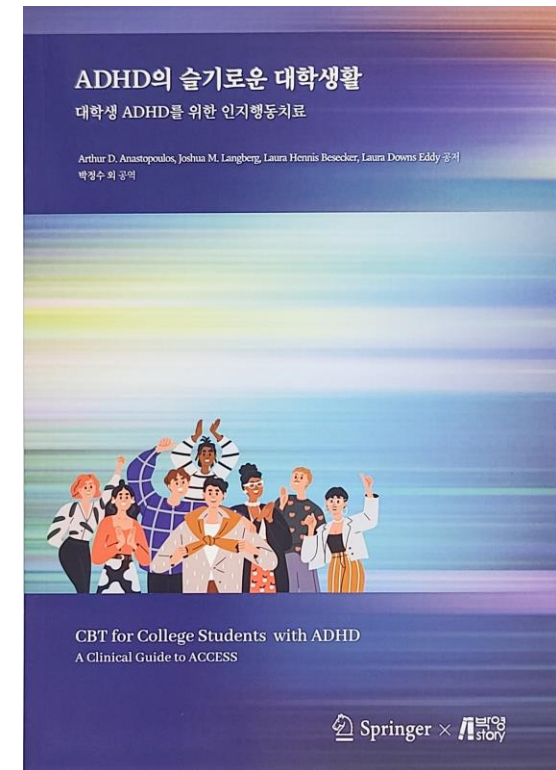
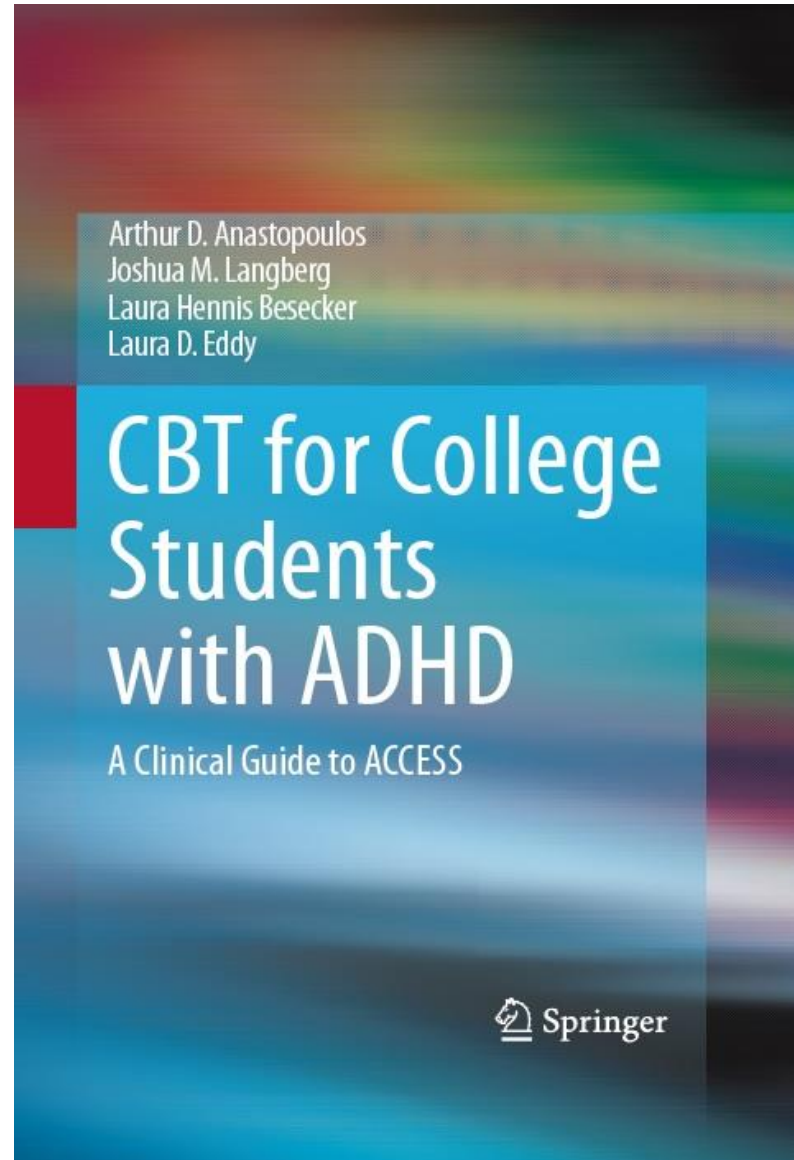
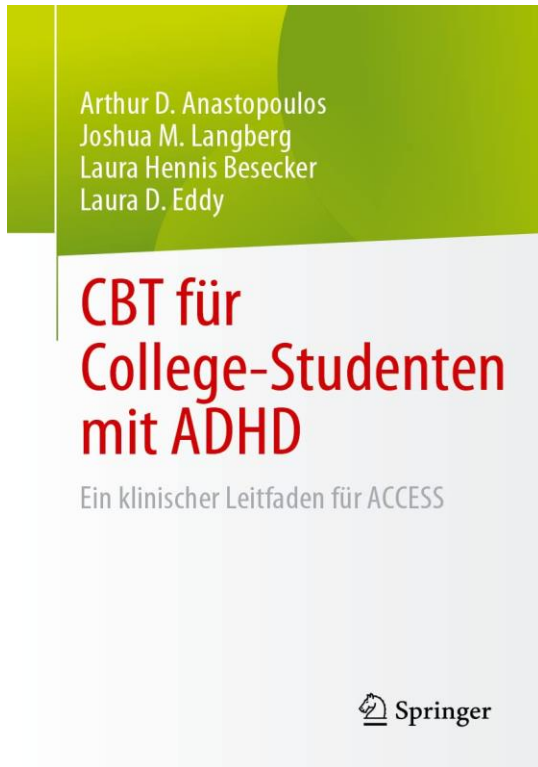
TEST STRATEGIES



Campus Resources & Treatment Services

	Pre-Active	Post-Active	Post-Maintenance	6-Month Follow-Up
	%	%	%	%
Disability Services				
Immediate	25.3%	67.3%***	60.9%**	66.7%
Delayed	22.1%	37.5%	38.0%	-
ADHD Medication				
Immediate	53.3%	68.9%	67.0%	80.4%
Delayed	41.7%	59.4%	71.9%	-
Other Medication				
Immediate	26.1%	24.0%	30.1%	33.0%
Delayed	29.1%	32.4%	37.6%	-
Psychosocial Tx.				
Immediate	33.7%	25.3%	34.5%	30.2%
Delayed	52.4%**	39.4%**	45.1%	-

Disseminating ACCESS



Sites Implementing ACCESS

Colleges & Universities

University of North Carolina at Greensboro
Rutgers University
Western Carolina University
Fayetteville State University
Elizabeth City State University

North Carolina State University (in progress)
University of North Carolina at Charlotte (in progress)
Ajou University in South Korea*

ADHD Coaching

Cindy Palmer (Founder of [Threshold Coaches](#) in Washington state) added a modified version of ACCESS to the many coaching services that she and her staff privately provide to students in several universities and community colleges throughout the state.

Classroom Instruction

Clarissa Marshall (certified ADHD coach; Assistant Director/Case Manager, Accessibility Resource Center, Guilford College) incorporated elements of ACCESS into a semester-long [course](#) that undergraduate students can take for academic credit.

Training Model for UNC System Schools

- Day 1 initial presentation focusing on impact of ADHD on college student functioning and overview of ACCESS Program
- Identification of campus support units and graduate student programs to be involved in delivering ACCESS
- Sharing relevant readings and other materials in preparation for Day 2 approximately one month later
- Intensive Day 2 training using weekly group and mentoring session outlines, PowerPoint slides, weekly handouts, group discussion, role plays, video presentations, etc.
- Additional consultation available after Day 2 training

Feedback from UNC System Students

Over 90% of the participants stated that they **would recommend ACCESS to other students** and that the program helped them:

- ✓ Better understand ADHD and how it impacts their life
- ✓ Learn strategies to help with organization, time management, and planning
- ✓ Become more aware of how thoughts can impact their emotions and behavior
- ✓ Learn strategies to better manage their attention span
- ✓ Learn strategies to help them become more successful academically
- ✓ Learn strategies to improve their emotional well-being
- ✓ Learn strategies to help them in daily life functioning

More than 70% of the students also reported that the ACCESS:

- ✓ helped them in their relationships with others
- ✓ increased their knowledge and awareness of resources/support services on campus

Comments from UNC System Students

“Thank you again for letting me be a part of the program. I learned so much about ADHD but most importantly about myself. I was struggling with so many aspects of ADHD and I didn’t even realize it. I know I have a long way to go in improving my emotional/behavioral side, but with the knowledge I’ve gained and implemented, I feel very confident in this new beginning.”

“I feel that all of the components were helpful, each area helped me develop a system to better my life with the ADHD diagnosis.”

“I really enjoyed being able to relate to others within the group. It helped me not feel so alone with the things that I was experiencing but also allowed to hear from others about suggestion on what helped them.”

“The handouts! I can keep using them for a long time.”

“Great instructors; so much great information that I am using on a daily basis to manage life. I am so very thankful for the opportunity to be a part of this. I went into it having no idea how my brain even functioned, I thought I was a lost cause when it came to being organized, resourceful and even a good human (the adaptive thinking helped with this).”

Future Directions

Next steps

- ❑ In discussions with several other 4-year postsecondary institutions

Future plans

- ❑ Online delivery to students from any 4-year postsecondary institution
- ❑ Delivering to students in community college settings
- ❑ Serving seniors in high school during summer before attending college

Distant future plans

- ❑ Modifying for use with general college student population

In Review

- ❖ ACCESS is designed specifically to accommodate the developmental needs of emerging adults with ADHD attending college
- ❖ ACCESS gives students with ADHD the knowledge and skills necessary to successfully manage new responsibilities that arise in college
- ❖ Open clinical trial and RCT results lend support to efficacy
- ❖ Feedback from students completing ACCESS extremely positive
- ❖ ACCESS is intended for use in combination with other support services and treatments to meet the multiple needs of college students with ADHD
- ❖ ACCESS can be tailored for use on many different college and university campuses and for use by off-campus professionals who privately provide services and support to college students with ADHD
- ❖ Participation in ACCESS increases the likelihood that college students with ADHD can be more successful not only during college but also during the developmental transition into the post-college adult world

For additional information about our
ACCESS-related programs and
services, please visit:

<https://empoweringstudents4success.com/>

Thank you very much
for attending today's presentation.