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Interpretative Phenomenological Analysis of Attention Deficit Hyperactivity Disorder in Adolescents

Ergenlerde Dikkat Eksikliği Hiperaktivite Bozukluğunun Açıklayıcı Fenomenolojik Analizi

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BSTRACT

Current research on attention deficit hyperactivity disorder (ADHD) is generally based on quantitative methodology. This indicates a lack of information on how ADHD individuals explain this phenomenon, and what they experience. The aim of this research is to reveal how attention deficit hyperactivity disorder is experienced in adolescents and how adolescents explain this phenomenon. The participants in this study were ten adolescents aged 11-18 who were diagnosed with ADHD and did not have a comorbid diagnosis. Participants were interviewed through a semi-structured interview form. The interviews were conducted and recorded on an online platform, and a transcript of the voice recording of each participant was then created. The texts obtained from the transcripts were analyzed with an interpretative phenomenological analysis. As a result of the analysis, the following themes were found: Academic difficulty, normalizing and affirming the diagnosis, living with undesirable emotions and behaviors, and negative social experiences. The findings reveal that the ADHD-related experiences of adolescents and their explanations for the ADHD diagnosis are not of a single nature. Instead, they were also perceived in a positive light as well as negative. The results reveal that the awareness of professionals and families who have contact with ADHD-diagnosed adolescents should be raised, and interventional and motivational programs directed at ADHD treatment-related negative experiences of adolescents can be organized. **Keywords:** Adolescents, attention deficit hyperactivity disorder, interpretative phenomenological analysis

Dikkat eksikliği hiperaktivite bozukluğu (DEHB) ile ilgili araştırmaların genellikle nicel metodolojiyle kurgulanmış araştırmalar olduğu görülmektedir. Bu durum DEHB tanılı bireylerin neler deneyimlediklerine ve ilgili fenomeni nasıl açıkladıklarına yönelik bilgi eksikliğine işaret etmektedir. Bu araştırmanın amacı ergenlerde dikkat eksikliği hiperaktivite bozukluğunun nasıl deneyimlendiğini, ergenlerin bu fenomenle ilgili açıklamalarının neler olduğunu ortaya çıkarmaktır. Araştırmaya 11-18 yaşlarında eş bir tanısı olmayan, DEHB tanısı almış 10 ergen katılmıştır. Katılımcılarla yarı yapılandırılmış mülakat formu aracılığıyla görüşülmüştür. Mülakatlar, görüşmelerin yürütüldüğü online platform üzerinden kayıt altına alınmış ve her bir katılımcıya ait ses kaydının yazı dökümü oluşturulmuştur. Yazı dökümlerinden elde edilen metinler Açıklayıcı Fenomenolojik Analiz yöntemiyle analiz edilmiştir. Yapılan analiz sonucunda akademik zorluk, tanıyı normalleştirme ve olumlama, arzu edilmeyen duygular ve davranışlarla yaşama ve olumsuz sosyal yaşantılar temaları bulgulanmıştır. Bulgular DEHB tanılı ergenlerin DEHB ile ilişkili deneyimlerinin ve DEHB tanısına yönelik açıklamalarının sadece bir nitelikte olmayıp karmaşıklaştığını hem olumlu hem olumsuz nitelikte olduğunu göstermektedir. Sonuçlar DEHB tanılı ergenlerle teması olan meslek profesyonellerinin ve ailelerin farkındalıklarının artırılması gerektiğini, tedavi sürecinde ergenlerin DEHB ile ilgili olumsuz deneyimlerine yönelik müdahaleler oluşturulabileceğini ayrıca bu müdahale programlarına ek olarak deneyimlenen duruma özgü, bireylerin ihtiyaçlarına uygun biçimde motivasyonel programlar düzenlenebileceğini ortaya koymaktadır.

Introduction

Attention deficit hyperactivity disorder (ADHD) is a heterogeneous and multifactorial neurodevelopmental disorder (Martinez-Badia and Martinez-Raga 2015). It is characterized by developmentally inappropriate and impairing inattention, motor hyperactivity, and impulsivity; With difficulties beginning in childhood and generally continuing into adulthood (Thapar and Cooper 2016). ADHD is the most common

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neurodevelopmental and psychiatric disorder prevalent in childhood (Akutagava-Martins et al. 2015, Leung 2016).

In a study examining 545 children who visited the emergency department, 251 of them presented with injures, and 294 had other complaints. Among the children presenting with injuries, behaviors suggestive of ADHD were found in 22 (%9), while in children with other complaints, 30 (%10) showed behaviors suggestive of ADHD. Indeed, research conducted with children diagnosed with ADHD indicates that they are at a high risk of serious injuries due to increased hyperactivity and decreased attention (Conversano et al. 2020). In a qualitative study conducted in Australia, 8 participants were interviewed through semi-structured interviews to explore their perception of ADHD and its diagnosis, as well as their attitudes towards stimulant medication. Parents attributed positive meaning to ADHD in their children due to their high energy levels and cognitive abilities despite difficulties in school and academics. Additionally, they mentioned that labeling ADHD as a neurobiological disorder provided them with relief (Ghosh et al. 2016). Another study aimed at revealing the perceptions and school experiences of adolescents diagnosed with ADHD. Participants who attended this study spoke positively about the beneficial effects of medication usage, and they also described the difficulties they faced in school and social life when not using medication (Kendall 2016). Motivation processes related to ADHD were investigated in yet another qualitative study involving adolescents. Participants were asked about how they get motivated in their daily lives. Some participants mentioned that physical arousal gave them pleasure, and that they perceived exciting activities as rewards, which increased their energy levels accordingly (Morsink et al. 2017).

In the context of Turkish literature, an analysis reveals that extant investigations concerning Attention Deficit Hyperactivity Disorder (ADHD) predominantly assume the form of compilatory inquiries grounded in a quantitative methodological framework, primarily delving into the ramifications of a specific phenomenon upon individuals (İmren et al., 2013; Ay and Kılıç, 2019). Upon an extensive survey of both international and Turkish academic literature, it becomes evident that qualitative methodological approaches in ADHD research are notably less prevalent in comparison to their quantitative counterparts (Lee et al. 2014, Şimşek and Karataş 2019). Furthermore, the corpus of phenomenological studies remains conspicuously restricted. This dearth of phenomenological investigations underscores a deficiency in our understanding of how individuals afflicted with ADHD conceptualize this disorder, elucidate their subjective experiences, and articulate these encounters.

The analysis of data obtained in phenomenology research is aimed at revealing experiences and meanings. During the analysis, there is an effort to conceptualize the data and to reveal the themes that can explain the related phenomenon. Findings are presented in a descriptive manner and often include direct quotations, then the results obtained from these themes and patterns are explained and discussed (Yıldırım and Şimşek 2018). In this context, this phenomenological research does not have any hypotheses to be tested like in quantitative research. The aim of this study is to reveal how attention deficit hyperactivity disorder is experienced in adolescents and how adolescents explain this phenomenon.

This research is posited to offer valuable insights into comprehending the experiences of adolescents grappling with Attention Deficit Hyperactivity Disorder (ADHD) and promoting heightened awareness thereof. Adolescents diagnosed with ADHD encounter a plethora of challenges spanning diverse life domains. These challenges encompass academic hurdles, encompassing a diminished capacity for sustained focus, inattentiveness in educational settings, reading and learning impediments, dwindling motivation, and the consequent erosion of scholastic performance. This situation underscores the imperative of instituting tailored support initiatives for adolescents diagnosed with ADHD, and the augmentation of awareness among parents and educators in this domain. Informed by these experiential accounts and elucidations, it becomes evident that support programs may be orchestrated to benefit both adolescents and parents embroiled in the therapeutic process. The findings of the research can be beneficial in increasing insights into the experiences of adolescents diagnosed with ADHD in school, family and other social environments. Additionally, the findings can contribute to the assessment and treatment processes of clinicians working in the field.

Method

This study is phenomenology research designed in a qualitative research design. Qualitative research not only contributes to the literature but also makes the voices of underrepresented groups heard, and investigates the deeper meanings behind a central experience (Creswell 2020). Phenomenological research focuses on phenomena that are already known but do not have an in-depth and detailed understanding of. In this research design, definite and generalizable results are not found. Instead, examples, explanations and experiences that will provide a better understanding of a phenomenon are put forward. In this regard, it can make valuable

contributions to both the literature and the field of practice (Yıldırım and Şimşek 2018). According to the report dated 10/6/2021, this research was found ethically appropriate by the Ethics Committee of Işık University, Institute of Social Science, Clinical Psychology Graduate Program. An informed consent form was prepared for the parents of each participant in the study and their consent was taken.

Participants

Interpretative Phenomenological Analysis (IPA) studies are conducted with small sample groups. A detailed case-by-case analysis of individual transcripts takes a long time, and the aim of such a study is to speak in detail about the understandings and perceptions of the selected group rather than making general claims prematurely (Smith and Osborn 2003). In phenomenology studies, the sample size can vary between 2 and 25 (Alase 2017). In addition, since long interviews are conducted in such studies, the number of individuals to be included in the sample should be limited and this number should not exceed 10 (Yıldırım and Şimşek 2018). Therefore, the sample of this study consisted of 10 adolescents aged 11-18, who were, after being evaluated by a child psychiatrist, diagnosed with attention deficit hyperactivity disorder in the past according to the DSM criteria. Individuals with another psychiatric or neurological diagnosis comorbid with ADHD were not included in this study. The demographic information of the participants is shown in Table 1.

Table 1. Demographic characteristics of the participants					
	Sex	Age (avg.)	Education	Age of diagnosis	
Participant 1	M	12	Middle School	-	
Participant 2	M	16.5	High School	<6	
Participant 3	M	13	Middle School	-	
Participant 4	M	13	Middle School	<8	
Participant 5	M	14	High School	<8	
Participant 6	F	12.4	Middle School	<12	
Participant 7	M	14.5	High School	<10	
Participant 8	M	17.8	High School	<8	
Participant 9	M	17.2	High School	<15	
Participant 10	M	17.9	High School	<12	
N= 10		14.8			

Data Collection Tools

A semi-structured interview form created by the authors was used to address the research questions. Information was obtained from all participants through the forms below.

Demographic Information Form

Participants were asked about their age, sex, grade, how old they were when they were diagnosed with ADHD, and whether they had any additional diagnoses other than ADHD.

Semi-Structured Interview Form

Within this structured format, respondents were prompted to elucidate the temporal context of their ADHD diagnosis, their personal conceptualization of this diagnostic event, their cognitive and emotional responses during the assessment procedure, the ensuing repercussions of this diagnosis on their life trajectories, their coping mechanisms when confronted with challenges, and the sentiments they wish to convey to the professionals responsible for their diagnostic process.

Voice Recorder

The interviews were held and recorded on the Zoom platform. Firstly, informed consent was taken from the adolescents' guardians via a signed form. Then, before beginning the interviews, informed consent of the adolescents regarding the voice recording was taken verbally. After the audio recording was completed, transcripts of all the dialogues in the interviews were then written.

Statistical Analysis

According to Biggerstaff and Thompson, the analysis method adopted in phenomenological research consists of several repeating cyclical stages. After the first encounter with the text, the initial themes are determined.

Themes are then grouped together and made into a summary table (Biggerstaff and Thompsom 2008). Qualitative data analysis is inevitably a subjective process and the analysis itself is at every stage the explanatory work of the researcher (Smith and Osborn 2003). In a descriptive phenomenological analysis study conducted with individuals with chronic back pain, the analysis began with an explanatory reading in which the initial responses of the participants were explained in the side margin of the page. These initial notes were then turned into new themes at a higher level of abstraction and recorded on the opposing side of the paper. In order to establish a connection between the themes, an examination was made, and superordinate themes were created for the first case where these sub-themes were intertwined with the descriptive information. This process was then repeated for each individual case. After analysing every case, the main themes table was created. The themes were reviewed to ensure that the transcripts were well represented, and the superordinate themes table was supported with quotations from each participant (Smith and Osborn 2007).

For explanatory phenomenological analysis, first, the excerpt is read carefully several times. At this stage, quotations are started to be coded and meaning units are scanned for in the text. Noteworthy points, connections and contradictions in the text are searched for and notes are taken. Possible explanatory or thematic topics that may arise are determined. The researcher explains the conflicts and contradictions in the text. Initial codes written for each participant are listed and links between them are searched. The created categories are attempted to be verified constantly by reviewing the data. High-level and low-level titles that will emerge from category lists and data are started to be established. This cycle is repeated for all other interviews, and the emerging topics are compared with each other. This process continues until the themes encompassing all the available data are revealed (Arkonaç 2021). Herein, in this study, these analysis steps were followed.

Validity of the research

The prerequisite for being scientific in quantitative methodology research, which developed from the positivist tradition, is to completely ensure validity and reliability. The research can be considered scientific only if the data of the research is obtained independently from the possible effects of the researcher and if it is possible to reach the same results when the study is repeated by someone else. In other words, the criteria of being scientific in quantitative methodology research are reliability and repeatability (Yıldırım and Şimşek 2018).

However, the criteria that are given importance in qualitative methodology research are validity and credibility. There is no purpose to have repeatability. The events and phenomena are determined by the participants involved. In the qualitative paradigm, the researcher must exhibit an unbiased attitude to understand the reality. The researcher's role can be to become a data collection tool, but he or she should separate his or her views from individual perceptions and propositions. In addition to these, the proximity of the researcher to the data source, the researcher's exposure to the facts related to the field, and the collection of data with methods and processes suitable for the structure of the data are the qualities that increase the validity of the qualitative methodology. In summary, taking the necessary measures to reach the right data, and presenting the process in a clear way that allows other researchers to review the findings are important criteria that should be met in qualitative research (Yıldırım and Şimşek 2018).

One of the strategies used in qualitative research to ensure validity is peer review. Peer review provides the researcher the opportunity to maintain an honest attitude, receive suggestions about methodological steps and emerging themes, receive supervision, and get rid of the researcher's own biases (Guba and Lincoln 1985). In this context, the methodological use of open-ended interview questions, adopting an attitude that allows the participants to make their own explanations, and conducting the interviews in a comfortable environment that does not remind the participants of the professional identity of the researcher were preferred. These qualities allow the participants to reveal their experiences and increase the validity of this research.

In addition, the data obtained as a result of the analysis and the themes were subjected to peer review and restructured as described by Guba and Lincoln (1985). Moreover, during the analysis process in which the themes were created, the degree of how the themes represent the nature of the codes and the experiences, and the relationship with the relevant quotations and their explanatory role were examined and re-reported by a doctor of clinical psychology as an expert review. These steps are among the factors that further increase the validity of this research.

Results

As a result of the analysis, 4 main themes were found. These themes are: Academic difficulty, normalizing and affirming the diagnosis, living with undesirable emotions and behaviours, and negative social experiences.

The codes that form the academic difficulty theme and the frequencies of these codes encountered in the explanations of the participants, in other words, how many different participants use these codes in their explanations are shown in Table 2.

The codes that form the normalizing and affirming the diagnosis theme and the frequencies of these codes in the explanations of the participants are shown in Table 3.

Table 2. Codes that form the academic difficulty theme and their frequencies				
Codes	Frequency			
Inability to focus- Inability to focus in class	8			
Delay in literacy - difficulty reading	4			
Decline in quantitative success	2			
Low motivation	1			
Learning delay	1			
Impact on school life	1			

Table 3. Codes that form the normalizing and affirming the diagnosis theme and their frequencies			
Codes	Frequency		
Normalizing the diagnosis	3		
Affirming the diagnosis	1		
Advantages of the diagnosis	1		
Increased motivation	1		
Denying the negative effects	1		

The codes forming the living with undesirable emotions and behaviours theme and the frequency of these codes in the explanations of the participants are shown in Table 4.

Table 4. The codes that form the living with undesirable emotions and behaviours theme and their frequencies				
Codes	Frequency			
Hyperactivity	5			
Anger	2			
Sadness	3			
Impulsivity	2			
Abnormal perception	2			
Inability to cope	2			
Avoiding to explain	3			
Desire to be mean	1			
Forgetfulness	1			
Medication use	2			

The codes that form the negative social experiences theme and the frequency of these codes in the explanations of the participants are shown in Table 5.

Table 5. Codes that form the negative social experiences theme and their frequencies			
Codes	Frequency		
Exclusion	1		
Disruptive social relationships	3		
Lack of social interaction - inability to make friends	2		

In addition to these, the analysis examples, the quotations that best represent the relevant theme and the interview questions, and the codes and the encompassing themes are briefly presented in Table 6.

Table 6. Semi-structured interview questions, quotes, codes, and themes						
Interview questions	Quotes	Codes	Themes			
1. How long ago were you diagnosed with ADHD?	"Around 6th grade it existed before. Let me put it this way. There was					
Can you tell us about an	already such a thing before. I mean, I					
ordinary day before you	was guessing, but I think I got the					
received this diagnosis?	diagnosis in like 5th or 6th grade.					
_	That's what they told me. As in, that I					
	have attention deficit hyperactivity					
	disorder. Then I started using					
	medication for a while."					
2. What does ADHD mean to	"I can't fully focus in class. But I can	Inability to focus	Academic difficulty			
you?	focus a bit. But I can't focus fully. I'm					
How do you define being diagnosed with ADHD?	out of touch with the lectures. I can't be involved. I'm constantly thinking					
diagnosed with ADHD!	about irrelevant things in class."	Hyperactivity	Living with undesirable			
	about irrelevant things in class.	Tryperactivity	behaviors and emotions			
	"Umm, I mean so bad for me. I can't					
	listen to lectures, I can't study, I can't					
	sit still. Computer games are my					
	favorite; same as everyone else. I can't					
	even sit still in front of them"					
3. How did this situation affect	"So, I used to have a teacher at school.	Exclusion	Negative social experiences			
your life?	He was literally always excluding me.					
What do you think about the	That's why I decided to be a little					
symptoms, how do you feel	mean. I'll get well soon. Also, I have					
about them?	this medication. Also, we bought these books."					
4. Does being diagnosed with	"Being diagnosed; no. On the contrary,	Affirming the	Normalizing and affirming			
ADHD make life difficult for	it is something that makes it easier.	diagnosis	the diagnosis			
you?	Like, if I had not received this	ulagilosis	the diagnosis			
If yes, how do you deal with it?	diagnosis, my life would have been					
,, ,	vastly different. Like, it was like a					
	turning point in my life for me."					
	"C					
	"Getting the diagnosisrather getting better, like getting a little more					
	normal. It's as if I'm living a quieter,					
	more peaceful life, like fighting with					
	knives, so it's more peaceful, as if it's					
	normal. Nothing bad happens to me					
	and I can concentrate. I mean, it					
	changed my life dramatically, I felt like					
	I started my life all over again."					
5. How does ADHD affect your	"I mean, it affects a lot. I think about	Impulsivity	Living with undesirable			
relationship with others?	how it was, I mean how I was before I		behaviors and emotions			
	started my medication, that was					
	ruder, something that spoke whatever					
	came to my mind. Right now though, I seem to be trying not to offend people.					
	So like that."					
6. What would you like to say	"I think umm can be a little more					
to the experts who carry out	descriptive when explaining it to					
the diagnosis process?	patients, especially young children.					
	They can make them aware of things a					
	little more. Because I was young at the					
	time too, and I was only told that I					
	have attention deficit. But I didn't					
	know what it was. I haven't researched					
	too much about what it was either.					
	Maybe they could be a little more					
	descriptive. Especially for young children. To the younger ones."					
	children. 10 the younger ones.					

Discussion

In a phenomenological study consisting of 13 adolescents with ADHD aged 14-19 conducted by Frondelius et al., the following themes were found: Struggling with vulnerability, responding to a label, and manoeuvring social life (Frondelius et al. 2019). Participants defined ADHD-related experiences as features they both hated and liked, and reported that impulsivity and high levels of energy especially caused hinderance in school life, but helped with better endurance in some activities such as sports. When the superordinate themes are considered, the findings of this study are similar. Most of the participants stated that they suffered from hyperactivity, experienced inability to sit still etc., and they reported that it provided an advantage in activities involving mobility and sports.

Another theme in Frondelius et al.'s (2019) study is responding to a label. The codes that form this theme is being happy to find answers and something definable. Here, participants shared their experiences regarding finding a reason to be different and having a name for their hardships. Having a name for their hardships meant some things are structured and comprehensible rather than feeling a vague disappointment. When the findings of this study are examined, it is seen that some adolescents reject the negative effects of ADHD and state that being diagnosed creates relief and makes their lives easier. One participant described being diagnosed as a turning point in their life. In this context, the findings of this study are consistent with the findings of the aforementioned study in terms of the positive and relaxing effects of the diagnosis. Considering the normalizing and affirming the diagnosis theme found in the study and its similarity with the findings of the above-mentioned study, the positive effect of the diagnosis on adolescents may be caused by the fact that the diagnosis provides a source for their problem and lets adolescents make sense of the process as opposed to thinking that the difficulties caused by ADHD in many areas of their lives are an individual problem or a mental disorder. Considering the explanations on the normalizing and affirming the diagnosis theme, it is seen that some of the participants mentioned the convenience that the diagnosis created in their lives. For example, while describing what they experienced during the ADHD evaluation process, one of the participants reported that a psychologist explained to him thoroughly what kind of problem ADHD is and what can be done about it, and this made him feel very relieved. Another participant described the diagnosis as being aware of the disorder, and that even if there was no diagnosis, the situation would occur; but thanks to the diagnosis, he knows what it is. As mentioned above, one participant stated that the experts should be a little more descriptive to people involved in the diagnosis process, especially to young children as they should be better informed by experts with more explanations.

Similarly, in another study conducted with university students diagnosed with ADHD, an interpretative phenomenological analysis method was used and it was found that students' experiences related to the diagnosis had been both positive and negative. In the study, some of the students reported that they tended to see the benefits of the diagnosis and they even had wanted to get diagnosed earlier than they were. Some students, on the other hand, emphasized the feelings of stigma and shame caused by the diagnosis, and conveyed their negative experiences. In this context, although getting a diagnosis is seen as a relief by these students, it was simultaneously considered a negative process due to experiences such as stigmatization (Lefler et al. 2016). In this study, it is seen that adolescents consider ADHD as a negative ongoing situation with experiences of undesired emotions and behaviours, being exposed to negative social experiences, and having academic difficulties; while simultaneously sharing their positive experiences, and talking about the comfort and advantages of the diagnosis.

In another qualitative methodology study which aimed to elicit the 'voice' of young people with ADHD and their experiences at school, when the participants were talking about the positive effects of taking medication, they reported that not only their focus in the class increased, but it also helped combat their problems with time management, as well as coping with anger problems (Kendall 2016). In this study, in addition to the positive effects of medication use mentioned above, it was found that it also helped overcome negative experiences related to both anger and impulsivity as mentioned by one of the adolescents. The participant associated the diagnosis with the use of medication and emphasized that his life had improved, and he was no longer liable to fights and risky behaviours.

In another phenomenological research (Lee et al. 2014) aimed at exploring the experience of 6 young athletes diagnosed with ADHD, with an average of 22.7, it was observed that participant shared both positive and negative experiences. For instance, all participants reported that their attention drifted towards irrelevant stimuli in their surroundings, leading them to be unable to follow instructions and make mistakes, resulting in criticism from coaches and teammates. However, despite experiencing various challenges in social interactions,

the participants mentioned the positive aspects of their involvement. Particularly, they found benefits in forming friendship with teammates due to shared interest and goals, even though they faced many difficulties. In summary, the study revealed a mixture of positive and negative experiences among young athletes with ADHD, shedding light on the challenges they face in their sports activities and social interactions while also highlighting the positive aspects they gain through teammate.

According to Lee et al. (2014), some adolescents diagnosed with ADHD have mentioned that stimulant medications are an effective option, in addition to individual coping strategies, for managing their condition. However, in this study, medication use was reported as a negative experience by some participants, while others shared it as a positive experience especially due to the effects of improved focus during classes. In this context, the findings of the mentioned study are consistent.

It is seen that the current research based on qualitative methodology on ADHD in Turkey is carried out with participants such as teachers and parents (Cesur and Akyol 2019, Şimşek and Karataş 2019). In a study that included the opinions of teachers about the socio-emotional problems experienced by gifted children with ADHD, it was reported that children had problems such as lack of self-confidence, negative perception of their environment and lack of communication. Moreso, when we look at the opinions of the teachers, the general characteristics of children with ADHD are defined as hyperactivity, inattention, excessive talking, inability to focus, impatience, anger, shyness, apathy, forgetfulness, inability to complete various activities, anxiety, and various psychological disorders. Considering the themes of academic difficulty and living with undesirable emotions and behaviours in this study, along with the codes that form them (inability to focus, hyperactivity, impulsivity, anger, forgetfulness, low motivation, and impact on school life), it is seen that there is an overlap between the opinions of the teachers and the statements of the adolescents in this study. In addition, according to the findings of the study, the teachers also included the views of the parents, and stated that many of the gifted children with ADHD had communication problems (Şimşek and Karataş 2019). When the findings of this study are examined, it can be argued that some participants have difficulties making friends considering the negative social experiences theme. Some of the participants thought that their friends would not want to talk to them because the participants are easily distracted, and they said that they would fail to meet the criteria for making friends by disrupting the manner of communication because they spoke too fast, and they were worried about explaining their diagnosis to their friends. All these are consistent with the findings of the aforementioned study.

In phenomenological research, there is no attempt to generalize in accordance with the structure of qualitative methodology. The aim is to present explanations and experiences that will contribute to a better understanding and explanation of a phenomenon, and based on this, to provide data both for the literature and for practical applications (Yıldırım and Şimşek 2018). The lack of long-term clinical study experience of the corresponding author to the ADHD phenomenon can be considered as a limitation of the research. In addition, the fact that some of the adolescents participating in the research do not give detailed answers or any answers to some questions could also be considered as another code or a superordinate theme. Moreover, given that the participants were diagnosed at an early age, their statements may be inaccurate.

Conclusion

The findings underscore the imperative of augmenting awareness among professionals and families who engage with adolescents diagnosed with ADHD. Moreover, they suggest the potential development of targeted intervention programs aimed at alleviating the adverse experiences of adolescents undergoing ADHD treatment. Beyond these general interventions, tailored motivational strategies, finely attuned to the specific circumstances of the individual, may be devised to further enhance their experience. Furthermore, it is recommended that future phenomenological and qualitative methodological investigations in the realm of ADHD should focus on the evolving perceptions surrounding ADHD diagnoses and the related experiences of children and adolescents over time. Such research should also explore the differing attitudes of parents, educators, and other individuals engaged in social interactions with these individuals.

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