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Serving Students with ADHD in Spanish Universities: Actions and Good Practices

Atención a estudiantes con TDAH en universidades españolas: actuaciones y buenas prácticas

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Abstract

Attention Deficit Hyperactivity Disorder (ADHD) has an impact on the academic and quality of life of university students with this diagnosis. The aim of this study was to describe the actions aimed at individualised attention for students with ADHD in Spanish universities and to identify good practices. To do so, a survey-based methodology was used, by administering a questionnaire to the heads of support services for students with disabilities in 36 Spanish universities (23 public and 13 private). The results identify that the registration of students with ADHD in these services is increasingly common. The most commonly used measures to assist these students are adaptations of written tests, distraction-free placements and planning strategies. These measures are more frequently used in the first years. No differences were found between public and private universities with respect to attention measures. The results of this study allow us to conclude that the commitment of universities to students with ADHD has increased with the incorporation of specific actions. However, there are shortcomings that need to be addressed by university inclusion policies, which include specific training for teaching staff, greater funding for these services with specialised staff and raising awareness of

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ADHD in the university community.

Keywords: ADHD; university; services; counselling.

Resumen

El Trastorno por Déficit de Atención e Hiperactividad (TDAH) tiene un impacto académico y en la calidad de vida del estudiantado universitario con este diagnóstico. El objetivo de este estudio fue describir las actuaciones dirigidas a la atención individualizada de estudiantes con TDAH en las universidades españolas e identificar buenas prácticas. Para ello, se ha utilizado una metodología basada en la encuesta, por medio de la administración de un cuestionario a los responsables de los servicios de apoyo a estudiantes con discapacidad de 36 universidades españolas (23 públicas y 13 privadas). Los resultados identifican que el registro de estudiantes con TDAH en estos servicios es cada vez más habitual. Las medidas más utilizadas para atender a este alumnado son las adaptaciones de las pruebas escritas, ubicaciones libres de distracciones y estrategias de planificación. Estas medidas se dan con más frecuencia en los primeros cursos. No se encontraron diferencias entre universidades públicas y privadas respecto a las medidas de atención. Los resultados de este estudio permiten concluir que el compromiso de las universidades con el alumnado con TDAH se ha incrementado con la incorporación de actuaciones concretas. No obstante, se observan carencias a las que deben responder las políticas de inclusión universitarias que pasan por una formación específica del profesorado, una mayor financiación de estos servicios con personal especializado y sensibilización sobre el TDAH a la comunidad universitaria.

Palabras clave: TDAH; universidad; servicios; orientación.

Introduction and objectives

At the university level, attention to diversity implies the responsibility to offer equal learning opportunities for all, especially for the most disadvantaged groups, including students with disabilities (Ahmed, 2007; Porto, 2022).

In Spanish universities, the University Student Statute, approved by Royal Decree 1791/2010 on 30 December, recognises the rights of people with disabilities and strengthens the principles of equal opportunities and non-discrimination in all aspects of university life. Specifically, it encourages the creation of services for the university community with disabilities (article 65.6), and highlights the importance of adapting tutorial programmes and activities to the needs of students with disabilities (article 22).

In practice, Spanish universities have created or promoted the already existing services for students with disabilities, have made these services visible in the universities' inclusion plans, and have developed programmes and guides to contribute to the training of teaching staff and tutorial action with students with disabilities (Fundación Universia, 2021, 2023; García-Cano et al., 2017; Porto, 2022; Suárez-Lantarón and Castillo, 2020; Vieira and Ferreira, 2011). In general, Spanish universities have made progress in improving accessibility for students with disabilities to both places (classrooms, libraries, sports facilities) and digital

resources (web, virtual classrooms, etc.). However, their capacity to individualise in the teaching-learning process has been lower (Fundación Universia, 2023; Núñez, 2017).

Moreover, attention to students with disabilities is included as a key element in the evaluation of university education, both in the design of degrees and in their accreditation (Royal Decree 822/2021 of 28 September, which establishes the organisation of university education and the procedure for quality assurance, 2021). With regard to their evaluation, Ferreira et al. (2014) propose a system of 40 indicators on the obligations of universities towards students with disabilities, grouped into eight areas: institutional framework, access, participation, information and guidance, adaptations, accessibility, resources and results.

In order to achieve effective inclusion in the university environment, it is not enough to have regulations that support this cause. It is essential to carry out structural changes and adaptations to ensure universal accessibility (Bagnato, 2017; CERMI, 2020).

These services are a fundamental factor for students with disabilities, with the aim of achieving full inclusion in the university. This also includes training and information for teaching staff to promote a more appropriate response to their needs (Moriña, 2015). In addition, these services design both individual and group activities, especially at the beginning of university studies. During the academic period, attention and counselling are available at the student's request. At the end of their university studies, some universities adapt their career guidance processes to the characteristics of students with disabilities (Ferreira et al., 2023).

Among these university students are those diagnosed with Attention Deficit Hyperactivity Disorder (ADHD). ADHD is a neuropsychiatric disorder that impairs attention, impulse control and behaviour, which affects academic success (American Psychiatric Association [APA], 2013). ADHD has comorbidity with other disorders. These include oppositional defiant disorder or conduct disorder and others such as specific learning disorder and disruptive mood dysregulation disorder. In a minority of the population, ADHD is also associated with intermittent explosive disorder and antisocial personality disorder and, more exceptionally, with Obsessive Compulsive Disorder (OCD), Tic Disorder and Autistic Spectrum Disorder (ASD; APA, 2013).

It should also be taken into account that this disorder affects the socioemotional development of these students, especially their self-esteem, anxiety, self-concept, executive functions and empathy (Álvarez-Godos and Ferreira, 2022). ADHD has an adverse impact on academic performance and educational achievement, which can lead students diagnosed with this disorder to drop out of university studies.

One of the factors contributing to the academic failure of university students with ADHD is the lack of specific support in the university environment, given that the assistance they receive during their higher education is less compared to the support provided in previous educational stages (DuPaul et al., 2018; Kwon et al., 2018). At this stage of transition to university life, these students face additional challenges, not only related to the symptomatology of their disorder, but also

adapting to greater independence, a new environment with more distractions and new routines, and less supervision (LaCount et al., 2018).

Generally, people with a diagnosis of ADHD have combined treatments, on the one hand, with pharmacological treatment using stimulants such as methylphenidate or lisdexamfetamine, or non-stimulant drugs such as atomoxetine, and, on the other hand, with psychological treatment based on psychological, psychoeducational and, in some cases, psychosocial therapeutic interventions (Federación Española de Asociaciones de Ayuda al Déficit de Atención e Hiperactividad, 2022; Ministry of Health, Social Services and Equality, 2017).

One of the most frequent measures aimed at university students with ADHD are test-taking adaptations, such as increased time and adapted formats, as well as the use of devices that allow them to track the duration of the test. In addition, some universities offer the use of separate classrooms, although it should be noted that sometimes this measure does not usually reduce ADHD symptoms and test anxiety and may even contribute to marginalising them, which can lead to a decrease in performance (Álvarez-Godos et al., 2023).

Furthermore, access to tutoring is beneficial for university students with ADHD, as it is often conducted on a one-to-one or small group basis, which allows for greater attention to their needs (DuPaul et al., 2017). Therefore, it is crucial to detect students with a diagnosis of ADHD from the moment they enter university in order to ensure equal opportunities for academic success and an enriching university experience (Granados-Ramos et al., 2022).

Therefore, considering university autonomy in the provision of support for students with ADHD, as well as the diversity of measures described in the literature, the general objective of this study was to describe the actions aimed at the care of students with ADHD in the support services for students with disabilities in Spanish universities and to identify good practices. The specific objectives are as follows:

- To know the profile of university students with ADHD.
- Describe the procedure and the agents involved in the care process for students diagnosed with ADHD.
- To identify which measures are used by Spanish public and private universities to provide specific attention to students with ADHD.
- To find out the opinion of those responsible for services on the degree of involvement and training of university teaching staff, in public and private universities, to adapt to the needs of students with ADHD.
- Identify good practices and difficulties in the care of university students with ADHD.

Method

Population and Sample

The sample consisted of a total of 36 Spanish universities (see Appendix),

equivalent to 42.8% of the total of 84 universities included in the Register of Universities, Centres and Degrees (RUCT), which met the criterion of maintaining teaching activity prior to the 2017-18 academic year. This criterion is used in order to select universities with experience in the full course of Bachelor's or Master's degree courses. Of these, 23 are public (64%) and 13 are private (36%). This pattern of distribution of university ownership is close to that of the population (58% public and 42% private) according to the aforementioned criteria. Furthermore, the participating universities correspond to 12 of the 17 Autonomous Communities of Spain, distributed equally throughout the country. Specifically, those responsible for the support services for students with disabilities in the 36 Spanish universities indicated have participated in the study. These managers are mainly women (72.2%) and have more than six years' experience in the service (69.4%), followed by 22.2% with 3 to 5 years' experience and 8.3% with 0 to 2 years' experience.

Instrument

The study is framed within a non-experimental, *ex post facto* research design of a comparative descriptive nature, using the survey technique through the administration of an *ad hoc* questionnaire divided into dimensions that respond to the objectives of the study (McMillan and Schumacher, 2005). These dimensions refer to: description of the service, experience of the service with students with ADHD and profile of students diagnosed and comorbidity associated with the disorder), procedure for the care of students with ADHD (phases and agents involved), awareness-raising initiatives and relationship with external services, intervention measures and programmes aimed at students with ADHD, training and actions aimed at teaching staff to care for students with ADHD and, finally, good practices and difficulties in the care of ADHD at the university. The response format to the questions includes single-choice, multiple-choice, open-ended responses and a Likert-type scale with 5 values, 1 being the minimum score and 5 the maximum score.

The validity of the questionnaire is based on a systematic review of international studies on services, adaptations and intervention programmes implemented for university students with ADHD (Álvarez-Godos et al., 2023). In addition, items have been added that correspond to specific measures included in the Guide to Care for People with Disabilities at the University 2020/21 (Fundación Universia, 2021) and the Guide to adaptations at the university (Red de Servicios de Apoyo a Personas con Discapacidad en la Universidad (SAPDU), 2017). The questionnaire was submitted for validation by three academic experts from Spanish universities who have conducted specific research on attention to diversity in higher education and with academic management responsibilities within their respective universities in this field. Throughout their professional careers, these experts have held positions such as service manager, tutor for Specific Educational Support Needs (SEN) and coordinator of the inclusion and diversity committee, among others. Modifications were introduced which were subsequently reviewed and accepted by the group of experts.

Data collection and analysis procedure

The questionnaire was sent to the heads of the services during the months of February to April 2023 via a link to *Google Forms* to the institutional e-mails obtained from the official websites of the universities.

Data analysis was carried out using the SPSS v.26.0 statistical package. Descriptive statistical analyses were carried out in order to describe the sample and summarise the variables of interest. In this case, in the case of ordinal variables in which the Likert scale format with 5 values is used, the frequency corresponding to values 4 and 5 is shown for the presentation of the results. With regard to the analysis of differences between public and private universities, non-parametric statistics were used since the sample characteristics do not meet the criteria of normality. Specifically, the Mann-Whitney U test was used on the two independent samples (public/private universities) for ordinal variables (Likert scale) and chi-square for categorical variables. Statistical significance of differences and relationships between variables was set at $< .05$. When statistically significant differences were found in the Mann-Whitney U test, effect size was calculated from Cohen's d and η^2 statistics (Cohen, 1988). On the other hand, for the analysis of the open-ended questions, MAXQDA Analytics Pro2022 (22.7.0) was used for the analysis of qualitative data following an inductive process of categorisation.

Results and discussion

Profile of university students with ADHD

All the universities in the sample currently have students with ADHD registered with their service, and their experience is high, with 65% of the participating universities indicating that they have been registered for more than 6 years.

With regard to diagnosis, those responsible for the services responded that university students with ADHD were always or almost always diagnosed during the Primary Education (44.5%) and Compulsory Secondary Education (41.7%) stages, decreasing notably in the university stage (16.7%). These results are consistent with the most frequent period of diagnosis in developmental development, with symptoms appearing before the age of 12, and in two or three areas of the individual's life (APA, 2013). Schools that provide compulsory education in Spain have specific protocols for ADHD care which, for the most part, are coordinated with the health sector, but do not systematically include communication with the university system (Ferreira and Álvarez-Godos, 2022). Although the diagnosis should already have been made at university, as it is a chronic pathology, the results of this study coincide with others which state that, on occasions, there is an incorrect diagnosis that extends into adulthood (Castañeda and Fraga, 2023; Pinilla et al., 2021).

ADHD is a disorder with high comorbidity, with 25% of respondents indicating that ADHD is frequently or very frequently associated with other disorders or difficulties. Among them, they present a higher comorbidity (Figure 1) with

anxiety symptoms (25.5%) derived from the problems caused by their disorder. They also mentioned dyslexia (20%), ASD (20%) and learning difficulties (16.4%). In addition, episodes of depression (7.3%), as well as emotional (3.6%) and social (3.6%) problems are present among pupils. Less frequently (1.8%, respectively) an association is found with High Intellectual Abilities and OCD. These results are similar to those described in the introduction on comorbidity associated with ADHD (APA, 2013), except for the coexistence of this disorder with High Intellectual Abilities.

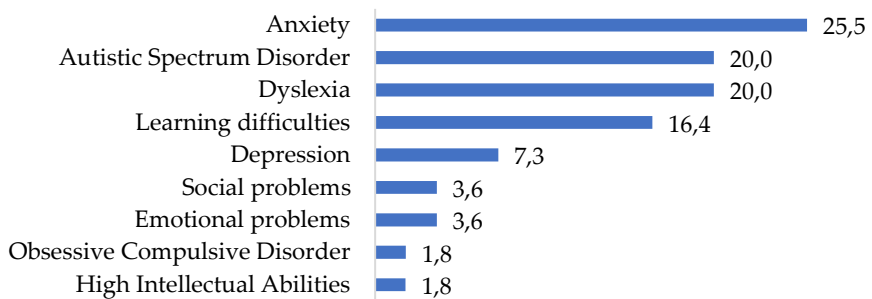


Figure 1. ADHD comorbidity reported by services (%).

55.6% of those responsible for the service indicate that students with ADHD do not usually hide their disorder. However, some managers state that sometimes they prefer to go unnoticed due to their negative experience in previous stages, or because of stereotypes associated with their pathology.

As expressed by the person in charge of a service,

...there may be a certain amount of concealment on arrival at the university. Or students may be uninformed about the existence of a service at the university that can provide them with support and guidance. A third option may be that, as they progress in their studies, they require less support or have external support (combined with medication and external psychological or pedagogical care). The fact is that the ADHD students that we attend to at the university service are significantly fewer than those who request adaptations in the EBAU (R14).

Procedure used by the services of Spanish universities to attend to students with ADHD

50% of the services indicated that they have specific staff to provide individual attention to students with ADHD.

With regard to the agents contacted by the services with the aim of meeting the needs raised by students with ADHD, they mainly contact the teaching staff (83.3%) in order to make them aware of the diagnosis and propose adaptations. To a lesser extent, they have indicated other agents they contact, the person in charge of the course tutoring (69.4%) and the degree coordination (63.9%).

Sometimes it is the pupils themselves who directly communicate their problems derived from ADHD to various agents. Most of them communicate almost always or always with the service (75%). To a lesser extent, they contact the teaching staff themselves (33.3%) or the person responsible for course coordination/tutoring (27.8%) to deal with any problems they may have. Finally, they contact the student representative of their class (2.8%).

The support services for students with disabilities carry out awareness-raising initiatives on various disabilities or disorders. 44.4% have taken part in initiatives to raise awareness of ADHD in order to make the whole university community aware of the characteristics of this disorder, although those responsible for these services report that there is little concern in the university community about ADHD. Thus, only 22.2% of those responsible answered that they perceive ADHD to be a subject of great concern in their universities (values 4 and 5).

University coordination with external services or ADHD associations is low. Only 36.1% indicate that there is coordination with external services (specific ADHD associations and private clinics/clinics).

Measures used by Spanish universities to provide specific attention to students with ADHD

Service managers were asked about the most common measures they provide to their students with ADHD, with Likert response questions (1 being never and 5 always) (see Table 1).

Table 1

Measures aimed at students with ADHD from the service

Measures for students with ADHD	% (values 4 and 5)	M (DT)	Type of institution	Average range	Mann-Whitney U test	<i>p</i>
Adaptations in the delivery time of the exams	94.4%	4.69 (.789)	Public Private	18.00 19.38	138.00	.583
Maintain contact for follow-up	72.2%	4.14 (1.099)	Public Private	18.26 18.92	144.00	.843
Distraction-free location in the classroom	69.4%	3.69 (1.261)	Public Private	18.78 18.00	143.00	.822
Planning and organisational strategies	63.9%	3.67 (1.373)	Public Private	18.24 18.96	143.50	.837
Adaptations in the time taken to deliver work	55.65%	3.53 (1.298)	Public Private	19.89 16.04	117.50	.277
Examination	55.6%	3.36	Public	17.72	131.50	.542

format adaptations		(1.477)	Private	19.88		
Methodological strategies that promote attention	50.0%	3.33	Public	19.13	135.00	.620
		(1.146)	Private	17.38		
Peer note-taking support (tutors)	47.2%	3.00	Public	20.93	93.50	.058
		(1.474)	Private	14.19		
Human resources	44.4%	2.94	Public	19.17	134.00	.600
		(1.585)	Private	17.31		
Facilitating social relations with peers	38.9%	2.94	Public	18.85	141.50	.787
		(1.372)	Private	17.88		
Adaptations of study materials	33.3%	2.76	Public	19.28	131.50	.543
		(1.394)	Private	17.12		
Mentors	27.8%	2.22	Public	19.93	116.50	.242
		(1.416)	Private	15.96		
Other measures	13.9%	1.53	Public	19.11	135.50	.442
		(1.341)	Private	17.42		

In decreasing order, the services report that they frequently, almost always or always (values 4 and 5) carry out the following actions. In the first place, adaptations in the time taken to hand in exams (94.4%) stand out, according to the literature, which indicates that this is one of the measures most frequently used with students with ADHD (Álvarez-Godos et al., 2023). Secondly, contact with students for follow-up (72.2%) is usually carried out via e-mail, face-to-face and virtual meetings and, on some occasions, by telephone.

In addition, teachers are advised to place students diagnosed with ADHD away from possible distractions in the classroom (69.4%) and the implementation of strategies aimed at proper planning and organisation is also favoured (63.9%). According to LaCount et al. (2018), this type of measures aimed at time management favours a reduction in inattention and lower levels of hyperactivity in students with ADHD.

Other frequent measures are adaptations in the submission of assignments (55.6%) and adaptations in the format of exams (55.6%): separating questions, changing the font, etc.

The least frequently adopted support measures include note-taking by peers (47.2%), who act as tutors for their peers with ADHD. This is followed by human resources (44.4%), where personal assistants and student volunteers stand out.

Likewise, social relations between peers are promoted (38.9%) and adaptations are made to study materials in order to facilitate learning (33.3%). Finally, mentors (27.8%) are peers from higher grades, also diagnosed with ADHD, with whom they share their experiences and advice. These adaptations, related to the social context, are crucial for their socio-emotional development. Frequently, these

students have low levels of self-esteem, self-concept, social competence, and high levels of anxiety, which are associated with the disorder (Álvarez-Godos and Ferreira, 2022; Bishop et al., 2019).

A Mann-Whitney U-test was performed to determine whether there were differences in the measures targeted at students with ADHD adopted between public and private universities, and no statistically significant differences were observed in any of the measures.

In relation to these measures, students with ADHD were asked about their demand, from the moment they enter university, in the first years, or throughout their time at university (1 never and 5 always). Initially, these students request a series of measures adapted to their needs for the university entrance exam (66.7% almost always or always), thus presenting themselves to the service. This interest intensifies during the first years of study, with a high demand for these measures from students (83.3%). However, as their university studies progress, the request for support decreases slightly (61.1%).

When analysing the differences in demand for these measures between public and private universities, statistically significant differences ($U = 65.50$, $p = .003$) were identified in the demand for adaptations required for the entrance exams. This analysis reveals that the average range of demand in public universities (22.15) is higher than in private universities (12.04). In this case, the values $d_{\text{Cohen}} = 1.039$ and $\eta^2 = .213$ indicate a high effect size (Cohen, 1988), which is consistent with the fact that university entrance examinations are held at public universities.

With regard to intervention programmes, between 20-30% of universities reported offering these services, with no statistically significant differences between public and private universities. The most frequent programmes correspond to cognitive-conceptual therapies (30.6%), which allow students with ADHD to address academic and social impairment, possible connections with depression and anxiety derived from this disorder, and emotional problems they may have. Cognitive-behavioural therapy programmes show improvements in ADHD symptoms, especially related to attention (Van der Oord et al., 2020).

On the other hand, *mindfulness*, offered by 24.2% of the participating universities, is defined as the awareness that arises from paying attention on purpose, in the present moment and without judging the unfolding of the experience moment by moment, decreasing stress in these students (Gabriely et al., 2020). Finally, 22.2% of universities implement coaching programmes, which are focused on establishing and reinforcing a set of clear goals for the student, promoting autonomy, self-determination and metacognitive awareness. The application of coaching to university students with a diagnosis of ADHD has been shown to be effective in improving study skills, learning strategies, time management and the achievement of personal goals. Contributing to a reduction in emotional distress and an increase in satisfaction with small achievements (Prevatt et al., 2017).

Intervention programmes are delivered through various channels within universities, including psycho-pedagogical offices, applied psychology services

and functional diversity departments. They are also provided by specialised guest staff, as well as by the service's own technicians. In addition, different types of workshops focused on student wellbeing are organised, such as relaxation workshops, emotional wellbeing, anxiety management and stress control, in order to offer additional tools for the management of these conditions.

Finally, 38.9% of universities offer career guidance to students diagnosed with ADHD, with no statistically significant differences between public and private universities. Normally, this guidance is provided by specific job placement services or employment centres. Their main objective is to facilitate students' job search, providing them with tools such as entrepreneurship strategies, advice for job interviews, development of professional skills and access to *mentoring* programmes.

Involvement and training of university teaching staff

According to the services, on a scale of 1 to 5 (not at all and very much), teaching staff show a high level of involvement (88.9% values 4 and 5), taking the initiative to go to the service when concerns arise regarding the care of students with ADHD (44.4% values 4 and 5). Although the teaching staff show a proactive attitude, the services emphasise that they are not adequately prepared to respond to the needs of students with ADHD (only 25% values 4 and 5). Regarding these issues, differences were found between public and private universities in the degree of teacher involvement ($U = 70.0, p = .002$). The average rank in private universities (24.62) is higher than in public universities (17.26). In this case, the values reported by the effect size analyses, $d_{\text{Cohen}} = .97$ and $\eta^2 = .19$, indicate a high effect size (Cohen, 1988).

58.3% of universities provide their teaching staff with a series of training courses. These training sessions are given by the services themselves, Attention Deficit and Hyperactivity Disorder (ADHD) Associations, professionals specialising in the disorder, Training Centres and psychologists. Furthermore, 52.8% of the universities indicate that they have action guides aimed at helping university teaching staff to deal with students with ADHD. These guides are produced by the service itself, or they use those produced by the SAPDU Network. To a lesser extent (19.4%), there are repositories of materials and resources produced by the service. Finally, 66.7% of the departments indicate that they always or almost always provide methodological guidelines to the tutors of their Final Degree Projects (TFG) and Master's Degree Projects (TFM), and to a lesser extent (38.9%) for their examining boards. There are no statistically significant differences between public and private universities in these aspects. The greater degree of knowledge of teaching staff about the disorder has a positive effect on these processes of action and on their awareness of students with ADHD (Sanz-Cervera, 2018).

Good practices and difficulties in the care of university students with ADHD

The heads of the services have insisted on some of the measures already mentioned when referring to the good practices that are carried out within their university related to the attention to students with ADHD, insisting on those referring to the training of the teaching staff. In addition, other good practices stand out, such as personal tutors, help in the management of documentation, as well as pedagogical advice and personalised advice for teaching staff with the aim of providing strategies for both teaching staff and the students themselves to favour their academic activity.

In response to the open question about what they consider to be the difficulties encountered in the care of students with ADHD, they refer to factors stemming from both individual aspects of students with ADHD and others external to them, both those referring to the preparation of teachers, the diagnostic procedure, resources and funding, and the attitude towards this disorder (Figure 2). Firstly, the students themselves, with the effects of ADHD symptomatology and comorbidity with other disorders or difficulties, as well as the mistrust that they sometimes have due to their experience, which leads them to be independent and not seek the necessary help. Secondly, teachers who have a lack of training, difficulties in understanding and adequately addressing the specific needs of their students with ADHD. Thirdly, the diagnostic procedure which in many cases is deficient, in addition to the lack of a disability recognition certificate for this disorder. Fourthly, the attitude of the university community towards ADHD, where there is a lack of knowledge of the disorder itself, as well as a distorted view due to stereotypes. Lastly, the lack of resources and funding from universities. It should also be understood that these difficulties extend to the staff of the university community in charge of preparing the corresponding adaptations. Those in charge of the services state that,

Lack of understanding on the part of teachers, as well as lack of material and human resources. Lack of knowledge of some teaching teams (teaching staff). We need to provide more training for teachers. Attention to diversity is a matter for everyone, not for a specific unit (R23).

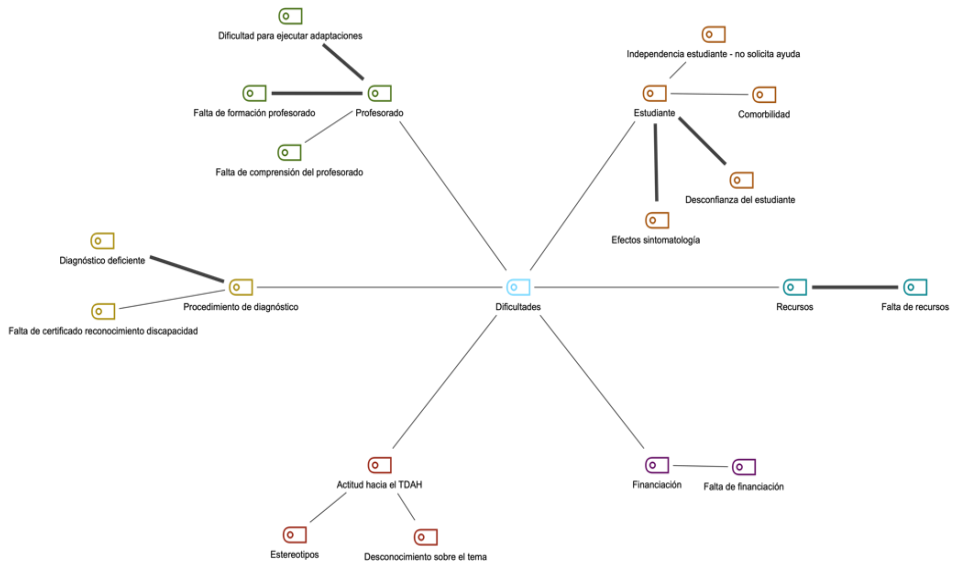


Figure 2. Difficulties in attending to students with ADHD.

Conclusions

This study has deepened our knowledge about the attention offered to students with ADHD by the support services for students with disabilities in Spanish universities.

Firstly, the profile of students with ADHD has shown a lower tendency to be diagnosed at the university stage and their highest comorbidity is associated with anxiety. In addition, those responsible for the services are of the opinion that these students do not hide their disorder from the university community.

Secondly, in the procedure used by these services to attend to this group, on the one hand, the importance of having specific staff to attend to these students individually and, on the other hand, having a procedure for informing teachers about their diagnosis and necessary adaptations stands out. Most students with ADHD, when they have a problem, communicate firstly with the service and secondly with the teaching staff. Furthermore, it should be noted that the level of awareness of ADHD in the university community is low and that coordination with external services or associations is also scarce.

Thirdly, the most common adaptation measures, especially in the first years, are the increase of time for exams, the placement of the student in the classroom away from distractions and the inclusion of planning and organisational study strategies. These measures decrease in the following academic years. The demand for these measures starts when students enter university through the entrance exams, where a number of adaptations are already provided. Intervention

programmes are not as recurrent due to lack of resources for their implementation.

Fourthly, teachers have a proactive attitude, coming to the service to communicate their concerns about this disorder, but their professional training to address and respond to the needs it entails is not sufficient. Although universities offer training through courses, teacher participation is low.

Lastly, with regard to good practices, those responsible for the services were reiterative in emphasising the importance of some of the measures mentioned previously, such as individualised attention from the transition to university until the end of studies, advice for teaching staff and the incorporation of the service in the university's inclusion policies. With regard to the difficulties, they point out the difficulty in identifying students with ADHD, who sometimes do not want to make their diagnosis visible, the need to improve the funding of these services in universities by incorporating more specialised staff and, finally, to continue raising awareness in the university community about the needs of students with disabilities, and specifically those diagnosed with ADHD, considering it to be one of the many "invisible disorders".

The broad sample of services that have participated in this study provides an overview of the overall picture of care for students with ADHD in Spanish universities and identifies a set of specific actions. However, it should be borne in mind that the participating universities are diverse (in terms of size, ownership, location) and, furthermore, within the scope of their autonomy, they have different degrees of commitment to actions aimed at students with ADHD. Therefore, the individual analysis carried out by each university to propose improvements in this area should incorporate the view of students with ADHD on their personal experience at university, their teaching staff and those responsible for the inclusion policies of each university and its centres.

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Appendix

CCAA	Type of institution	University
Andalusia	Public	UNIA
		UCA
		UCO
		UGR
		UJA
		USE
Castilla y León	Public	UBU
		ULE
		UVA
	Private	IE
UI1		
Catalonia	Public	UBA
		UPC
	Private	URLL
UAO		
Community of Madrid	Public	UCAR
		UCM
		UNED
		UPM
	Private	UAX
		CUNEF
		NEAU
		UFV
Community of Valencia	Public	UPV
		UMH
		UV
	Private	VIU
		EU
Autonomous Community of Navarre	Private	A
Galicia	Public	UVI
Balearic Islands	Public	UIB
Canary Islands	Public	ULL
	Private	UFP-C
Basque Country	Private	UMON
Principality of Asturias	Public	UOV
Region of Murcia	Public	UMU

*Recognised as a private university in 2019, with activity since 1973 as a centre attached to the Complutense University of Madrid.