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What makes adolescents diagnosed with ADHD Tik *(Tok)*? The lived experience of ADHD in online and offline worlds

A thesis submitted in fulfilment of the requirements for the degree of Doctor of Philosophy

University of Witwatersrand

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January 2025

Declaration

I declare that this thesis titled '*What makes adolescents diagnosed with ADHD Tik (Tok)? The lived experience of ADHD in online and offline worlds,* is my own work. It is submitted for the degree of Doctor of Philosophy at the University of Witwatersrand, Johannesburg. It has not been submitted for any other degree or examinations at any other university. All sources cited have been indicated and acknowledged by means of complete references.



_____

Linda Louise Moss

Date: 20 January 2025

Abstract

This qualitative study sought to gain insight into the lived experiences of adolescents who had either been diagnosed with ADHD by a medical professional or who self-identified with characteristics of the phenomenon. The study examined how this group of adolescents navigate online and offline worlds, exploring how experiences in both these contexts shape identity, agency and connection to others. Additionally, the project investigated how these adolescents engage with and perceive information about ADHD in the social media platform TikTok. The final aim of the study was to gain a clearer understanding of the benefits and risks of the online world for these young people. Ten participants, recruited from the private school sector in Johannesburg, participated in the study. This study produced two main sets of data, the first data set contained visual components consisting of collages, bodymaps, photographs, music lyrics and TikTok videos, and the second comprised of transcripts of talk generated during data collection sessions and individual semi-structured interviews. Both narrative and thematic analysis were used sequentially of one another. Two levels of analysis were conducted, firstly the construction of four descriptive narrative portraits which presented participants' experiences and perceptions within their offline and online worlds. Secondly, thematic analysis across all the data sets, identifying similarities and differences between the participants, which were expanded according to generalised themes. For most participants, an ADHD label gave them a plausible and simplified reason for their difficulties, disappointments and academic struggles. However, this label tended to have a flattening effect on identity, obscuring the complexity that is threaded through their lives. The ADHD label had a transformational effect on the participants subjectivity and interactions with others, with imagined futures containing sharp references to inabilities and deficits. However, participants' stories and illustrations were rich, articulate and creative, demonstrating exceptional abilities to convey complex information, unique perspectives and imaginative ideas, providing a distinct contrast to the master narrative around ADHD. Narratives around medication were complex and varied. Although some participants reported increased self-control and focus, side effects produced changes that appeared to be in conflict with the way they perceived themselves. School seemed to be a place that provoked considerable anxiety, with deviations from parameters of academic achievement implicated as the prime initiator of an ADHD diagnosis. The pitfalls of the online world were widely acknowledged; however, it provided these young people with an imaginative space, offering connection, agency and a different kind of being and belonging in the world. Participants found TikTok videos humorous and validating, using the platform to procure information, which was not always forthcoming in the material world, with some using the platform to engage with alternative narratives that resonated with their struggles and sense of difference. The virtual world provided opportunity for identity play, underscoring the concept that identity is fluid, multiple and context dependent. Using creative methodologies, this study offered a phenomenological exploration of the perceptions and experiences of this group of adolescents, gaining insights that would not have ordinarily been apparent during conversations within clinical, therapeutic or traditional research settings. Participants' narratives provided a rich illustration of how they construct their identities across time, in relation to others and through their embodied experiences.

Keywords: ADHD, adolescent identity, social media, TikTok, creative methodologies

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Dedication

To the participants of this study, your willingness to participate so selflessly and enthusiastically has been both humbling and inspiring. Thank you for trusting me with your experiences, allowing me the privilege of telling your stories. This work is a testament to your remarkable abilities, exceptional insights and beautiful perspectives.

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If I have accomplished anything it is by standing on the shoulders of giants

Isaac Newton

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Chapter 1 – Introduction to the Study

This qualitative study aimed to gain an understanding of Attention Deficit Hyperactivity Disorder (hereafter referred to as ADHD) from the perspective of a group of South African adolescents who had either been officially diagnosed (by a medical professional) with ADHD or self-identified with the characteristics of the phenomenon. By listening to and analysing these young people's stories about ADHD, their encounters with teachers, parents, friends, medical professionals and treatment, this study sought to gain insight into the lived experiences of adolescents positioned (or who understand themselves) in this particular way. Furthermore, this study aimed to capitalise on rich, personal perspectives of how these particular adolescents navigate their online and offline worlds, and how experiences within these spaces contribute to the construction of their identity, agency and connection to others. The final aim of the study was to discover how these young people engage with and perceive information and content posted about ADHD in the popular youth focused platform TikTok. Using creative methodologies, this study offers a phenomenological exploration of the perceptions and experiences of this group of adolescents, to gain insights that would not have ordinarily been apparent during conversations within clinical, therapeutic or traditional research settings.

Classified as a neurodevelopmental disorder, ADHD is defined within the revised fifth edition of the Diagnostic and Statistical Manual of Mental Disorders [DSM-V-TR] (American Psychiatric Association [APA], 2022) as a "persistent pattern of inattention and/or hyperactivity-impulsivity, that interferes with functioning or development" with symptoms typically emerging in early childhood" (p. 170). Expanding on this clinical definition, the Royal College of Psychiatrists (2023) in the UK describes children with ADHD as follows:

> Children with problems of attention can appear forgetful, distracted, not seeming to listen, disorganised, take ages to start doing things and then when they do, they rarely finish it. Children with hyperactivity seem restless, fidgety, full of energy, and 'always on the go'. They may seem loud, noisy with continuous chatter. Children with symptoms of impulsivity do things without thinking. They have difficulty waiting for their turn in games or in a queue, and interrupt people in conversation. (para. 5)

Similarly, the Royal Australian and New Zealand College of Psychiatrists [RANZCP] (2023, para. 1) frames ADHD as a serious and enduring mental disorder with significant implications across educational, relational and occupational domains. Notably, the RANZCP (2023) includes "emotional dysregulation" and "anxiety" as key features of the phenomenon, signalling an expanded understanding of ADHD that goes beyond attention and behavioural regulation, to include broader affective dimensions.

ADHD is one of the most prevalent yet controversial disorders in child psychiatry (Rojas-Navarro et al., 2024; Tassinari Rogalin & Nencini, 2015; Timimi, 2021). One of the central controversies surrounding ADHD lies in its diagnostic ambiguity. Unlike many medical conditions, ADHD lacks definitive biological markers and is instead diagnosed through behavioural observations and subjective reports from adults in the child's environment(Timimi, 2021). This reliance on interpretation may contribute to the significant variability in ADHD prevalence rates across the world. Studies to determine the prevalence of ADHD have produced mixed results with prevalence rates ranging from one percent to nearly 20 percent among children and adolescents worldwide (Ayano et al., 2020; Polanczyk et al., 2015; Schoeman & De Klerk, 2017; Umar et al., 2018). Although there are no recent official statistics available on the prevalence of ADHD in South Africa, it is suggested that

anywhere between five and 10 percent of children are diagnosed with the disorder (Liebenberg & Schoeman, 2017). There is a higher rate of ADHD diagnosis in children from more affluent households in South Africa (Moss, 2017). This trend may be ascribed to the high expectations that well educated; upper income parents may have of their children. Moreover, this tendency may illustrate how societal norms, and cultural ideals construct specific ways of being a child as acceptable or problematic, reinforcing broader anxieties about productivity, conformity and success. Parental anxiety around academic performance may make it more likely for parents to seek help and possible diagnosis for their children (Getahun et al., 2013; Swingle, 2015). However, ADHD diagnosis within wealthier sectors may also be attributed to better access to healthcare and medical insurance (Botha & Schoeman, 2023).

Typically, ADHD is diagnosed by a psychiatrist or other healthcare professionals. However, in today's digital world, and the proliferation of mental health communities within social media platforms, there is widespread concern around the increasing trend of self-diagnosis of mental health conditions particularly among adolescents (Corzine & Roy, 2024). Unbridled access to medical information in the virtual world may lead to unnecessary stress due to misdiagnosis. However, as Davis (2023) explains, 'self-diagnosis' of a mental health condition may not be about the desire to be classified according to a psychiatric condition but rather refers to the search for recognition and validation of life's difficulties, frustrations and disappointments. When young people's struggles are interpreted according to a diagnostic framework associated with official, authoritative medical knowledge, they tend to become real, valid and recognisable to both themselves and others (Davis, 2023).

Contextual History

All ten participants are adolescents who live in suburban Johannesburg located in Gauteng, a province described as South Africa's economic hub. During apartheid, a brutal system of segregation and oppression, cities like Johannesburg were intentionally designed and maintained as racially segregated spaces. Centrally located urban neighbourhoods and business districts were reserved exclusively for whites, whereas black people were forcibly confined to poorly resourced townships located in the outskirts of the city (Letsoko et al., 2022). South Africa's first democratic elections in 1994 marked the end of apartheid, signalling the beginning of a new era grounded in the principles of freedom, equality and democracy (Bray et al., 2011). Post-apartheid Johannesburg has transitioned into a vibrant, complex and evolving city that reflects the legacies of the past and aspirations of a modern international metropolis. Considered the financial capital of the country, Johannesburg is colloquially known as 'the City of Gold', 'Jozi', or 'Joburg', a place that epitomises the country's stark socio-economic contrasts and dual realities, where affluence and opportunity coexist with poverty and systemic exclusion. Wealthy suburbs contain luxury housing, worldclass amenities and relatively stable infrastructure, while historically marginalized areas beyond the city like Soweto and Alexandra continue to be plagued by poverty, overcrowding and vastly inadequate service delivery (Letsoko et al., 2022). Despite strategic plans and urban re-generation projects, the city grapples with strains on current infrastructure due to rapid urbanisation, the mushrooming of informal settlements some of which are adjacent to affluent suburbs, where homes (shacks) are built illegally from scrap material and have little to no access to essential services like water and electricity. Johannesburg's crime rate is exceptionally high, currently ranking as the third most dangerous city on the African continent (Statista, 2024a). Due to the increasing levels of crime and violence in both the city and the suburbs, gated communities have become a popular housing option for middle to

upper-class social groups of the country. These areas are enclosed by high walls and electric fences, with access restricted by gates or booms, dislocating communities from their immediate surrounds (Letsoko et al., 2022).

Every child born in South Africa after 1994, is considered a ‘born-free’, supposably able to lead a prosperous life after decades of racial segregation and oppression (Bray et al., 2011). Instead, persistent inequalities remain deeply entrenched with statistics reflecting the glaring inequalities which “weave a story of about how South Africa has failed its young people” (Chikane, 2018, p. 8). While the elections brought about political change, this significant milestone did not deliver equal opportunity for the country and its children. In South Africa, some children grow up in environments of extreme affluence and privilege. At the opposite extreme, others endure severe poverty in both rural and urban areas without access to basic services, adequate healthcare or schooling, highlighting persistent inequalities in a post-apartheid society. “The transition from apartheid has engendered a mix of opportunities and disappointments, changes for the better and changes for the worse” (Bray et al., 2011, pp. 21–22). With a Gini coefficient of 0.63, South Africa has one of the most persistently high inequality rates in the world (Statistics South Africa, 2024b). Wealth inequality of the country remains extreme, with the richest 10% of the population owning approximately 85% of the total wealth, while the bottom half the population hold only 4% to 7% of the nett wealth (Maluleke, 2023).

During apartheid, social and economic divisions were strictly enforced along racial lines. People of colour were deprived of business opportunities, access to equal education, dispossessed of property, and excluded from career progression (Visagie, 2013). The new democracy represented a time for change and opportunity, with the deracialisation of

education and the labour market as well as employment equity policies and black economic empowerment (Southall, 2023). The boundaries of privilege are no longer tied to 'whiteness' and now include a growing number of black children in families within the rapidly expanding black elite and upper middle classes. While there is a lack of consensus in defining "what and who is middle class in developing countries like South Africa", metrics such as "occupation, per capita household income, income measures based on lifestyle and status" are frequently employed (Visagie, 2013, p. 3). The disparity between South Africa's richest and poorest remains unchanged as the decline in racial inequality has largely resulted in a rise in the incomes of the wealthiest black individuals, rather than any significant increase in wealth for the poorest. Access to jobs is a primary axis for inequality, official unemployment statistics in 2023, stood at 32.1%, however, the unofficial unemployment rate which includes discouraged workers who are not actively looking for work is 42.6% (Maluleke, 2023). Youth aged 15-24 years continue to have the highest unemployment rates of almost 60% and are more vulnerable to unemployment in comparison to older age groups. According to statistics in 2023, 33% of young people aged 15-24 years were not in employment, education or training [NEET] (Maluleke, 2023). Widespread unemployment leaves many trapped in a cycle of perpetual poverty, with limited relief provided by the state in the form of small social grants, old-age pensions and child-support grants. In post-apartheid South Africa, class has replaced race as the primary driver of the country's deep social inequalities. (Bray et al., 2011; Southall, 2023). South Africa's vastly unequal context shaped by the legacy of apartheid and socio-economic disparities according to race and class, have significant implications for two key institutions, healthcare and education which play a pivotal role in children's well-being and future prospects. The participants of this study are situated within the upper middle class bracket, a socio-economic position that affords their families the choice to access private education and healthcare, the capacity to reside in well-resourced

neighbourhoods and benefit from reasonable economic security, especially during times of crises as recently demonstrated by the recent Covid pandemic (Chelwa et al., 2024). Living in such an unequal society presents unique challenges for privileged youth. While they may benefit from material security and access to resources, these young people are not immune to the precarity and anxiety shaped by local conditions. Furthermore, constant connectivity to an online world amplifies global issues like economic volatility and social inequalities, while curated online content can exacerbate the pressure to succeed and conform to idealised lifestyles, which may shape their perceptions of self-worth and identity.

Healthcare within the South African Context

During the apartheid era, access to good quality medical care was restricted for those classified as 'non-white'. Despite radical changes inscribed in the constitution more than three decades ago, the state of public healthcare remains vastly inadequate and racialised. Currently, the South African healthcare system consists of public and private sectors (Thaver et al., 2021). The cost of private healthcare is prohibitively high with just over 16% of the population able to afford these services which individuals finance through medical insurance or out of pocket funding (Statista, 2024d). Unlike public healthcare facilities, private healthcare institutions are not burdened by overcrowding and underfunding and have an adequate supply of doctors, nurses and other medical professionals (Thaver et al., 2021). There are massive flaws in South Africa's mental health system which has remained on the periphery of the public health sector (Nguse & Wassenaar, 2021). South Africa's Mental Health Care Act (2002) implemented in 2004, was lauded as one of the most progressive examples of mental health legislation globally. However, considerable barriers to the financing and development of mental health services have obstructed the implementation of such a potentially transformative piece of legislation (Burns, 2011; Nguse & Wassenaar, 2021). The Life Esidimeni tragedy that took place between 2015 and 2016 where over 140

psychiatric patients lost their lives and 44 patients remain unaccounted for, illustrates the neglect of public mental health services in South Africa. (Nguse & Wassenaar, 2021; Pillay, 2019). The overburdened public healthcare system which tends to prioritise basic medical care over mental health services, may leave children and adolescents who are experiencing distress without support and resources they might need. Conversely, those who can afford private health care have access to psychologists, psychiatrists and counsellors who offer treatment plans which may include therapy, medication and other interventions. Furthermore, wealthy parents who are able to navigate the complexities of healthcare systems, may be more likely to seek medical explanations for their children's behaviour which deviates from societal norms or influences academic behaviour.

The South African School System

Education in South Africa has a troubled history deeply rooted in the legacy of apartheid, providing children with different prospects and opportunities. Schools serving white children during the height of apartheid were administratively and pedagogically privileged in comparison to schools serving black communities (Ndimande, 2016; Soudien, 2007). The ideology behind this system of education was to provide a simplified curriculum in poorly resourced, overcrowded schools to ensure that black people remained a source of unskilled and thus cheap labour (Mncube et al., 2011). The advent of democracy in 1994 heralded reforms to school funding, management, governance and curriculum design. Although there has been a significant revision of policies, the scale of educational devastation prior to 1994 in South Africa was enormous and the quality of education for most children remains poor.

Under the framework of the new constitution, two distinctive categories of schooling have emerged, public (all apartheid schools collapsed into this category) and private schools which currently accommodate approximately 3,2% of the student population (Department of

Basic Education, 2023). Since 1994, there has been a dramatic increase in the number of private schools, statistics reveal that in 2023 there were approximately 2 325 private schools in South Africa, of which 918 were in Gauteng (Department of Basic Education, 2023). While many parents may covet this level of education for their children, annual fees for these private institutions range from R100 000 to R250 000 per annum, making them financially prohibitive for most of the country's population (Statistics South Africa, 2024b). Although school admission based on race may be illegal, school fees seem to have a similar marginalizing effect .

In South Africa, a school's performance is predominately determined by the only national benchmark, i.e. the matric (Grade 12) pass rate. Competition among schools especially in the private sector, most of which are for profit schools and in ex Model C schools (a term used to designate prestigious former white schools) is rife. Maintaining a 100% matriculant pass rate within these institutions is key to their popularity and for many, their profitability. This places significant pressure on both learners and teachers to achieve such results. Increased demands are placed on teachers and learners to produce exemplary test-based performance outcomes, which may not only be to the benefit of the schools they represent, but allow learners to compete for shrinking access to the world of work, income and commodity consumptions (Cohen & Morley, 2009; Saltman, 2017).

South Africa's current sluggish economic climate, compounded by a high cost of living and above inflation school fee annual increases, many parents face mounting pressure to sustain their children's education in private school facilities (Libera, 2024). This financial pressure then transfers to children, creating an implicit expectation to excel academically and justify the significant investment in their education. The pressure to perform and produce

unrealistically high academic results may lead to a pathway of chemically augmenting school performance by using pharmaceutical substances to optimise or enhance cognitive, behavioural or emotional functioning beyond what is considered typical (Aikins et al., 2017). Medication to 'treat' ADHD such as methylphenidate (commonly known as Ritalin or Concerta) is routinely prescribed to assist with focus, impulse control and task completion. However, in the context of competitive schooling environments, the use of this kind of medication can also be understood as a means of chemically enhancing performance in line with institutional demands and neoliberal expectations of productivity and achievement (Aikins et al., 2017). In an unequal society like South Africa, with a schooling system in turmoil any form of advantage is compounded, creating further distance between the privileged and the disadvantaged.

Violence, Racism and Gender in South African Schools.

Corporal punishment has been forbidden in South African schools since 1997 (South African Government, 1996). Despite these changes, violence within the country's schools is growing at an alarming rate, making these spaces unsafe for both teachers and learners alike. Reports of school based violence is an everyday occurrence in South Africa, with crime statistics from December 2023 to the end of February 2024, recording 7 murders and 61 rapes occurring predominately within the country's public educational institutions (Statistics South Africa, 2024a). Video footage of a Johannesburg teacher and grade nine learner exchanging blows, the fatal stabbing of a grade eight child at his school gate by other learners from a neighbouring school (Luvhangu, 2024), a principal of a Johannesburg school shot and injured by a Grade 6 learner, are all cause for significant concern (Phiyega, 2024). In response to these kinds of incidents, the Department of Education has developed programmes with the South African Police Services through the "Adopt-a-Cop" programmes and the deployment of school resource officers who patrol the grounds and corridors of selected public schools in

a bid to create safer learning environments (Phiyega, 2024). While these issues are deeply concerning, they are not directly present in the privileged institutions attended by the participants in this study. Schools serving the affluent minority of children provide environments which are mostly insulated from these incidents of violence. However, living in a radically unequal, highly violent society is an integral part of these young people's zeitgeist. As Bradbury (2020) astutely observes, "…the stories of others' experiences [are] internalised and lie deep within us rather than typically suggested in external social contexts that surround and influence persons" (p. 22).

Some 30 years since South Africa's democratic elections and the implementation of a constitution which prohibits unfair discrimination, harassment and hate speech, incidents of racism are remarkably evident within the country's schools. Recent reports of black learners being subjected to a "slave auction" in a Western Cape school (Swartz, 2024) and the leaking of a WhatsApp group chat among white learners from a Pretoria High school, containing racist remarks about their black peers (Njilo, 2024) are stark reminders of the country's painful past that continue to persist in the present.

There is a call to confront problematic values, cultural norms, racism and hegemonic masculinity that persist in many South African schools (McKaiser, 2020). Many institutional identities and heritage (more particularly private and ex model C schools) are imbued with residual traditions of preparing white children for compulsory army conscription (a key feature during the apartheid regime), some of which are still practiced today (McKaiser, 2020). One just needs to attend a rugby match between rival boys' schools and listen to the war cries of opposing sides, most of which arouse a sense of soldiers being called to an imaginary war. It is not just the chanting of the boys that is imbued with war-like aggression, messages launched at the young players from the side lines by coaches and parents

encouraging them to “get him”, “take him down” and other less ‘polite’ rhetoric are heard throughout the game, underscoring a winning at all costs mentality. Although aggression may be actively encouraged on the sports field, when hostility filters into the classroom, teachers and administrators become troubled by it, with most actively seeking to bring it into check quickly. Medication may seem to offer a quick-fix solution.

Globalisation

Within the context of the educational system, children are frequently told that rewards are earned by working hard at school and in doing so they can be anything they want to be (Piketty, 2014). However, this meritocratic concept remains a myth for many school children and while it has a superficial appearance of equality, it masks the real advantages and disadvantage that are perpetuated in an unequal society (Piketty, 2014) like South Africa. An important indicator of such inequalities is electronic technologies such as access to online and mobile technologies. For those who are able to access these technologies, the global world is open and accessible, while those with limited access, their knowledge is limited to their local world (Moloi & Mhlanga, 2021) The concept of globalisation was introduced in the 1990s to describe considerable changes happening across the globe. Although not a new phenomenon, globalisation is a key determinant of political, social and economic changes in the 21st century, which does not only re-shape societies but also impacts on education policy, practice and institutions (Moloi & Mhlanga, 2021). New communications and information technologies are changing the world, with the instant transmission of information and images, national boundaries are blurred, time and space becomes compressed. Secondly the production, management and distribution of goods across national boundaries, the reduction of international trade barriers and the fluidity of global financial markets have contributed to a single global capitalist economy. Thirdly, in addition to the economic changes, globalisation has resulted in social and cultural changes (Christie, 2008). With the spread of

media in all its imaginable formats, cultural ideas and practices have shifted from one context to another, providing people with a different consciousness of the world, provoking changes in identity and meaning (Moloi & Mhlanga, 2021). However, some points of disagreement endure in the debate around globalisation. Critics maintain that globalisation generates great differences in wealth not only between but also within countries. Whereas wealthy countries (or pockets of wealthy people within countries) may benefit from the global world, the poor are left out of the opportunities offered by global trade, global investments and economic opportunities, global travel and employment prospects, especially if they are not linked to the net (Christie, 2008; Moloi & Mhlanga, 2021). It is widely acknowledged that the global economy is based on information technologies and the ability to access and switch between multiple networks is crucial to participating in the information age (Moloi & Mhlanga, 2021). Within this global informational economy, unskilled labour, stable jobs and predictable careers are fading into the periphery, replaced with highly specialised workers who are able to capitalise on innovation and information, adept at constantly modify their skills to meet everchanging demands (Christie, 2008). The move away from commodity based economies to those that are knowledge based, has significantly impacted the youth unemployment rate, which has compelled youth to remain in school for longer periods of time to secure better credentials (Christie, 2008).

Adolescent development in a Digital World

The participants were 15 and 16 years of age at the time of the study, born between 2007 and 2008. This developmental stage is marked by heightened reflexivity, peer orientation and digital fluency. Belonging to a cohort often referred to as ‘GenAlphas’, the ‘iGeneration’, ‘Zoomers’ or ‘phonosapiens’ (Valkenburg & Piotrowski, 2017), the internet, WIFI, search engines, smartphones and social media have been an intrinsic part of these adolescents’ lives (Oswald et al., 2016). The participants may also be referred to as ‘digital

natives' a term coined by Prensky (2001), who classified youth born after 1980 as being more familiar with and adept at using technology in comparison to previous generations, those termed 'digital immigrants. Although Prensky's classification of digital natives and digital immigrants is criticised as being somewhat stereotypical and lacking, these different generations may differ in their use of technology, competencies and expectations (Evans & Robertson, 2020). Publications like the *Net Generation, Digital Natives, Generation Me* and *The Millennials,* assert that children today are quite different to those who grew up before the dawn of the world wide web in 1981 (Valkenburg & Piotrowski, 2017). Nussbaum (2007) points out that young people's proclivity to share details of their private lives on the internet created what she considers the first real generational divide since the rise of rock and roll in the 1950s. She provides a satirical account of what older generations think about youth and how they live their lives rather publicly in an online world:

> Kids today. They have no sense of shame. They have no sense of privacy. They are show-offs, fame whores, pornographic little loons who post their diaries, their phone numbers, their stupid poetry—for God's sake, their dirty photos! —online. They have virtual friends instead of real ones. They talk in illiterate instant messages. They are interested only in attention—and yet they have zero attention span, flitting like hummingbirds from one virtual stage to another. (para. 8)

The participants, like all young people, make sense of themselves and the world they live in through reciprocal interactions with their environments (Bronfenbrenner & Morris, 2006). Developmental challenges (fitting in, establishing peer relationships, developing and expressing identities etc.) that adolescents encounter have remained unchanged. However, these processes are taking place within omnipresent digital spaces which tend to amplify them, altering their quality, quantity and scale. Furthermore, this generational cohort engage

with diagnostic language not only through clinical encounters but also via social media and online communities where terms like ADHD circulate widely. This heightened access to psychiatric narratives has the potential to shape how young people understand themselves and navigate belonging in increasingly digitally mediated social worlds. Moreover, the revolution of the Web has freed individuals from the constraints of previously defined communities based on geographical locations to ones that transcend the boundaries of time and space (Duvenage et al., 2020; Kirk & Milnes, 2016). However, this global connectivity may provide heightened awareness of living in an uncertain and violent world, where images of wars, social injustice, disasters precipitated by climate change travel around the globe at lightning speed. Although conceptualised long before the advent of social media platforms, Bronfenbrenner's (1993) ecological model is sympathetic to the wide variety of contexts within which development takes place. Visualised as concentric circles, the child is located at the heart of a nested environment, surrounded by micro, meso, macro systems each with differing degrees of proximity and influence (Bronfenbrenner, 1993). Digital media technologies have added to the complexity of Bronfenbrenner's model, creating a unique landscape within which development takes place. However, previous boundaries between the neat layers of nested systems have effectively been blurred and penetrated by the introduction of digital platforms into daily experiences and intimate relationships, having a profound effect on how adolescents understand themselves, belong, choices they make and the relationships they have with others.

In the last decade, the world has experienced digitalization of all aspects of people's lives at an incredible pace. Smartphones (which have become increasingly more affordable) and social networking services(SNS) are transforming the social life, acts of communication and self- expression of today's youth (Somerville & Brady, 2019). The power, portability and

connectivity of smartphones have significantly reconfigured the production and exchange of information. Digital platforms have transformed the way adolescents interact with one another, providing them with the ability to craft social spaces without the need for physical movement to specific locations (boyd, 2014). It offers adolescents a virtual arena beyond the personal space of their bedrooms to explore the world and understand their place within it.

Recent statistics indicate that 79% of the country has access to the internet. The number South African households without internet access decreased from 64,8% in 2011 to 21,1% in 2022. (Statista, 2024c). Rapid development of SNS provides users access to websites, applications (apps) and electronic tools that facilitate leisure activities and digital interactions with friends, family, celebrities and strangers (Valkenburg & Piotrowski, 2017). Today, smartphones are ubiquitous among middle class adolescents who rapidly adopt digital technology especially social media which privileges speed, complexity and variation, all of which are appealing to the developing adolescent brain.

Covid-19

In 2020, the world was launched into a time of undeniable crisis due to the outbreak of COVID-19, which led to a dramatic loss of life, economic and social disruption, creating unprecedented challenges to healthcare and educational systems (Lamraoui & Al-Alousi, 2023). One of the leading sources of ADHD information online, ADDITUDE, reported that the pandemic triggered a surge of ADHD diagnoses in the US (ADDitude, 2021). Worldwide, the lockdowns affected people of all ages, however the restrictions had a profound effect on adolescent developmental tasks. Mandatory periods of isolation and physical distancing from friends and family, during a time when adolescents are biologically and psychologically driven to connect with peers, social media platforms were increasingly relied upon for social connection, self-expression, escapism and in some instances education

(Hamilton et al., 2020). Prior to the onset of the pandemic, it was estimated that adolescents spend roughly six hours per day on screentime (Valkenburg & Piotrowski, 2017). Although the time that adolescents spend on their phones or other electronic devices may vary by country, these estimates have increased exponentially since the pandemic.

The hard lockdown and the nationwide closure of schools in response to the COVID-19 pandemic saw the emergence of what has been referred to as 'crisis schooling' where many children were educated at home (Anciano et al., 2020). The move to online learning underscored deep set educational inequalities, pertaining not only to hardware or connectivity but digital learning and self-directed learning skills (Literat, 2021). Learners who were fortunate enough to have access to resources like online schooling, use of school textbooks and worksheets were able to keep up with school work, ostensibly teaching themselves or where possible, assisted by their parents (Anciano et al., 2020). Educational spaces collided with the home environment, creating extraordinary stress for parents thrust into the role of educator, while trying to manage their own occupational demands and the strain of economic uncertainty. Similarly, the pandemic was an unprecedented test of the parent-teacher relationship with home-based learning providing either a humanizing or critical glimpse of one another.

Research Aims

The aim of the study is to contribute to knowledge about adolescents' own understanding and perception of their ADHD diagnosis. Exploring how these particular adolescents interact with the world (both offline and online) aims to provide deeper insights into their identity, how they express and understand themselves, access support, develop agency and gather information pertaining to ADHD. This in-depth phenomenological exploration acknowledges that with smartphones as constant companions, the lives and

experiences of young people cannot be considered independently from a digital reality, as the boundaries between online and offline worlds are becoming increasingly indistinct. Drawing on the virtual experiences and perceptions of these young people, may provide a broader understanding of the function, value, and challenges online environments offer young people who are positioned (or who understand themselves) in this particular way. Content posted (or viewed) on social media sites by adolescents represents aspects that they find relevant, rather than observations made about them or prompted from them by adults in non-naturalistic settings. Although online content may not always reflect adolescents' authentic identities and practices, it does however illuminate how they choose to present themselves and share their lives in these digital spaces (Literat, 2021). The phenomenon of ADHD has been extensively researched, however, a vast number of studies are located within a clinical setting and have largely employed quantitative methods of enquiry (Kendall, 2011; Wang et al., 2016). Qualitative studies have started to address the distinct paucity of phenomenological studies focusing on the overall lived experiences and perceptions of ADHD among adolescents (for example Béliard et al., 2019; Brady, 2014; Grønneberg et al., 2023; Moss, 2017; Singh et al., 2010). However, more work is required to hear the authentic stories of young people's encounters, understanding and experiences of ADHD.

By way of concluding this chapter, a summary of the content contained in each chapter is provided in the following section.

Chapter Organisation

Chapter one has provided the contextual background, situating the study and the participants in time and place. Chapter two provides a theoretical framework underpinning the study, focusing on the evolving concepts of adolescence and identity within the contexts of psy-disciplines, schooling and narrative identity. It begins by examining the shifting

construction of childhood and adolescence, highlighting how these categories have been influenced by industrialisation, compulsory education and developmental psychology. Key theories, Foucault's (1977) critique of power and Rose's (1999) examination of psy-discourses in shaping subjectivity are included. Hacking's (2007) concept of the discursive construction of human kinds and the looping effect is added to emphasise how classification influences behaviour and identity. The role of schools as sites of regulation and normalisation through surveillance and assessment framed by Bourdieu's (1996) concepts of capital and habitus is presented. The chapter concludes by shifting the focus to identity, contrasting Erikson's (1968) developmental model with more fluid and culturally contingent understandings of identity. The impact of master narratives, agency and imagination in constructing alternative narratives provides a foundation for understanding identity formation in complex cultural, social and institutional contexts,

Chapter three provides a comprehensive review of the literature relevant to the study of ADHD and its intersection with the digital world, focusing on both international and South African contexts. The chapter is organised into three sections, the neurobiological perspective on ADHD, which includes qualitative studies of adolescents' experiences with diagnoses and medication; the school environment, investigating the links between academic pressure, relationships with teachers and the label's role in addressing challenges within schools; and social media's influence on adolescents with an emphasis on the costs and benefits of the digital world. Special attention is given to TikTok, a popular youth focused platform and its role in shaping adolescents' experiences.

Chapter four provides a methodological outline of the study, which is qualitative in design and located within the phenomenological paradigm. The study was conducted using

creative narrative methods. The participants are described according to their age, race, gender and ADHD diagnosis (by a medical professional or who self-identify with the phenomenon) along with other inclusion criteria. Data collection and the analysis of both the visual and verbal data is explained. The chapter concludes with the researcher's own positionality and ethical considerations.

Chapter five is the first of four analysis chapters in which I discuss the findings of the study. Four narrative portraits were specifically selected for their ability to illustrate how adolescents use online and offline spaces in the construction of their identity, agency and connectivity to others. Theory is kept to a minimum in this chapter, creating a broader space to surface the stories about these young people's lives in both the offline and online worlds.

Chapter 6 is the first of three thematic analysis chapters across the data set and two overarching themes are presented. The first theme, ADHD turning points examines critical moments when participants were diagnosed with ADHD or began to self-identify with the phenomenon. These turning points are illustrated using particular incident narratives [PINs] (Wengraf, 2011), providing detailed accounts of interactions with medical professionals, teachers and parents. The second theme explores the transformative nature of an ADHD diagnosis and contains subthemes of dis-connectivity and feeling misunderstood and implications for the future.

Chapter seven explores participants' experiences in relation to the social institutions of health and education which create the nexus for the diagnosis and management of ADHD. The chapter is organised into two central themes. The first theme, the biomedical understanding and management of ADHD examines participants' perceptions of ADHD and

their experience with medication. The second overarching theme, experiences within the institution of school explores participants' interactions within the school setting, with a particular focus on anxieties around failure and performance, navigating the school context without a sense of belonging and concludes with the relationships with teachers.

Chapter eight, the final analysis chapter, moves beyond the institutions of medicine and school to the virtual world which has emerged as a significant institution which offers dynamic spaces for socialisation, learning and identity play. This chapter examines both the challenges and opportunities present in an online world, exploring how these engagements impact the development and construction of adolescent identity.

In chapter 9 the concluding chapter, I provide an overview of the findings presented in the thesis in relation to the research aims. Adolescents' lived experiences and perceptions of ADHD which included interactions with medical professionals, parents, teachers and peers, and their insights into the effects of their ADHD medication are summarised. The identities within an offline and online world are contrasted. The digital world is framed as a paradoxical space rich with possibilities and challenges. The chapter highlights the value of creative methodologies in capturing rich and nuanced data. Strengths, limitations and the direction of possible future studies are also provided.

Chapter Two – Theoretical Framework

The concept of childhood and adolescence has evolved over time, and is widely understood according to Western beliefs, with professionals collaborating to create frameworks through which young people's bodies and behaviours are observed, classified and managed. However, adolescence is a complex and ever-changing category which is not always characterised according to neat, chronological progressions as developmental psychology suggests. This chapter provides a theoretical framework for exploring adolescence and identity, examining how psy disciplines and discourse have profoundly influenced our understanding of human behaviour. By establishing dominant models that interpret, classify and manage individuals according to normative frameworks, these disciplines have been deeply instrumental in constructing the concept of the 'universal child'. The institution of school is a pivotal site where the classification of individuals is enacted and enforced. Schools serve as not only as centres of learning but are also mechanisms of regulation, shaping identities and behaviours of young people according to societal norms.

A classical account of identity is located in the work of Erikson (1968), who proposes that adolescence is a critical period for establishing identity, a time wherein individuals question who they are, what role they play and what they want to become. Rooted in developmental psychology, Erikson (1968) emphasises that identity formation is a linear process, marked by stages and crises particularly during adolescence when individuals grapple with "identity vs. role confusion". For Erikson (1968), identity is achieved by resolving these crises, creating a coherent and stable sense of self. In contrast, Hall (1996) challenges the notion of a stable, unified identity emphasising instead that identity is shaped by external forces like culture, power and discourse. This chapter examines narrative identity which offers an extension of Erikson's concept of identity. However, narrative identity also challenges the idea that there is a uniform pattern of developmental milestones through which

individuals progress in exactly the same way and at the same rate, disrupting the notion of the 'universal child' and resisting traditional frameworks of identity development.

Changing Conceptions of Childhood and Adolescence

Adolescence is a fairly recent phenomenon, recognised as a distinct life stage which can be attributed (in part) to industrialisation and the concurrent expansion of educational opportunities. The word adolescence originates from the Latin word "adolescere" which means to "grow up or to grow into maturity" (Steinberg & Lerner, 2004), and is thus understood as a transitional period from childhood to adulthood (Arnett, 1999).

In his seminal work, the *Centuries of Childhood,* the French scholar, Ariès (1962) claims that childhood is not a natural phenomenon, but rather a concept created by society. Ariès asserts that during the Middle Ages the concept of childhood and adolescence did not exist. Through the analysis of artworks, pictures and texts, Ariès (1962) claims that children after the age of infancy were conceived and depicted as miniature adults. The absence of childhood or adolescence as a unique period endured until the late 18th century, when Jean Jacques Rousseau, proposed that "treating [children] like miniature adults is potentially harmful" (citied in Atwater, 1992, p. 8). Rousseau's (1762) work is credited as being one of the earliest developmental accounts that recognised adolescence as a particular life phase.

Compulsory school attendance is considered one of the most significant contributors to the institutionalisation of adolescence, precipitating the categorisation of young people according to their age, a key feature within current Western societies (Ariès, 1962). At the start of the 20th Century, child labour was prohibited, school attendance became mandatory, and children were sheltered from the realities of everyday life (Burman, 2008). During the final decades of the 20th century in Western societies, youth-orientated industries began targeting young people as a particular consumer group, creating adolescence as a unique

period with a distinct identity and sense of belonging (Koops & Zuckerman, 2003). Ariès (1962) considered adolescence as "the privileged age of the 20th century", concluding that:

> […] our society has passed from a period that was ignorant of adolescence to a period in which adolescence is the favourite age. We now want to come to it early and linger in it as long as possible. (p. 31)

The modern psychological perspective of adolescence can be traced back to the first president of the American Psychological Association, Stanley Hall. Credited with the 'discovery' of adolescence, Hall's (1904) study, *Adolescence,* claimed that it was a new developmental phase rife with mood disruptions, conflict with parents and enthusiasm for risky behaviour. Hall (1904) popularised the notion that adolescence is an inevitable period of "storm and stress" almost entirely dictated by biological influences, best contained or passed through as swiftly as possible. Since Hall's (1904) work establishing adolescence as an area of scientific interest, the debate over adolescent storm and stress continued to simmer (Freud, 1958, 1968, 1969; Mead, 1961). Today, the biological underpinnings i.e. 'raging hormones' remain a popular explanation for the perceived lability, aggression and sexuality associated with adolescence (Arnett, 1999). Although mood disruptions, risky behaviour, chaos and conflict between adolescents and their parents is considered an inevitable feature of this life phase, current research is creating a more realistic view (Siegel, 2014). There is increasing evidence that while adolescence can be a challenging period, individuals negotiate it with varying degrees of difficulty. There is also wider recognition that biological changes are no longer considered the only factor affecting young people's development, adjustment and behaviour, but rather a complex interplay between biological, contextual, psychological, social and environmental factors (Siegel, 2014).

Despite universal markers such as biological growth and psychological development, adolescent development is influenced by the context within which it occurs. Geographical locations in which adolescents develop, skills they are required to master, and the ways their progression toward adulthood is commemorated is embedded and defined by cultural, historical and societal conditions (Ngwenya et al., 2023; Timimi, 2005). The current concept of adolescence originates from constructs developed in the Global North, raising with it considerable uncertainty as to whether it is applicable to the African context (Ngwenya et al., 2023). Understanding adolescence from the Global North perspective ignores important considerations like context, culture, values, beliefs and social structures within which young people live, such as political, social, healthcare systems as well as formal and informal processes (Ngwenya et al., 2023). Western defined concepts of adolescence overlook the lived realities of many young people and is applicable to a small minority of children in developing countries like South Africa. Many children have never had the privilege of living in a protected, separate world of childhood, and those who participate in un-childlike behaviour like engaging in paid work, caring for siblings or ailing family members or who don't have traditional (nuclear) families, are often isolated from the category altogether and are referred to as 'youth' (Seekings, 2008). During the apartheid regime in South Africa the terms 'youth' and 'children' were not always determined by age, but typically racialised and politicised (Seekings, 2008). Black children who were embroiled against the struggle against the prevailing regime were defined by authorities as 'youth' and were positioned as violent, anti-social, undisciplined and criminal deviants (Morrell, 1998; Seekings, 2008). Conversely white children were constructed as vulnerable and innocent. Today, these categories are still applied in racial and classed ways.

"Norms and milestones that constitute developmental psychology present a picture of orderly progressive development of ideal, typical citizen subject who is knowable, known, docile and productive" (Burman, 2008, p. 26). Burman (2008) advises, "we need to be vigilant about the range of intended and unintended effects mobilised by claims to development, to be mindful of whose development is being privileged and correspondingly, who is marginalised" (p.12). This is particularly pertinent in South Africa where healthcare facilities and educational systems, especially those serving previously disadvantaged communities are inadequate, and young people are considered 'abnormal' or 'inferior' according to Western precepts (Ngwenya et al., 2023). For many young people living in post-apartheid South Africa, transitions from adolescence to adulthood are not neat, orderly moments of change, nor do they follow the sequences prescribed by Western psychology (Bray et al., 2011). It is argued that developmental psychology does not consider the chaos and complexity of the developmental process, and is culture's way of determining how children should be, as opposed to steering us closer to the real, lived experiences of young people (Burman, 2008; Timimi, 2005).

Social Media and the Notion of a Perpetual Childhood

Today, adolescents navigate a unique developmental landscape where interactions within a digital world are as influential as their experiences in the material world. Social media platforms are facilitating spaces for self-expression and self-experimentation, allowing young people to construct and reconstruct their identities in ways previously unimaginable and unavailable. In the 1980's, US child psychologists and cultural critics like Postman (1983), noted that the line between the culture of childhood and adulthood was rapidly vanishing, mostly due to the corrupting influences of television which granted children access to an adult world. Arguing for the return to a time of pre-television, where distinct boundaries between adults and children existed; Postman (1983) hoped that such a remedy would

ultimately rescue childhood, ensuring the longevity of the category well into the 21st century. Today the distinction between childhood and adulthood has rematerialized, however, it has done so in ways contrary to how Postman imagined. Although the category of childhood remains, how it is experienced and represented is now progressively within the control of young people themselves (Eichhorn, 2019). In our current digital age, children are free to construct their own worlds and fill these spaces with their chosen content.

During times when the construction of childhood was firmly within the remit of adults and reflected to children via the family photograph album or grainy cine-camera clips, young people bypass this process by circulating content without the input or interference of adults (Eichhorn, 2019). Eichhorn (2019) presents an astute distinction to Postman's prophecy of a disappearing childhood, claiming that childhood and adolescence are more evident and ubiquitous than ever before. Eichhorn (2019) ascribes the pervasiveness of these categories to children and adolescents' extensive "access to technologies needed to represent their lives, circulate these representations and forge networks with each other, often with little or no adult supervision" (p. 12). Ironically, the threat of a disappearing childhood, has been replaced with what Eichhorn (2019) calls a "perpetual childhood" (p. 3), with the predicament that digital technology has facilitated a childhood that can never be forgotten. While many people nostalgically look back on childhood memories and often regret not keeping more souvenirs and photographs from their past, some populations have grown up with the complete absence of family albums and other mementos during forced displacement, political conflict during events like World War II and mass migration (Eichhorn, 2019). Today, such complete absence of childhood relics and reminders may never be experienced by today's youth, especially those who are categorised as Gen Alphas. The premise of a perpetual childhood is not to promote another moral panic about the harmful effects that a

digital world may have on children. Eichhorn (2019) rather encourages us to reconsider what is at stake when entering an era when it is almost impossible to disconnect ourselves from childhood and adolescence. The consequences of this for young people are only starting to emerge and will very likely have a significant bearing on what it means to grow up in the 21st century. The evolving concept of adolescence, influenced by cultural, historical and technological shifts, underscores its fluid and constructed nature. Adolescence is not just a biological or developmental phase but is deeply shaped by societal and institutional narratives. Psy-disciplines are key institutional forces which have historically classified and managed individuals, reinforcing normative frameworks that continue to influence our understanding of adolescents.

Psy-disciplines / Psy-complex and the Classification of People

Foucault (1977) explains the historical pivot toward the scrutiny of the individual, underpins the foundation of all sciences and methodologies employing the prefix 'psycho', commonly referred to as the psy-disciplines. It signified the birth of a process where individuals began to emerge as worthy subjects of study, intervention and potential transformation. Knowledge of the individual, and the comparison of human behaviour and its psyche against established norms, became the foundation for developing practices and therapies with the intention of identifying deviations, and subsequently transforming, improving and correcting such 'aberrations' (Foucault, 1977). The term psy-disciplines are closely linked to the concept of psy-complex and are often used interchangeably. However, a valuable distinction is that "the psy-disciplines are regimes of knowledge and expert practice, while the psy-complex acknowledges the interaction between expert knowledge regimes and those subjected to, interpolated into and interacting with those disciplinary knowledges" (McAvoy, 2014, p. 1).

The natural sciences model has had a significant influence on psychology and psychiatry. This model operates on the assumption that all truths regarding human behaviour, cognition, and mental processes were in existence long before the discipline was established, waiting for their discovery and systematic organisation (McAvoy, 2014). However, the influential works of Foucault (1972, 1976, 1977) further developed by Rose (1999) critique this assumption, and argue that the psy-disciplines do not merely unveil pre-existing truths, but rather construct the very expertise they utilise for assessment and classification. Thus, psy-disciplines bring into being the phenomenon they claim to measure, creating specific forms of expert knowledge and developing standards of normativity (Burman, 2008). These standards can then be used to mold socially desirable individuals. Furthermore, psy disciplines facilitate socio-political control, largely because they present themselves as adhering to a 'neutral scientific' paradigm capable of determining 'truths' about human nature and behaviour (Burman, 2008).

The Foucauldian framework revises the traditional understanding of the shaping of the subject, asserting that it is not as a result of psy-expertise being applied to an individual, but rather a complex interplay of external influences and personal agency (McAvoy, 2014). The "dispositive" (i.e. the discourse, metanarratives and other apparatus) of the psy-disciplines provide ways through which the subject is constructed and understood by individuals themselves and society at large (Foucault, 1977). Rose (1999) posits that psy disciplines are instrumental in the production of the modern subject, subjectivity and self-understanding. The development of psychology into a recognised field and its societal role was "tied to its capacity to produce a technical means of individualisation, a new way of construing, observing and recording human subjectivity and its vicissitudes" (Rose, 1999, p. 136). Together with other psy-disciplines, psychology is a technology, "a way of making visible and intelligible certain features of persons, their conducts and their relations to one

another" (Rose, 1999, p. 11). Foucault argues that these technologies "permit various operations on [individual's] own bodies and souls, thoughts, conduct, and ways of being, so as to transform themselves in order to attain a certain state of happiness, purity, wisdom, perfection, or immortality" (Foucault, 1988, p. 18). Although these technologies allow one to actively construct oneself, they are not freely chosen. "These practices of the self are not something invented by the individual himself. They are models that he finds in his culture" (Foucault, 1988, p. 81). For Foucault these technologies provide crucial insight into understanding how we have become to be specific types of subjects in specific historical periods (McAvoy, 2014).

The functioning of the psy-disciplines is intimately tethered to the neoliberal politics of Western democracies where individuals are seen as autonomous agents who are personally responsible for the success or failure of their lives, independent of the social or economic conditions that shape their possibilities (Rose, 1999). Rose's (1999) critique points to the limitations and potential dangers of this alliance between the psy-disciplines and neoliberalism. Raising concerns about how such a paradigm may marginalise or pathologise individuals who do not fit or succeed within its prescribed framework of 'liberty', 'autonomy' and 'self-realisation', all of which are prized forms of contemporary neoliberal societies. Moreover, it calls into question what gets lost in a society where collective issues and structural inequalities are reframed as problems located within the individual (Rose, 1999).

Human Kinds and the Looping Effect

While Rose considers how psy-discourses inform the conditions of possibility for how we come to understand and experience ourselves, Hacking (2007) focuses on how scientific classification "may bring into being a new kind of person, conceived of and experienced as a

way to be a person" and the subsequent "looping effect [...] the way in which a classification may interact with the people classified" (p. 286). Despite the ostensibly neutral terms of these categories, Hacking (2007) postulates that they contain a normative bias. With limited exceptions, the phenomena which are segmented into 'kinds' by human and social sciences, are those who are conceived as deviant; discourses of deviance reinforce corresponding notions of normalcy. When thinking of kinds of people as objects of enquiry, it is normally done so with some kind of intention in mind, either to control them (e.g. prostitutes), to help them (e.g. suicidal individuals) to change them for their own good (e.g. the obese) or simply to admire, encourage, emulate and understand them [e.g. geniuses] (Hacking, 2007). We think of these people as "definite classes, defined by definite properties", and as we gather information about these people, we can do more for them, control, change or emulate them better (Hacking, 2007, p. 293).

Hacking argues that the discursive construction of human kinds has a generative function, it "makes up" a new category of individuals and while this may just be considered conventional nominalism, this making of human kinds is a distinct and dynamic kind of nominalism. In *The Social Construction of What?* Hacking (1999) introduces us to the differentiation between indifferent kinds and interactive kinds. Natural kinds like geometric shapes, whales or a lump of gold are considered indifferent kinds. In the case of the whale, nothing changes when it is classified as a mammal as opposed to a fish. Humans interact with and react to the labels and the treatment assigned to them, they are moving targets as our investigations interact with the targets themselves, they are no longer quite the same as before, this is the looping effect. By way of an example, Hacking (2007) explains this process using the historical evolution of multiple personality disorder (now known as dissociative identity disorder):

> We tend to behave in way that are *expected* of us, especially by authority figures, doctors for example. Some physicians had [individuals with multiple personalities] among their patients in the 1840s, but their picture of the disorder was very different from the one that is common in the 1990s. The doctor's vision was different because …the doctor's *expectations* were different. That is an example of a very general phenomenon: the looping effect of human kinds. *People classified in a certain way tend to conform to or grow into the ways that they are described*; but they also evolve in their own ways, so that the classifications and descriptions have to be constantly revised. Multiple personality is an almost too perfect illustration of this feedback effect. (p. 21, emphasis added)

The looping effect does not only occurs in relation to people who are aware of the label given to them. Even when people are unaware of the classification (like young children) the looping effect may still be possible. Hacking (2007) asserts that the looping effect involves broader units like schools and families, influencing and modifying the attitudes of people around the child because of the diagnosis. This in turn affects the child who has been diagnosed, and making them see themselves differently, thus giving rise to the looping effect.

Hacking (2007) provides a list of seven 'engines' which produce (scientific) knowledge and explores the implications of these forms of knowledge production for understanding human life, particularly in relation to the psy-disciplines categorisation and diagnosis of behaviour. The engines are, ordered according to the times they came into effect, 1) count, 2) quantify, 3) create norms, 4) correlate, 5) medicalise, 6) biologise and 7) geneticise. Hacking added three further engines to the list, 8) normalise, 9) bureaucratise, and 10) reclaim identity. The last engine, reclaiming your identity, has become increasingly potent of late as it includes "resistance by the known to the knowers" and a significant source

of countless looping effects (Hacking, 2007, p. 306). Individuals who are medicalised, normalised and administered often attempt to regain control from the institutions and the professionals contained within them, occasionally creating new experts and new institutions.

The Institution of School

Psy disciplines like developmental psychology are "explicitly concerned with the comparison, regulation and control of groups and societies" (Burman, 2008, p. 13). Schools are deeply influenced by developmental psychology and other psy disciplines which shapes how education systems understand, manage and classify children based on established norms. As key social institutions, schools are not only sites of academic learning but also spaces where adolescents navigate roles, relationships and societal expectations.

Foucault (1977) explains that a body is deemed 'docile' when the individual is shaped and deviance from the norm is corrected by State means and power, rendering them, obedient, practical and productive citizens. In a modern society, power is no longer exercised through overt forcefulness, but rather through the internalisation of self- surveillance (Foucault, 1977). In contemporary societies, controlling the behaviour of large populations is essential, however, the direct application of force cannot be efficiently distributed. Instead, power is distributed through discourse, a subtle yet effective mechanism (Foucault, 1977). These mechanisms of power are embedded in schools and classrooms practices, defining what is considered to be appropriate behaviour, acceptable academic performance, 'normal' or 'deviant' behaviour (Burman, 2008). Children's bodies are thus regulated and normalised through instruction, rules and assessments, applied by teachers and reinforced by institutional policies, curriculum and pedagogical practices. Foucault (1977) extends Bentham's concept of the Panopticon into modern institutions like schools where discipline and control are exercised through the subtle yet pervasive mechanisms of surveillance and self-regulation.

Learners are observed through the presence of teachers, particular classroom arrangements, rigid timetables and other mechanisms like attendance registers and school surveillance cameras (Graham, 2006). Furthermore, learners are monitored and evaluated through examinations and assessments, which rank, classify and evaluate their academic performance. Individuals internalise these norms, and learn to view themselves through the eyes of authority figures, even in their absence (Graham, 2006).

A quiet, structured, 'docile' classroom is considered to be the foundation of instruction. Disruptive behaviour, defiance of classroom norms or challenging teachers' authority that disrupts this harmony can be viewed as violating the 'purity' of the classroom (Douglas, 1996). In her work *Purity and Danger*, Douglas (1996) uses the concept of "pollution" to describe how certain practices, behaviours or objects may threaten social order. Douglas'(1996) concept of dirt or pollution extends beyond physical cleanliness, contending that "where there is dirt there is a system" (p. 36). She continues, "dirt is the by-product of systematic ordering and classification of matter, in so far as ordering involves rejecting inappropriate elements" (Douglas, 1996, p. 36). Just as societies create systems to deal with pollution, Douglas' (1996) concept can be used as a framework to understand how children who challenge the norms of the classroom behaviour are marginalised, pathologised, and medicalised to restore the 'purity' of the learning environment.

Schools across the world have the same institutional forms, they teach more or less the same curriculum (i.e. mathematics, languages, sciences), children are split according to age and ability, governed by timetables and instructed by adults. However, what happens inside schools and classrooms is an entirely different story (Christie, 2008). Whether children are successful or fail at school may be ascribed to their efforts, however, both success and

failure are inextricably linked to social structures. Christie (2008, p. 8) proposes that "when people fail in predictable patterns this is a social issue that goes beyond the individual person". Class, social relationships, fluency in the language of instruction, learning experiences in the classroom and the kind of school the individual attends are structural opportunities that influence individual achievement, yet are beyond individual control (Christie, 2008). The tension between individual and social inequalities is captured by French theorist Pierre Bourdieu within his concept of 'forms of capital' which exist in economic (income, property and other financial assets), social (contacts, social networking and relationships) and cultural forms (Bourdieu, 1977, 1986). According to Bourdieu, cultural capital (i.e. familiarity with the dominant cultural codes in society) exists in three states, embodied, objectified and institutionalised states, each form serving as an instrument for the appropriation of symbolic wealth, considered worthy of being desired or owned (Bourdieu, 1977). Cultural capital is particularly valourised within the field of education as it is often misperceived by teachers as a 'natural gift' of academic intelligence and is rewarded with upwardly biased evaluations of learners' academic ability (Bourdieu & Passeron, 1990). Thus, when children from wealthier socioeconomic backgrounds enter school, they do so with certain privileges or cultural capital that provide them with advantages and better chances of success. Children from advantaged families are more likely to attend schools that recognise and reward cultural capital. These learning environments are often characterised by peers from similar privileged backgrounds, a keen focus on the academic environment and high academic achievement. Bourdieu and Wacquant (1992) propose that capital is intrinsically linked to power, the more capital an individual possesses, the greater their access to power within the "field". Bourdieu (1990) does not consider the field as a particular territory or geographical space, but rather as a "structured social space" containing "people with constant and permanent relationships that operate within this space by either

transforming or preserving the space by defining their position within the space"(pp. 41–42). To gain understanding of human actions in relation to conditions of the field, Bourdieu (1990) introduces us to "habitus", which he defines "ways of standing speaking and walking, and thereby thinking and feeling" (p. 70). Bourdieu (1990) compares the social field to a game, describing habitus as a 'feel for the game', those who understand the rules of the game put their capital to good use, allowing them to progress further than others.

> When habitus encounters a social world of which it is the product, it is like a 'fish in water', it does not feel the weight of the water, and it takes the world about itself for granted. (Bourdieu & Wacquant, 1992, p. 127)

Habitus has the capacity to influence a student's attitude toward learning, educational aspirations and behaviour within the academic environment. A learner whose habitus is misaligned with the institution's values and attitudes can experience school as a hostile and strange place.

Gender, Masculinity and Discipline within the Context of School

Although there is no significant gender difference in school enrolment, more males repeat a grade or drop out of school entirely, with less males writing the National Senior Certificate school leaving exam (Spaull & Makaluza, 2019). In addition to poor school performance and throughput, boys absorb the bulk of resources in additional academic support and special needs education (Timimi, 2005) which may suggest that boys are falling disproportionally outside the norm. Behavioural 'problems' among boys are frequently associated with the expression of hegemonic masculinity.

Masculinities are not biologically determined but rather socially constructed and shaped by socio-political contexts. In his seminal work, *Gender and Power*, Connell (1987) asserts that masculinities are formed through social practices and relations that mirror broader

structures of power. According to Connell (1987), 'hegemonic masculinity', describes the dominant form of masculinity which constructs men as being brave, dominant, aggressive, physically strong, defiant of authority figures, and the casual treatment of schoolwork. Connell's concept of hegemonic masculinity received a great deal of criticism with respect to its fixed and over simplistic content, failing to capture the fluidity, flexibility and diversity of masculinity especially within the South African context (Morrell et al., 2012). Connell (2000) subsequently addressed some of these criticisms, conceding that masculinity is complex and is constantly negotiated depending on social, political and cultural conditions.

Masculinity studies conducted in the UK among white and black adolescents confirm how race and social class shape the development, interpretation and expression of their masculine identities (Frosh et al., 2003). In post-apartheid South Africa, social class intersects with how boys construct and express their masculinities. Schools are key socialising institutions, as Morell (1998) points out, different kinds of schools, (i.e. township, private and former Model C schools) are instrumental in the construction of different masculinities. Black boys who attend private or former Model C, historically serving white privileged communities, are referred to pejoratively as 'coconuts' by their male counterparts in the townships (Durrheim & Mtose, 2006), and are considered lacking (African) masculinity (Langa, 2010). Race and class may also shape how boys construct and perform their identity. For middle class boys, masculinity may be expressed through academic achievement and working class boys being streetwise. (Frosh et al., 2003; Langa, 2010). Black masculinity has been keenly studied to account for the experiences and expressions of young black male learners' 'machismo' (Hooks, 1990; Sewell, 1995). These enquiries have "often focused on the sexism, aggression and violence of black males. Not only does this reinforce stereotypes but it also leads to a homogenous image of black masculinity" (Wright

et al., 1998, p. 78). Black boys are often exoticised for their "sporting prowess, musical ability and representations of style, whilst simultaneously criminalising these attributes" (Wright et al., 1998). Other research indicates that educators and school administrators often view black youth as "subnormal" when it comes to academic performance and ability, and are not considered to be as invested in the educational process as their White middle class peers (Goff et al., 2014; Rudd, 2019). For black adolescent boys, these racial biases weaken their sense of belonging or "mattering" (Carey, 2021). Partial "mattering" due to stereotypical traits and talents where their value is conditional and based on their contribution to the school, undermines their self-concept and worth, compelling them to question whether they matter at all (Carey, 2021). This is exemplified in the granting of sport scholarships for black boys providing them access to educational institutions where their athletic prowess is valorised and exploited, yet their academic and intellectual abilities remain ignored and neglected (Harrison et al., 2011).

Phoenix (2024) argues that the dehumanization of black people and repeated efforts to portray them as less intelligent than white people continue to haunt society, shaping contemporary actions and beliefs. Phoenix (2024) examines the critically acclaimed UK documentary *Subnormal: A British scandal,* which reveals how in the 1960s and 1970s black children from the English Caribbean or whose parents were from the Caribbean, were disproportionately classified as subnormal. Despite the absence of any evidence of being educationally inferior, these children were ejected from mainstream schools in the UK and relocated in Educationally Subnormal Schools. The documentary is a chilling reflection of how such miscategorisation is a result of deeply ingrained social inequalities. The film provides the individuals (telling their stories much later as adults) a platform to share how such racist treatment results in feelings of profound shame, pain, the wish to remain invisible

and devastating intergenerational consequences. Classified as subnormal served as a catalyst for some individuals to work hard, gaining a multitude of awards and degrees, proving to themselves and others that they were not intellectually lacking, sacrificing valuable time which could have been invested in raising their children and earning an income. The documentary confirms that the recognition of injustices is an insufficient catalyst for change to address inequities, as the ideologies that underscore them remain invisible and thus remain unchanged (Phoenix, 2024).

Research in the US indicates that black and Hispanic pupils are subjected to more severe disciplinary measures and experience more criminalised forms of school discipline in comparison to their white counterparts (Little & Tolbert, 2018; Ramey, 2015). In South Africa, similar patterns emerge where black youth tend to be caricatured as aggressive, violent, threatening (Haley & Bradbury, 2015). Black learners, particularly those who attend privileged schools tend to be disproportionality disciplined, suspended or expelled for relatively minor transgressions. In contrast, white boys who commit more serious offences are often viewed as having a medical/psychiatric conditions believed to be beyond their control (Blum, 2011; Moss, 2017). This racial discrepancy echoes Evans' (2004) observations in the UK where white children's behaviour is often medicalised and considered 'mad' or 'sad', while black children exhibiting similar behaviour are labelled as 'bad'. These racial and gendered stereotypes exacerbate the challenges faced by many black boys as they not only influence the severity of the discipline but also impact on teacher expectations, pedagogical practices and assessments (Little & Tolbert, 2018).

Schools are spaces where norms, expectations and classifications significantly shape adolescent' development. The structures and practices within schools intersect with broader

cultural and social forces, influencing how young people perceive themselves and are perceived by others. These processes make school pivotal for the construction of identity as they provide both opportunities and constraints for self-expression and belonging.

Identity

The question "who am I?" and "how do I articulate who I am?" has developed into what is known as identity. Originating from the Latin root 'idem', which translates to 'the same', the concept of identity paradoxically suggests both similarity and difference (Buckingham, 2008). On one hand, identity is individually unique, something that distinguishes us from others. Conversely, identity implies a collective belonging, like gender, national or cultural identity, implying that identity is shared with those who may be similar (albeit not the same) in some significant ways (Buckingham, 2008). Identity is a nebulous and rather slippery term, used in multiple contexts across a range of epistemological frameworks, to the extent that its analytical effect has become somewhat diluted. According to Brubaker and Cooper (2000):

> conceptualising all affinities and affiliations, all forms of belonging, all experiences of commonality, connectedness and cohesion, all self-understandings and self-identifications in the idiom 'identity' saddles us with a blunt, flat, undifferentiated vocabulary". (p. 2)

Erikson (1968).views adolescence as a critical period for establishing identity, a key period wherein individuals question who they are, what role they play and what they want to become. Erikson's (1968) developmental model describes eight successive stages, with each stage characterised by a crisis or conflict needing to be resolved. Erikson (1968) did not use the term crisis to imply "a threat of catastrophe, but a turning point, a crucial period of increased vulnerability and heightened potential" (p. 96). Each stage is construed as a polarity, a positive and confident disposition (e.g. trust) contrasted with an alternative

extreme of diminished enthusiasm (e.g. mistrust). Erikson (1968) proposes that the primary task during adolescence is resolving the conflict between "identity" and "role confusion", facilitating the progression into early adulthood and the formation of intimate relationships. While identity is associated with positive outcomes, role confusion triggers uncertainty, doubt and a sense of loss, provoking serious questions about the view of oneself and how one is perceived by others. Role confusion during adolescence is not uncommon as young people navigate considerable physical, cognitive and emotional changes (Siegel, 2014) and it is this 'crisis' that requires resolving. In Western societies, it is widely accepted that adolescents may playfully engage in desires, ambitions and risks, during a phase which "… is firmly defined and yet seems uniquely made for young people" (Erikson, 1968, p. 156). Erikson (1968) defined this stage as a "psychosocial moratorium" and can be understood as a 'niche' or a pause during which young people experiment with different possible identities, roles and beliefs without any permanent commitment to them.

Canadian sociologist, Goffman, explains how identity is achieved through ongoing interactions and negotiations with others. In his work, *The Presentation of the self in Everyday Life,* Goffman (1959) explores how social encounters in public spaces, are carefully managed and performed to influence or guide the impression that others may have of individuals. Ultimately, these presentations are guided by the response from others as well as rules and other social conventions, which vary in accordance with the setting. By using theatrical metaphors borrowed from dramaturgy, Goffman (1959) analyses and explains how people 'perform' during everyday face to face interpersonal interactions. During these interactions, individuals project an image, much like 'actors' deliver performances on 'stages'.

In his work titled *Who Needs Identity?* Hall (1996) explores the foundational beliefs and diverse approaches that have shaped the theoretical landscape of identity. He explores the role of discursive theories that emphasise how language influences the shaping of the subject, and the way it effects how we experience our bodies. Furthermore, he discusses the influence of psychoanalytic theory which positions the internal realm of 'drives' and 'desires' as central to identity, and draws on Althusser's theory of interpellation, which explains how individuals come to recognise themselves as subjects through social and ideological structures. Althusser's (1999) central thesis, posits that ideology calls or hails individuals into roles or identities through interpellation. When the individual is "hailed" and by acknowledging and responding to this call, it positions him as a specific individual recognised and constituted within the social order. Hall (1996) defines identity as follows:

> I use the word 'identity' to refer to the meeting point, the point of suture, between on the one hand the discourses and practices which attempt to 'interpellate', speak to us or hail us into place as the social subjects of particular discourses, and on the other hand, the processes which produce subjectivities, which construct us as subjects which can be spoke. Identities are thus points of temporary attachment to the subject positions which discursive practices construct for us. (pp. 5 - 6)

Hall (1996) suggests that understanding identity requires a combined consideration of the role psychoanalytic, discursive and external social processes play in the establishment of a sense of self, and how we understand our place in the world and our relationship with others. Therefore, as a more effective means of engaging with the notion of identity, Hall (1996) argues that we should consider identity as a concept "under erasure"; a philosophical technique for:

> terms no longer serviceable – 'good to think with' in their original form. But since they have not been suspended dialectically, and there is no other, entirely

> different concepts with which to replace them, there is nothing to do but to continue to think with them. (p. 1)

The act of marking a term 'under erasure' is to write it down and then cross it out, signalling the term's simultaneous necessity and inadequacy. Consequently, identity is not an indicator for a stable position in the world, a consistent feeling of belonging, nor an authentic sense of self, but rather as something that feels contested when we consider our social positioning, our belonging, and a sense of who we really are (Botsis, 2018; S. Hall, 1996). This aligns with Bauman's (1996) proposal to conceptualise identity as a verb, suggesting that it may be more helpful to talk about *identification* and the positioning of the subject as they become attached to categories of difference and their feelings of belonging to those categories. Hall (2000) describes identification as "a process of articulation, a suturing, an overdetermination not a subsumption" (p. 3). Botsis (2018) remarks that Hall's suture analogy offers a particularly vivid way in which we can understand identity, describing it as:

> something that feels natural but bears the scars of being held together. The suture leaves a scar on the body, so one always knows that area of the skin was sewn together, but once the tissue has healed, the scar becomes part of our bodies in a way that makes us unique and feels natural. (p. 21)

The suture can also be understood as an "intersectionality" a concept that is attributed to the legal scholar Crenshaw, but now has become ubiquitous within social sciences and humanities (Botsis, 2018). Intersectionality is a framework for analysing how various forms of social stratification like race, culture, class, sexuality and ability among others are interwoven with one another (e.g. a black, middle-class female, diagnosed with ADHD), which determine our position in society in relation to others. However, as Yuval-Davies (2006) contends, our social identities and experiences can't be fully explained or understood by isolating any single element of difference. As there isn't a single way of being any one of

these categories, or that they are immutable or even necessary. Similarly, Jones and Dlamini (2013) encourage us to move beyond one dimensional categories to define people, arguing that "the category of the person or what means to be a person is under constant negotiation. This negotiation takes place, is lived, through connection and difference" (p. 10). Hall conceptualises the body as a text, and just as one reads a book, one reads bodies in a similar way. Much like a reader deciphers meaning from text, we interpret bodies through lenses of race, class, gender and disability (Hall, 1996). For example a white person may be viewed as privileged, a woman as fragile, a person in a wheelchair as dependent, all these interpretations are informed by social and historical filters (Jones & Dlamini, 2013).

Identity and the Politics of Belonging

Social identity theory cannot be understood without the phenomenon of social power. Identity politics is a term which has emerged within social activist movements which resist "oppressive accounts of identities constructed by others who hold power over them, claiming the right to self-determination" (Buckingham, 2008, p. 7). The term is used in relation to struggles concerning race, gender, sexuality and disability, calling for recognition of facets of identity that have been "denied, marginalised or stigmatised" (Buckingham, 2008, p. 7).

Blommaert and Varis (2015) engage the term "enoughness" to articulate authentic belonging to 'fictional' categories. They contend that to be seen as an "authentic member of an identity category" one must possess sufficient quantities of certain "emblematic features" of a certain group (Blommaert & Varis, 2015, p. 6). Determining what these features are can be complex, as they often present as a patchwork of various ideological notions about what it means to belong to a specific category. Any effort detected in trying to exhibit these emblematic features, paradoxically leads to questions about one's authenticity. Genuine belonging should thus appear to be effortless, a concept Blommaert and Varis (2015)

describes as “fluency”, illustrating that authenticity requires a seamless incorporation of these features into one’s natural and habitual responses within the social environment (p. 7).

Yuval-Davis (2006) describes belonging as a deep-seated emotional connection that makes one feel “at home” and “safe”. Extensive socio-psychological research supports the idea that it is the fear of exclusion that drives individuals to submit to “apparent group identities” (Yuval-Davis, 2006, p. 198). Therefore, it is by the felt sense or the affective dimension of belonging which individuals start to think of themselves and their interactions with the world. Belonging can be considered a systemic construct, in her work on belonging and the politics of belonging, Yuval Davis (2006) argues that belonging can be partially considered according to our social locations or rather how we are situated within “grids of power relations in society” (p.199) according to one’s race, gender and class and other axes of difference. The societal positioning of an individual can be contrary to their own experience of belonging, producing a space of “possibility of struggle and resistance”(Yuval-Davis, 2006, p. 203). However, one’s social location which is determined by the intersection of axes of difference is often thrust upon individuals, limiting their experience of belonging. Belonging is only made patent and political when human agency makes contact with the structural systems that locate and categorise individuals within the grid of power. The politics of belonging includes both “the maintenance and reproduction of the boundaries of the community of belonging by the hegemonic powers” (Yuval-Davis, 2006, p. 205). Communities draw boundaries to determine what one must do, feel and believe to belong, ultimately defining who is ‘us’ and who may be considered ‘them’, however, the politics of belonging also includes the efforts of resisting and contesting these boundaries. Critics of identity politics raise the concerning issue of essentialism (e.g. fixing identity according to behavioural or biological characteristics). Essentialism overlooks the reality that people have

multiple components to their identities, and by emphasising aspects that are shared also means ignoring characteristics that may differ (Haslam et al., 2000). Essentialist beliefs can be used to defend existing social hierarchies or institutional practices and promote determinism, where individuals are judged on preconceived ideas based on their group membership or affiliation as opposed to personal traits and behaviours (Haslam et al., 2000).

Queer theorists like Judith Butler (1990) challenge identity politics, arguing that attempts to convey the interests of a group (e.g. women), ultimately reinforce binary views of gender (e.g. male/female), shutting down alternative, more fluid and subversive formations of gender and sexuality. Butler's view of identity is not entirely dissimilar to Goffman's more traditional views, although she rejects his idea that there is a back-stage personal identity which is more authentic than the one present in everyday social life. She draws from Goffman the notion that identity is performed and considered a fluid and ongoing process (Buckingham, 2008). Ultimately, both perspectives underscore that identity is something we 'do', as opposed to something we 'are' (Buckingham, 2008; Butler, 1990). Critics suggest that this approach implies that identity is something one can freely choose at will and, while it highlights the potential to resist dominant identities, it neglects the pressures that may be applied to conform (Buckingham, 2008). Ultimately, the goal is not to disband identities completely, but rather challenge and expand the frameworks within which they are understood. This allows for the recognition of both shared and distinct experiences in a way that is inclusive, flexible, and responsive to the complex realities of people's lives. Narrative identity offers an expansive framework to navigate the complexities of identity formation, highlighting how individuals make sense of their lives through storytelling.

Narrative Identity

> *Stories matter. Many stories matter. Stories have been used to disposes and malign. But stories can also be used to empower and to humanize. Stories can break the dignity of a people. But stories can also repair that broken dignity. (Adichie, 2017, 17:27)*

Polkinghorne (1988) suggests that humans have a natural proclivity to tell stories, they conceptualise their own lives and the lives of others in narrative formats that unfold over time. A narrative provides structure, meaning and purpose to the wide array of roles we play during the course of our lives, providing a coherent story of temporally arranged episodes (Polkinghorne, 1988). McAdams (1985) asserts that when people are asked who they are, how they have come to be who they are, and who they may become in the future, they typically answer by telling a story. The idea of identity as a life story evolved into narrative identity, "a special kind of story – a story of how I became to be the person I am becoming" (McAdams, 2018, p. 373). Before the 1980s, psychologists did not typically consider the connection between identity and narrative. McAdams (1985), started exploring the intriguing idea that if one could visualise identity, it would resemble a life story, much like a bounded novel where the 'I', arranges elements of the 'Me' into temporal sequences with chapters, scenes, characters and plots.

> Narrative psychology emphasises the temporal quality of human life that biologically unfolds inexorably forwards but in psychological terms is constituted through perpetual oscillations back and forth in time in which each fleeting present moment is infused with memories of the past and tenuously connected by intention and imagination to projected futures. (Bradbury, 2020, p. 4)

This perspective suggests that a story could integrate the remembered past, imagined future and various other psychological elements, imposing a narrative "order and logic to the chaos of experienced life" (McAdams, 2018, p. 361). Bradbury (2020) posits that just like all living beings, we exist within the flow of time, constantly moving forward, unable to rewind time. Our present selves are shaped "by both the accumulation of past experiences and the effect of past events, and we can use this narrative framing to understand ourselves and the lives of others as stories with plots and characters" (Bradbury, 2020, p. 13).

Narrative identity develops across the lifespan, at any given time, one can isolate a 'snapshot' of a developmental moment to inspect different parts or features of the story. The story could be situated within an ideological setting, or within a set of beliefs or values of what a person considers is "right, good and true" (McAdams & Cox, 2010, p. 169). The story can be interspersed with significant themes or nuclear episodes, moments which stand out and contain "high points, low points, beginning points, ending points and turning points in the story" (McAdams, 1996, p. 308). Stories also include "imagoes", human or humanlike characters, with each one integrating "a host of different characteristics, roles and experiences in the Me" and may interact or conflict across the life story, supplying a "narrative tension" that drives the plot forward (McAdams, 1996, p. 309). Imagoes can also be considered as possible, ideal or ought selves, or as McAdams (1996) describes, a range of "mini *mes* populating the big Me-narrative, who act and think in highly personalized ways" (p. 309). Life stories employ a particular narrative tone, drawing on "comedic, romantic, tragic and/or ironic forms"; as well as imagery, comprising of "word pictures, the sounds, even the smells and tastes the author creates, the metaphors, similes" that provide the narrative with a particular "feel" (McAdams, 1996, p. 308).

In the narrative identity approach, there is a particular focus on autobiographical stories, including stories that are typically considered critical life stories which are central to

one's life (Habermas & Reese, 2015). Along with autobiographical accounts, McAdams (1996, 2001) identified motivational themes of agency and communion that permeate life stories. The motivational orientation of communion centres around love, affiliation and intimacy, while agency includes concepts like self-determination and autonomy. Josselson (2009), Habermas & Bluck (2000), Fivush and colleagues (2017), emphasise that autobiographical storytelling evolves with the narrator's developmental stage, affecting how they interpret and integrate personal life experiences into their identity. Initially, individuals may lack the capacity to fully understand their experiences leading to a superficial narrative. However, as they mature, their enhanced cognitive and narrative skills allow for a richer, more complex interpretation of past events. This growth enables them to see past experiences in new ways, incorporating these insights into their broader self-concept. From the ages of 15-25 individuals recall a significant number of autobiographical events which is associated with the "memory bump" where episodic memories during this time are rich and emotional (McAdams, 2001). This interaction between narrative construction and developmental progress highlights the role of personal storytelling in identity formation, demonstrating that it is both a reflection of current developmental stages and a driver for further growth and self-awareness (McAdams, 2001).

While the life story holds significance throughout the lifespan, its development is particularly prominent during adolescence, as this period marks the onset of formal operations and societal expectations related to establishing oneself through education, work and relationships (McAdams, 2001). During adolescence key cognitive structures crucial for the development of the self-system start to emerge. These structures enable essential processes like the elaboration of possibilities and the synthesis of complex abstractions (Inhelder & Piaget, 1958). Adolescents acquire the ability to consider multiple variables at a

time, apply scientific reasoning, engage in metacognitive processes and contemplate abstract notions like love, faith and politics. This enhancement of cognitive capacity, facilitates adolescents' ability to entertain various self-concepts, particularly in relation to the past and present selves (Inhelder & Piaget, 1958). Furthermore, adolescents become proficient at establishing causal links between experiences and their self-perception (Habermas & Bluck, 2000), enabling a more coherent and temporally integrated sense of self. As Erikson (1968) suggests, the quest for identity predominantly unfolds within a specific historical and cultural context, and emphasises the unique challenges adolescents may face in industrialised societies which allow for greater autonomy and self-exploration. This view is supported by McAdams and Pals (2006), who argue that identity formation is a collective process, intricately woven in accordance with one's cultural and social milieu. Thus, the interplay between adolescents' newly developed cognitive abilities to think abstractly and societal expectations, propels them forward towards achieving a coherent sense of self. Cohler and Cole (1996) consider life stories as narratives that:

> present a discourse of a particular kind, organised with a potential listener in mind and with an intent often explicit to convince the self and others of a particular plot or present ordering of experience rendered sensible within a particular time. (p. 6)

Aligned with the Vygotskian tradition, McLean, Pasupathi and Pals (2007) formulated a sociocultural model to guide investigations into the development of narrative identity. This model posits that identity is gradually constructed as individuals narrate their life experiences to others and with others. Building on Vygotsky's socio-cultural framework, Bradbury (2020) encourages us to think that narrative identity as "embodied, temporal and relational" (p. 3). This perspective situates identity as not only a psychological construct but also a socially and culturally mediated phenomenon.

Adolescents who are deeply engaged in identity development often spend more time alone than younger children, making self-reflection an important aspect of identity development. However, even in moments of solitude, the social environment intrudes in many ways, “there is always an audience for ourselves, an internalised social other for whom we perform, who is our interlocuter” (Bradbury, 2020, p. 22). As individuals engage in imagined dialogues about specific events in isolation from others, it is common to share memorable events with others (McLean et al., 2007). Even in moments of solitary reflection, others invariably become listeners, participants and co-creators of one’s narrative. As McLean et al. (2007) suggest, it is the sharing of stories through which identity can be constructed and sustained.

Master Narratives

McAdams and Pals (2006) highlight how narratives vary across cultures, substantially influencing identity construction. In the US, the “redemptive self” as a narrative is salient and powerful, where negative experiences are often reframed into positive outcomes (McAdams & Pals, 2006). Narratives about the redemptive power of suffering and good prevailing over evil, plays a crucial role not only in establishing a culturally acceptable narrative, but is also instrumental in sustaining psychological well-being. Narratives that align with cultural norms provide a framework that facilitates identity development by offering familiar and acceptable structures within which individuals can construct their experiences. However, for those whose experiences and identities fall outside of these canonical narratives these norms are constraining and even damaging. Adopting a ‘silver lining’ redemptive narratives may be one way to avoid censure, misunderstanding and rejection (McAdams & Pals, 2006). McAdams (2001) has demonstrated that individuals with fewer redemptive life stories may exhibit less psychological well-being. This observation raises critical questions concerning whether

diminished psychological health is the result of the individual's failure to construct the 'right' kind of story, or due to cultural constraints that limit the emergence of alternative narratives.

According to Hammack and Cohler (2009) master narratives are defined as a "cultural script or dominant discourse" that thrives in a society (p. 51). Drawing on the insights of Thorne and McLean (2003) as well as Bamberg (2004), master narratives are understood not only in the context of historical happenings or collective memories, but also as influencing the understanding of social categories. Master narratives "are dominant scripts which can be identified in cultural products and discourse (e.g. media, literature, film and textbooks). These scripts contain collective storylines that range from a group's history to the notions of what it means to inhabit a particular social category" (Hammack, 2010, p. 178). Master narratives can distort truths about particular individuals and can have detrimental effects. By projecting a uniform image of a group, these narratives strip away complexity, diversity and nuance, reinforcing stereotypes and biases, producing stigma and misunderstanding within society. Consequently, Adiche (2017) cautions us about the "danger of the single story" (0:11) which reduce entire communities to monolithic entities and overlook the rich and varied experiences that define their lives.

McLean and Syed (2015), provide a comprehensive set of principles and a taxonomy for understanding master narratives. According to this framework, master narratives (though varying across cultures), share key characteristics: *ubiquity* (widely known across the culture), *utility* (defining acceptable and valued frameworks for self-identity), invisibility (often unconsciously internalised), *rigidity* (embedded within societal structures and thus difficult to change) and *compulsory* (marginalizing those whose stories diverge from these narratives). As McLean and Syed (2015) articulate, master narrative are more than just story structures, they are elements that have become entrenched within the architecture of society.

By embedding themselves into the very fabric of society, these narratives dictate the normative framework within which individual lives are expected to unfold. These narratives manifest in three distinct types: episodic (e.g. the events of 9/11), structural (e.g. redemptive narratives) and biographical (e.g. how life progresses), with each playing a crucial role in shaping societal expectations and individual identities (McLean & Syed, 2015). Biographical narratives establish a template for what a 'successful life' trajectory should look like, implicitly setting the standard for cultural acceptance and value. Individual identities and personal narratives that align with these master narratives are, therefore, more likely to be regarded as legitimate and valued within their cultural context. Conversely, narratives that diverge from the established norm are often met with resistance or outright rejection, and such deviation places the individual at risk of marginalization and oppression. Individuals who deviate from dominant narratives are then tasked to seek a different narrative as part of their identity construction (McLean & Syed, 2015). For those who feel alienated from mainstream narratives, identity work then involves finding an explanation for being different, this can be achieved by identifying and aligning with an alternative or counter narrative (McLean & Syed, 2015).

Agency and Narrative

Bakan (1966) defines agency as "the existence of the organism as an individual, manifesting itself in self-protection, self-expansion and mastery of the environment" (p. 15). Agency signifies some degree of ownership over one's subjective experiences and suggests a measure of personal causation. According to Deci and Ryan (1990) selves not only act, they also initiate action and cause things to happen. An individual's agentic abilities to assert themselves, maintain autonomy, control their environment and influence their life trajectory, are consistently paired with psychological well-being (Adler et al., 2016). Agency can also be lost when individuals feel controlled by external circumstances, or due to unpredictable or

punitive environments or feel dominated by internal forces beyond their control (McAdams, 1996).

The discursive framework suggests that agency is not an inherent attribute of the world, it isn't "a biological, historical or psychological 'given'" but rather that our understanding and articulation of agency is deeply embedded in narratives (Brockmeier, 2009, p. 225). Harré (1995) suggests that the concepts of agency and action are linguistically paired with their opposites:

> We can only grasp the meaning of what it is to be agentive by contrast with what it excludes, that is, what it is to be passive. So, in studying the ways in which we present ourselves as agents by discursively embedding our actions in the agentive framework, we must not fail to attend to the ways we have of presenting ourselves as patients, and to life projects and situations that call for one or the other strategy. (p. 122)

Many of life's projects necessitate not just a single approach but a combination of strategies, often deployed at the same time. It seems more fitting to then view agency and the lack thereof (interpreted as passivity, powerlessness, abeyance) as existing on a spectrum. Typically, we are able to tell multiple stories to explain or rationalise what we or others do or don't do, in doing so we are often oblivious to the "agentive status" of our actions (Brockmeier, 2009).

Narrative Imagination

Narratives that don't include a vision of the future are devoid of hope and a sense of agency. Brockmeier (2009) describes how language serves as a resource for meaning-making and as a form of agency, suggesting that narrative imagination (the ability to envision how things might unfold based on the present), plays a vital role in guiding human actions toward what Bruner (1986) describes as 'Possible Castles'.

Andrews (2014) explores the critical role of the imagination and narratives, illuminating how these two concepts can underscore the importance and the fluid nature of time, bridging the gap between what is 'real' and 'unreal'. Brockmeier (2009) describes narrative imagination as "the most ingenious architect of our real and possible worlds - and their material and fictitious castles" (p. 214). While narratives often reflect the world as it is, (even though it is viewed through a lense of subjective reality) as we peel away the layers of a story, we recognise the significant contribution of the imagination. While imagination can take a myriad of forms (of which narrative is one), when imagination and narratives intertwine, "we encounter the balancing act which defines us as being human" allowing us to navigate our existence, firmly grounded in reality, yet simultaneously adrift in a sea of memories and dreams (Andrews, 2014, p. 2). The moving of the psyche between time frames is a daily occurrence. "That memory - bringing forward experiences of the past into the present – is a cornerstone of identity to be clear" (Andrews, 2014, p. 3). Without memory, it is almost impossible to understand who we are in the present, let alone envision a future for ourselves. We constantly reflect on our pasts through the lense of our present circumstances, and this process reshapes how we imagine our future (Andrews, 2014). Much like a 'time traveller' we can reflect back on our life, who we have become:

> We look back on the selves we once were, selves who we are both connected to but distinct from our current selves – and this self-regard can be met with a number of different reactions, be it a fondness toward our youthful selves as we grappled to find our way, or a reticent distance from the yearnings which once occupied our hearts and minds. (Andrews, 2014, p. 3)

Imagination does not transcend reality, but is rather deeply rooted within it, expanding from the tangible world into the realm of possibilities. Unlike a "psychological tiara", reserved for special occasions, imagination is a constant companion that directs our reasoning and

perceptions (Andrews, 2014). Although it might be employed for "constructing castles in the clouds, we use it transform our lives and communities for better or for worse" (Andrews, 2014, p. 11).

Storytelling serves not only as a sophisticated means of exchanging information and defining meanings but also a method for generating new insights (Brockmeier, 2009). Narratives do not merely adhere to existing cultural conventions and frameworks, they also explore thoughts, emotions, and experiences that challenge and extend beyond familiar territories (Brockmeier, 2009). According to Bruner (1986), narrative is a formidable tool for imagining or 'subjunctivising' the world in terms of what might be. It invites the speculative and the factual, encouraging us to inhabit multiple realities in multiple contexts, across more than one order of time. We invariably accept the offer to "be in the subjunctive mode" and in doing so allows us "to be trafficking in human possibilities rather than in settled certainties" (Bruner, 1986, p. 26). Orgad's (2012) research on the role of global imagination and its presentation within media provide insight into how stories we encounter through the media and via the internet which are constantly evolving and changing, shape individual and collective imaginations. Virtual domains and "modalities of culture are increasingly heterogenous and contradictory, offering children the material of multiple "traditions" in which to recognise and from which to construct themselves" (Bradbury, 2020, p. 21). Media introduces us to distant individuals whose lives may greatly diverge from our own, right into our living spaces. These kinds of encounters "feed the way we see, think of and feel about the world, about our relations with others and about our place in the world" (Orgad, 2012, p. 28).

Conclusion

Narrative identity plays an important role in the way individuals understand and articulate their own development over time. This underscores a sense of continuity, but also

the integration of various selves across different moments and contexts of life, a function that Erikson assigns to identity itself. Narrative identity integrates aspects of the self synchronically, by weaving different roles, values, attitudes and performance demands into a unified self within the varied and complex moments of life (McAdams, 1985). Furthermore, narrative identity combines aspects of the self diachronically, connecting the past, present and anticipated future selves. The life story is a dynamic construct, that undergoes constant revision, making identity development an ongoing lifelong endeavour. Hammack (2008) and others (McLean & Syed, 2015) propose that narrative identity is continuously shaped by interaction with dominant master narratives which shape and define normative roles and behaviours. Singer (2020, p. 225) refers to these narratives as “voices in our heads” which have a significant influence on the individual, despite being perceived as oppressive. For those with marginalised identities, the task is to develop alternative narratives while challenging and re-building master narratives that are more expansive and affirming of diverse pathways to identity development (Singer, 2020).

Chapter 3 – Literature Review

This chapter presents a comprehensive overview of international and South African studies relevant to the phenomenon of ADHD as well as research pertaining to the digital world social media. These diverse studies include quantitative and qualitative empirical studies conducted within a range of disciplines like education, psychology, medicine, public health and social welfare.

Studies about ADHD and the digital world may be considered as two seemingly disparate fields. However, research has consistently highlighted the link between ADHD and online activities, with studies emphasising the heightened vulnerability of adolescents with ADHD to the risks associated with the online world. Furthermore, the fast-paced, highly stimulating nature of the online world has been implicated in the rise of ADHD diagnoses among young people and adults. Adolescence is considered a critical period of identity development and exploration, however, in today's world, this process is inextricably linked to the pervasive influence of the online world. Understanding adolescent identity thus requires an approach which integrates the study of both traditional developmental frameworks like school, family and the dynamic, ever-evolving digital landscapes that define youth experiences today.

This chapter is organised into three main sections. The first section examines the neurobiological perspectives of ADHD, including qualitative studies that explore adolescents' experiences of the ADHD label. Literature which discusses the subjectivity of the diagnostic process and longitudinal studies examining the long-term efficacy of stimulant medication is included. Notably, there is limited research within the South African context that explores adolescents' own experiences of an ADHD diagnosis and medication. The second section focuses on literature which examines ADHD within the school environment, exploring links with academic pressure, teacher relationships and ADHD as a tool to manage

school challenges. Although there is a significant amount of South African research based on the perspectives of teachers and parents, there is a distinct paucity of recent studies of adolescents with ADHD and their lived experiences within the school context. The chapter concludes with research pertaining to social media, highlighting the costs and benefits of the online world with a particular focus on TikTok as a popular youth focused social media platform. Within this section, knowledge from technology and social media expert, dana boyd and sociologist Sherry Turkle is drawn on as their expertise and foundational contributions to the understanding of the online realm, provide a robust anchor for the exploration of the literature.

ADHD - Biomedical Impairment or a Socially Constructed Phenomenon?

Since its recognition as a diagnostic category in the mid 20th century, the conceptualisation of ADHD has been surrounded by much controversy and continues to arouse virulent debate over the aetiology and treatment of the disorder. Two conflicting discourses around the aetiology and interventions used to treat children presenting with challenging behaviour have prevailed over time. The neurobiological approach which affirms ADHD's scientifically established existence (Barkley, 2013; Faraone & Radonjić, 2020) and the critical social constructivist view which denies the disorder's clinical entity (Moncrieff & Timimi, 2013; Timimi, 2005, 2021)

The biomedical discourse asserts that ADHD is the result of innate biomedical impairment which is essentially relieved by chemical treatment. According to this model, genetic factors, malformed neurological structures and deficits in the neurotransmitter dopamine are implicated in the aetiology of the disorder (Faraone & Radonjić, 2020). The formal definition of ADHD can be found in the American Psychiatric Association's diagnostic handbook (DSM) which is used globally to guide the diagnosis of psychiatric

conditions, with the most current version in its fifth revised edition (DSM-V-TR). Each revision of the DSM has seen a change in the diagnostic criteria for ADHD, which is no longer classified as a disruptive behaviour disorder, but rather included as a neurodevelopmental disorder. The DSM's vertical and horizontal expansion of the diagnostic criteria for ADHD where at each new edition appears to loosen the diagnostic criteria, can be understood according to Haslam's (2016, p. 8) "concept creep". This notion describes a process where over time, several key psychological concepts (especially those which are considered to be undesirable, hurtful or pathological) are altered semantically. Phenomena like abuse, trauma, bullying, mental disorders, addiction and prejudice have been subject to such changes, where their meanings are stretched and dilated to "capture qualitatively new phenomena and quantitively less extreme phenomena" (p. 1). Psychiatric conditions are continually revised from DSM-I to DSM-V-TR, and new domains of pathology have been added.

> Phenomena that may have been previously understood as moral failings (e.g. substance abuse) bad habits (e.g. eating problems), personal weaknesses (e.g. sexual dysfunctions), medical problems (e.g. sleep disturbance), character foibles (e.g. shyness) or ordinary vicissitudes of childhood now find shelter under the umbrella concept of mental disorder. (Haslam, 2016, p. 8)

According to the DSM-V-TR, ADHD is defined as "a persistent pattern of inattention and/or hyperactivity and impulsivity" with symptoms typically emerging in early childhood (APA, 2022, p. 58). The DSM-V has seen the broadening of certain key criteria making it easier for more adolescents and adults to qualify for the diagnosis. These changes may also result in more individuals obtaining services from which they may benefit like academic concessions which would not have previously been the case. Moreover, the DSM-V-TR

expanded the age category for an ADHD diagnosis from seven to 12 years of age, which may increase the risk of conflating regular developmental processes like physical, cognitive, and neurological changes experienced during puberty with ADHD. The list of behaviours used to define ADHD in the DSM-V -TR includes words like "'often, 'seems', 'difficulties', 'reluctant', 'easily', 'quietly' and 'excessively' which appear to be 'define' ADHD symptoms", are actually hard to define (Timimi, 2021, pp. 38–39) While the words such as "'often' is assigned to each one of the symptoms, it is unclear as to how many times impulsive, disruptive or hyperactive behaviours need to occur for them to be considered a symptom [i.e. once an hour, or a day or month?] (Timimi, 2021). Furthermore, symptoms no longer need to be "clinically significant" but rather "interfere with or reduce the quality of social, academic or occupational functioning" (APA, 2022, p. 60).

Neurobiological Approach to Treating ADHD

The neurobiological model advocates the primary treatment of ADHD with psychostimulants (e.g. methylphenidate), or non-stimulant medication [e.g. atomoxetine] (Mechler et al., 2022). Although international guidelines advocate for a multimodal approach which recommends psychosocial treatments in combination with psychopharmacological treatment, (National Institute for Health and Care Excellence [NICE], 2018), this kind of treatment strategy is extremely costly, thus medication often remains the primary intervention (Liebenberg & Schoeman, 2017). Typically, medication used to treat children with ADHD in South Africa is either a stimulant i.e. Methylphenidate (commonly known as Ritalin or Concerta) or Atomoxetine (Strattera) which is a non-stimulant medication or in some cases tricyclic antidepressants (Liebenberg & Schoeman, 2017). While regimens like medication and behavioural intervention may temper the symptoms of the disorder, they are not considered curative.

Consequences of an ADHD Diagnosis

A substantial amount of biomedical research cautions that if ADHD remains undiagnosed and untreated (primarily with medication), can expose the individual to a litany of harm and a life trajectory filled with adverse experiences, accentuating the importance of early recognition and intervention strategies (Barkley & Dawson, 2022). Studies enumerate some of these detrimental effects such as academic difficulties (Jangmo et al., 2019), poor peer relationships and mental health (Maxwell et al., 2024), increased suicidal thought and behaviour (Garas & Balazs, 2020), sexual promiscuity, social ineptitude, failed relationships, criminal activities, and financial troubles (Barkley & Dawson, 2022; Zadelaar et al., 2020) and accentuate the importance of early detection and intervention strategies. Barkley (2020; 2022), a leading authority on ADHD emphasises impairment and risk associated with the phenomenon. While Hallowell (2021) a psychiatrist who is also considered a specialist in the field supports Barkley's view, but adds that individuals diagnosed with ADHD possess an innate strength, considering it a unique gift or asset.

In the analysis of ADHD in prescribed textbooks of special educational programs in the US, Freedman (2016) comments on the medicalised narrative representation of children diagnosed with ADHD, who are portrayed as "inherently dysfunctional" and "devoid of positive characteristics" (p. 32). With such a broad swathe of negative effects and the absence of any cure for the disorder, it is hard to conceptualise that any individual diagnosed with ADHD can experience a positive sense of self.

Diagnostic labels like ADHD play a significant role in how individuals understand themselves and are perceived by others. Within health practices, conceptions of children and young people as 'human becomings' (future focus) as opposed to 'human beings (present

focus) undermines their capacity to make sense of their medical diagnosis and treatment (Qvortrup, 1994). Viewed as 'unfinished products', young people's participation within clinical environments are variable, their opinions are not always seriously considered, or even viewed as legitimate (Alderson & Yoshida, 2016). Agency, autonomy and responsibility of young people is often undermined when diagnosed with ADHD, a label which places emphasis on deficits and difficulties, and may render their choices or opinions as impulsive, inattentive and lacking focus (Alderson & Yoshida, 2016). Children can take an active role when making decisions about aspects of their health that directly concern them, provided they are given clear information in age-appropriate terms they will understand. Alderson and Yoshida's (2016) study in Tanzania, illustrates how children use their bodies (by speaking or acting) to express agency. Children may be also divested of their agency through their bodies by way of deprivation, punishment and exclusion. A child's agency may be shaped through personal exchanges, demonstrating their competency through humour, friendship, respect, ingenuity or alternatively through anger or conflict. Children's behaviour, whether it is subtle or blatant, overt or implied demonstrates their social awareness. For example, a young person may practice silence as a conscious act of respect for adults as opposed to passivity or incompetency (Yoshida, 2011).

There was a distinct paucity in the literature on adolescents' own experiences of ADHD which may suggest that doctors, other medical professionals and parents are the main moderators of children's health. However, emerging literature offers insight into the lived experiences and perceptions of children and adolescents diagnosed with ADHD. A meta study conducted by Ringer (2020) included 16 qualitative studies across the US and Europe, exploring adolescents' perceptions and experiences of ADHD. The analysis revealed themes relating to identity, relationships, physical and psychological needs. According to Ringer

(2020) many adolescents implicated their ADHD diagnosis in the perceived lack of control over their body, behaviours, emotions and thoughts. Ascribing a predominantly neurobiological cause for ADHD, participants considered their behaviour as an uncontrollable, biological trait. While this perception could have an exculpating effect and thus potentially benefit young people's self-esteem, most of the studies indicated that a diagnosis of ADHD had negative implications for adolescents' identity and self-esteem, reporting that it made them 'feel bad' and 'out of control'. Ringer (2020) indicates that adolescents reported feeling different and viewed themselves as outsiders or felt that they were singled out, which had undesirable consequences with respect to relationships with teachers and peers.

A study including children, adolescents diagnosed with ADHD and their families in Chile and France, investigated the subjective experience of ADHD and the cultural meanings that influence an individual's experience of the disorder (Béliard et al., 2019, p. 63). Results from the study categorized multiple meanings associated with ADHD, according to registers of "deficit" and "disruption" which need to be normalised. The third register of "hidden potential" considered ADHD to be both a valuable and challenging condition as participants associated it with traits of creativity, charisma, high speed performance and multitasking (Béliard et al., 2019, p. 55). However, participants felt that these traits were "masked" as the expression of these extraordinary capacities were not deemed appropriate within the context of school and society at large. According to the researchers, the emergence of ADHD as a hidden potential is associated with the "new normative and moral context, linked to value transformations and the development of neuroscience" (Béliard et al., 2019, p. 71). This positive view of ADHD which transforms difficulties into assets is considered by the researchers to be "linked to a particular historical and normative context combining recent

transformation in the conception of individual and reconfigurations of scientific knowledge, [i.e. ADHD is an expression of biological diversity]" (Béliard et al., 2019, p. 72). However, the hidden potential register did not resonate with all those diagnosed with ADHD. The concluding remarks of the study invited further reflection as to socio economic, gender, institutional and political contexts as factors which may be instrumental in the production of different meanings and experiences of ADHD.

Grønneberg and colleagues (2023) explored how young people in Norway position themselves in relation to societal norms prior to being formally diagnosed with ADHD. The study identifies six subject positions linked to two central themes of struggles with schoolwork and social behaviour. Assuming a devalued subject positions of "not being good enough" and "one that must be fixed", some participants used metaphors from the animal kingdom or nature to describe their feelings of not belonging or fitting in. Comparing themselves to animals helped them articulate their otherness, highlighting the tension between their behaviour and environmental norms (Grønneberg et al., 2023).

A qualitative study conducted in a child and adolescent outpatient clinic in South Africa, explored illness perceptions and emotional experiences of 12 adolescents diagnosed with ADHD (Botha & Van der Westhuizen, 2023). The study explored the perceived impact of ADHD and its effects on their emotions and coping strategies within a 'resourced deprived' education system that did not accommodate diverse learning needs. Findings of the study highlighted the participants' perceptions of inability and lack of control over their cognitive processes, behaviour and emotions. These challenges were compounded by environmental expectations and led to feelings of exclusion, inadequacy and being 'not normal' which frequently resulted in efforts to conceal their diagnosis. While some

adolescents benefitted from stimulant medication and developed strategies like movement and structured routines, others faced punitive disciplinary measures and reported feeling misunderstood by their teachers and peers.

A study by Werkhoven and colleagues (2022) analysed different roles of diagnostic labels for developmental disorders within clinical, therapeutic, social and administrative contexts in the Netherlands. Within the clinical context diagnostic labels like ADHD and Autism Spectrum Disorder (ASD) can offer practical benefits like access to support, development of treatment plans and eligibility of services. Administratively, labels are a determinant as to who may claim care provisions and special accommodation. Within a therapeutic context, labels can be insightful and explanatory, affording young people an opportunity to "explain the multiplicity of experiences and difficulties, reducing them to central traits summarised in a diagnostic label" (Werkhoven et al., 2022, p. 946), even though the causal roots for these experiences and difficulties may be heterogenous. Socially, an ADHD label can facilitate information about atypical behaviour and needs, but the authors caution they can be significantly stigmatising and may perpetuate harm, injustice, low self-esteem and unwarranted exclusion.

Criticism of the Neurobiological Approach

Psychosocial discourse challenges the biomedical notion of ADHD being a true, objective disorder but rather a social and cultural construct whereby "disorders in society [have created] disorders in children" (Graham, 2008, p. 66). It is suggested that the expression of behaviours is a response to modern western life and its associated "narcissistic value system" (Timimi, 2005, 2017, 2021). Children are socialised into this system which is male dominated and focused on the individual. Instead of examining themselves and the society that they have created, adults locate the problem within the child and label them with

ADHD, and subject them to powerful pharmaceutical interventions (Timimi, 2005, 2017, 2021)

In the field of medicine, the process of diagnosis can explain symptoms and provide treatment to address the underlying biological pathology, but in psychiatry, diagnosis is often an illusory term. ADHD is a product of a classification processes which is descriptive in nature and based on subjective judgments (Erlandsson & Punzi, 2017; Timimi, 2017; Timimi & Timimi, 2022). Billions of dollars, allocated to large volumes of research aimed at uncovering the biological explanations of mental disorders, have yet to uncover the effects of neurobiology alone on psychological experience (Timimi, 2005, 2017, 2021).

Although neuroscience has undeniably transformed our understanding of the human brain, there are still no definitive medical tests, specific cognitive or neurological markers for psychiatric diagnoses like ADHD (APA, 2022). Genomic-wide searches have yet to identify a single candidate gene implicated in ADHD (Faraone & Larsson, 2019). The lack of firm evidence is defended by insufficient sample sizes and the heterogeneous, multifactorial and complex nature of the disorder as reasons for the absence of data (Timimi, 2017, 2021). Currently, claims of heritability of ADHD have not been properly understood and are based on statistical and not genetic data (Faraone & Larsson, 2019; Werkhoven et al., 2022).

The diagnosis of children presenting with ADHD type behaviour remains subjective and arbitrary. Clinical judgments are influenced by heuristics, biases and standards employed by the ‘diagnoser’, who are influenced by exposure to prevailing ideologies (Mahone, 2012; Merten et al., 2017; Timimi, 2005, 2021). Timimi, (2021) a child and adolescent psychiatrist,

argues that using a classification system that can only describe in order to explain, we end up with a problem of tautological circularity.

> The problem is if we try to use a classification like ADHD, that can only describe an observed set of behaviours (i.e. as a diagnosis) can be illustrated by asking another set of questions. If I was to ask "why" a particular child cannot concentrate, is hyperactive and shows impulsivity and I were to answer that these behaviours are caused by ADHD, then a legitimate question is to ask is "how do you know that they caused by ADHD?" The only answer I can give to that question is that I know the child is presenting with hyperactivity, impulsivity and poor attention. In psychiatry what we are calling diagnosis will only describe but is unable to explain and therefore isn't a diagnosis. (Timimi & Timimi, 2022, p. 18)

In their analysis of the descriptive classification of ADHD (te Meerman et al., 2022) identify how ADHD is reified into a concrete disease through "language choice, logical fallacies, genetic reductionism and textual silence" (p. 3). Metaphors in particular have a reifying effect especially when used to illustrate ADHD as a harmful brain disorder:

> Now I want you to understand something. Your brain can be split in two pieces. The back part is where you acquire knowledge. The front part is where you use it. ADHD like meat cleaver, just splits your brain in half. (Barkely, 2012, cited in te Meerman et al., 2022, p. 5)

Barkley's graphic "meat-cleaver" metaphor transforms ADHD into a concrete object, that has the powerful ability to split brains. This analogy not only has a strong fear appeal but it is also particularly deceptive as neuro-anatomical correlations are yet to be established through empirical studies (te Meerman et al., 2022).

The Controversy Around Pharmacological Treatment of ADHD

While the concept of ADHD is replete with problems around reliability and validity, much of the controversy revolves around the pharmacological interventions to treat children and adolescents presenting with behaviour associated with the disorder (Timimi, 2010; 2017). At the heart of the debate is the use of medication as the frontline treatment for children's (sometimes as young as 2years old) behaviour that is deemed to be problematic. However, it appears that even once a diagnosis is formulated and medical treatment ensues, many of the short-term benefits seem to disappear entirely or shrink to clinically insignificant proportions (Coghill et al., 2023; Kortekaas-Rijlaarsdam et al., 2019).

As early as 1994, the APA concluded that "stimulants do not produce lasting improvements in aggression, conduct disorder, criminality, education achievement, job functioning, marital relationships, or long-term adjustment." This assertion prompted the National Institute of Mental Health (NIMH) to commence the American Multimodal Treatment of ADHD (MTA) study. Commencing in 1998, the MTA was the first longitudinal study to investigate the long-term efficacy and safety of pharmacological treatment among 579 young children (aged 7 and 10 years) diagnosed with ADHD (Sluiter et al., 2020). At first, the results were positive and after a period of 14 months, it was reported that participants who received medication demonstrated a far greater reduction in core ADHD symptoms in comparison to those participating in behaviour therapy (combined with medication or alone). There was even a suggestion that medicated children performed better on reading tests too. However, the study continued and by the end of three years, the early benefits of psychostimulants had vanished, with the study unable to find support for continuing superiority of medication regardless of initial symptom severity (Sluiter et al., 2020). Furthermore, those who used more medication in the 24–36-month period, were more

likely to experience an increase in ADHD symptoms, had higher rates of delinquency and were considerably shorter (by an average of 4cm) and lighter (by 3 kg) relative to those not taking the medication. The third MTA follow up concluded that medication use was associated with depression and anxiety as well as increased hyperactivity-impulsivity and oppositional symptoms (Sluiter et al., 2020). The most recent MTA follow-up in 2017, confirmed the lack of evidence for long-term symptom relief, with extended use of stimulants implicated in growth suppression and the increased risk of anti-social and criminal behaviour. Considering these findings, it would be expected that there would be a revision in treatment guidelines alongside the decrease in the use of stimulant medication, however, many studies reveal the contrary (Sluiter et al., 2020). This paradox may be aligned to the fact that the initial results of the MTA received considerable attention and were widely published in the media and scientific journals. Unlike the original 1999 study, the three year follow up results of the MTA were only published some 8 years later with little accompanying press and professional coverage. As Timimi (2017) reflects, this delay and understated publicity, endorsed the results of the original study which advocated the safety and efficacy of stimulant medication, thus gaining a foothold as the standard approach in treating children diagnosed with ADHD. Over two decades later, the first MTA study results remain one of the most commonly cited studies and continues to receive twice as many citations each year in comparison to the follow up studies (Sluiter et al., 2020).

Other long-term studies have been unable to establish that the use of stimulants beyond two years is associated with improved outcomes (Coghill et al., 2023; Gilchrist & Arnold, 2008; Kortekaas-Rijlaarsdam et al., 2019), and were correlated with an increase in unhappiness, a deterioration of relationships with parents and academic underperformance (Currie et al., 2014). Research pertaining to adolescents' experiences of taking stimulant

medication has produced mixed results. Some studies report that young people acknowledge the need for their ADHD medication and cite benefits like improved self-esteem and agency, as it mitigated negative social behaviours and subsequently improved relationships with peers (Sibeoni et al., 2023; Singh, 2006; Singh et al., 2010). However, according to other investigations, adolescents view medication as an external mechanism of 'control' that makes them feel different, limits their creativity (Fleishmann & Kaliski, 2017), self-expression and undermines their self-esteem and sense of control (Frank et al., 2015; Khan & Aslani, 2020).

A review across five data bases conducted by Jacobs (2023) analysed studies examining adolescents' personal experiences with control and self-esteem while taking methylphenidate. The aim of the study was to improve the clinical counselling for adolescents about the effects of prescribed stimulant medication. While concepts of self-esteem and sense of control were not directly addressed in the research questions of the studies, they frequently emerged as a prominent theme in the interviews. Adolescents frequently expressed that while the medication could help them feel more in control and improve their sense of self, it often fell short of their expectations. Furthermore, they reported feeling significant pressure to conform to behavioural norms and comply with treatment decisions largely made by adults, exacerbating their feelings of disempowerment. The findings of the study highlighted the need for clinicians to include adolescents in meaningful engagement about the effects of stimulant medication on their identity and autonomy, cultivating a sense of agency and collaboration.

Ethnographic fieldwork conducted by Rojas Navarro and Vrecko (2017) in a Chilean school examine the effects of ADHD medication. The authors challenge the traditional biomedical assumption that the ADHD medication alone produces behavioural changes; but

rather how psychopharmaceutical effects are shaped by multiple contextual determinants like student-teacher relations, teachers' perceptions and children's agency. The study proposes that children are not passive subjects of the medical discipline and simply controlled or constrained by their ADHD medication. Results suggest that children are active (although they are by no means free) agents who work in concert with socio-material configurations that produce particular drug effects. The authors indicate that the potential pharmaceutical effect is modified by the child's expectations, teacher-student relations, teachers' perceptions and should not only be understood according to their "chemical properties and biological modes of action" (Rojas Navarro & Vrecko, 2017, p. 1). Results from the study challenge the traditional view that ADHD medication alone produces behavioural changes, The study proposes a range of determinants influence the effects of medication, such as classroom dynamics, student-teacher relationships and teachers' perceptions.

Side Effects of ADHD Medication

While considered to be safe, medication used to treat ADHD has multiple side effects Growth delays, weight loss (Deng et al., 2021), mood swings, somnolence (Mechler et al., 2022) and cardiovascular problems (Harris, 2023) are some of the most commonly reported complications. Although Strattera is not considered to be as effective as stimulant medication, it is often used in patients who cannot tolerate the side effects of methylphenidate. However, this form of medication is not without adverse side effects and is believed to increase suicidal thoughts and behaviour (Linden et al., 2016; Mechler et al., 2022), although these harmful effects could also be attributed to comorbid conditions like depression (Reed et al., 2016). There are also suggestions that medication (stimulants and non-stimulants) can worsen the symptoms they are attempting to fix, described as an "iatrogenic effect" (Timimi, 2021). The worsening of 'symptoms' once the medication starts wearing off is known as the rebound effect. However, these adverse reactions are often

interpreted as the worsening of ADHD characteristics and often precipitate increased doses and the addition of further medication. A psychotropic polypharmacy of anti-depressants, mood stabilisers and neuroleptics, sometimes in combination with one another are often used to combat the iatrogenic effects of the stimulant treatment (Boyle & Johnstone, 2020; Timimi, 2021), Thus, when children enter the mental health system as an 'ADHD patient', it is not uncommon for further psychiatric diagnoses to ensue, perhaps, in order to justify such polypharmacy (Boyle & Johnstone, 2020).

Race and Gender Disparity in ADHD Diagnoses

The latest publication of the DSM-V-TR confirms the racial disparity of ADHD diagnoses in the US, with lower clinical identification rates among African American and Latinx populations (APA, 2022). Similarly in the UK, children and adolescents from ethnic minority backgrounds, particularly Black and Asian communities, are less likely to be diagnosed with ADHD and treated pharmaceutically (Banerjee et al., 2024; Timimi, 2021). Globally, more boys are diagnosed than girls with ratios varying from 2:1 and 10:1 (APA, 2022) however, this ratio tends to even out to 1.6:1 in adults (Liebenberg & Schoeman, 2017).

A study investigating the link between ADHD and different forms of schooling was conducted amongst adolescents from four schools located in Gauteng, South Africa (Moss, 2017). Results from the study propose that the diagnosis and prevalence of ADHD is strongly influenced by gender, race and class. The majority of adolescents diagnosed with ADHD were boys (65%), more than half of the participants (61%) were from upper middle-class families and mostly white (71%). A similar study conducted in the US investigated the influence of sociodemographic factors on ADHD diagnosis and treatment among elementary school children (Morgan & Hu, 2023). Drawing from a nationally representative database,

researchers reported significant differences in ADHD diagnoses and access to treatment based on race, socio-economic status and levels of parental education. While accounting for similar symptom levels, more white children and those from higher income families with more educated parents, were more likely to be diagnosed and treated for ADHD.

A Welsh study investigating the gender disparity in ADHD diagnoses among children explored the biological, social and clinical factors contributing to the underdiagnosis in girls (Martin, 2024). The author claims that ADHD diagnoses are more likely to be initiated in girls during adolescence or adulthood and are often due to self-reporting of symptoms as opposed to more conspicuous (hyperactive and disruptive) behaviour identified by teachers and parents. Martin (2024) argues that the gender disparity could also been attributed to the comorbid symptoms of depression and anxiety which appear to be more common among girls, which may overshadow ADHD symptoms during clinical assessments.

Critical Psychology's Call for an Alternative Approach

Although the DSM may have improved in reliability, the diagnostic system has been repeatedly called into question with regards to its validity, i.e. the correctness for making a diagnosis (Pérez-Álvarez, 2017). The Critical Psychiatry Network, an organisation of critical psychiatrists has mobilised a campaign under the slogan of "No more psychiatric labels" and have called for the abolition of the DSM on the basis of the lack of validity (Pérez-Álvarez, 2017). Such open and critical dialogue is long overdue, however, those who publicly question the efficacy of psychotropic medication, the validity of the DSM, and the value of the diagnosis; are often dismissed as ignorant, incompetent and dangerous (Boyle & Johnstone, 2020); relegated to the same group who believe in the flat earth policy or associated with the questionable practices of Scientology. However, at the heart of the criticism is not an assault on psychiatry, but rather a plea to the safeguarding of professional ethics and an appeal to

share the disquiet about the growing trends toward medicating children unnecessarily with a host of psychotropic drugs (Boyle & Johnstone, 2020). Critical psychologists, Lucy Johnstone and her colleagues in the UK launched a set of ideas, the Power, Threat, Meaning Framework (PTMF) that represents a fundamental shift from the biomedical conceptions of the DSM (Boyle & Johnstone, 2020). As opposed to the notion of "what's wrong with you?", according to the DSM, the PTMF shifts the focus to "what has happened to you?". The authors suggest that when people experience difficulties, they are ultimately responding to an event/s in their lives. This framework rejects the medical process of diagnosing "disorders" in favour of a narrative response that tells of contexts, power and systems (Boyle & Johnstone, 2020).

The Neurodiversity Movement – An Alternative Framework

The concept of neurodiversity is fast becoming an alternative framework for understanding cognitive differences like ADHD, autism and dyslexia (Hiew, 2023). The term was originally coined by Australian sociologist Dr Judy Singer. Singer (2016) who used the neologism in her sociology honours thesis titled "*Odd People In: The Birth of Community amongst People on the Autistic Spectrum, a Personal Exploration of a New Social Movement Based on Neurological Diversity."* However, the concept did not gain traction until 2013, when best-selling author Steve Silberman paid tribute to Singer in Wired magazine writing: "Few can claim to have coined a term that changed the world for the better. Judy Singer can" (cited in Harris, 2023). Singer's original conception of neurodiversity was initially established in her quest to find a political term to shift the discourse of atypical ways of thinking and learning away from the litany of words like deficits, disorders, and impairments. Singer (2016) argues that everyone is neurodiverse, there was no such thing as a typical brain and that Autism, ADHD, dyslexia, dyspraxia were merely forms of infinite versions of the human brain and mind. Singer combined 'neuro' as a reference to the growth of neuroscience

and ‘diverse’, a political term originating in the black civil rights movement in the US. As a neologism, neurodiversity is a definition which Singer proposed could be applied to the whole of humanity (Cromby & Johnstone, 2024). However, neurodiversity is a political term for those who demand recognition of their human rights and has morphed into a powerful minority-rights campaign. Singer’s thesis was not formulated on any brain scans, tests or any other diagnostic proof, after all, it was originally conceived as a political term, not a scientific one. There is no scientific evidence that supports an accepted definition of ‘neurotypicality’ and if there is no such thing as a ‘neurotypical brain’, then it would be almost impossible for a ‘neurodiverse brain’ to exist (Cromby & Johnstone, 2024). The neurodiversity ‘label’ has also not been without its critics, as the term is increasingly appropriated by those who consider themselves as having ‘high functioning’ autism. This has attracted much criticism from the autism community who argue that this misappropriation erases the difficulties that those with such profound autism encounter, to the extent that they cannot live independently and need constant care (Cromby & Johnstone, 2024). Since the Wired magazine interview in 2013, the term neurodiversity has travelled around the globe at an enormous pace, with those who think or feel in a ‘different’ way, self-identifying with the ‘neurodivergent’ label. Ironically, this was precisely what Springer had not intentioned, as ‘neurodivergency’ simply implied that everyone was different and that everyone used their brain in their own unique way. However, a significant number of individuals who categorise themselves as neurodiverse, resist the original position that everyone is diverse, insisting that it remains a special category that distances them from everyone else, even if it means being positioned as disordered, disabled, and different (Cromby & Johnstone, 2024).

ADHD and School

The startling upsurge in school-age children diagnosed with and medicated for ADHD warrants further investigation of other factors that may be at play. It is believed that

schooling, particularly early schooling may be a primary culprit in the ADHD diagnostic epidemic (Foundation For Economic Education [FEE], 2019). Over the last decades, young people are spending more time in school and school-related activities than ever before. Children are playing less and expected to do more at very young ages (FEE, 2019). A large international study across 13 different countries investigated the association of children's birthdates and the likelihood of being diagnosed with ADHD (Whitely et al., 2019). Findings show that children who are the youngest in their class tend to be at a higher risk (up to 70%) of being erroneously labelled with ADHD. Relative immaturity within academic settings may be misattributed as inappropriate or 'abnormal' behaviour and considered to play a significant role in the overdiagnosis or misdiagnosis of ADHD.

Competition is a core component within market driven economies, it is considered a key ideology for raising standards and improving the wellbeing of the population, outweighing cooperation or social responsibility (Timimi. 2021). It is inevitable that a process that extols qualities of success, induces anxiety about failure, whether it be in school or the workplace. Consequently, the individual is engaged in a perpetual struggle with those around him, to be "better, smarter and stronger" than his peers. While very few will achieve the ultimate "top dog" status, most people are subject to "the ongoing fear of falling behind and becoming defined (and/or self-defined) as a member of the class of losers" (Timimi, 2021, p. 22). The pressure to perform is particularly salient in academic institutions where learners are subjected to continual surveillance and performance monitoring measures like test scores and ranking of schools according to their learners' achievements (Timimi, 2021). Fass (2016) argues that children are objects of parental control and when young people's behaviour is viewed as 'deviant', parents are frequently inundated with advice or implicated as the cause of the child's behaviour. Children who fail to meet the expectations of self-

control and perfection are considered dysfunctional, which may also point to the striving of an ideal life world.

Steare et al., (2023) conducted a systematic review across a broad range of countries investigating the association of academic pressure and adverse mental health conditions like depression, anxiety, suicide and self- harm among adolescents. Of the 52 studies included in the review, 48 found a positive correlation between academic pressure and at least one harmful mental health outcome (Steare et al., 2023). Timimi, (2021) argues that mental health outcomes are "emotional correlates of failure [which] are naturalised and individualised and so depoliticised." (p. 23). To the point that when:

> 'epidemics' of self-harm, eating disorders, depression, loneliness, performance anxiety and social phobia are simply disorders of individuals with 'dysfunctions.' They are medical conditions that arise from internal failings and require health professionals to correct them. You will not be expected to believe that this may be the outcome of the 'winner' and 'loser' social structure. (Timimi, 2021, p. 23)

ADHD within the Classroom

According to studies in the US and Europe, many students displaying behaviour characteristic of ADHD experience a wide swathe of academic, social and behavioural impairments, all of which impact negatively on their schooling (Cheesman et al., 2022; Zendarski et al., 2017). It is also reported that adolescents diagnosed with ADHD may be unable to focus and concentrate, which hampers their classroom learning and may be considered difficult for schools and teachers to manage (Gaastra et al., 2020; Zendarski et al., 2017) and subsequently are at greater risk of being suspended from school or even dropping out (Zendarski et al., 2017).

Recent studies around schooling and ADHD from the perspective of teachers are plentiful. Teachers are often considered to be ideally located to identify learners who may qualify for an ADHD diagnoses as they observe children's behaviour in structured settings like classrooms. (Degroote et al., 2024). Teachers can significantly influence a learner's academic trajectory and emotional well-being. Positive student-teacher relationships are often considered a prerequisite for learning as they foster supportive and trusting environment where learners feel understood and valued. A systematic review conducted by Ewe (2019) integrated existing literature (consisting mostly of quantitative studies) examining the relationship that teachers have with learners diagnosed with ADHD in mainstream primary and secondary schools. Teachers reported experiencing less emotional closeness, lower degrees of co-operation and more frequent conflicts with learners diagnosed with ADHD than with other learners. Learners felt less emotionally connected to their teachers in comparison to their 'non- ADHD' peers, a sentiment that was echoed by the teachers themselves.

Essentialist beliefs which view young people with ADHD as fundamentally different from their peers are widespread in both public and scientific discourses. An online study in Germany investigated specific beliefs preservice teachers have about the phenomenon and how these beliefs influence their expectations of children diagnosed with ADHD (Hennig et al., 2023). The authors argue that teachers' essentialist beliefs about ADHD were closely aligned to Rosenthal and Jacobson's (1968) Pygmalion and Golem effects, where positive expectations from teachers can lead to improved performance whereas negative expectations generally result in poorer outcomes.

Braude and Dwarika (2020) explored the challenges teachers face in accommodating and supporting learners with ADHD. The project formed part of a wider study that spanned

across four South African provinces, the Eastern Cape, Western Cape, Mpumalanga and Gauteng. Results from the study suggested that many teachers (who were from a broad range of government schools) struggled with limited knowledge and skills related to ADHD, leading to frustration and difficulties in managing classroom behaviour. Teachers emphasised the need for more practical strategies, resources and training to support learners diagnosed with ADHD.

Another South African study conducted among foundation phase teachers from nine private schools aimed to determine their knowledge and understanding of ADHD (Jaye et al., 2020). In comparison to similar previous studies using the same research instrument (the Knowledge of Attention Deficit Disorders [KADDS]), teachers demonstrated a relatively high knowledge of ADHD. Teacher training, exposure and experience working with children diagnosed with ADHD as well as the reading of professional articles were linked to their higher levels of knowledge. Teachers were particularly knowledgeable about the aetiology and features of ADHD. They demonstrated fair knowledge of the pharmacological treatment with stimulants. Furthermore, most teachers implicated sugar and food additives as increasing ADHD type behaviour, and the majority were also unaware that elements of ADHD could be addressed with behavioural therapy.

Although teachers may not ‘diagnose’ learners with ADHD, nor recommend that they are medicated for behaviour characteristic with the disorder, the mere suggestion to parents to have their child evaluated by a medical professional can set the ‘ADHD ball’ in motion (Graham, 2008). Tegtmejer and colleagues (2018) analysed how ADHD is used “as a resource for understanding and managing the problems experienced in school” (p. 8). The authors argue that “the categories used by staff individualise the problems of pupils by

pointing to the lack of ability (…) and that the problems are rarely seen as consequential to pedagogical practices or teachers' actions" (Tegtmejer et al., 2018, p. 123). Although schools may advocate for ADHD diagnoses as a means to address and support learners' 'special needs', it simultaneously hinders teachers' nurturing of these particular needs as an ADHD diagnosis confirms that difficulties are located 'within the child' as opposed to the school context (Hjörne & Säljö, 2019). Schools serving privileged communities are often able to jettison problematic students off to the experts milling in and around the domain of the school to in-house professionals like school counsellors, psychologists or to external clinicians and a host of other medical professionals. Consequently, psychiatrists and other medical professionals are positioned as experts within everyday educational practices, which for many medical professionals is an unfamiliar space beyond their scope of expertise (Hjörne & Säljö, 2019).

While there appears to be no shortage of studies about ADHD from teachers' perspectives, there are less visible accounts of experiences within the school context from the perspective of adolescents. In an attempt to address this paucity, an Australian study investigated the educational experiences of adolescents diagnosed with ADHD (Gibbs et al., 2023). This rather unique Australian study was conducted by and co-authored with an 11-year-old Grade six learner who had been diagnosed with ADHD and thus assumed a novel participatory approach. The collaboration not only amplified the voices of adolescents with ADHD but highlighted the importance of involving young people in research about their own experiences. The study used the young learner's self-designed survey to gather insights from other adolescents aged from 11 to 13, exploring their perceptions of how ADHD influences their behaviour, learning and relationships with teachers and peers. Findings revealed that learners with ADHD reported difficulties with impulsive behaviour, meeting classroom

expectations and navigating social stigma. However, many recognised strengths like creativity and energy which they associated with ADHD and were appreciative of supportive teaching practices like individual attention, adjustments to tasks and the freedom to use tools like fidget spinners.

For some adolescents diagnosed with ADHD, a change in the learning environment can lead to positive outcomes. Studies in Europe investigating the effects of the global lockdowns and a shift to learning at home necessitated by the COVID pandemic, reveal mixed but interesting findings for adolescents diagnosed with ADHD (Bobo et al., 2020; Melegari et al., 2021; Thorell et al., 2022). Results indicate that most young people experienced overwhelming feelings of sadness, loneliness, anxiety about the health and welfare for their families, and isolation from their peers. However, online study at home and longer time to study was associated with a decrease in ADHD symptoms (Melegari et al., 2021; Zhang & Ma, 2020); an improvement in school related anxiety, which was attributed to the flexibility of home-learning, reduced exam pressure (Thorell et al., 2022); and increased self-esteem which was attributed to fewer incidences of negative feedback from within a school environment (Bobo et al., 2020)

Social Media and the Implications for Adolescents

The debate around media and their influence on children's cognitive and physical development is a long and contentious one. Media and technology innovations have provoked great uncertainty and fear since Socrates predicted the downfall of human memory and cognition with the invention of the stylus. Subsequently, the invention of the printing press, the radio, TV and cinema were all considered to have the potential to darken the future of humankind (Appel et al., 2020). Technologies are frequently heralded as the answer to significant global challenges. However, when these anticipated solutions do not

materialise, it can lead to widespread disappointment (boyd, 2014). This disillusionment can trigger a backlash, with attention shifting towards the potential adverse effects associated with these technologies. Much of the concern and unease surrounding young people's interaction with social media is rooted in either misunderstanding or unmet expectations. Typically, this confusion generates discussions that either assume utopian or dystopian narratives (boyd, 2014).

Social media platforms have emerged in rapid succession and have raised concerns about the impact on adolescent relationships, identity, self-esteem, social skills (boyd, 2014) and mental health (Cataldo et al., 2021). Digital platforms have transformed the way adolescents interact with one another, providing them with the ability to craft social spaces without the need for physical movement to specific locations (boyd, 2014). It offers adolescents a virtual arena beyond the personal space of their bedrooms to explore the world and understand their place within it. Online engagement with social media platforms can be particularly valuable during adolescence, a time when young people are actively searching for a sense of who they are and how they fit into the world.

Turkle, an American sociologist has been particularly fascinated by the way young people embrace virtual worlds and argues that the distinction between computers and humans has become increasingly blurred. Turkle (2017) contends that a new society started emerging as people escaped the limitations of their offline identities. She recalls her earlier work at the Massachusetts Institute for Technology (MIT), and an encounter with a group of young researchers, equipped with various technologies like radio transmitters, computers and keyboards in a backpack and spectacles with digital displays. This paraphernalia allowed them to be perpetually wired to the internet, permitting them to live in both the physical and

the virtual world simultaneously. Despite the physical consequences of carrying the equipment, the researchers felt more organised and capable of handling complex information. While the experiment was ostensibly to improve productivity it seemed to have a transformative effect on self-concept, with one individual remarking that it made him feel more confident and prepared (Turkle, 2017). This experiment foreshadowed a seismic shift towards constant digital connectivity facilitated by today's smartphones. Although identity is continuously evolving during the course of life, online environments offer new tools and mechanisms for this ongoing construction. Media studies scholar Sundén (2003), describes the process where people consciously create their digital presence as "typing themselves into being" (cited in boyd, p. 36). Duffy and Chan (2019) explore the complexities of social media use and argue that it is axiomatic that adolescents' engagement with the wide array of platforms inherently involves self-presentation. Crafting an online persona is a creative endeavour, and just like children fabricate elaborate stories or games, experimenting with possibilities of who they can be, social media platforms serve as a veritable playground for adolescents, providing them with a range of possibilities and unique opportunities to experiment with, and sculpt different facets of their identity in ways not previously possible (Turkle, 1995, 2017)

Ikegami (2011) describes how individuals explore identity and belonging in the virtual world through the use of avatars. Ikegami (2011) explains, "in today's context of cyberspace, avatars are digital representations of the self, technological artifacts that provide a three-dimensional graphic body as an anchor for communications in the virtual world" (pp. 1157-1158). Le Bresco (2004), affirms the importance of avatars and the anonymity they provide while navigating online spaces "for some subscribers it is the anonymity of cyberspace that is most attractive, the fact that they exist online only as words detached from

their bodies frees them from less self-conscious reflection about the nature of their embodied experiences" (p.179). The benefit of anonymity within the virtual world may be particularly salient for those who experience stigma in the offline world. In cyberspace, our bodies can be represented the way we want in a myriad of ways, and these online representations can produce different ways of thinking about who we are and how we relate to our world (Turkle, 2017). The virtual body is one's ability to envision new ways of engaging with the environment. As Franck (1995) notes, we do not leave our body behind when entering the virtual world, "without our physical bodies, I am in no world at all – but instead [we are] leaving behind a particular kind of 'being in the world', a being in the world that is constrained by physical limitations" (p. 20).

In the online world, everything is rapidly new and rapidly old, many services and platforms evolve or become obsolete within a very short period of time. However, the ability to communicate asynchronously, search for information online, experiment with online identities and navigate social relationships are permanent features of online life (Valkenburg et al., 2021; Valkenburg & Piotrowski, 2017). The term affordance describes how objects can be used in one's environment (for example a water bottle can be used to drink from but also as vase or even a weapon). In the case of social media, the possibilities of online platforms can be used are vast, which provides insight into their appeal and effects (boyd, 2014). Valkenburg and Piotrowski (2017) explore three particular affordances of social media, asynchronicity, cue manageability, and scalability. Social media platforms typically allow users to communicate asynchronously providing them with time to edit and rethink their messages and images before posting them. The ability to revise and enhance messages is especially beneficial to adolescents and individuals who are socially anxious or lonely, providing them with additional time to polish their self-portrayal but may also benefit by

internalising these refinements (Stern, 2008; Valkenburg et al., 2021; Valkenburg & Piotrowski, 2017). Most platforms allow users to control the visibility of personal cues, they can choose as to whether they want to represent themselves through written descriptions or adding other information like photos, emojis or videos. Moreover, users can employ freely available software techniques to enhance or alter these cues (Gorea, 2021). By refining how they portray themselves online can be beneficial (i.e. improve their self-perception), however, young people's choices about how they present themselves online is heavily skewed by the notion of fitting in and being accepted (Gorea, 2021). If online presentations are exaggerated (i.e. too intimate, or appearing to immature) these actions can breach the norms of social media engagement and lead to awkward and potential hurtful outcomes like ridicule or social exclusion (Gorea, 2021; Valkenburg & Piotrowski, 2017). The construction of visual identities must "pass as authentic (edited enough), but not too authentic (too real)" (Gorea, 2021, p. 3) . Although the practice of curating and sharing 'selfies' may be considered narcissistic, Gorea (2021) argues such "authenticity work surrounding the pressure to perform an authentic self in narrowly accepted ways is a source of major anxiety for youth" (p. 3).

Numerous international studies have indicated that engagement with social media can have an adverse effect on young people's mental health (Abi-Jaoude et al., 2020; Boer et al., 2021; Cataldo et al., 2021). A South African study investigated the relationship between social media usage and mental health among young adults aged 14 to 35 years (Lukose et al., 2023). Findings of this quantitative study revealed that young adults spend around six hours per day on social media, attributing a good portion of this extensive use to the fear of missing out (FoMo). Depression, anxiety, low self-esteem was listed as detrimental mental health effects of excessive social media engagement. Other global studies investigated the most

common risks encountered by youth while interacting with social networking sites, these include exposure to sexual images, increased sexual behaviour (Van Ouytsel et al., 2022), access to online content encouraging self-harm and suicide (Scherr, 2022), the inappropriate disclosure of information (Towner et al., 2022), and the exposure to hate material and cyberbullying (Kumar & Goldstein, 2020).

As social media platforms increase in popularity, studies have been conducted to determine whether these technologies enhance or reduce intimacy and feelings of belonging and connectedness among peers. Some studies show that the ability to maintain connections despite geographical separation is a key advantage of digital communication, and foster a greater sense of closeness to peers (Ehrenreich, 2022). Moreover, Ehrenreich (2022) contends that adolescents engage in extensive emotionally supportive exchanges on social media, using platforms to seek peer support during difficult times. Online platforms have become modern confessional spaces, where disclosures, once reserved for close friends or family or the church are now declared without the constraints of personal bonds (Turkle, 2017). While online admissions may not always be entirely factual, they may be true enough for the individual to feel some sense of relief, less isolated and for readers to feel more connected to a community (Turkle, 2017). Even when confessions transpire under the cloak of anonymity, it does not exclude emotional involvement. There is satisfaction in releasing feelings online, and imagining the ideal scenario that it will reach someone who may genuinely care. However, as the online world expands the reach of those who may offer compassion, it also increases exposure to the potential cruelty of strangers (Turkle, 2017).

Interestingly, research focusing on particular social media features reveal that platforms that use images like Instagram, Snapchat and TikTok, reduce feelings of loneliness,

suggesting that the focus on visual content enhances a ‘social presence’ among peers, promoting a stronger feeling of connection (Pittman & Reich, 2016). In contrast, other research indicates that smartphone and social media usage may diminish social connections and contribute to feelings of social isolation (Marttila et al., 2021). A meta-analysis indicated a correlation between social media use and feelings of loneliness, suggesting that loneliness might drive increased social media usage rather than the reverse (Chu et al., 2023). The mixed findings regarding social media’s effect on social connectivity might be attributed to methodological challenges in determining cause and effect, but also the ways in which adolescents engage with these technologies.

Although critics assert that social media platforms are responsible for the decline in face-to- face interactions, recent research in the US indicates that, 41% of adolescents attribute the overwhelming number of school and extra curricula commitments for reduced in-person activities (Gelles-Watnick, 2023). A further 34% of adolescents report that friends are too occupied with their own responsibilities making it almost impossible to physically connect with one another, while 32% point to transportation as a barrier to seeing their friends (Gelles-Watnick, 2023). The convenience of digital interactions is a significant factor, with 33% of adolescents reporting that it is easier to connect online than in person. In addition to these logistical reasons, many young people describe feeling not only more confident, but more authentic and outgoing when interacting on social media platforms (Gelles-Watnick, 2023)

Before the advent of social media, individuals who deviated from non-mainstream values and beliefs often struggled to find an audience that would listen to and validate their perspectives (Granic et al., 2020). These digital spaces facilitate communication across

geographies providing young people with alternative narratives they would have otherwise been oblivious to. Furthermore, online spaces provide opportunities to co-create alternative narratives that seem to be a more appropriate fit with developing value structures (Granic et al., 2020). However the disadvantage of these specialised online communities, is that they can create echo chambers that limit exposure to differing viewpoints, discouraging engagement with the world outside their circles (Campbell, 2023).

There are growing concerns about the presence of a 'sick role subculture' on platforms like TikTok (Amorelli et al., 2022; Paulus et al., 2021), where users might mention their illness in content to gain 'likes' and 'follows'. Watching these videos could potentially cause viewers to adopt illness behaviours via social contagion. Platforms like YouTube and TikTok have been linked to the emergence of tic-like disorders in youth, apparently initiated by viewing similar behaviours online (Amorelli et al., 2022; Paulus et al., 2021). To address this issue, clinicians have created guidelines to evaluate and treat such cases, and have introduced "Social Media Associated Abnormal Illness Behaviour" as a new term to describe this trend of 'Munchausen's by internet' (Giedinghagen, 2023).

Online platforms have been accused of fuelling preoccupations with one's appearance. Sharing selfies is particularly common among adolescents, however, many young people become preoccupied with their appearance on social media and is associated with negative mental health outcomes (Choukas-Bradley et al., 2020). With the opportunity to showcase their physical selves online, young people may pursue an unattainable level of perfection by editing, filtering and enhancing certain features (Burnell et al., 2022).

TikTok

Previous research has identified TikTok as a popular site for youth expression, identity development, peer collaboration and social comparison (Kale, 2020; Montag et al., 2021). Users who engage with the app typically view, create, comment on and share the videos featured on the platform (Montag et al., 2021). TikTok is a highly immersive app which is used to create and share short (between 15 and 60 seconds) looping videos, pairing them with original sound or a library of music, effects and soundbites. Videos can be simply viewed or shared with others, commented on or 'liked' by pressing a heart icon. When users open the app, they are directed to the landing page known as the "For You" page. This personalised homepage consists of a stream of videos, generated by the app's algorithm, builds a profile of the user and their interests. Unlike Instagram which is criticised for being a curated platform filled with images of inauthentic and unrealistic perfection, TikTok is largely understood as a platform with content that is raw, relatable and unfiltered (Montag et al., 2021). However, TikTok's aggressive AI algorithm[1] has been condemned for its lack in transparency in disclosing the parameters used to design content according to the user's profile and interests, which goes largely unnoticed by the end-user. It is this algorithmized version of self that distinguishes TikTok from other social media platforms (Montag et al., 2021). The algorithm is notorious for prioritising popularity of the content over accuracy, increasing the potential to distribute information that is misleading and sensationalist (Montag et al., 2021). These algorithms which are designed to keep the user online for as long as possible, have also been criticised for creating echo chambers, providing very little option for the presentation of alternative or critical opinion. This process could facilitate mass

[1] An algorithm is machine-based learning processes based on previous online behaviour which determine how content is filtered, ranked and recommended to users which are believed significantly influence user's choices and what is seen on social media

persuasion, influencing the behaviours and opinions of a significant amount of people (Montag et al., 2021). Historically, TikTok has faced accusations of racial bias, where black content creators having to struggle for visibility and credit. In 2020, content creators flagged that terms like “Black Lives Matter” and “Black People” appeared to be muted by the platform’s automated moderation systems (Kung, 2022).

TikTok has normalised discussions pertaining to mental health and created opportunities to share lived experiences which can be validating and empowering. However, the increasing trend of self-diagnosis based on unregulated information may pathologise behaviour which can have disturbing consequences (Somerville & Brady, 2019). Content about ADHD on the TikTok platform ranges from symptomology, life with ADHD, self-diagnosis, medications, survival tips (hacks), and dating to name but a few. ADHD generates some of the highest mental health related views with videos containing the ADHD hashtag currently standing at over 20.6 billion views. Interestingly, in January 2024, TikTok officially removed the number of views a particular hashtag generated which was used as a useful tool by researchers to identify the scale of exposure to videos (particularly those considered to contain potentially harmful content). This move has been extensively criticized as a major step back in TikTok’s transparency policy. Prior to this change, data extracted from TikTok in December 2023 provided the number of views of a small sample of the videos with ADHD, #adhdmemes (125.4 million views), #adhdmeds (66.5 million views), #adhdtraits (21.1 million views), #adhdadvice (15.3 million views), #adhdschool (15.1 million views) #adhdassessment (13 million views) and #adhdteens (12.5 million views) (TikTok, 2023).

While it is recognised that TikTok has its fair share of problematic content, a large majority of content generated by young users is exceptionally clever and subversive. This

content is circulated, remixed and repurposed in unexpected ways (Wright, 2021). The skill with which these users re-contextualise, juxtapose and comment on recently published often niche material is impressive. This is remarkable, given TikTok's massive community and the constantly shifting landscape of popular culture users tap into (Wright, 2021). Despite its dynamic nature, many educators view TikTok as either a distraction or a bad influence. For now, TikTok has become part of popular culture, and popular culture clearly has the power to influence everyday beliefs and perceptions (Sellnow, 2018). Although Vygotsky (1980) asserts that societal influences, student cultures and peer groups have the largest impact on student learning, it is increasingly challenging for educators to responsibly and authentically engage with these aspects as more social interaction is taking place online (Wright, 2021).

Social Media and the Link with ADHD

Scholars have raised concerns that the increase in the diagnosis of ADHD in the last decade may not necessarily indicate underdiagnosis in the past, or overdiagnosis in the present, but rather the surge of ADHD diagnoses may be at least partly attributed to social media use. Findings from a longitudinal study conducted by Boer and colleagues,(2020) in the Netherlands, suggest that problems associated with ADHD characterised by "addiction like behaviours, such as the displacement of other activities for social media use (SMU), or having conflict with others due to their SMU" (p. 863), may increase ADHD symptoms among adolescents in general over time.

Multiple studies have investigated the intersection of ADHD and addiction (Augner et al., 2023; Chen et al., 2024; Wang et al., 2024), concluding that youth diagnosed with the disorder are prone to develop an addiction to online engagement, which may manifest in the problematic use of social media, gaming, gambling and pornography. Studies indicate that

young people with ADHD are susceptible to what is now defined in the DSM-V-TR as Internet Gaming Disorder (IGD) as both phenomena include difficulties with impulse control, reward sensitivity and executive functioning (APA, 2022). The DSM- V-TR suggests that problematic internet use (PIU) alongside other proposed disorders like caffeine use disorder are conditions that warrant further investigation. A meta-analysis of studies across different data bases like Pubmed, PsycINFO and Google scholar identified 24 studies published between 2004 and 2021 investigated the relationship between PIU and ADHD (Augner et al., 2023). Findings of the study revealed a significant association ADHD symptoms and PIU, with males and adults demonstrating stronger links in comparison to females and younger individuals. The results suggest that ADHD related symptoms may make individuals more susceptible to psychological mechanisms in digital applications which are specifically designed to "hook" users, increasing their engagement and potentially worsening the characteristics associated with ADHD. Although adolescents diagnosed with ADHD may appear to be a "uniquely vulnerable population", boyd (2014) argues, very little is gained from framing social media engagement as a disease:

> Technology makes the struggles youth face visible, but it neither creates nor prevents harmful things from happening even if it can be a tool for both. It simply mirrors and magnifies many aspects of everyday life, good and bad. (p. 212)

Recent revelations from former Silicone Valley employees warn that we are in the midst of an 'attention crisis' and call for urgent external regulation to reduce the harm imposed on society at large (Hari, 2022). Developers of applications are being exposed for designing platforms that capture users' attention, manipulate emotions, amplify hate and spread misinformation (Hari, 2022; Lanier, 2018). "Free" applications like Facebook, Twitter, Instagram, Snapchat, YouTube and TikTok are believed to be explicitly designed to

encourage excessive smartphone usage, with engineers adding more features to make them increasingly engaging, making users progressively distracted, and ultimately compromising their ability to pay attention and focus (Hari, 2022; Lanier, 2018). The technological affordances of these platforms and algorithms identify interests, guide content and connect people based on their shared interests. A key aim is to keep users engaged for as long as possible to gather personal data about their habits and preferences, which is then sold by Big-Tech companies like Google and other surveillance capitalists for a considerable profit (Hari, 2022; Lanier, 2018).

To mediate the deleterious effects of excessive engagement with digital screens, media experts recommend a 'digital detox' (Lanier, 2018). However, offering simple solutions to complex problems, can be likened to what Lauren Berlant (2011) considers 'cruel optimism'. When simple solutions fail (as they will most of the time) when applied to larger systemic problems, the individual will blame themselves, attributing their lack of willpower or strength of character for their failure, as opposed to acknowledging pervasive environmental forces at work (Berlant, 2011; Hari, 2022). It should be acknowledged that the response to the attention crisis is both individual and collective, bringing into awareness the multiple layers of an environment unequivocally designed to diminish focus and attention (Hari, 2022).

Conclusion

This comprehensive literature review provided an examination of the complexities of ADHD, the diagnostic process, treatment and social implications. The contrasting neurobiological and social constructivist perspectives offer distinct ways of understanding ADHD with the former emphasising biological brain-based factors and the latter critiquing the subjective nature of the diagnosis. Exploration of pharmacological treatments highlight short-term benefits of stimulant medication and also raises concerns about side effects. The

critical role of school was also emphasised, revealing how academic pressures, teacher relationships and institutional frameworks shape the experiences of adolescents. This section highlighted gaps in the research, where voices of adolescents diagnosed with ADHD remain underrepresented in studies focusing on the school experience. Lastly, social media and the impact on adolescents is explored, demonstrating both its potential and risks, more especially the attentional issues related to increased online exposure.

Chapter 4 - Methodological Framework

This qualitative research project is located within the paradigmatic framework of phenomenology and was conducted using creative narrative methodology. Research employing qualitative methods aims to address the shortfalls of quantitative methodologies, which typically gather data from subjects and interpreted with little to no opportunity for participants to account for their behaviour, and may ignore social contexts within which they occur (Bradbury, 2020). Phenomenology focuses on individual lived experiences, providing a deep, detailed understanding of how individuals perceive and make sense of their world. By sharing their first-hand experiences, participants were encouraged to narrate their own stories in their own terms. Epistemologically, phenomenological approaches are based on a paradigm of personal knowledge and subjectivity, emphasising the importance of personal perspectives and interpretations. As such, this approach was powerful for the understanding of subjective experience of young people diagnosed with ADHD, gaining insights into how they perceive and make sense of the world and themselves, eliminating the clutter of taken for granted assumptions and traditional frameworks. The experiences of others may not always be easily understood and unavoidably requires the researcher to interpret meanings according to their own positioning, which may overshadow how participants experience their own realities. However, as Fay (1996) suggests:

> …genuine understanding goes beyond sensitivity. To know others – indeed to know oneself – is to be able to make sense of their experience. For this needs, in addition to sensitivity, the ability to decipher the meaning of their experiences. For this you needn't be them or be very much like them (except in the innocuous sense of being able to have experiences and to think and feel in ways persons do). (p. 28)

The lens of phenomenology or participants' own experiences and the articulation of these experience in their narratives, challenges the dominant medicalised discourses and social ways in which they are positioned within schools, families and the medical field. The participants' own knowledge and interpretation of the world is understood according to Josselson's (2004) hermeneutics of faith (also understood as hermeneutics of restoration), which means taking the participants "at their word" and has the potential to access major themes and structures that scaffold biographical telling (Josselson, 2004). The hermeneutics of faith requires the "phenomenological epoch, an effort at presuming as little as possible in order to believe in the manner of the believer" (Josselson, 2004, p. 10). This approach penetrates beyond received versions of the world to uncover participants' own experiences, 'bracketing' taken for granted assumptions and contexts or at least acknowledging them to achieve "a purer distillation of meaning" (Josselson, 2004, p. 7). Adopting the perspective of the young participants themselves, enables a critical engagement with the dominant discourses of powerful social institutions such as schooling and healthcare.

Narrative Methodology

Combining a phenomenological paradigm with narrative methodology created a powerful framework for understanding the lived experiences of the participants through the lens of personal storytelling. "Human beings are inherently storytellers and it is through the activity of narration that we create meaning in our lives" (Andrews et al., 2000, p. 77). According to Riessman (2008) "narrative research can offer a more nuanced and contextualized understanding of social phenomena than other research methods, because it allows us to explore the meanings that people attach to their experiences, and the way those meanings are shaped by cultural and social factors" (p. 5).

Narrative methods have the capacity to capture the richness and complexity of social phenomena, providing insight into unspoken rules, uncovering different and sometimes contradictory layers of meaning, which provides a deeper understanding of the individual and the world in which they live. It is against this backdrop that I chose a narrative approach for this study.

Narrative accounts "investigate not just how stories are structured and the ways in which they work, but also who produces them and by what means, the mechanisms by which they are consumed, and how narratives are silenced, contested or accepted" (Squire, 2008, p. 4). Master narratives are an integral part of society and are essentially defined as, "culturally shared stories that guide thoughts, beliefs, values and behaviours" (McLean & Syed, 2015, p. 323). Most individuals within a given culture internalise dominant narratives, weaving them into their own personal stories. If the researcher does not read the personal stories without accounting for the master narratives, they risk "the temptation of emphasizing too strongly individual's agency to construct any narrative of their choosing" (McLean & Syed, 2015, p. 326). However, these master narratives are not viewed as stories of individuals' lives, but rather "broad culture specific stories that are available for individuals to potentially internalise and resist, both consciously and unconsciously" (McLean & Syed, 2015, p. 323). This was particularly salient for the participants in this study, as understanding the experiences of these young people from their perspective did not only prove meaningful for them, but also provided alternative ways of viewing themselves, as opposed to the master narrative of being disordered, distracted, delinquent and reckless. The participants' trust in me and their willingness to talk about their experiences, facilitated the surfacing of counter narratives, stories that allowed for a recognition and validation of a counter reality.

Riessman (2008) explains that through the interpretation of narratives, we discover 'truths' about the narrators' experience and provide insight as to how they understand themselves and would like to be understood. However, Bradbury (2017) cautions, "narrative is not a transparent route into the minds of storytellers or to the social world in which they live" (p. 18). Narrative work is complex, it involves a delicate balance between being receptive and open-minded towards participants' accounts, while maintaining a critical distance that enables the researcher to discover insights that may not be immediately apparent or even known by the participants (Josselson, 2004).

During the conceptualisation of this study, it became apparent that conventional research methods to explore the phenomenological component of the project would not be sufficient. Traditional data gathering instruments like interviews may not fully facilitate authentic stories around young people's encounters and perceptions of ADHD and may even further entrench existing stereotypes. There is considerable debate around the inadequacy of the use of words alone within the narrative approach especially when trying to capture and express the complexities of lived experiences (Bradbury, 2017). Esin and Squire (2013) argue that interviews may be restrictive for young people, contending that "some individuals tell stories about themselves with more enjoyment and skills than others" (p. 23). Interviews and other traditional methods of data collection can make power relations between adults and adolescents more salient, during which young people may feel forced to comply by providing the kind of answer they think the researcher is looking for (Winstone et al., 2014). Furthermore, young people who have been diagnosed with ADHD or understand themselves according to the symptoms of the disorder, are often subjected to extensive scrutiny by a multitude of adults. Thus, these young participants may be understandably wary of the intentions of researchers who may be viewed as additional surveillance in their lives

(Winstone et al., 2014). In acknowledgement of this, instead of doing research "on" these young people, this study recognised the role that participants play in shaping the research process by selecting and constructing the data, moving them from the sidelines of the research toward an active immersion in project. Esin and Squire (2013) argue that "narratives can operate across media, including still images", suggesting that "visual images can certainly constitute narratives, though (like other narratives) they may not be easily or similarly read" (p. 24). Images which "are built up by different collaged signs, often applied in layers; their understanding, like their production, involves a narrative progression across them" (Esin & Squire, 2013, p. 24). Creative, visual mediums provided a valuable alternative to capture and articulate the "messiness" and the "non-linearity" of the participants' experiences which may have been difficult to put into words (Bradbury, 2017). Prosser (2012) asserts, "art can comprise of complexity and contradiction, and unlike arguments in an academic paper, art need not be linear" (p. 199). To comprehend the 'meaning' of narrative, visual materials were used to prompt and recall memories and experiences (Squire, 2008). "Visual representations of experience - in photographs, performance art, and other media – can enable others to see as a participant sees, and to feel" (Riessman, 2008, p. 142). Images used in the study were both 'found' (e.g. TikTok videos, music lyrics) and 'created' (e.g. collages, bodymaps, photographs). These powerful visual cues facilitated dialogue and self-expression, providing "generative and creative ways" to gain insight into the participants lived experiences, facilitating discoveries which may have remained inaccessible (Botsis & Bradbury, 2018). Moreover, asking young people to work with creative narrative forms other than just interviews, made participation more enjoyable but also elicited discussions which provided deeper and authentic insights into their experiences and perspectives (Winstone et al., 2014).

Consistent with the descriptive and qualitative nature of this study, no specific hypotheses were formulated, but the study addresses the following research question and sub questions:

1. What are the lived experiences of adolescents diagnosed with ADHD or who self-identify with the characteristics of the phenomenon and their own understandings and perceptions and experiences of ADHD?
    1.1. How do these particular adolescents navigate their offline and online worlds and how do their experiences within these spaces contribute to their identity, agency and connection to others?
    1.2. How do these young people engage with and perceive information and content posted about ADHD in the popular youth focused platform TikTok?
    1.3. What are the benefits and risks the online world may present to these particular adolescents?

Participants

To take part in the study, participants needed to be 15 or 16 years of age, in Grades 9 or 10, and have either been formally diagnosed with ADHD by a medical professional or 'self-identify' with the characteristics of the phenomenon. The age category for the study was chosen by taking into consideration that most individuals who receive ADHD diagnoses are diagnosed as children, often at the onset of formal schooling. It is estimated that the majority of children in South Africa are diagnosed with ADHD between the ages of 10 and 19 years old (Liebenberg & Schoeman, 2017; Moss, 2017). Consequently, adolescents aged 15 or 16 would be familiar with the discourse associated with behaviour that is deemed contrary to the normative ideal. Furthermore, adolescents who are officially diagnosed or who self-identify with the characteristics of ADHD would have had some experience (directly or indirectly) with the ADHD label and treatment processes. Although by the age of 16, adolescents

diagnosed with the disorder may have had experience with ADHD medication, it was not a criterion for participation. Excluding current or previous exposure to ADHD medication was an important consideration for 'self-identified' participants, as they may not have had any experience with medication associated with the pharmacological treatment of ADHD. Moreover, longitudinal studies indicate a significant number of young people who had been taking stimulant / non-stimulant medication for ADHD at the onset of their diagnosis (mostly during early childhood), discontinue the medication between the age between 14 and 18, either with or without their parents' consent (Brinkman et al., 2018). The reasons cited for terminating treatment included concerns around side-effects, a reduction in efficacy, social stigma, difficulties around access to the medication or that it was no longer needed (Brinkman et al., 2018). As there are no clinical markers or diagnostic tests for ADHD, medical professionals base their judgements or 'diagnose' ADHD according to a cluster of characteristics associated with the label. Participants who self-identified with the label use the same accepted (subjective) frame for the label as applied by medical personnel, thus their judgments were considered equally valid. Finally, participants needed to own a smartphone and engage with social media platforms like Instagram, TikTok, Snapchat, Twitter, YouTube etc. to take part in the study.

The study was designed to focus on the experiences of ten adolescents. Selecting a suitable sample size in qualitative research is a subject of much debate and practical uncertainty (Vasileiou et al., 2018). When considering sample size, researchers are encouraged to consider parameters like the scope, accessibility, complexity of the topic, quality of the data, and the design of the study (Morse, 2000). The decision to work with a small sample size was motivated by the aim of gathering richly textured information using multiple instruments around experiences and perceptions of adolescents. Morse (2000)

suggests that “the more usable data are collected from each person, the fewer participants are needed” (p. 5). A considerable amount of data was gathered, and due to the focused nature of the project, was extremely detailed. It is not always easy to ascertain the point of saturation, and as Josselson (2014) points out, “saturation never occurs when telling personal stories, as each participant has something unique to add to the study” (p. 27). With this in mind, it was considered that 10 participants were enough to gain multiple, distinctive and rich insights to satisfy the aims of this study. Although there was a potential to include more young people in the project, ten participants facilitated meaningful reflection with the data generated during the multi-activity sessions. The sample size was consistent with the level of analysis employed which was to identify underlying ideas as opposed to a superficial descriptive analysis (Braun & Clarke, 2006).

Initially, two private co-educational schools in the greater Johannesburg area were approached as possible recruitment sites for the study. The decision to recruit participants from private schools was informed not only by practical accessibility but was also strongly grounded in unequal patterns of ADHD diagnoses observed in South African schooling. My earlier Master’s research (Moss, 2017) explored the prevalence of ADHD across four different schools in Gauteng. Results from the study proposed that the diagnosis and prevalence of this phenomena is strongly influenced by race, gender and class. The majority of children diagnosed were boys, more than half were from upper-middle class families and most of the children were white. While the overall prevalence rate (3.7%) across all four schools was lower than the international and South African literature suggested, the racial, class and gender disparities became evident when the number of children diagnosed with ADHD were analysed according to the type of school (i.e. former model C, township, private) and communities they served. There was a complete absence of the diagnosis in the

township school, where most children were from low income, impoverished families. Similarly, in the ex-model C school located in the outskirts of a city center, comprising mostly of black learners, a small minority of learners were diagnosed. Furthermore, the children in both these schools were unaware of the phenomenon of ADHD, and to most the disorder was somewhat of an enigma.

While efforts were made to ensure heterogeneity within the sample with respect to gender, racial identity and experiences with ADHD, all participants had similar socio-economic backgrounds, attended English medium private schools and with the exception of two individuals, all spoke English as their home language. Families who can afford the tuition fees and associated costs of private school education, serve as an indication of an upper-middle class status. Similarly, the economic privilege of this class position facilitates access to private healthcare which offers comprehensive medical and mental health services. Private schools continue to function as concentrated sites of post-apartheid privilege. They are characterised by academic intensity, heightened surveillance of learner behaviour and strong parental advocacy. Within these environments, attentional and behavioural difficulties are more readily problematised, medicalised and managed through formal diagnoses and pharmaceutical intervention (Moss, 2017). Moreover, these participants are not only situated within a context of local educational inequality, but also occupy a unique hybrid position, shaped by a dual reality of local rootedness and global belonging. While their reference points may be constrained by South Africa's stark socio-economic inequalities, the legacy of apartheid and current socio-economic realities, they are also embedded in a globalised youth culture enabled by digital connectivity. As upper-middle class learners in elite schooling environments, participants navigate a dual set of pressures, the local imperatives of academic success and intuitional discipline, and the global forces of algorithmically driven spaces that amplify visibility, achievement, self-monitoring and comparison. Despite the participants

representing a particularly privileged group, there is increasing penetration of social media with its associated strengths and dangers across all strata of our highly unequal society. The focus of the study on the practices of pathologising of children who do not conform to the ideal type of neoliberal subjectivity is of critical relevance for all children, arguably particularly for those growing up in the majority world.

There are numerous benefits to partnering with schools for research purposes. For this study, it offered a strategically appropriate site to access adolescents who had received an ADHD diagnosis or self-identified with the characteristics of the phenomenon. Moreover, recruiting participants through schools rather than online platforms and other community organisations provided practical and ethical advantages, as they included a degree of institutional oversight and an environment familiar to participants. However, using schools as a recruitment site also posed a variety of challenges. Accessing schools and developing positive relationship with designated contacts were arguably the least complicated processes. Although both principals embraced the prospect of learners taking part in the project, they cautioned me that parents of the schools' student body were often reluctant to disclose sensitive information like ADHD diagnoses, particularly if they believe the school is unaware of any formal or informal 'self-imposed' diagnoses. This was the sentiment of a number of other schools that were initially approached as possible research sites for the study. Three of these schools cited parental fear surrounding stigma associated with mental health diagnoses like ADHD. One school which has a reputation of being a highly competitive academic institution, mentioned that the parent body would take extensive convincing to divulge sensitive information about their children, especially information that may "shift the school's opinion of their children's intellectual competence" and declined to participate.

The following steps were followed to secure access to the participants:

Step One: Initial contact was made with the schools and the study aims and rationale were presented to the principals (see Appendix 1).

Step 2: Both heads of the schools agreed to send out the information about the study on my behalf to the parents of the grade 9 and 10 student body (see Appendix 2). In addition to this, both principals addressed the grade nine and ten learners giving them a verbal and written overview of the project (see Appendix 3). Learners who were interested in participating in the study were asked to speak to their parents, and if they agreed, students provided their details to their respective grade controllers[2]. The grade controllers then followed up with the parents to secure their written consent (see Appendix 4) for their child to participate in the study and written assent from the participants (see Appendix 5). Originally, seven learners (five from Grade nine and two from Grade ten) from the first school volunteered to take part in the study. Unfortunately, only two learners from the second school agreed to take part, it was agreed that I would arrange to meet them off school premises, outside of school hours.

Step 3: After a meeting with the principal of the remaining school, it was decided due to timetable constraints and other logistics that I would only work with the five Grade 9 learners who volunteered for the study. The school provided me with the contact details of the two Grade ten learners, however, one learner withdrew before the study commenced due to the passing away of a family member, and the other potential participant withdrew due to the demands of provincial sport commitments.

Step 4: It was then decided to recruit three additional participants through purposive and snowball sampling techniques, which included contacting people within my professional network who teach or who have other contact with adolescents. Letters about the study (see Appendix 6) were sent to the parents and once they agreed for their child to participate in the

[2] A grade controller is a teacher who has been appointed as the head of the grade

research, letters about the study were then sent to the participants (see Appendix 7). The table below presents a profile of the ten participants who took part in the study:

Table 1. Profile of Participants According to Race, Gender and ADHD Status

[3]Name	Age	Race[4]	Gender	ADHD Status
Sharitha	16	Black	Female	Officially diagnosed
Bonolo	15	Black	Female	Self-identified
Lucy	16	White	Female	Officially diagnosed
Emma	16	White	Female	Officially diagnosed
Riley	16	White	Female	Self-identified
Layla	16	White	Female	Self-identified (but medicated by GP)
Craig	16	White	Male	Officially diagnosed
Sanele	15	Black	Male	Self-identified
Mphilo	16	Black	Male	Officially diagnosed
Jayden	15	Black	Male	Officially diagnosed

Data Collection

Once the school had secured the signed parental consent forms and learners' assent forms on my behalf, a group introductory session at the school was held with the five participants during the school day. Thereafter, a total of three individual sessions each lasting an hour were conducted at the school. The timing of the sessions was coordinated by the grade controller who allocated time during life orientation lessons in a classroom that was private and some distance away from the central activities of the rest of the school. Apart from the introductory session, all data collection at the school was conducted with individual participants. During the construction of the collage about ADHD and the bodymaps, each

[3] All research participants were provided with a pseudonym

[4] Black in this research project, refers to the broad definition including the apartheid categories of Black African, Coloured and Indian. The decision to use 'black' in the broader sense was not taken without careful consideration. It reflects an attempt to foreground structural conditions of racialisation and marginalisation in educational and psychological contexts, rather than to impose a homogenising or totalising identity.

participant worked independently in separate corners of a large classroom. There was however a spontaneous moment of joint interaction among the five participants at the school after the completion of the bodymap session, this was recorded and included in the analysis of the data. Each data collection session at the school was scheduled one week apart.

Parental consent (see Appendix 8) and participants' assent was secured for the other five participants (see Appendix 9), they were met individually at their homes at a time that was convenient for them. A total of four one-hour sessions were conducted in a private space within their respective homes. Each data collection session was scheduled one week apart. The following table provides a summary of the purpose of the research instruments, the data collection method and the length of the sessions:

Table 2. Summary of Purpose, Method and Length of Data Collection Sessions

Session No.	**Purpose**	**Data collection method**	**Length of session**
1	***Introductory Session*** Getting to know one another How is ADHD positioned and perceived in popular youth focused media platform, TikTok?	Icebreaker Informal discussion around social media Collection of TikTok Videos	½ an hour ½ an hour
2	Thoughts, feelings and experiences of ADHD	Collage using art-based materials and music	1 hour
3	Online experiences	Body-Map Collage	1 hour
4	Lived experience of ADHD Identity (online/offline)	Photo-elicitation	N/A – Done within their own time
5	Discussion and explanation of all visual components	Semi-structured interview	Between ½ an hour to 1 hour

During the introductory meeting, the project was explained to the participants, an ice breaker activity about social media (see Appendix 10) was used to create a relaxed environment. There was a profound sense of collaboration among the group members at the school, and a lively discussion triggered by the ice-breaker activity around social media ensued. For all participants, this was a topic they clearly felt confident in providing forthright opinions about. Although phenomenological research is conventionally aligned with individual accounts of lived experience, this group mediated activity was designed to support rather than replace the central phenomenological focus. This collective exercise offered stimuli for self-reflection, providing participants with shared references to begin articulating their own experiences and perceptions of the digital world. Furthermore, this group work provided a space in which surface themes and tensions were explored in private, participant - led reflection. In this way, the study maintained fidelity to phenomenology's emphasis on the first person perspective, while recognising that subjectivity is always situated within and shaped by intersubjective and cultural fields.

Once the ice-breaker activity had been concluded, the focus turned to collection of videos about ADHD from the TikTok platform. A common practice within research practices using online information as data sources is to select an intentional data corpus or use the hashtag which is a central component of most social media platforms (Jackson & Foucault Welles, 2015). Hashtags are used to express global or local conversations, events, provocative or non-contentious topics to name a few (Omena, 2020). There is a hashtag for almost every social interest, political debate (e.g. # zondocommission), representation of communities (e.g. #femboy), the awareness of mental health (e.g. #Suicide awareness) and medical conditions (e.g. #multiplesclerosis). The vast number of views (over 20 billion) of hashtags related to ADHD confirmed that the topic is exceptionally popular on the platform.

However, this posed a considerable challenge when it came to the selection of an appropriate and manageable sample for the project. It was during this engagement that emphasis was placed upon participants as co-researchers, thus disrupting the power imbalance that is so often apparent while conducting research with young people (Flanagan et al., 2015). Each participant was asked to use their cell phone to select videos about ADHD from the TikTok platform relating to ADHD (see Appendix 11). The participants were asked to each find four videos that they felt appropriate and perhaps resonated with them, or with which they disagreed or found annoying or inaccurate. The participants were asked to save their selected videos to a Gmail account to facilitate a discussion and analysis. Screenshots of the videos were taken and printed out. Other salient aspects contained within the videos, i.e. the number of 'likes' generated by the post and the number of followers the original poster had on the platform were noted, however, this information was only used to contextualise the analysis.

During the second session of data collection, participants were asked to design a collage to represent the phenomenological experiences of ADHD. Each participant was given a list of prompts (see Appendix 12) to encourage self-reflection. A variety of stationery and craft materials were made available, including A2 sheets of cardboard, art markers, stickers, magazines, glue and scissors. Access to a WIFI enabled colour printer was provided to print any desired material like memes, poems or pictures. During this session, participants were also asked to select music or a particular song they felt represented their perception and experience around their (official or self-imposed) ADHD diagnosis (see Appendix 12). Music is closely associated to memories, emotion and experiences, and can be used to elicit layered responses, produce unanticipated disclosures, and other aspects that largely remain unspoken or unexplored through conventional research methods (Saarikallio, 2019). All the lyrics of the songs selected by the participants were downloaded, printed and attached to the back of

the collages. The collages were photographed, and the photos were printed. Interactions between the researcher and the participants during the construction of the collages were audio recorded.

The aim of the third session was to gather data to explore the 'how and why' adolescents with officially diagnosed or self-diagnosed ADHD engage with social media platforms, and the type of identity work is taking place in these spaces. To explore these online engagements and experiences the participants were asked to construct a body map collage. Participants were given a list of prompts/suggestions (see Appendix 13) to encourage self-reflection and guide the development of the body map. Body-mapping is an innovative methodological technique developed within the context of South African health activism. Solomon (2007) adapted body mapping as a method for HIV positive women to narrate their experiences through life-sized visual representations, integrating narrative, symbolic and emotional reflections into an accessible and holistic medium. Morgan and colleagues (2000) at the Memory Box Project in Cape Town used body mapping to explore memory, trauma and identity in a way that honoured the personal as political, allowing the participants to re-frame their stories within broader socio-political contexts. More recently, Lambert et al. (2022) have demonstrated the method's potential to elicit layered insights into the lived experiences of stigma, illness and identity, especially in contexts where conventional verbal interviews may fall short. In this study, body mapping offered participants a way to express their experiences within an online world in a visual and symbolic way, thus aligning with the broader methodological commitment to understanding subjective experience in its full complexity. Through constructing body-maps, the participants were positioned as the 'knowledge producers' and the researcher as the 'facilitator', disrupting the power imbalance between the 'expert' and the 'subject'. During this session at the school, once the body-map

collages were completed, participants asked if they could look at each other's maps. All agreed and a delightful interaction filled with comments about the distinctive approach that they had all taken ensued. These interactions were captured in the voice recordings of the body-mapping session. Once the body-map session was concluded, photographs were taken of each one and then printed out.

At the conclusion of the body-mapping session the participants were provided with the photo-elicitation task which was designed to explore the lived experiences of adolescents diagnosed with ADHD, with a particular interest around their online/offline identity /identities. Images captured by young people on their own (phone) cameras for self-representation can provide powerful images within spaces that researchers as outsiders would not ordinarily have access to (Loizos, 2000). Photographs can enhance the sharing of information as well as the foregrounding of participants' own processes that may only receive a partial or muted attention in interviews (Loizos, 2000). Furthermore, photo elicitation approaches have been successfully used by community researchers to give those who are disempowered an opportunity to tell their own stories (Loizos, 2000). Drawing on the work of Kessi (2013, 2021), photo-elicitation is positioned not simply as a prompt for memory, but as a method of self-reflection and social meaning-making. In South African contexts marked by historical and ongoing inequalities, Kessi (2021) demonstrates how photo elicitation enables participants, particularly youth, to interrogate their social locations and articulate their identities in ways that resist dominant discourses. Through selecting or producing images, participants in this study were able to foreground visual features of their online and offline identity/ies, highlighting their own interpretive authority. Due to the nature of this task, time constraints with the timetable of the group I worked with at the school and the upcoming end of year exams for all participants, they were all asked to complete the

photographic task within their own time. Participants used their cell phones to photograph particular moments, places, people and objects that captured a sense of who they are in both an online and offline world. A list of photo prompts was provided as a guide (see Appendix 14). We agreed that a week would be sufficient time to collect their respective images which they then shared to a Gmail address and printed out for later discussion and analysis.

The final session comprised of an individual semi-structured interview with each participant around the construction of their ADHD collage, body-maps, selection of TikTok videos and photographs. These sessions varied in length, ranging from 30 minutes to an hour. A list of questions was prepared for the interviews (see Appendix 15), however the collage, body maps, music, and photographs were primarily used as visual provocations to encourage the participant to tell his/her story, providing descriptions and interpreting the visual elements and symbols. Two participants could not meet face to face, but we agreed to meet via Microsoft TEAMS for the final discussion. The dialogue that was generated during the final session was audio recorded.

Data Analysis

According to Riessman (2008), "narrative analysis refers to a family of methods for interpreting texts that have in common a storied form" (p. 11). This study generated two main sets of data for analysis and interpretation. The first set contained the visual components, (i.e. the collage, bodymap, photographs, music lyrics and TikTok videos), and the second set, comprising of verbal components generated during the final semi-structured interview and interactions that took place between the researcher and the participants during the introductory session, the creation of the collage and body maps. As the visual and verbal data sets were both in the form of stories, narrative analysis was deemed the most appropriate method. There is no definitive roadmap to approach narrative analysis (Polkinghorne, 1996).

Guidelines and processes to approach narrative analysis range from models that privilege the structure and temporal ordering, to those which focus on the context and function of the story (Riessman, 2008).

Four narrative portraits (presented in Chapter 5) were constructed using the visual elements of the collage, bodymap, photographs and music, supported with direct quotes from the verbal data. For this section of the analysis, I engaged Lawrence-Lightfoot's (2005) portraiture methodology, an approach which is grounded in phenomenological and narrative traditions. Portraiture methodology uses narratives to create a textual representation that approximates a painted picture, a picture painted with words, capturing the "essence" of what it means to be human:

> [P]ortraits are designed to capture the richness, complexity and dimensionality of human experience in social and cultural context, conveying the perspectives of people who are negotiating those experiences. The portraits are shaped through dialogue between portraitist and the subject, each one participating in the drawing of the image. (Lawrence-Lightfoot & Davis, 1997, p. 3)

Narrative portraiture is a methodological tool that "disrupts the common research practice of privileging the researchers' interpretation and over-analysing people's narratives" (Rodríguez-Dorans & Jacobs, 2020, p. 613). The portraits were specifically chosen to reflect particular narrative identities within offline and online spaces and include concepts of connectivity and agency. Verbal accounts were supplemented with the visual images of the collage, body map, music lyrics and photographs. "[A] 'giving voice' approach involves carving out acknowledged pieces of narrative evidence that we select, edit and deploy to border our arguments" (Fine, 2002, p. 218), and thus, as the researcher, I played a significant role in the construction of the portraits. The story is the key component, assuming the role of a portraitist, I was tasked with "selecting the themes that will be used to tell the story,

strategic in deciding on points of focus and emphasis, and creative in defining the sequence and rhythm of the narrative" (Lawrence-Lightfoot, 2005, p. 10). Moreover, the portraiture as a methodology focuses "on goodness, documenting what is strong, resilient, and worthy in a given situation, resisting the more typical preoccupation with weakness and pathology" (Lawrence-Lightfoot, 2016, p. 19). This resonated with how I wanted to counter the hegemonic biomedical rendering of those diagnosed with ADHD, as this preoccupation with pathology fails to bring us closer to the understanding of the lived experiences of young people who are not behaving or developing according to 'normative' ideals. Lawrence-Lightfoot's (2016) approach is not to romanticise the reality that children struggle, but as she articulates "if we look at the problem deeply, find a way to document and measure it, maybe we will actually be able to do something about solving it." (p. 20). The central tenet of narrative portraiture is that all humans are flawed in some way, this approach attempts to understand what is good and worthy, yet unavoidably laced with imperfection and weakness. By documenting what is 'good' and 'strong', may transfer participants' strengths to other settings which can have a transformational effect and emancipatory possibilities (Lawrence-Lightfoot, 2016). The construction of these portraits involved a vertical analysis of sorts, literature and theory were not explicitly applied but were rather invoked in the interpretation of themes in the horizontal analysis across participants' stories presented in Chapters 6 ,7 and 8. Each portrait was provided with a title, these were extracted from the names participants gave to their collages and body maps once they had completed them during the individual sessions. The table below provides an overview of the four the portraits:

Table 3. An overview of the Participants' Narrative Portraits

Name	**ADHD Portrait title**	**Online Portrait title**
Lucy	Artistic Idiot	Rubymoon
Bonolo	It's Just Chaos	It's All About the Angle
Craig	That Awfully Weird Child	Horns and Halos
Jayden	The Goofmeister	It's a Crime Scene

Thematic analysis was conducted across all data using elements from Squire's (2008; 2013) experience-centred and culturally-orientated approach, and was guided by Braun and Clarke's (2006) steps for thematic analysis. Squire's (2008; 2013) trajectory in narrative research reflects a critical move from the experience centred approach, which privileges personal meaning and internal coherence, to a more culturally orientated framework that emphasises the social, discursive and political conditions under which narratives are produced.

Experience-centred narrative analysis attends to personal stories that focus on meaningful accounts of experiences that people share about themselves. Unlike event narrative, it is defined by themes as opposed to the structure of the story and aims to locate moments of change in narratives, offering the potential of understanding as well as improvement (Squire, 2008). While Ricoeur (1991) posits that by "listening to a story not yet told" the psychoanalyst may not only scrutinise the story but may offer the possibility of providing a story that is "more bearable and more intelligible" (p. 30). This process is not limited to analysts and clients; all storytellers and listeners, including researchers and participants, engage in such transformative acts (Squire, 2008).The experience-centred approach is flexible and may include, past, present and future, describing imaginary events or actual experiences. Furthermore, the experience centred approach allowed for the integration

of verbal and visual material produced during the multiple data gathering sessions, stitching them together to create authentic accounts of participants' own lives.

In her description and critique of the experience-centred approach, Squire (2008; 2013) recognises that narratives are not transparent reflections of an inner stable self, but rather discursive, performative constructions shaped by social, cultural and institutional contexts. Unlike experience-centred models that assume coherence, continuity and interiority, a culturally orientated perspective places these assumptions under scrutiny. It foregrounds how narratives are shaped, constrained and made possible by cultural resources, institutional discourses and historical context. This approach allows for contradiction, silence and fragmentation in narrative, recognising these not as methodological shortcomings, but as meaningful indicators of how subjectivities are constructed under conditions of constraint and possibilities. Assuming this culturally orientated lense made it possible to examine how the participants' narratives are shaped within wider discursive, institutional and social contexts. Rather than privileging one approach over the other, the analysis treats them as complimentary, enabling a more layered and critical engagement with the data.

The horizontal analysis across the data sets produced the following main themes: 1) The ADHD turning point and the transformational effect of the label, 2) The institutions of medicine and school, and 3) The online world. Analysis of these themes are presented in chapters six, seven and eight. The narrative portraits and thematic analyses developed in this study were not returned to participants for member checking or validation. While participant validation is often cited as a strategy to enhance the credibility of qualitative research (Birt et al., 2016; Lincoln et al., 1985), it was intentionally set aside in favour of a reflective, relational and interpretive approach that recognises the complexity and subjectivity of meaning making. The aim was not to produce fixed or universally agreed-upon accounts, but

to rather construct rich, layered representations that reflect fluid, often contradictory narratives shared by the participants. Additionally, given that the participants were adolescents, there were ethical concerns that returning dense or interpretive texts might generate discomfort, confusion or reinforce researcher authority rather than genuinely empower participant critique (Koelsch, 2013). Instead, the analysis was guided by a commitment to interpretive integrity, where researcher's responsibility is not located in securing validation but engaging ethically with participants' stories, attending to their silences, tensions and ambiguities with care and accountability.

Narratives that demonstrate change may include a "turning point" (Lincoln & Denzin, 2003) in a person's life. Particular Incident Narratives (PINs) were included in the analysis presented in chapter six. These 'smaller' stories in the narrative are defined by Wengraf (Wengraf, 2011) as "an account of a particular experience that the person has lived through – The best PINs are narrations in which the person appears to be at least in part reliving the experience that they are talking about" (Wengraf, 2011, p. 547). By examining these PINs, provided insight into what participants recall as being significant, their views and orientation toward themselves, others and the world. In addition to the PINs, Squire's (2007) conversion narratives, was engaged when analysing the transformational effect of the label presented in chapter six. Conversion narratives refer to a way of understanding how individuals use storytelling to articulate moments of profound change in their lives. During her work with South Africans living with HIV, Squire (2007) observed that the respondents often referenced religion using words like "belief", "acceptance" and "testifying". The narratives follow a pattern similar to a religious conversion, where individuals move through stages of denial and struggle toward eventual acceptance of one's condition, underscoring the powerful role of storytelling in making sense of a life-altering event. Engaging Squire's (2007) conversion

narrative framework served as a heuristic tool for identifying how individuals construct meaning through shifts in self-perception and identity. While traditionally associated with linear narratives of transformation from disruption to resolution, the use of a conversion narrative framework in this study was intentionally unconventional. The framework was employed not to confirm redemptive trajectories, but to trace movement, tension and ambivalence in the participants' narrative constructions, particularly in relation to the diagnostic moment as a significant disruptive break in the continuity of life and story.

McAdams (2001) proposes that narrative identity can be discovered by using an inductive or deductive process. An inductive process was selected, as the objective of the study was to discover meanings, experiences and identity. Fraser (2004) suggests "disaggregat[ing] long chunks of talk into specific stories" (p. 189) to find meaning. The process of dividing and then reconstructing data facilitated the discovery of threads and themes interwoven within each story. Geertz (1973) reminds us that a researcher's task is not just collecting fragments of information and "arranging abstracted entities into unified patterns" (p. 17). The researcher's role is to present an interpretation of the phenomenon under study, by penetrating "into the very body of the object" imagining what experiences, perceptions, behaviours and connection to others may mean to them, providing a "thick description" (Geertz, 1973, p. 10).

The transcriptions of the verbal data were approached as part of an iterative analytical process. They were read and re-read in conversation with the original recordings to ensure accuracy and familiarity with each participant's story. Transcription included not only the spoken word but also paralinguistic features such as pauses, hesitations, laughter and utterances like hmm, um, ugh were included in the transcripts. These non-verbal cues convey meaning that is not always captured by the words themselves, and can provide insight into

the narrator's attitudes, emotions and intentions, thus ultimately enriching our understanding of the narrative (Squire, 2008). Where necessary, notations were made to indicate moments of visual referencing (e.g. pointing to an image, referring to a photograph) to preserve the contextual integration of visual materials in the spoken text. No transcription or coding software was used, transcripts were formatted manually in Microsoft Word. The visual and verbal data sources were considered equally important and used in conjunction with one another to maximise the richness of the data, providing additional and meaningful information to participants' stories. Triangulating multiple sources of data like collages, photographs, music, body-maps, videos, and the narrative about their construction is frequently used to corroborate the results from another, and is traditionally understood as increasing reliability (Ritchie & Lewis, 2003). However, Richie and Lewis (2003) assert, "the 'security' that triangulation provides is through giving a fuller picture of phenomenon, not necessarily a more certain one" (p. 44). Although this study drew on a range of visual methods like TikTok videos, music lyrics, photographs, body maps and collages, these artefacts were not treated as discrete or incomparable forms of data. Rather, they were understood through a shared lense of narrative and meaning making practice. What unified these media was not their form but their function, each operating as a technology of self-representation.

All visual images of the collage, bodymaps, photographs and screen shots of TikTok videos were placed on a storyboard for each participant, combining textual and visual data, enabling a richer, layered engagement with meaning. I started working through the data to create an ordering framework, this process was slow and recursive, taking time to consider the entanglement of the visual and verbal data. As they began to immerge, fragments of data were labelled (coded) and tentative interpretations were made.

Reflexivity

Research is a human act and is therefore important to acknowledge that my personal background, experiences and prior assumptions which had a bearing on the type of research questions I considered important to explore. Within my counselling practice, I am privileged to work with a variety of young people, many of whom arrive in my office with an ADHD diagnosis, and some of whom understand themselves as 'having' ADHD. The insights and experiences of these particular young people were a significant catalyst for this research. Although it is not necessary to provide a full autobiographical account of my life, reflexivity according to Josselson's (2004) "hermeneutics of restoration" (p.11) clarifies how aspects of myself could be filters through which I perceive the world, and how I am positioned to understand the insights and meanings offered by the participants. The researcher's attempt to interpret intended meaning of the data is an "inherently relational activity, encapsulating both the desire to understand and the impulse to connect and respond" (Josselson, 2004, p. 11). However, Josselson (2004) cautions us about issues of "over-identification" with participants and urges researchers to be "scrupulous" with meanings derived from the data, ensuring they are "indeed 'faithful' to the meanings intended by participants and not supplanted with their own (p. 11). Bracketing, a method to improve objectivity and accuracy, involved reflections on my preconceived ideas, beliefs and assumptions about adolescents and their digital world, as well as ADHD and the potential to influence the research project (Josselson, 2004).

My journey as a mother to three adolescent children also had bearing on this study, more especially, my eldest daughter was born prematurely, weighing in at just over 1.3kgs. Her developmental journey was paved with remedial schooling, a litany of professionals, a diagnosis of ADHD, learning difficulties and the full swathe of medication occupational therapy, speech therapy, neurodevelopmental physiotherapy and a multitude of other

unconventional therapeutic interventions. I know and appreciate the desperation of a mother who is willing to try almost anything to make sure that their child's academic journey is as successful as possible but, in doing so, tries not to eclipse the essence of who the child is beyond the confines of the school walls and test results. During her Grade 4 year, the headmistress of her then remedial primary school told me that it would be highly unlikely that she would matriculate. Her words left an indelible mark in my memory. I was troubled by the proposition that my child might not possess that coveted piece of paper at the end of her school career, however, I was even more deeply disturbed as to how a headmistress could predict the 'failings' of a child some eight years into the future. I am happy to report that my daughter proved her very wrong and is now close to concluding her degree as a foundation phase teacher. It has however not been an easy journey.

As a mother, I have also experienced how young people today live their lives saturated by mobile technology and media and have joined a multitude of online parenting groups in a bid to reassure myself that I was not alone in this remarkable and oftentimes exasperating experience of parenting in the 21st century. Within these online support spaces, there is much concern about "screenagers" provoking considerable handwringing about their current functioning and forecasted futures. These online "support groups" contain grumblings about adolescents being self-entitled, disengaged, bad-tempered, and addicted to their smartphones. While this may be so in many cases, much of my experience living and working with young people is that they are generally informed, media savvy and actively involved in the negotiation and construction of their social worlds.

Wetherall (1996) proposes that "troubled subject positions" are established when participants tell their story, unsure as to whether the researcher is either sympathetically aligned or may be in opposition to their sentiments. It was thus important to share the way

my own insights and experiences with the participants before we commenced with any data collection. Josselson (2004) encouraged me to consider "shared social locations and assumptions" as well as "points of discordance and strangeness" (p. 11) within the research process. Although I have had extensive exposure to young people diagnosed with ADHD, I have no personal experience of what it must be like to be diagnosed or understood as an adolescent with ADHD. I certainly don't know what it is like to live my teenage years constantly tethered to a cell phone or other technological device like a laptop or iPad for that matter. I am part of what can be considered the last of the "tech-free" generation. Growing up in South Africa living my teenager years in the 1980s, the closest I got to technology was the introduction of TV in 1976 and a little later, Nintendo game consols. I was raised on TV programmes like *The A-Team*, *Airwolf, Knightrid*er and my all-time favourite *CHiPs,* an American show about the adventures of two motorcycle patrolmen as they protected and served the citizens of California. Although we had no access to talking cars, state of the art helicopters or police motorbikes, I can relate in a very small way as to how one is influenced by media. I distinctly remember how we re-enacted scenes, transforming into Californian police officers on our bicycles, tearing around the neighbourhoods and apprehending imaginary crooks. Telephones were fixed to a table or the wall, and if you were lucky enough, your parents were somewhat 'liberal' and attached a long extension cord to the handset, facilitating a little more privacy, or as much a few extra meters could afford. Phone calls were contained within the day and early evenings, calls after 8pm invariably brought with them news of illness or some other form of crisis. School on Monday morning was particularly rich with the stories and updates as we emerged from the quarantine of the weekend.

Today, technology is often the great divide between adults and young people, with adults' attempts to control technology being a point of significant conflict, both in school and

home environments. Schools have added technology to their campaigns against addiction and advocacy for safety. My experience of some of these programs about online safety is that adolescents could often teach the presenters a thing or two about some of the more subtle hazards of social media, and loopholes to circumnavigate privacy and security systems. It was thus important to clarify my stance on social media with the participants as I did not want to be seen as another adult casting a judgmental eye on a space that I was unfamiliar with while growing up. However, I was also conscious not to appear too 'strange or unfamiliar' (Josselson, 2004), managing a balance between not knowing about aspects of the participants' online (and offline) world, and knowing enough so as not to appear 'out of touch' and thus unable to understand the meanings produced. This balancing act became extremely apparent during a particular moment of the introductory session at the school. While talking about the benefits and drawbacks of WhatsApp, the word GOAT (greatest of all time and not the noxious smelling creature with horns) came up in the conversation. The story was interrupted by another participant who had a sense that I might be getting the 'wrong end of the stick', interjected, "Wait guys, does ma'am know what GOAT is?" Thankfully I did, but this was one of many incidents in the sessions, where a word, acronym or a name of the latest TikTok challenge like "devious licks" would surface, and I would be quizzed on the meaning of the vernacular. I hoped I knew enough to not appear like an out of touch dinosaur, but simultaneously, I also hoped that gaps in my knowledge would be a powerful opportunity for these young participants to be my teacher and they certainly were. Potter (1996) suggests that within any conversation, participants need to "establish their right to speak" about subjects which surface, this is done by both the interviewer and interviewee "claiming category entitlement", by asserting their membership of a group, possessing "expert knowledge or privileged experience" about the research topic (p. 70). Successful claims to category entitlement allow people to speak without having to explain the source of

their knowledge. Including youth focused social media spaces like TikTok, and exploring the navigation of their online worlds positioned the participants as the experts, and my (virtual tour guide), reducing the power dynamics and facilitating relationships. Qualitative research is primarily built on relationships, my first priority was to establish a relationship based on transparency. Building relationships with foundations of comfort, trust and rapport, provided participants a safe place to explore and share the complexity of their experiences, perceptions and life worlds.

Ethical considerations

Approval for this study was granted by the School of Human and Community Development (see Appendix 16). As this project involved direct interaction with minors, ethical clearance for the School of Human and Community Ethics Committee for Research into Human Subjects (Non-Medical) was applied for and granted (see Appendix 17).

This study was guided by the ethical principles of autonomy and respect for the dignity of persons, non-maleficence, beneficence and justice (Wassenaar, 2006).
The principle of autonomy and respect for dignity "finds expression in most requirements for voluntary informed consent by all research participants" (Wassenaar, 2006, p. 67). Parents were asked to provide their written consent for their child to participate in the study. Prior to any data collection, the purpose, methods and procedures of the study were explained to the participants and their verbal and written assent was secured. As the sessions were audio recorded, parental consent and participant assent was obtained (see Appendices 4, 5, 8 and 9). The data obtained from TikTok were not password protected but in the public domain, thus no permission to use the data for research purposes was required. I was however guided by the ethical guidelines when working with data procured from social media platforms, as creators of the TikTok videos may not reasonably expect to have their posts used in research

studies (Ess et al., 2020). Bearing this in mind, I remained conscious of the fluidity of public-private distinctions in the virtual world, making every effort to respect and protect the dignity of the users (Ess et al., 2020). During the analysis of the data, there were moments where I felt that the participants may be recognisable due to their distinctive identities more especially within the online context, despite using pseudonyms and redacting features within photograph images. I contacted two particular participants, confirming that they were comfortable with the way their information was presented in the analysis.

The principal of nonmaleficence requires that as the researcher, I was to "ensure that no harm befalls research participants as a direct or indirect consequence" of the study (Wassenaar, 2006, p 67). Participants were considered a vulnerable population due to their age and their official or unofficial ADHD diagnosis. I have over 14 years of experience working with young people in my counselling practice and felt well equipped to deal with the needs of the participants in a sensitive manner. I was comfortable with my ability to listen effectively and detect any trauma or distress that may have arisen during the sessions. Although it was not anticipated that any significant psychological distress would be experienced by participating in the study, all participants were provided with the name and contact details of a psychologist (see Appendix 18). The psychologist was available to provide participants with free counselling at a venue close to their home or school.

Wassenaar's (2006) principle of beneficence requires the researcher to "maximise the benefits that the research will afford to the participants in the research study" (p. 67). Any risk of participation in the study would need to be offset against potential benefits. After the study, I received several messages from participants thanking me for listening to their stories,

and that they felt understood and had experienced shifts in their self-awareness. I was truly grateful for these sentiments and that they had felt some of the benefits the study intended. In line with the final principle, justice, all participants were “treated with fairness and equity during all stages of the research” (Wassenaar, 2006, p. 68).

Chapter 5 – Narrative Portraits

The important thing is for the characters to feel real, and to be given the humanity they are due. That granting of humanity is what separates a full portrait from a stereotype (David Levithan)

This chapter includes four narrative portraits which have been specifically chosen to provide insight into participants' interactions and experiences within their online and offline worlds. The intersectional identities of these four individuals vary across race and gender and include both those officially diagnosed with ADHD or who self- identify with the label. However, these portraits have not been selected as 'representative' of "categories of persons" according to superficial attributes; but rather exemplify what it means to be a young person, navigating life through places and points of "connection and difference" (Jones & Dlamini, 2013, p. 10).

Josselson (2004) reminds us that "good interpretation results from a fusion of horizons, through dialogue with the texts" (p. 9). Extracts from the participants' collages, photographs, music choice, body maps and the stories they told about them were selected, and synthesized to provide a deep, rich description (Geertz, 1973) of who these young people are in an online and offline world. According to Prosser (2012), "Art can describe, reflect and evoke emotion, which dry facts or figures and cool logic rarely do…art can help us (researchers, participants and interested communities) imagine what it is like to live that life" (p. 199). Creative methodologies provided the participants with an "alternative vocabulary for articulating their experiences" (Botsis & Bradbury, 2018, p. 414), dislodging conventional ways of accessing their knowledge and wisdom, producing expressive first-person accounts of their lives. Theory is kept to a minimum in this chapter, with the analysis accomplished by collating the participants' stories across multiple data sources into expressive first person accounts about their lives, creating meanings around their experiences without the intrusion

of my ‘expert’ view (Lawrence-Lightfoot, 2005). Staying close to the raw data brings the participants to the centre of the research, involving the reader in the active construction of knowledge as a witness to the minutia of young people’s lives that may be hidden from mainstream society.

Each portrait is characterised by two unique labels generated by the participants, providing a rich and descriptive synopsis of the complexity of their lives within their offline and online worlds. Offline, Lucy describes herself as an “Artistic Idiot”, yet in the virtual world, she experiences herself quite differently through her online persona “Rubymoon[5]”, a shrewd arctic fox. Jayden who considers himself “The Goofmeister”, in the ‘real’ world, adopts a sombre and critical stance as he considers his online world to resemble a “Crime Scene”. Offline, Craig defines himself as “That Awfully Weird Child”, however his persona in the virtual world, which he describes as “Horns and Halos”, bears little trace of awkwardness. While Bonolo refers to her offline world as “Just Chaos”, life online is marked by order and sophistication as she defines it as “All About the Angle”.

[5] Lucy provided me with her permission to use the name Rubymoon without the need to substitute it with a pseudonym as she felt confident it could not be linked to her in any way.

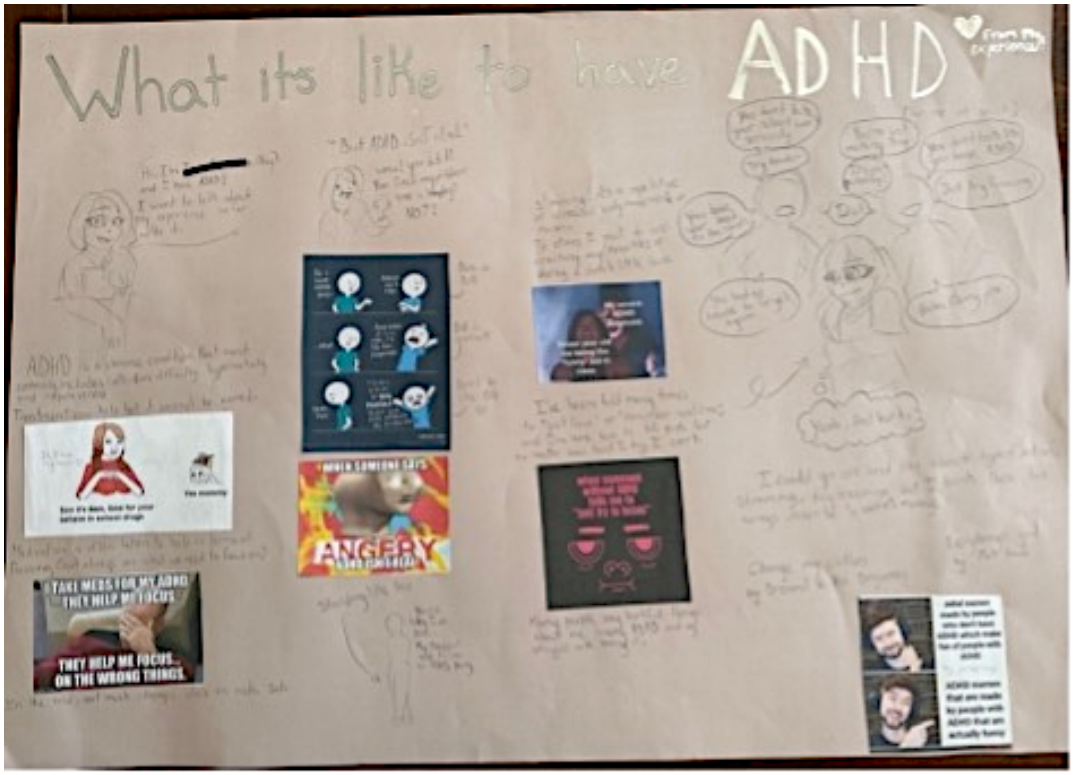
Narrative Portrait One - Lucy

Lucy's Offline World, "I Am an Artistic Idiot"

When I first met Lucy, she was friendly yet a little uncertain of herself within the context of the focus group. However, as the initial group session progressed, it was clear that Lucy had much to say and was eager to share her opinion and insights, often speaking with a great sense of authority around the subjects of social media, TikTok and ADHD.

Lucy's collage reflecting her experience with ADHD (see Figure 1 below) demonstrates her view of herself that she is artistic. While she was busy constructing her poster, I asked her if she enjoyed art and she responded: "*Oh man my whole life its art in general… though… but I will be homeless and starve, the only thing I am good at is art and being…being a nuisance".*

Figure 1. *Lucy's Collage About ADHD*



Although art is clearly a very important component of her world, Lucy very quickly dismisses any future benefit of her creative talent. It is also at this point that Lucy gives me the first glimpse of the derogatory way she views herself. Education is seen to be a pathway to bright futures and infinite possibilities. However, Lucy is quite aware that her artistic skills may not be as highly regarded in comparison to subjects like mathematics and science, which are seen as more prestigious and reliable pathways to lucrative careers.

While we were discussing some of the images that Lucy had chosen according to the prompts for the photographic task, I asked her to show me an image that she had selected to represent herself. Lucy points to the following image (see Figure 2 below) expressing, *"Yeah, this was a hard one, to be quite honest with you I really don't know who I am!".*

Figure 2. *Lucy's Photograph "I Really Don't Know Who I Am"*



Dressing up in a character costume demonstrates Lucy's fun and creative side yet is also a way in which she physically disguises her true identity. Throughout her narrative, Lucy maintains an identity of ineptitude, however, when it is read according to the hermeneutics of demystification, it may demonstrate how "voice and knowledge go underground" keeping any information that would counter this perception, firmly under wraps (Josselson, 2004, p. 17).

An image (see Figure 3 below) that Lucy had edited (drawing a cat like image over her face as well as adding a slogan on her T-shirt) and submitted as part of her photographic representation 'what makes it difficult to be me', made a profound impression on me. I asked Lucy to tell me a little more about why she had chosen this particular photo:

Figure 3. *Lucy's Photograph "What Makes it Difficult to be Me"*



I chose this one, well because of myself, I am pretty much an idiot! One great example is what happened last week, I was in my drama class, my dear friend got curious about what the button on the intercom did, and he gave it a click, it beeped, and I panicked and yelled "you fucking idiot!". Little did I know that the person on

the other side of the intercom heard everything I just said and responded back: "Mr __? ...Mr __, I think your students are playing with the intercom and I don't appreciate the language being used." You know that day…that day a little bit of my soul died.

Lucy provides herself with very little room for error, simple classroom shenanigans and doing something 'bad' are interpreted as being a 'bad person', or as Lucy defines it, an idiot. Providing me with this vignette, Lucy attempts to offer ultimate proof of her inadequacy and the profound effect her actions have on her sense of wellbeing. When constructing her collage, it was evident that she wanted to put care into the creative elements, and she uses her artistic talents to design a piece that is imaginative and 'pretty'. Yet behind this 'prettiness' there is a wealth of frustration and a feeling that she lacks ability. Toward the end of our discussion, I asked what came to mind when she looked at the collection of photos she had taken for the project, and if she were to put them in a book and give it a title, what that title might be. Lucy answers with little hesitation:

Lucy: Mmm…all these images are practically blackmail bullying material. The book would probably be called [laughs]: How to be the weird kid at school ***and everywhere else 101*** *[spoken with emphasis].*

LindaM: Wow, that's quite a title, can you tell me a little more about being this weird kid?

Lucy: Well, it's because of my hyper-fixations for one… No one really wants to sit and listen to a deranged teenager talk about her favourite character and everything about them, so I don't talk about it a lot…and that makes me…well, just weird.

Lucy uses self-deprecating humour when looking at her selection of images, undermining the possibility that they could serve as an insight into the complexities of her character. Her confession of being the "weird kid" may be a pre-emptive strike; saying it first

may deny others the opportunity to provide her with negative feedback, allowing her to own and control the narrative. Moreover, the pejorative names she assigns herself may be a masked plea for reassurance, empathy and compassion. Lucy views herself as the cause of her interpersonal difficulties, pointing to the social process of interpellation that positions her in a negative way (Althusser, 1999). Lucy's self-deprecating talk may also be an attempt at humility (a quality that is venerated), positioning herself as vulnerable and authentic, ironically signalling 'normal' being.

Lucy's Online World, "Ruby Moon"

Faced with the life-size piece of paper, Lucy giggled at the prospect of positioning herself to resemble how she represents herself in an online world. After giving it some thought, Lucy wanted to assume a pose resembling a gremlin for the outline of her body shape. Traditionally, a gremlin is a creature that is associated with causing trouble or the colloquial term for a lowly or despised person. Yet, as she worked on her body map (see Figure 4 below) this initial body position morphed into a figure that had no resemblance to a gremlin at all, but a colourful, creative creature (which was admired by other participants at the conclusion of the body map session conducted at the school). During our discussion, I asked Lucy to tell me a little more about her body map:

> *This is my main OC [original concept or character] that's what I represent myself online… I'm not pretending like [in a baby voice] Oh no I'm… [provides her online username] this is what I look like, I don't ever post pictures of myself, just my drawings, so this is what people would refer to me as the first bit of my username or the name of this character.*

At the outset, Lucy speaks about being cautious of posting images that can identify her and as a result she has created an online persona to conceal her true identity. I asked her if this character corresponds to how she sees herself in an offline world:

Somewhat, this persona is supposed to be a representation of me, except she is more confident to tell people her problems! Their name is Ruby Moon, their last name probably needs a change cos it doesn't really fit her, she is an arctic fox with thick white fur and red eyes… cos red is my favourite colour of course, so online she is technically my 'fursona' like my persona but a furry… yes, I get harassed about it a lot because of the misinformation about the fandom but it's, whatever… I just represent myself as an anthropomorphic fox.

Figure 4. *Lucy's Bodymap - Rubymoon*



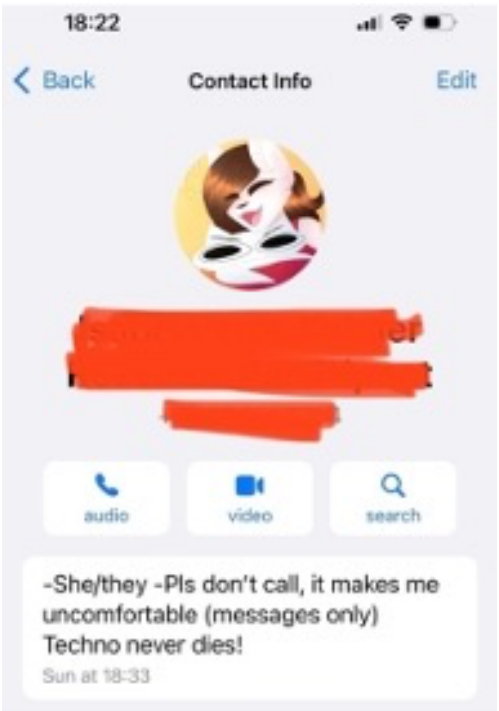
Lucy uses Ruby Moon much like an avatar, which she believes is a close approximation to who she is in a virtual world, which feels very different from her offline identity. Her body map is bursting with colour and bold marks, however, her collage about ADHD is completed in lead pencil, and barring the memes, is devoid of much colour. Lucy's collage and body map are performances, which as Josselson (2004) points out, positions herself in unintentionally contrasted ways. Lucy's digital representation of herself is moulded toward a desire to be more confident to express herself. Ruby Moon is symbolically significant; an arctic fox is a cautious creature that blends into the environment. Through the capacity to camouflage itself, the arctic fox can outwit adversaries and is revered for having a sharp mind, wisdom, perseverance and the ability to adapt to harsh environments. Lucy defends her choice of character, acknowledging the criticism that identifying with a 'fursona' attracts in an offline world, but quickly brushes it off. The benefits of Lucy's avatar in her online world offers her a new and agentic possibilities of engaging in the virtual world, one which reinscribes any characteristics associated with ADHD and poor school performance. These possibilities are fundamentally different to how Lucy feels within the real world. Her desire to live out this sense of empowerment is captured in this image of a screen shot (see Figure 5 below) she provided to illustrate access to support, where she imagines the galvanizing effect of assuming the traits of her favourite Manga character, Kurapika.

Figure 5. *Lucy "My Biggest Support"*



Blending with this cyber character who is considered an effective, skilled and formidable warrior with a bright future, is a prospect that Lucy yearns to introduce into her offline world, transforming it into a place where she feels courageous, confident and full of hope. While discussing her body map, Lucy points to a creature she has drawn next to the outline of her body: *"This is Greg, I don't know how to explain him he's just Greg, he kinda came with Ruby Moon in a way"*. Lucy tells me that she secretively draws Greg, (another character she crafted in her online world) either at the bottom of teachers' whiteboards, or on the corner of a poster in a classroom, *"Yeah Greg, he's just there, it's the way I leave my mark"*. Lucy's subtle act of inscribing Greg in obscure places in the school building serves as a covert reminder that there are alternative and more agentic ways of being in the world. As Lucy's contact information on her WhatsApp profile claims, *"techno never dies!"* (see Figure 6 below).

Figure 6. *Lucy "Techno Never Dies"*



Narrative Portrait Two - Jayden

Jayden's Offline World, "The Goofmeister"

Jayden has an impish smile and a delightful sense of humour, he is slim and short in stature, but exemplifies the adage that dynamite comes in small packages. Jayden defines himself as the *"goofmeister"* and prides himself on his ability to make his friends and classmates laugh. Like most of the participants in the study, Jayden was diagnosed with ADHD during his early primary school years and attributes his *"goofiness"* and spontaneity to his diagnosis, *"I don't think about things too much, it's that ADHD thing, I don't think too much, I just go do it".* Jayden offers the following image (see Figure 7 below) as evidence of being a fun, intrepid explorer, who isn't afraid of trying new things.

Figure 7. *Jayden "I'm Not Afraid to Try New Things"*



Prior to the construction of the collage, all participants were provided with a list of prompts to help them think about what it is like to be an adolescent diagnosed (officially or

self-identified) with ADHD. Jayden wrote down the prompts and provided succinct responses with words clipped from a magazine. During the construction of his ADHD collage, I noticed that Jayden was scrutinizing his poster and did not appear to be satisfied with the result. Surveying his work, Jayden claims *"naah, it isn't who I am, this is, it's waaay too boring"*. I asked Jayden if I could take a photo of his collage before he changed it (see Figure 8 below) and he agreed, although there was a note of reluctance in his voice. Armed with a fresh piece of cardboard, Jayden started carving up his poster, cutting his images out in the shape of puzzle pieces, adding colour and drawing an image of a creature resembling a rat (see Figure 9 below). It was at this juncture that it became quite apparent that Jayden did not want to be seen as boring or ordinary, but rather as a *"goofy"*, colourful and complex character.

Figure 8. *Jayden's Original Collage About ADHD*

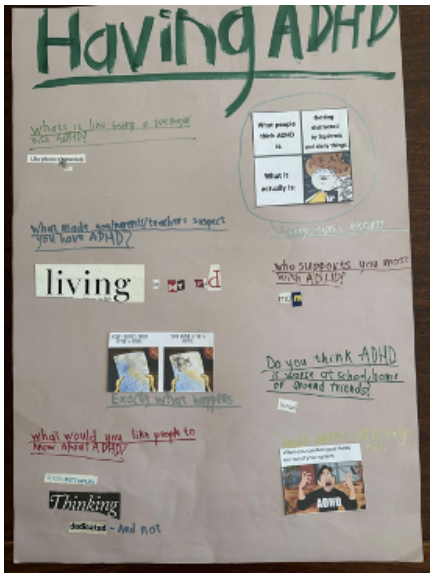


Figure 9. *Jayden's Revised Collage About ADHD*



Ironically, the revised version of his collage although a bit more colourful and intricate, appears to be neater and more organised than his first attempt. After all, jigsaw puzzle pieces still have straight edges and fit neatly within one another to create a coherent image with pleasing results. Editing the collage in this way was perhaps an attempt to

eradicate the spontaneous and imperfect elements, creating a more structured, organised and 'normalised' view of himself.

Throughout the focus group, Jayden was eager to contribute to the conversations and did so in an appropriate and engaging way. He provided concise opinions and allowed other members to speak, even when he clearly wanted to interrupt and add his opinion. In contrast, Jayden provided a different view of how he believes his friends perceive him in a social setting:

. *Jayden: Friends get annoyed with me cos sometimes we would be regularly having a conversation and then I will just bring up a very big point and just have a lot to say and it takes a while so maybe they might get irritated by that.*

LindaM: Do they tell you?

Jayden: They don't tell me, but I am sure they get tired of saying 'ja' and nodding their heads.

Although Jayden feels *"self-conscious only when having a conversation"* he believes that "*messing around doing goofy poses*" and "*telling jokes"* is a redeeming quality which perhaps tempers their frustration, allowing him to fit in. His identity of being 'goofy' and amusing extends into other photographic images Jayden selected, and when asked to caption his collection of photos he starts to laugh:

I am just looking at all these silly photos. If people were to see them, they would see how silly I actually am,[pointing to one the photographs in front of him] (see Figure 10 below). *Yeah, so if I just remember what I was thinking at the time it makes me laugh, I mean if I had to put them into a book or something I would say something like, "the absolute top ten goofiest photos of a teenager", yeah, extra goofy like I'm the goofmeister. You know when I look at these photos [laughing] I am imagining one*

of those silly piano songs from black and white films in like the 50s as the perfect soundtrack for them.

Figure 10. *Jayden "Doing Goofy Poses"*



However, after giving it some thought, it appeared that Jayden didn't quite resonate with his offering that a singular and rather old-fashioned instrumental piece would be a fitting accompaniment to the array of images representing him:

You know if I were to actually choose a soundtrack for my life it would be ACDC Back in Black, its hard rock, there all, all the different layers of instruments and all being really loud I would say it's chaotic cos everything happens at once.

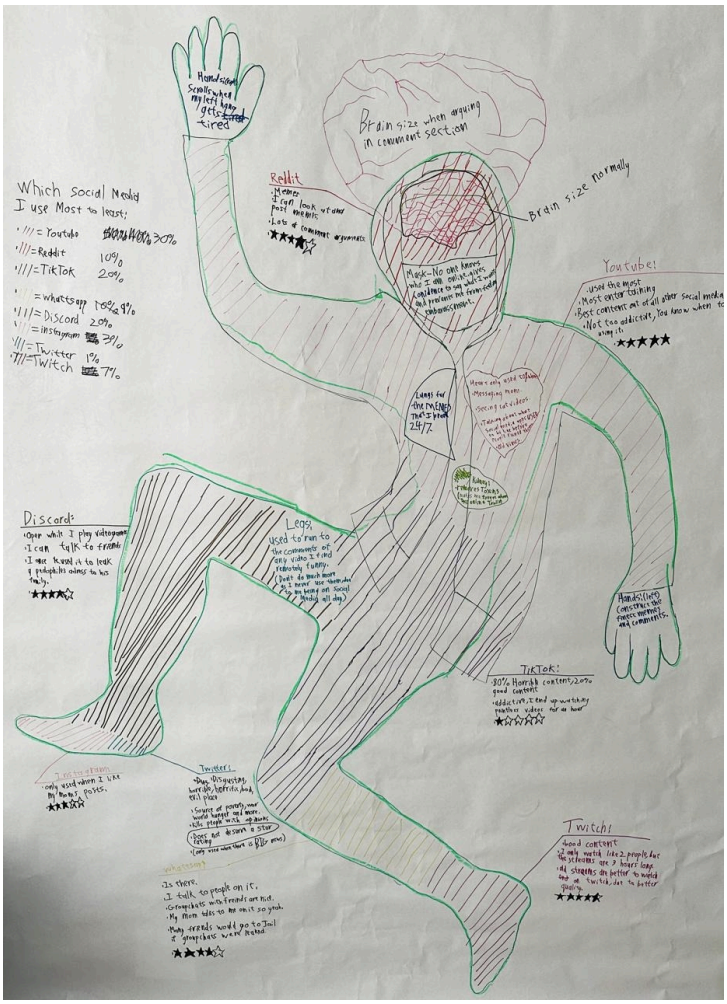
This musical analogy seems to equate to Jayden's revised poster which reflects the complexity of his life which he likens to *"pieces of 55 puzzles".* While he acknowledges that his life has a certain depth to it, he tends to offer a rather flattened version of his identity as a goofy, somewhat silly kid. Perhaps like Jayden, ACDC's powerful piece of musical virtuosity

Back in Black may be appear to be an amalgamation of loud, incoherent and clashing sounds, but is also intricate, intense and powerful.

Jayden's Online: World, "It's a Crime Scene"

Jayden circled the large piece of paper that was laid out in front of him to design his bodymap several times. Deciding how he was going to place his body on the paper he wiggled, adjusting his arms and legs until he was happy with the pose. When he got up, he immediately remarked that his outline resembled one found in a crime scene, *" whoa it looks like a body that has just fallen down the stairs, (laughs) yeah that's really accurate, it's like a crime scene"*(see Figure 11 below).

Figure 11. *Jayden's Bodymap "Its a Crime Scene"*



Jayden worked intensely on his bodymap, he looked rather serious as he appeared to be conducting a forensic audit of the social media apps available to him, giving them each a rating and a brief commentary. In this reflection of his online world, Jayden was the judge and in some instances the executioner of social media apps. Although this virtual world seems to include a sinister and malevolent slant, it appears to be a space where Jayden feels empowered by the affordances of social media, particularly its anonymity. On his bodymap, Jayden confesses to have *"doxed*[6] *a paedophile"*[7]*:*

> *I found his Instagram account and found his family and where he lives so I DM'ed [direct messaged] all his family members [laughing], yeah now everyone knows what he did!*

Although the internet is an often an unprotected hunting ground for paedophilia, providing perpetrators anonymous and low-risk access to children, it has also become a space where young people can report these crimes or say things they could never ordinarily say, protected by the online anonymity. This part of Jayden's bodymap evoked an emotive response from the rest of the group participants while they walked around surveying each other's body maps. Jayden was 'high fived' for metering out this retributive justice and basked in the glow of being celebrated as a digital vigilante.

Jayden's bodymap exemplifies Franck's (1995) argument that when entering virtual worlds, one doesn't "leave behind their physical body, but instead one is leaving behind a

---

[6] Doxed means revealing (online) someone's identity and often including their physical home / work address, phone number and other personal information.

[7] This confession made my blood run cold, I spoke to Jayden privately about this revelation and he assured me it concerned an online friend, and the appropriate adults had been involved.

particular kind of 'being in the world'" (p. 20). Jayden diagrams the transformative powers that social media seems to have over his physical body. Although his brain still thinks, his legs move, his mouth speaks, his lungs breathe, his hands scroll, his kidneys excrete and his heart feels; they function in seemingly different ways to accommodate the demands of an online world. Jayden demonstrates how he feels smarter and more articulate by drawing an enlarged version of his brain *"when arguing in the comment section"*, he explains a little further:

> *When someone says something and then my vocabulary just, I know words that I have never known before and I can just, I can just keep on arguing and arguing. Like everything I say just sounds better than when you are actually saying it out loud.*

Jayden presents a self that transcends his physical body and provides an imaginative and innovative way his body occupies this virtual world:

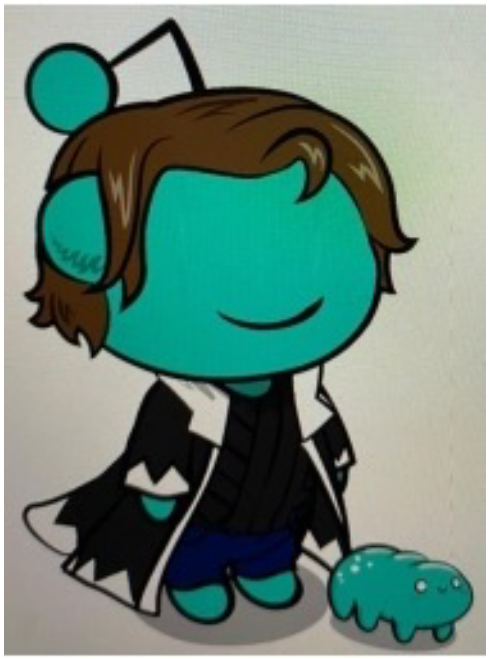
> *Lungs, for the memes that I breathe 24/7.*
>
> *Kidney, removes the toxins (makes me forget about toxic online trolls).*
>
> *Legs, used to run to the comments of any video I find remotely funny (they don't do much more as I never use them, due to me being on social media all day).*
>
> *Mouth [covered with a mask], "No one knows who I am online, gives me confidence to say what I want and prevent me from feeling embarrassment.*
>
> *Hands [left], construct the finest memes, Hands [right] scrolls when my left hand gets tired.*
>
> *Heart, only used when messaging mom, seeing cat videos, talking about what social media apps USED to be like before people ruined them, old vines.*[8]

[8] A now outdated version of social media similar to TikTok where one could create 6-7 second videos

These particular elements of Jayden's bodymap are reminiscent of the 1996 MIT experiment, with one researcher reporting "I feel invincible, sociable, better prepared, I am naked without it. With it I am a better person" (Turkle, 2017, p. 151) Although Jayden positions these 'bodily gains' while navigating a virtual world as fundamentally positive, his heart, the organ associated with emotion, appears to be selectively anesthetised and only functions during his online encounters with his mother and other very specific occasions. When Jayden is fully immersed in cyberspace, it appears that his way of being in the world changes, he feels smarter, more active, less awkward and not as vulnerable.

Jayden explains how his avatar (see Figure 12 below) is an eclectic mix of his online and offline personality, however, his 'true identity' may only be faintly recognisable (and only by those who know him extremely well) by his *"signature black and white waistcoat "and his "hairstyle".*

Figure 12. *Jayden's Avatar*



This diminutive cartoon like character represents Jayden's *"fun side",* and includes the iconic Reddit antennae, an online community where he feels *"at home".* It is however noteworthy that Jayden's virtual representation is devoid of any eyes, which makes him appear slightly mysterious and perhaps quite indifferent. Behind the somewhat private veneer of this virtual space, Jayden feels he can connect with others in measured ways:

> *If I am playing a game with random people in a team and they start talking about topics I am interested in, then I friend them, if not it's like ok good game,* ***BYE*** *[spoken with emphasis].*

Deciding how much of himself he wants to divulge, opens Jayden up to new pleasures of speaking without feeling self-conscious about being perceived as verbose and irritating, *"it's a place where everyone is always talking, like a lot".* Cyberspace provides Jayden with a variety of options of being in the world, unlike the offline environments where many non-verbal determinants may feel like impediments:

> *It's easier to talk online than face to face with people, like people can't see my facial expressions, how I am moving, what I am doing, so it's just my voice and that's all they can hear from me so then like I feel like I can talk more.*

It is in his virtual world that Jayden has the ability to be heard yet unseen, a liberating channel without stifling restrictions, a place where he feels powerful and in control.

Narrative Portrait Three - Craig

Craig's Offline World, "I'm That Awfully Weird Child"

Craig is an articulate, engaging young man with a wonderful sense of humour and an endearing nature. During our first encounter, it was apparent that he was precociously mature, embodying a kind of wisdom one would not expect from a 16-year-old. Craig was diagnosed with ADHD when he was eight years old, he spoke with a particular sense of authority around the topics of ADHD and expressed intriguing opinions about social media.

As we arranged Craig's completed ADHD poster, his collection of photographs, and his bodymap, the kinds of photographs Craig had selected were quite distinct from those of the other participants. Barring one image of his math workbook, Craig had not provided any other personal images, and certainly no images of himself or his body. All the photographs presented were mostly stock photos, lacking any degree of intimate detail. When I asked him to select a picture that would describe how he felt others perceived him in an offline world, Craig slid this image in front of me (see Figure 13 below):

Figure 13. *Craig " How Others See Me in the World"*



Craig is critical about his physical appearance, declaring, *"this is me, I am just a chubby nerd, like not a smart nerd, but like different, like nerds are, they different".* Craig tells me about a *"core memory"* from primary school, when he was auditioning for a part in his Grade seven school play Rapunzel:

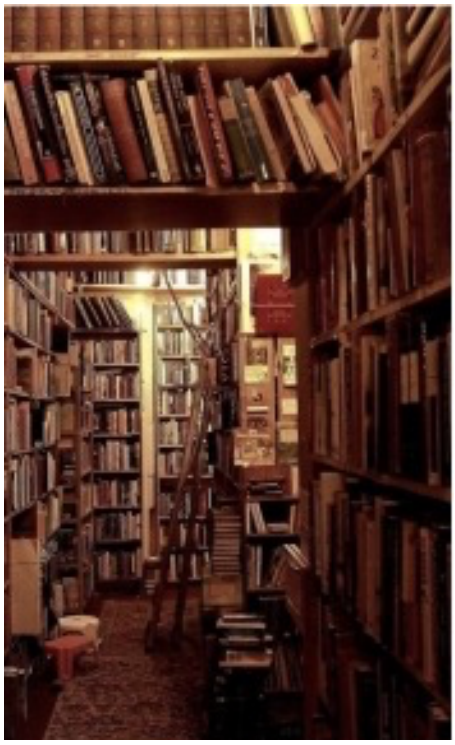
> *I love drama [laughs] like not the bad kind of drama but like stage drama so I thought I would make a good prince [laughs] but then this one kid walks up to me and asks why on earth I am trying out for the prince, and that I would be better playing that mad hag of a villain, mother Gothel.*

Craig has endured a long struggle with his weight, once a *"scrawny kid with beanpole legs – thanks Ritalin! [laughing]",* he is painfully self-conscious of his weight gain which he attributes to all the medication prescribed to regulate his anxiety and stabilize his mood, subsequent to his ADHD diagnosis. Craig uses a lot of self-deprecating references during most of his accounts about his 'deviant' behaviour and his physical appearance.

School troubles like poor academic performance, difficulties with peers, and teachers whom he felt were intolerant of him, formed a large part of Craig's narrative as he described his experience as a young person diagnosed with ADHD. Craig recounts how his parents had to move him to a small cottage school in grade five as he was exceptionally disruptive in class and was struggling socially. Moving to a smaller environment seemed to benefit Craig as he tells me how he met his *"two best friends"* whom he *"loves to pieces",* even though he was *"pretty annoying, um my friends tolerated me and they were never mean to me, they showed me what friendship was like".*

Surrounded by the collection of his photographs and his poster about the lived experience of an adolescent diagnosed with ADHD, Craig collects all the images. He arranges them as one would when manipulating playing-cards in a card game, then setting them down, as to reveal the hand he has been dealt. After a fairly lengthy pause, Craig sighs, and announces, *"I'm that awfully weird child".* In an attempt to support his proclamation of being rather strange, Craig provides me with a photograph of an image of a library crammed full of books (see Figure 14 below). Craig is an avid reader, given half the chance he tells me he would *"disappear into a book".* Although Craig tells me he initially chose this image to represent his greatest resource in life, it is also something that makes it tough for him to fit in with his friends and peers, none of whom share his love for reading.

Figure 14. *Craig: "I Would Love to Disappear into a Book"*



Craig is busy writing his own book and relishes the idea that he is the author of his own life story:

> *I can make my own story as I go along, those who don't support me, weeell [well] I will simply write them out, it is a space that no one can touch me, yeah, I think life in a book is pretty much untouchable from anything.*

Cyberspace may be a close approximation of this untouchable place for Craig. It may not be a perfect approximation of a safe place, but it comes close to mirroring a world where he can be anyone he wants to be. This craving to find a space where people view him differently is mirrored in the lyrics of a song from one of his favourite musicians, Wilbur Soot (2022):

> *I don't look good with my t-shirt off*
>
> *It's hard enough to be cool when everybody else*
>
> *Mocking your haircut, oversized sweaters, saying that I'm cute*
>
> *I don't want to be a soft boy anymore*

I'm looking for a window to another world

Where I don't feel as lost and bored

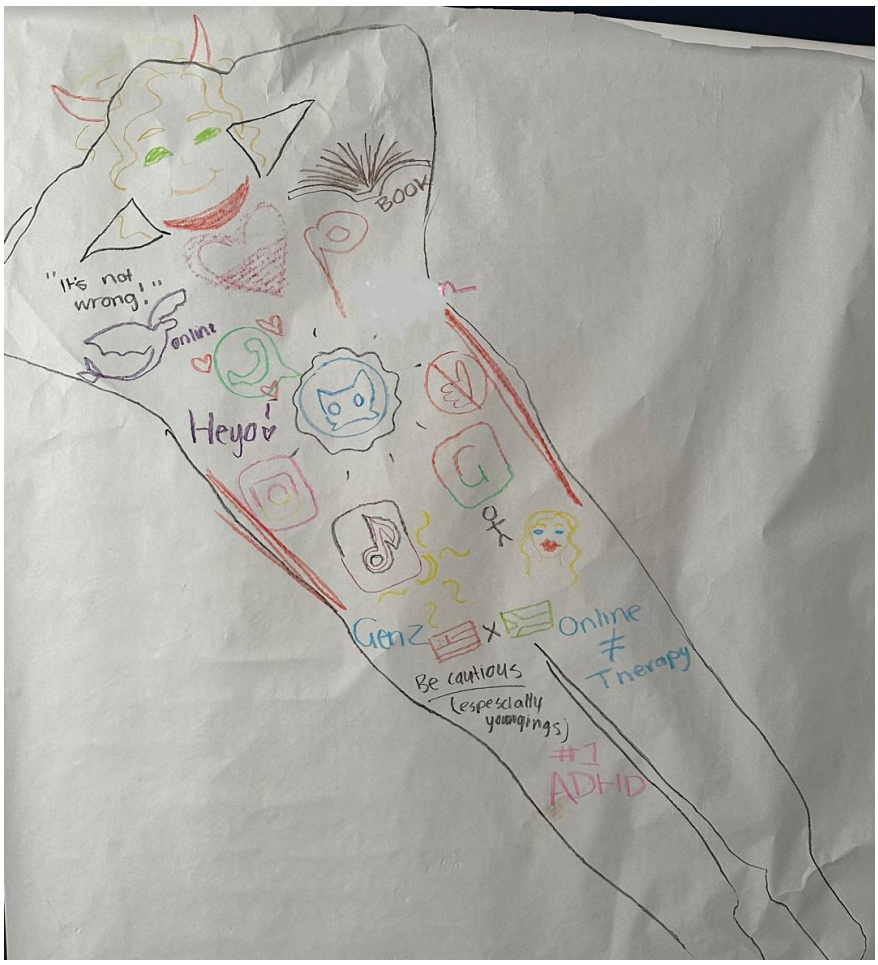
I just don't wanna be a soft boy anymore

These lyrics resonate with Craig's desire for a different place and perception of his physical body. Furthermore, the images and emotions that are contained within music, arouse different emotional states (Stern, 2008), subtly expressing Craig's desire to try on new identities that he longs for and also those he quite possibly fears (Arnett, 1999).

Craig's Online World, "Horns and Halos"

Craig describes life offline as him being *"just trying to get by, you know, trucking through every day".* In contrast, Craig summarises his life in cyberspace with an image of a dragon on his bodymap, *"it's sort of fantasy place where I can express myself and be myself*". The outline of his body representing his identity in cyberspace embodies a relaxed position, lying on his back with his hands locked behind his head (see Figure 15 below). It is in this world that Craig feels relaxed, fun, friendly and approachable, characteristics he feels he does not readily express in an offline world. Free from the limitations of his physical body, Craig feels less self-conscious and free to express himself and experiment with his identity (Le Bresco, 2004). While social scientists may operationalise this concept as 'pretending to be someone else' (Stern, 2008), young people like Craig view this online representation as capturing who he is, even though it may be in a more palatable or polished version for a virtual audience.

Figure 15. *Craig's Bodymap "Horns and Halos"*



Craig's bodymap posture appeared to be quite different to the young man sitting opposite me, hunched over and tugging at an oversized T-shirt. Craig tells me:

> *If I go out in public I'm very self-conscious um, cos you know I am too short, I am too chubby um, I worry what I am wearing so it looks ok, so you know people don't really see you online they see who you want to be, cos online people are quite accepting, well on all of my platforms where I am, so I honestly think that it's easier to be online, I feel a lot safer online than I do in person, look it's not a perfect space but it's a kinder space.*

Craig uses the anonymity of the virtual space to re-present himself via groups he associates with and images he chooses to share. The absence of visual cues makes Craig feel less

inhibited, not only by choosing information he conceals, embellishes or underplays, but also the privacy of the performance within the safety of his own home or bedroom (Stern, 2008). Ironically, should the online space be as kind and accepting as Craig indicates, there should be no need for him to hide. Although Craig believes he has a choice in how he presents himself online, this presentation is ultimately still informed by a society that greatly relies on acceptance and fitting in, highlighting the self-monitoring that Foucault (1977) describes.

Craig authors a personal slogan on his body map which encapsulates how he would like to be seen by his online audience. When Craig connects with people online, he opens with a greeting of *"heyo"* explaining that when you say, *"hello to someone online it sounds daunting, but if you say heyo it tells them that I am fun, friendly and approachable".* Although this greeting may provide the audience with an immediate inkling to the kind of person Craig is, it also may be an attempt at positioning himself as young and rather naïve, distanced from the maturity he has gained through many challenging life experiences. Although Craig never got to play the role of the prince in his school play, he stages a performance in his online world which offers him a myriad of tactical choices, exemplifying Butler's (1990) notion that identity is a fluid and ongoing process. Simple utterances help him strategically adapt an online performativity of himself in an effort to manage the impressions others may have of him and achieve the desired outcome of social approval.

Craig tells me about his community he has discovered on a Discord[9] server where he can explore *"nerdy things, like doubloon currency*[10] *swords and stuff, you know nerdy things,*

[9] Discord is a free online communications app where users can stream videos, text, chat, and play board games remotely

[10] A Spanish gold coin currency used by pirates

there is no talk about guns or drugs and there's no online dating, it's a wonderful space, we are just a bunch of nerds that get together to use escapism really". The escapism Craig is referring to may be a freedom to explore a version of himself that may be stifled in an offline world. During adolescence, the social implications of speech, physical appearance and behaviour (like the unusual interest in an ancient currency) in offline spaces can be brutal. Craig's specific virtual community affords him a relatively safe opportunity to explore his interests, (those which may make him stand out offline), as they are far removed from some of the everyday adolescent narratives. Such a protected virtual space may also provide Craig with a sense of belonging and a reprieve of sorts from an 'everyday self' that doesn't fit in with his peers and feels disordered in many ways.

Craig is not naïve about the trappings of social media and the dangers that infiltrate the online world. He tells me how he had to learn the hard way about cybersecurity and uses a portion of his bodymap to caution "*young uns", especially those who are 13 and in the phase of angstiness, it's really a scary and dodgy place and it can make things worse".* While the virtual world isn't always safe and utopian, Craig cites it as a place where he is also experimenting with his gender and sexuality, in a playful way:

> *Like I love using filters, you know those ones that transform your face from a boy to a girl, like that one's cool cos I have always wondered if I might be better looking as a girl (laughs), but I stay away from those that distort your face, those are horrific, I don't need those ones, I have my mirror for that [laughs].*

Craig's shows me a picture of his avatar (see Figure 16 below) he uses to represent himself in the online world. The dragon-like creature probably could not have been more perfectly suited to Craig's character that I came to know during our short time together.

Symbolically these formidable beasts are often depicted as fire breathing monsters, but also with qualities like strength, passion, loyalty and a remarkable sense of humour. Craig designed his dragon with some inspiration from similar avatars he saw on TikTok, however, his image has been personalized with battle scars, like red eyes (filled with tears) and a broken horn. Elaborating on this detail, Craig tells me how his avatar surreptitiously represents the effect of numerous difficulties he has encountered (both online and offline) with friends, family, strangers and school. Craig's avatar is also a metaphor for overcoming his internal challenges, *"I like this guy, cos it also reminds me that I have to slay my dragons"*. Freed from the confines of his physical body, and the constraints of his offline world, this dragon-like creature provides Craig with alternative versions of himself that may not be imaginable offline. As Turkle (1995) argues, "The internet has become a significant social laboratory for experimenting with constructions and reconstructions of self that characterise postmodern life. In this virtual reality, we self-fashion and self-create" (p. 180).

Figure 16. *Craig's Avatar "A Dragon with Battle Scars"*

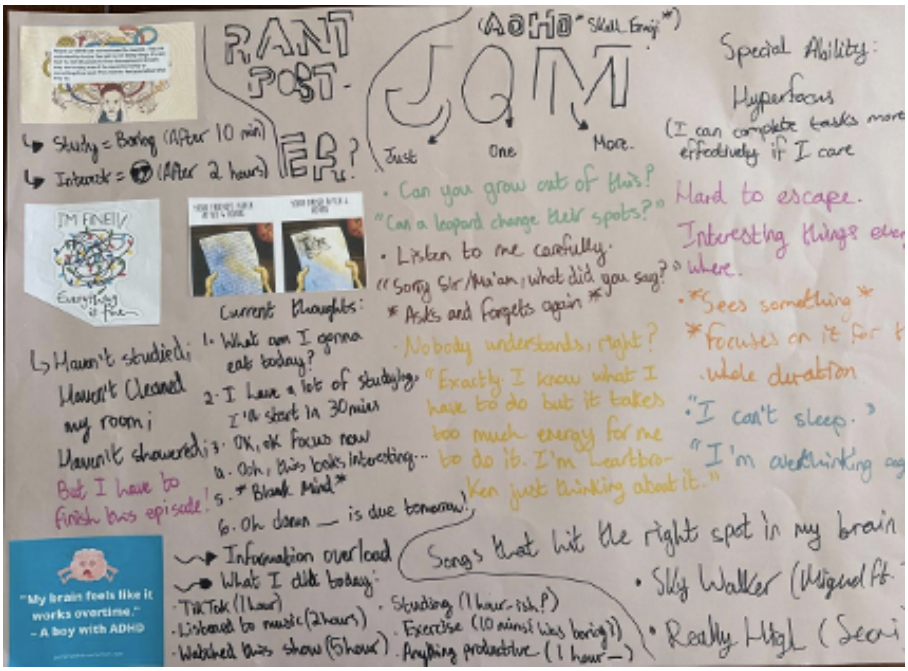


Narrative Portrait 4 - Bonolo

Bonolo's Offline World, "It's Just Chaos"

Bonolo is a tall, graceful and gentle young woman who takes great pride in her appearance. She has an incredible warmth about her and her friends consider her to be caring and generous. Bonolo is one of the four participants who has never received an official diagnosis of ADHD, but has rather diagnosed herself, proclaiming, *"I have had ADHD since the day I was born".* As soon as she received the brief about the ADHD collage, Bonolo leapt into immediate action, providing a raw and unfiltered account of her life. Her assemblage primarily consisting of masses of words, interspersed with a few images, provided a reflexive audit of her thoughts and behaviour (see Figure 17 below).

Figure 17. *Bonolo's Collage About ADHD*



The somewhat cluttered structure of Bonolo's collage was certainly distinctive as she used almost every inch of the cardboard to enumerate her transgressions and shortfalls. Within her collage, Bonolo proceeds to provide a striking synopsis of why she thinks she has

ADHD which she has ingeniously renamed as *J.O.M (Just One More),* a 'disorder' that she considers the root cause of regularly binge-watching series *"mostly for 7 hours straight, like I will go 'oh, just one more episode'"*; and also her proclivity for conversation and a good argument, admitting, *"well, I talk A LOT, I always have just one more thing to add, and when I get into fights I always have one more and one last thing to say".* However, Bonolo also asserts that being talkative and argumentative may be traits that align with dreams of becoming a feisty criminal lawyer one day, *"just like Annelise Keating in my all-time faaaaaavourite series, 'How to get Away with Murder', she's like hard core".* Assessing her poster with a somewhat critical eye, Bonolo captions her overall impression of her collage as *"well it's just chaos",* ostensibly providing me with a succinct closing argument for the case of a scatterbrained individual, who is perpetually disorganised and distracted.

While Bonolo's collage may appear to be a representation of a ditzy, careless and distracted teenager, there was certainly more to this ostensible version of a chaotic persona. As I sorted through the photographs that Bonolo had selected to describe her life in online and offline contexts, one particular image (see Figure 18 below) of a lone tall poppy caught my eye. As I separate the image from the rest of the pile, Bonolo takes the image and draws it toward her chest sighing, *"aaah my tall poppy picture… this is my favourite, I have it up in my room".*

Figure 18. *Bonolo's Tall Poppy Picture*



Bonolo tells me why this image resonates so well with her:

> *B: Well actually it was my older sister who told me about this, and it just well it just stuck with me [pause] you see, I am really tall, like, much taller than my friends, you see, [laughs] obviously, I have like a tall girl aesthetic, but I also stand out cos I like to talk and my family and friends, um, ja like they get disinterested and stuff like that, like, I know I am weird and like weird things like K-Pop and um- K-Pop dances I just randomly start dancing [laughs] and that annoys them I think.*

Typically, the tall poppy analogy is applied to individuals who tend to be high achievers rendering them distinctive from their peers, and consequently subject to harsh criticism in an attempt to normalize them or 'cut them down to size'. Bonolo does not use the tall poppy in this typical metaphorical way, she certainly doesn't consider herself to be a high achiever, she is not overtly censured by her friends and family, yet she feels conspicuous, unconventional and even a little peculiar. As she scanned the remaining images spread out in front of her, Bonolo exchanged her tall poppy photo for the following image (see Figure 19 below):

Figure 19. *Bonolo "This is Me in the Real World"*



> *This is me in the real world, no one really knows me, cos in real life, well I conceal myself a lot, um offline, I don't go a day without my music, I like being on my phone playing games and just, just listening to music. My fear is that people thinking I am weird or coming off as [pause] cringe, so yes, I tend to hide behind my phone and my music, like it helps.*

Bonolo's Online World, "It's All About the Angle"

Managing the conflict between fitting in and standing out (Erikson, 1968), Bonolo turns to her music and an online space. As we unroll her large sheet of paper on which she has designed her bodymap (see Figure 20 below), Bonolo smoothes out the image and laughs, *"I like how this turned out, like my head looks a bit strange, [laughs] but ja, it's how I pose in all my photos"*. My eye was drawn immediately to the social media app icons Bonolo had drawn within the headspace of her bodymap. While the inclusion of these icons was not exceptional to Bonolo's bodymap, they seemed to claim a particularly large portion of space. A cursory glance at this bodymap would perhaps yield a stereotypical sentiment about adolescents being consumed by social media, carelessly posting intimate details of their lives, in the hope of gathering likes and followers. However, as Bonolo started to describe her life in the online world, it became clear that she uses this space judiciously, navigating its pitfalls and potential in a sophisticated and erudite manner.

Bonolo instantly acknowledges that the online world is unpredictable and hazardous, she recognises that it comes with destructive consequences like *"anxiety",* and quite possibly *"depression".* She tells me about multiple encounters with *"cringy old white men asking for inappropriate photos"* and consequently goes to great lengths to protect her privacy, using obfuscating nicknames inspired by K-Pop, and providing vague live locations like *"circus".*

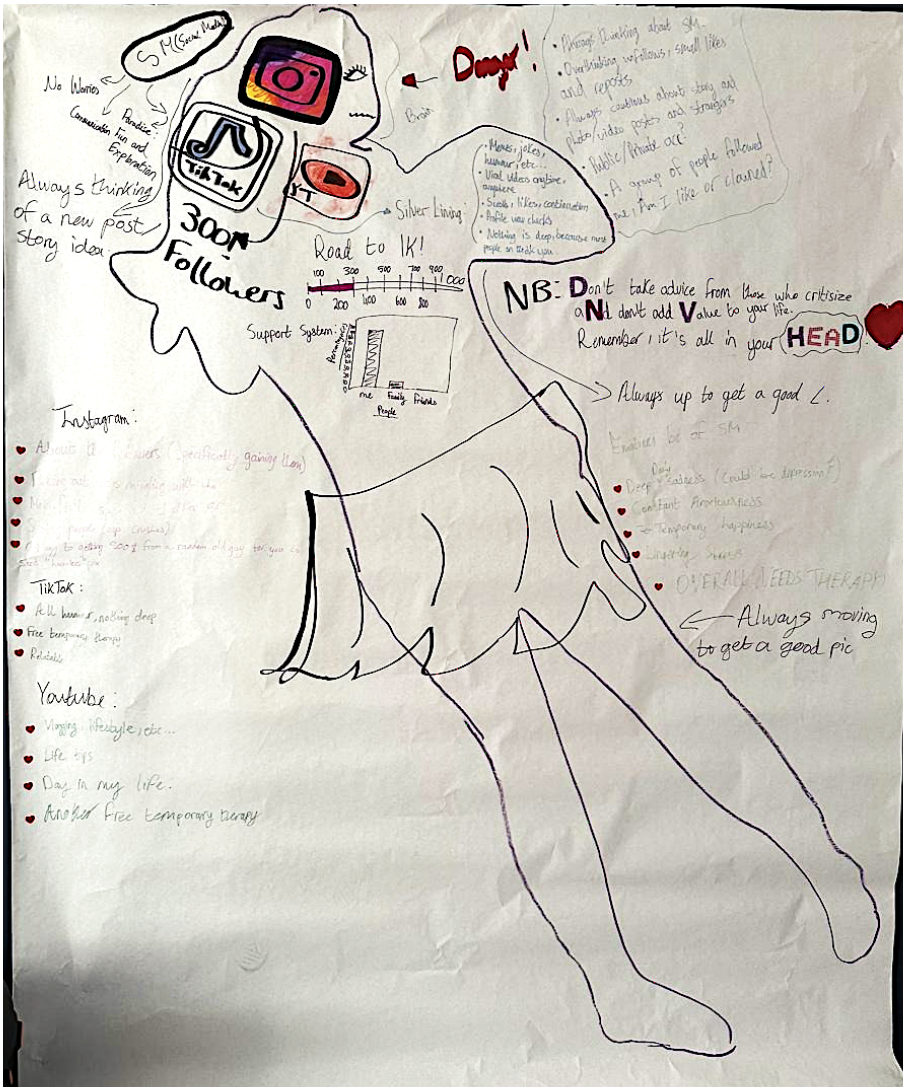
Bonolo is clearly not naïve when it comes to the pitfalls of social media, and describes people's virtual activities as follows:

> *So, there's no routine a lot of things that people write or do on social media um they, its mostly emotive there's no logic to it, the only logical part is the coding and the app itself not the people on it.*

While her brain alerts her to the deleterious effects of an online world, in big red letters *"Danger"* it is also a place she paradoxically equates it to a place where there are *"no worries"*. Bonolo's life online may expand her capacities of being a *"professional poster"* she is also conscious that it may also exploit her concerns about *"coming off as cringe and being judged"* along with other vulnerabilities and insecurities which she expresses on her bodymap as *"am I liked or am I clowned*[11]*?"*

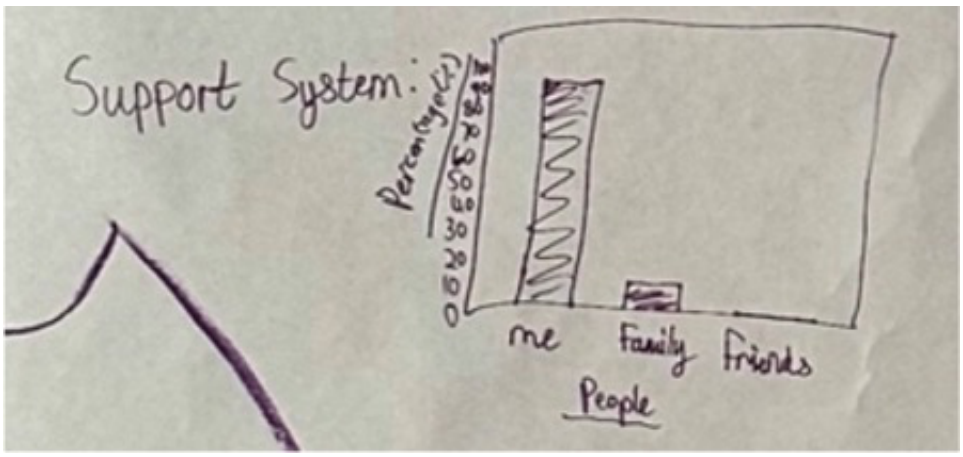
[11] "Being clowned" means being subject to ridicule

Figure 20. *Bonolo's Bodymap "It's All About the Angle"*



As we surround Bonolo's bodymap with her collage and photographic images, she immediately makes a comparison of her offline and online worlds, *"offline people only think of themselves, or they only like engaging with their friends, they don't really take me to heart".* This sentiment is reinforced by an illustration of a bar graph of her support system within her bodymap (see Figure 21 below), revealing that apart from a small sense of support from her family, Bonolo has learnt that she needs to be (virtually) self-sufficient, and co-opts technology as her aid.

Figure 21. *Bonolo's Support System*



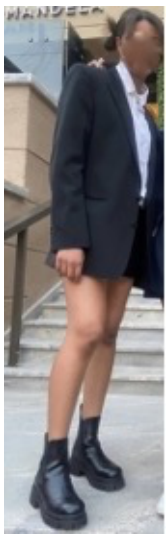
While she believes that the virtual world can be an illusory, superficial and light-hearted place, it is also a space which has a rather serious undertone. In her pursuit of achieving her aspiration of becoming a "*content creator"* and an *"influencer",* Bonolo is highly selective of how she presents herself in a virtual world, occasionally using people's 'likes' as a barometer of her progress. As Turkle (2017, p.11) states, "we nurture what we love and we love what we nurture", Bonolo tends to this online space with incredible care, thoughtfulness and precision, considering it a space she affectionately calls *"paradise".*

As we discuss how she would like others to see her within this online world, Bonolo presents me with two photographs (see Figure 22 and 23 below). At this point in our conversation, Bonolo's narrative became imbued with a sense of gravity, telling me that "*nothing you post online will be forgotten, people will always have access to it all the time, so you have to get it right, it's all about the angle, it's about getting everything just right".*

Figure 22. *Bonolo, "How Others See Me in an Online World"*



Figure 23. *Bonolo, "It's About Getting Everything Just Right"*



Bonolo's description of these images felt reminiscent of a modern-day Goldilocks with her images appearing to contain elements that were 'just right', reflecting a self that is polished and sophisticated, captured at just the right angle providing a glimpse of just the right amount of who she is without fully exposing her true identity. Any information that suggests immaturity, disorder or unruliness does not enter her virtual world as Bonolo illustrates using an argument with her mother who posted a video on her Facebook page:

> *Joh, we had such a fight, she posted this video of when I was a kid, I was like singing 'Let It Go' from 'Frozen', standing on the dining room table, I was furious with her, and like she wouldn't take it down until I really got mad with her".*

Although Bonolo's offline world may be recapitulated as *just one more*, her online world could be summarised as *just enough*, forging an online identity that escapes the limitations she feels in the offline world, transforming her 'ill-disciplined' body into one which is neat and orderly. Bonolo tells me when she peers into the mirror of her online world, *"seeing these images reflecting back like makes me feel confident and in control, I feel better like when I see these, I have purpose and meaning".* Bonolo's narrative of her online life

resembles the tagline of an online game, Second Life, promoted as "a place where you can love your body, love your friends and love your life" (Turkle, 2017, p.1). Being alive comes with inconveniences, however, in Bonolo's virtual world, these troubles are edited out, shaping an identity designed for great things and not destined to *"just randomly chase after shiny things like a squirrel".*

Conclusion

These four portraits provide us with a window into the life stories of these particular young people, juxtaposing their experiences within their online and offline worlds. The visual richness of the images immerses the reader into the experiences and contexts in which these participants live, providing a deep sense of who they are. In the event that the participants read these portraits, the aim would be for them to feel "fully attended to, recognised, appreciated, [and] respected" (Lawrence-Lightfoot, 2005, p. 6). ADHD can be a dominant prism through which these young people are viewed and categorised by others (and themselves), flattening out and obscuring the complexity that is threaded through their lives. Context is a critical resource for interpreting stories, which are laced with metaphors and images (Lawrence-Lightfoot, 2005). As Jones and Dhlamini (2013) state, practices of self-creation take place in particular places; these portraits demonstrate how an online world provides these young people with an imaginative space, offering connection, agency, authority and belonging that may not be apparent in offline contexts. Online experiences provide remarkable opportunities for identity play, however, this play has a particular serious undertone, as it holds the potential to inform us about not only who these young people are and what they want to achieve, but also what they may not be getting within the context of their offline worlds (Turkle, 1995, 2017).

These portraits demonstrate how the virtual world is not only an avenue for escaping imposed identities of their offline worlds, but also a platform for challenging the dominant narratives of deficiency, disorder and impulsiveness associated with ADHD. The crafting of avatars, sharing selected aspects of their lives and leveraging online anonymity, the participants subvert the expectation that ADHD may limit their ability to manage their behaviour and environments. Instead, they exhibit remarkable control, judgement, creativity and adaptability, carving out spaces where they can explore and assert multifaceted identities free from constraints and stigmas present in offline contexts. This duality highlights the transformative potential of the digital world, providing them with opportunities to play multiple roles, facilitating exploration of different aspects of themselves which underscore the consideration that identity is indeed fluid and multiple.

Chapter 6 - The ADHD Turning Point and the Transformative Effect of the Label

Chapter five presented an analysis of participants' interactions and experiences within online and offline worlds through the creation of four narrative portraits. Complementing this focused in-depth narrative analysis, this chapter includes the first of three thematic analysis chapters across the whole data set, identifying similarities and differences among the participants and arranging them into generalised themes. Combining Squire's (2008) experience-centred narrative approach and Braun and Clarke's (2006) thematic analysis provides a powerful synergy to focus on the key hinge of ADHD "diagnosis" in shaping the participants' narratives. This approach captures the richness of the participants' personal experiences and recurring themes across the verbal and visual data.

Two overarching themes are presented, the first of which features ADHD turning points, which explores the moments when participants were diagnosed with ADHD or came to understand themselves according to the characteristics of the phenomenon. These turning points are illustrated using particular incident narratives [PINs] (Wengraf, 2011) and provide detailed accounts of interactions with medical professionals, teachers and parents.

The second overarching theme in the chapter explores the transformative capacity how an ADHD diagnosis or self-identification with the label precipitated a change in character or how they came to see themselves in light of their diagnosis. Elements of Squire's (2007) conversion narratives were engaged in this section. Conversion narratives typically involve a before and after framework, emphasising the transition from one state of being to another. Two subthemes, (Dis)connectivity and feeling misunderstood, as well as implications for the future, are explored.

The ADHD turning point

Narrative accounts of diagnostic moments were plentiful within the participants' stories about ADHD, with most remembering what the experience felt like at the time. Although these recollected stories may not be objectively veridical accounts, they are truthful narratives, representing a combination of details participants decided to include in their moments of diagnosis (McAdams, 2001) Particular incident narratives [PINs] (Wengraf, 2011) relating to participants' ADHD diagnosis, including encounters with healthcare professionals teachers and parents, highlighting the significance of this moment of diagnosis as a turning point in their stories, a hinge in their narrative identities. The analysis of the PINs provides a rich description of participants' subjective perspectives, emotions and meanings associated with their diagnostic turning point.

Lucy's ADHD diagnosis began when she experienced difficulties in the school context and was at risk of failing her grade eight year. Her mother suggested consulting a psychiatrist, just before the mid-year exams. This particular interaction produced a narrative around an event that Lucy claims is something she will never forget.

> *Lucy: I remember it was a **rush** to get my prescription before exams started...*
> *I went to see Dr *, I clearly remember the first time I went into her office [sighs] …it's like etched in my brain [pause] I almost had a panic attack, the whole place was filthy, and the waiting room was covered in toys and some, some that weren't toys for some reason? Like there was this broken mixer, metallic bowls, and a real baby bottle. But I knew then that if I wanted the prescription, **I had to endure it... I had to be there**…I honestly **didn't have time to waste.***
> *LindaM: And when you got to see Dr *?*

> *Lucy: I know Dr * was just doing her job and get me the right prescription [pause] but she talked to me like I was a 5-year-old child who scraped their knee, it felt, well kind of condescending, but I knew I had to* ***push through it*** *[pause] for the prescription you know. Like that day I understood what it must be like to be old and people don't speak to you as a person, they talk to you as a* ***rabid animal*** *[pause] it's like [speaking in a sweet and patronizing voice], "Ok Miss Martha, it's time to give you your medication, daily shots of something and do you want jelly pudding? [speaking in a louder voice] Miss Martha do you want pudding?" [pause] it's like talking to a toddler, it's still like a human being, nothing has changed.*

Lucy's recollection of the process is peppered with words like *"rush", "race"* and having *"no time to waste";* indicating that the process felt not only chaotic and urgent, but that it lacked any meaningful engagement. From the moment she arrived in the doctor's office, Lucy is drawn to the physical attributes of the waiting room, mentioning the mismatched and rather tired looking toys, a space which felt ill-suited to her needs. This feeling of incongruence was a significant precursor to her interaction with the doctor during which she felt infantilised, being treated as a young child with limited abilities. At this moment, Lucy seemed to have very limited agency and knew if she were to protest it may simply have confirmed her immaturity, inability or both. However, Lucy's compliance was not meaningless, she astutely weighs up one choice (speaking her mind), over the other (remaining silent), proving that her silence is a "form of embodied agency" (Yoshida, 2011, p. 152). Straddling the intersection of being a child (i.e. being too immature) with a potential ADHD diagnosis (i.e. with limited cognitive ability), Lucy's opinion is not solicited during the encounter, ignoring the complexity of her emotional, psychological and social experiences as well as her contribution to choices and decisions in managing her wellbeing (Alderson & Yoshida, 2016; Brady, 2014). The tendency of healthcare professionals to rarely

enquire how young people feel when they are not considered competent enough to make decisions, illustrates how care and power are intricately linked (Rose, 1999). Lucy's memory of this past experience in the doctor's office has a rather melancholic undertone (McAdams, 2001). However, linking this experience with how she imagines it must be like to get old, when investment in one's care diminishes, human interactions are brief, perfunctory and almost inhumane, is a remarkable sign of imagination and compassion, quite unusual for most young people Lucy's age.

Emma was diagnosed with ADHD when she was in grade three. Subjected to continual harassing phone calls from her teachers about Emma's disruptive behaviour and inability to sustain focus during the school day, her mother enlisted the help of their general practitioner. The following PIN is Emma's recollection of the process.

> *LindaM: Do you remember how old you were when you were diagnosed with ADHD*
>
> *Emma: Oh, ja well I was in Grade 3, so like about 8 I think, they started with all these tests for my ears and , and eyes…**I was clueless**, **I didn't know anything** about ADHD, like I got this coloured sheet to put over my reading, [laughs] I never used it [silence] yip I had **no clue** on how that would have worked anyway [laughs] yeah so like you know **it wasn't explained.***
>
> *LindaM: So, you only knew it was ADHD in Grade 5?*
>
> *Emma: Yup, I had **no clue**, all I knew was that you know I was taking that medication but that was it, and my sister also took it, but **no one really explained**, [silence] I used to hear my parents **saying stuff about me** like "Oh Emma has ADD", or "Emma is this and its affecting her and such" but **no one ever explained** at the time.*

What is notable in Emma's account is that she reinforces the feeling of being *"clueless"* and *"excluded"* from any explanation as to why she was medicated, feeling disconnected from

discussions that had direct bearing on her life. Although the management of information between Emma's mother and the doctor may have been a well-meaning attempt to protect her (Brady, 2014), excluding her from the process made her feel marginalised and disempowered. As Qvortrup, (1994) indicates, when we consider young people like Emma as an 'adult in the making', a human 'becoming', her views of 'being' a child, and her capacity to negotiate and make sense of the diagnosis are marginalised. Emma understands that the rudimentary assessment of her eyesight and hearing were possible launchpads for her ADHD diagnosis. She laughs at the recollection of not using that *"strange green sheet"* over her reading, a demonstration of agency in the only way she knew how. Furthermore, while her laughter may reflect the peculiarity of the situation, it may also hide her embarrassment that she needed this kind of 'strange' intervention which in turn made her feel 'quite odd' herself.

Craig remembers his diagnostic pathway being paved by his disruptive behaviour in the classroom which he remembers began in his grade two year. He tells me about his encounter with his first psychiatrist, which he describes as a misdiagnosis and professionally incompetent:

> *Craig: Oh there have been loads of them, I've been through loads of therapists and even more psychiatrists…I do remember my first psychiatrist Dr *, she was* ***awful****, she was my dad's psychiatrist and she was kind of like ja, you have the same problems as your father and then she gave me medication, like she treated me* ***incorrectly****, like not…she didn't treat me badly but she got my medication* ***very wrong****, it made me feel* ***awful****, ja like just really* ***bad*** *you know.*
>
> *LindaM: You feel like she treated you incorrectly?*
>
> *Craig: Yeah, I guess* ***she didn't listen to me really****…she took one look at me and said I have ADHD, like my dad.*

LindaM: So, did you go back to see her?

Craig: Nope, my mom, um, my mom, my, said she wanted a second opinion, but I remember distinctly ***hating*** *going to psychiatrists after that.*

Craig's narrative about his first diagnostic encounter with his psychiatrist is infused with words like, "*awful", "bad", "treated me incorrectly", "didn't listen", "very wrong".* The absence of definitive tests, ADHD diagnoses rely on clinical judgements which are subjective and influenced by heuristics and biases (Merten et al., 2017; Timimi, 2005, 2021). Craig is seen to fulfil the ADHD criteria, a boy, who is disruptive in class, with the same 'genetic makeup' of his father. This interaction where he felt little attempt was made to understand the meaning of his behaviour made Craig feel misunderstood, unheard and invisible. Reducing him to symptoms on a checklist and an immediate prescription for medication, made Craig rather sceptical of the psychiatric process, and understandably so. He recounts his reaction to the news of subsequent appointments with different psychiatrists, describing his protests, *"I was like No! It's not going to happen; I am going to sit on the floor, and you will have to drag me there".* He then continues with a tone of utter incredulity, announcing "*and you know she would!"*. After many unsuccessful appointments with multiple psychologists and psychiatrists, Craig's mother finally found his current psychiatrist, and his narrative takes an optimistic turn:

*Umm ja now I'm finally seeing Dr * and she's* ***wonderful****, I* ***love*** *her, I'm so* ***lucky*** *to have her like* ***she gets me****, she really does,* ***I feel completely safe*** *around her um like I can actually* ***share*** *things that I go through and so* ***she can actually help me*** *find not what's wrong with me but* ***what's up with me*** *so I can* ***better understand*** *myself to* ***better help*** *myself.*

Craig's relationship with his current psychiatrist transforms his previous negative experiences. His narrative is filled with encouragement, containing words like **"***wonderful",*

"love", "she gets me", "I feel completely safe" feeling confident that someone has readjusted the focus from "*what's wrong*" with him to "*what's up with him*". McAdams (2001) describes this transition as a redemption sequence, one in which previous unpleasant experiences with those with authority over his life, is changed into a meaningful and compassionate encounter, which sustains Craig's hope and confidence that is needed to navigate life's complexities.

Although he had never been officially diagnosed with ADHD, Sanele tells me how his parents suggested that he probably had ADHD due to his distractibility in grade 0, when he was just five years old. Some ten years later, the idea that he has ADHD remains firmly rooted in his self-concept. Sanele explains that his parents never pursued an official ADHD diagnosis, because he does *"so well in school"*. Academic achievement is often considered an overarching benchmark of a 'normal' child. Sanele's superior school performance seemed to assuage his parents' fears which perhaps restrained them from actively pursuing an official ADHD diagnosis for him. Sanele's parents' somewhat premature assumptions may also be indicative of how life has become more complicated for parents who face multiple pressures while raising their children. Furthermore, children are expected to show restraint, maturity and self-control at an increasingly earlier age (Timimi, 2021). Within the context of private school, children face immense pressure to conform and perform. These demands are further exacerbated for black children and their parents, who may feel a compounded need to prove their belonging (Yuval-Davis, 2006) to these institutions, and may encounter increased surveillance by teachers and other school authorities. Within a wider social context, racial and gendered stereotypes afford black boys very narrow margins of 'error' which not only influence teachers' expectations and assessments, but may be disproportionality disciplined for minor transgressions (Blum, 2011; Little & Tolbert, 2018).

Mphilo was certainly one of the quieter participants, however, when he spoke, he did so in a very considered and succinct manner. Mphilo clearly remembers the event which he considers initiated his ADHD diagnosis. As he approached the eve of his 16th birthday, (and thus the legal age of obtaining a motorbike license), his persistent requests for a 'dirt bike' collided with his father's frustrations around Mphilo's approach to his schoolwork:

> *Mphilo: I just wanted a dirt bike, like I kept asking for this bike and my parents kept saying no, one night at supper [silence] my dad got really mad at me about always asking for a bike [silence] yoh, like he was mad, he made the table shake.*
>
> *LindaM: He was angry at you for always asking for a bike.*
>
> *Mphilo: Yeah, he was like, he was "How come you can be so focused on getting a bike but like not on your schoolwork?", like he was mad, yoh [silence] that night [silence]. My sister, she came up with the idea for me to go to the doctor and actually see if I have ADD, cos you know my parents like they didn't know what it is if I'm being honest [silence] we don't talk about those things [silence] like my sister knew since years back that I have ADD. Ja, so I went to the doctor and ja he diagnosed me with ADHD.*

Mphilo's sister's protective proposition that his persistent requests or his "*obsessions with getting a bike"* was a sign that something was 'biologically wrong' with him, and not within his control. This proposition seemed to protect Mphilo that night from his father's frustrations and his inability to reconcile that his son could be so dedicated to the process of getting a motorbike, and not be able to apply the same enthusiasm toward his schoolwork. Mphilo's silences within his narrative slow down the telling of his story, creating space for reflecting the deep emotional impact of that that evening. While Mphilo recounts the event he believes precipitated his diagnosis in fine detail, he describes his encounter with his doctor succinctly, *"so I went to the doctor and ja he diagnosed me with ADHD".* This description

implies the process was brief, predetermined and clinical, but also suggests that he had little expectation that his voice would be heard during the encounter.

Bonolo is another participant who is self-diagnosed, she explains how she arrived at the conclusion that she might have ADHD:

> *Well for a long time, I have been piecing the symptoms together, um…for a while now from what I have been hearing through other people's experiences and watching TikTok videos and other stuff online, as it correlates with what I have been going through.*

Bonolo reads her behaviour within the lexicon of 'symptoms' associated with ADHD and concludes that her distractibility is a marker of the condition. I asked Bonolo if she has considered approaching her parents about her concerns around her diminished concentration:

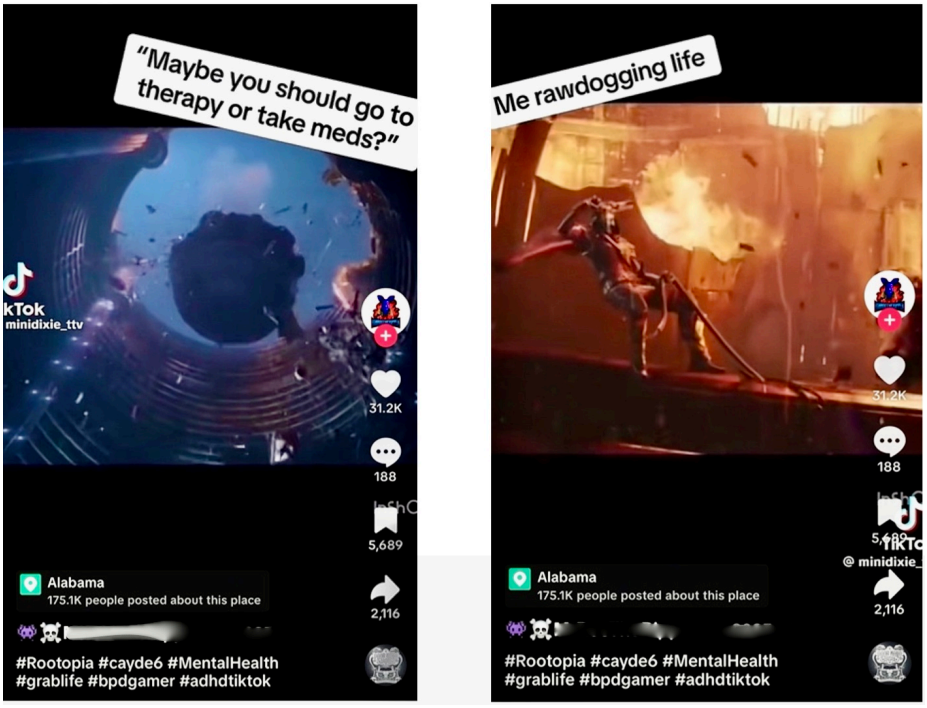
> *Umm [pause] I feel like especially because my parents are African, especially like I feel in African culture it's like mental health is not really talked about a lot and like if you have, I feel like um with ADHD, like for me personally … but I couldn't tell my parents it's hard for me to study because if I do, they will sss…sss, I will feel like I am coming off as being lazy. I think in their minds when someone does not want to put in the work or effort in stuff that counts like education, I feel they would think oh the only reason isn't because someone has a medical problem, cos if they could do it as kids then we can do it, it's just because you are lazy, that's what they will think. My parents, they really don't understand ADHD, like my mom will say, "Immerse yourself [laughs] in your books", like she expects me to wake up one day and say, "You know what I really want to be is a scholar so let me start reading lots and lots of books" [laughs].*

Bonolo and Mphilo's parents' reluctance to talk about mental health is representative of what Hall (2000) considers the intersection of psychological life and social reality. As Phoenix (2024) argues, some histories can have vastly different impacts in the present, depending on how people are positioned. Bonolo and Mphilo's parents' silence can be viewed within the context of raising a child in South Africa, where shadows of a racialised, traumatic past linger and haunt the present. Black parents who were subjected to dehumanising and discriminatory treatment at school, embody hauntings of being positioned as intellectually inferior or lazy, have long lasting and intergenerational consequences (Phoenix, 2024). Racialised hauntings produce pain and shame and the urge to remain invisible and silent, which are often exemplified in parents' narratives which they pass onto their children. Furthermore, black parents may be understandably reluctant to add a label to their child that may attract any kind of stigma or evidence of being 'different' or 'subnormal'. Consequently parents encourage their children to put their head down and work extraordinarily hard, as a means to compensate for the negative ways black children were (and in many cases still are) positioned (Phoenix, 2024).

Bonolo explains the TikTok she has selected to encapsulate her feelings around struggling to focus during exams (see Figure 24 below), imagining that an ADHD diagnosis and medication could grant her some form of reprieve if her parents were open to it. She explains, "*so this is me, I am just going to have to raw dog*[12] *life, like that's all I can do".*

[12] The term "raw dog" is used to describe having sex without a condom.

Figure 24. *Bonolo's TikTok Selection, "Raw-Dogging Life"*



A good portion of the literature cautions that ADHD symptoms which remain undiagnosed and thus unmedicated, may have severe implications both in the short and long term (Barkley & Dawson, 2022). Bonolo's description of "raw dogging" life may point to the potential protective value she assigns to the diagnosis, feeling quite vulnerable without it. It may also however demonstrate her need for her parents' recognition of her struggles, providing her with a protected sense that she does not have to navigate her difficulties on her own.

The ADHD label and a change in character / identity

Diagnoses like ADHD can be understood as a transformative moment, provoking a retrospective reading of one's behaviour which can have a profound influence on one's biographical trajectory (Hacking, 2007). McAdams (1996) suggests that the life story can be interspersed with particular moments or nuclear episodes, that stand out and may contain

"turning points, high points, low points", which may either affirm a sense of continuity or a change in "Me", and have implications for participants' future (p. 14).

Sanele explains that his informal diagnosis has turned him into a *"boring person"* conferred by his parents when he was five, claiming, *"like I always knew that I had to work hard because I had it"*. I asked Sanele if he thinks his life would be any different had he not been told he had ADHD, he immediately replies, *"life would be more chilled I guess, ja, relaxed and less about worrying about schoolwork"*. The implications of his ADHD diagnosis shaped Sanele into a consistently hard worker, and as a result, others just see him as *"this kid who is always studying"* (see Figure 25 below*).*

Figure 25. *Sanele, How Other People See Him, "I'm This Kid Who is Always Studying, Me Chowing Life Science"*



This image creates a distinct impression that he is a disciplined and conscientious learner, determined to show Life Science (a subject notorious for large volumes of work) 'who is boss', or as Bakan (1966) more eloquently describes, as demonstrating mastery over his environment. Sanele's imago of a dutiful, high achieving student and essentially a 'good boy', comes with consequences that appear to frustrate him. Within his collage, he includes the poignant statement "*I'm not a machine*", and I ask him to tell me a bit more:

> *Like a lot of people see me like I can just study and do school things, like it does come easy but it's a lot, like I also need to do things like coding and stuff that's not about school.*

Sanele believes that others see him as a one-dimensional entity, with distinct parts that can be reduced to simple elements; something that operates flawlessly and systematically through a set of programmed instructions. This mechanistic metaphor of predicable performance also suggests Sanele's fear of being perceived as dull and boring and, as McAdams (2018) reminds us, stories can be anything, they just can't be boring, even if one's life is considered uneventful. Within the context of school and family life, Sanele is viewed as a stereotypical hard working, high achieving student. The trouble with this stereotypical view is not that it is untrue, but vastly incomplete (Adichie, 2017). This sense of an incomplete understanding resonates with an image of a meme (see Figure 26 below) Sanele included in his poster.

Figure 26.. *Sanele's Meme in His ADHD Collage, The Missing Piece*



He considers that stimulants, but clarifies *"not like Ritalin or those kinds, more like coffee and monsters*[13] *",* may 'make him complete'. Sanele erases the word validation from the meme, suggesting this missing piece is the recognition of his complexity, validating him as a full human being rather than a one-dimensional academic machine. Sanele occupies multiple and contradictory subject positions. As a middle-class boy, the importance of his superior academic achievement may be seen as an expression of a socially acceptable masculinity (Frosh et al., 2003; Langa, 2010). Furthermore, his academic success and conscientious application to his school work suggest intersectional complexities around race and ability, challenging the stereotypical ways black boys may be viewed in the school environment as underachievers (Goff et al., 2014; Rudd, 2019). His academic performance is also contrary to typical understandings of young people who are positioned according to the characteristics of ADHD.

Emma tells me how the news of her ADHD diagnosis was difficult to process and was simultaneously a turning point and a low point in her life, affirming a sense of change within herself (McAdams, 1996). She uses the words clipped from a magazine to explain: *Well, it turned my world upside down, ja it was hard, and I remember feeling like…well like I had the blues I guess, ja that's a good way to explain it".*

While Emma was constructing her collage, I noticed she selected a word "exceptional". However, as she goes to paste the word onto her collage, she snips off a section, transforming it into "exception", her decision to do so becomes apparent when she

[13] Monster – is a popular energy drink with a high caffeine content sold in South Africa

tells me her story about ADHD. Emma speaks about how her ADHD diagnosis made her feel extraordinarily different from her friends, especially in primary school:

> *I mean they all very smart, they got good grades, they didn't have ADHD… and I, well from grade 1 to grade 9, I thought I was just stupid it made me feel super bad about myself. It was like… "Oh Emma has ADHD, she's not smart, so" … Like there was just no need for me to try as I always just got bad marks.*

A little later, Emma's narrative of feeling *"stupid"* transforms as she re-counts another turning point in her life:

> *But then I got my first 70% for History in grade 9 and that was the best thing that ever happened to me*, *I mean it was super easy, but that mark…just knowing I could get it changed my perception… so now my average is like close to 70, it's never been like that.*

Signalling this turning point with *"But then"*, Emma's internalised stigma of being *"just stupid"* shifts. After the salvational event of her *"first 70%",* she manages to construct a meaningful and positive identity in the face of her past academic difficulties (Squire, 2007) Although she makes an attempt to diminish her achievement, the "*super easy*" test was not merely a fluke, but reset her academic pathway along with her sense of self and identity (McAdams, 1996). With this memory in mind, Emma tells me, in retrospect she is quite grateful that she considered herself *"not so smart"* and offers an intriguing view on how her diagnosis spared her academically:

> *You see for me, while everyone was trying to do well like for going into high school, I liked that I felt that way about myself cos by grade eight all my friends were burnt out; they don't have that drive anymore. I think being smart gives you a cocky attitude towards…like school and ja, so now I am peaking in grade 10 and I didn't waste my energy in primary school worrying about photosynthesis or something [Laughs].*

Emma time travels back into her past (Andrews, 2014), providing multiple stories about the effects of her ADHD diagnosis as a somewhat humbling experience, but one that ultimately had a redemptive, agentic ending (McAdams, 1996). Although Emma does not describe her school struggles according to any kind of explicit religious connotations, she deploys a structure which moves her story from a sense of conflict that culminates in a conversion moment (Squire, 2007). Emma's articulation of her turning point and her new narrative of a successful and achieving student, conforms to the norms and expectations of what is deemed appropriate and desirable for a 'good life' (McAdams & Cox, 2010).

By contrast, while Craig tells me that the diagnosis had an explanatory value to it, as we discussed it a little further, it seemed that this benefit was overshadowed by what he believed the implications of the diagnosis really meant to him. I asked Craig to talk to me about the masks he had included in his collage, which he had captioned with words clipped from a magazine "Give new meaning to being" (see Figure 27 below). Craig tells me the blue mask was what he felt like before he was diagnosed with ADHD, adding:

> *Like for me, when I was a child, it was hard for me to understand the concept. 'Why do I have this?' Especially cos I felt so carefree and sort of felt so normal. I loved life… I just thought you know that everything was great. Like it just felt like it was normal for me, and I think my ADHD kinda changed that for me…like it's not all bad. Don't get me wrong, cos I feel that knowing what's up with me, helps me cope, feel validated like you know oh right I know why I am a weird kid, but I don't need to just hide in my shell and stuff, like, it's an actual thing and other people go through it.*

Craig's ADHD diagnosis had a transformational effect on his subjectivity, which seemingly converts him from feeling *"carefree"* and *"sort of normal"* to *"weird*" a process that paradoxically normalizes him. Craig's conversion narrative frames his ADHD diagnosis as a

shift from one state of being to a more resolved sense of self understanding and belonging (Squire, 2007). His ADHD diagnosis provides him with evidence that he is not alone, there are others just like him, more especially, there are enough people like him to warrant an entire psychological category (Werkhoven et al., 2022).

Figure 27. *Craig's ADHD Collage Mask Detail, "Gives New Meaning to Being"*



(Dis)Connectivity and Feeling Misunderstood

An ADHD diagnosis is accompanied by a wide range of unpredictable effects. The label has a particular effect on how many participants made sense of their lives and interactions with others. From the outset of creating her collage, Lucy is eager to tell her story about "*What its' like to have ADHD - From my experience*". She tells me, *"I'm feeling overwhelmed that I am going to put everything on here…like I feel this is a chance to actually tell people how I feel so I don't want to leave anything out"*. Lucy's collage contains an overarching theme of feeling misunderstood, with faceless characters (see Figure 28 below) she has drawn telling her to her "*to try harder*", "*it's just puberty*", or accusing her of having

her "*head in the clouds*". Lucy writes in several places on her collage and uses memes to emphasise that people in her world tell her that "*ADHD isn't real*" to which she replies rather sarcastically, "*wow! you did it! You fixed my problem, have a trophy! NOT*" (see Figure 29 below).

Figure 28. *Lucy's Collage Detail of Faceless Characters*

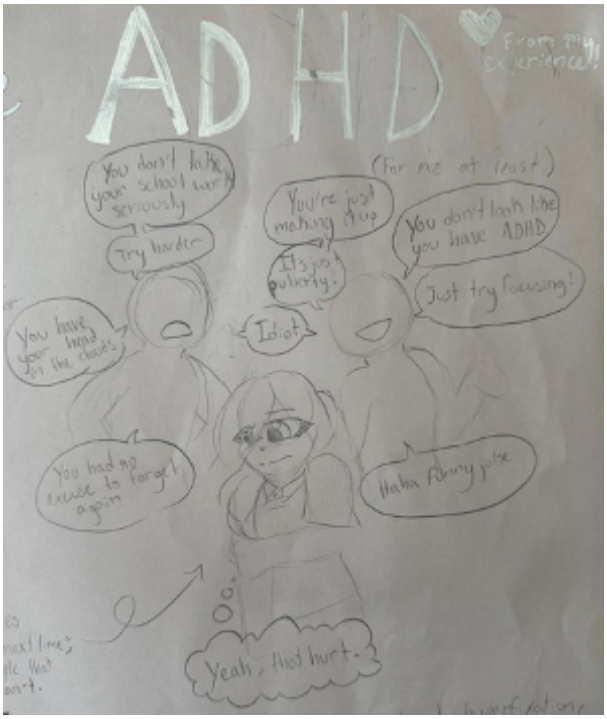
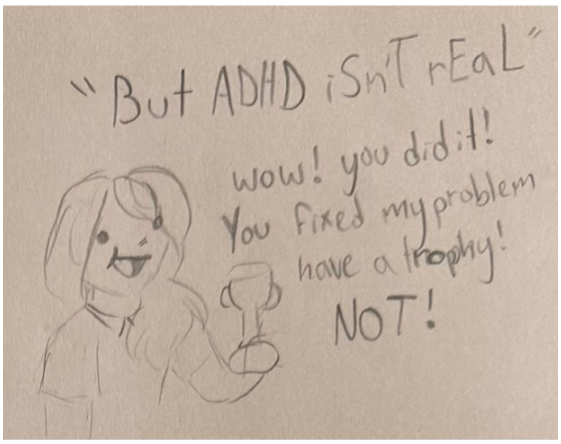


Figure 29. *Lucy's Collage Detail, "But ADHD Isn't Real"*



Lucy's collage provides a distinctive account of feeling misunderstood and her struggles invalidated. It became clear why Lucy had expressed an urgency to include as many details as possible about her experiences and perceptions around ADHD, offering her a rare opportunity to tell her story. In human sciences, in order to understand "kinds" of people, they first need to be classified. Hacking (2007) offers a critique of this classification of "kinds of people" as these constructions may not always be particularly helpful to those who are classified. While Lucy's hopes that her ADHD diagnosis would lead to others understanding her better, it paradoxically makes her feel less understood. The construction of the collage facilitated the telling if her story, as Ricoeur (1991) points out, hearing a story "not yet told", offers the possibility to tell a different story, one that for Lucy may be "more intelligible" (p. 30), one which is a full representation of her personal experiences.

During our discussion of his ADHD poster, Craig points to the meme of a dog with a look of astonishment on his face and captioned "How I feel when someone says ADHD isn't real". Craig tells me why he included the image: "*This reminds me of my mom saying that um she thinks my ADHD diagnosis made me worse, she doesn't have it, so she can't understand".* Craig continues *"a lot of people don't understand, they don't know what it feels like to be me".*

Bonolo also feels that very few people really seem to understand her struggles with motivation, and admits "Like*, I know what I have to do but it takes too much energy for me to do it, like no one understands right? I'm heartbroken just thinking about it".*

In a world that is acutely aware of difference along the lines like race, gender, class, religion, nationality and ability, it is understandable that participants feel that unless people are exactly like them, their experiences and actions will remain misunderstood (Fay, 1996).

However, Fay (1996) cautions against this solipsistic thinking, while shared identity may facilitate understanding, it is not a prerequisite for meaningful engagement and connections. The understanding that Bonolo and Craig long for can be achieved through engaging with one another through dialogue, listening to and being open to alternative viewpoints, acknowledging similarities and points of difference (Fay, 1996).

Implications for the Future

Lucy makes meaningful connections to her ADHD diagnosis, providing some kind of enduring truth about who she is in the present and will prevail into her imagined future (McAdams, 2001). Lucy uses music to sum up her ADHD diagnosis by pointing to two songs she has included in her collage, describing them as *"this is what I feel about me and my ADHD".* Lucy explains how the lyrics of *Change my clothes* (Dream & Benjamin, 2021) resonate with her frustration as she imagines future achievements, yet she feels like her ADHD anchors her in one place:

It's worth it to make some mistakes

You miss all the shots you don't take

I really wanna change the world

But I can't change my clothes

Lucy's reveals *"I'm very different to my friends, things come easier to them, I know that my ADHD makes me different, I know it isn't my fault that I am this way".* Consequently, Lucy's fears of a bleak future are reiterated in the choice of her second song, *Everything's Good* (Good, 2020) which also echoes her sentiments of feeling "different" :

I used to think that growing up I could be anything

But I didn't get smarter like mama said

'Cause I didn't go to college like all my friends

And I still don't have a dollar to pay my rent

And I guess no one noticed when I was six

Yeah, I'm a little bit broken and can't be fixed

But everything's good, yeah everything's good

The lyrics capture the essence of Lucy's fear of not following a socio-normative trajectory that is expected of adolescents. While her peers unite around academic accomplishments, destined to go to university and lead fulfilling lives, Lucy feels her academic challenges isolate her and make her feel remarkably different from her peers. For Lucy, her ADHD diagnosis means not only a loss of belonging (McLean et al., 2018), but also a potentially unfulfilled and grim future. While Lucy's ADHD diagnosis appears to provide insight and relief from blame, it also makes her acutely aware of her difference and more specifically, that this difference is about being broken without any prospect of being fixed.

Much like Lucy, Layla's narrative around her ADHD diagnosis includes fears about her future prospects. Although one side of Layla's collage contains the 'frenzied' characterisation of her ADHD, she has drawn a remarkably vibrant and bold fig tree on the left-hand side and included an excerpt from Sylvia Plath's, *The Bell Jar* (see Figure 30 below). As Layla explains her use of this particular imagery and literature, her story has a rather melancholic narrative tone (McAdams, 1996). Layla acknowledges that her future contains many options, however she believes that the "*always busy"* character of her "*severe ADHD*" produces "*constant scattered focus and the inability to pay attention to anything long enough to make good choices*". She claims, "*I have been like this like forever, like it isn't new".* Furthermore, she anxiously believes that these qualities will most likely impede her ability "*to even see these choices and make the right decisions for my future".* Layla's construction of her narrative identity is not merely assembling episodes from her past and current ability of not being able to focus, she uses this reasoning to draw very specific

conclusions about herself and her future (McAdams, 1985). Layla's beautiful depiction of a fig tree, heavy with fruit, combined with the sophisticated words of the poem, may also have an implicit meaning, deeper than the one she offers about her inability. According to the hermeneutics of faith, we are encouraged to "read between the lines" and look beyond the intended narrative, noting that "for every given story there is also an untold one" (Josselson, 2004, p. 18). I was struck by how Layla was already mourning a future that had not yet happened. I was, however, even more intrigued by the stark contradictions contained within this vignette, as she paradoxically illustrates her apparent ineptitude by citing a highly sophisticated and complex literary work. These contradictions and inconsistencies are disguised "pointers to other layers of meaning" which reveal Layla's remarkable abilities, aspects which she does not make overtly apparent or that she may be explicitly unaware of (Josselson, 2004, p. 4).

Figure 30. *Layla's Collage Fig Tree Detail and Excerpt from The Bell Jar*



Conclusion

In this chapter, I have attempted to analyse the moments at which participants received an ADHD diagnosis or came to understand themselves according to the characteristics of the phenomenon. As Wengraf (2011) indicates, PINs can "access vanished and mutated times, places, nuanced states of feeling and ways of doing and living" (p. 53). A theme of feeling unseen, unheard and marginalised surfaced within the participants' PINs. There appeared to be a sense of profound incongruity between what these young people needed from their doctors or parents and what they received. As the participants' narratives confirm, an ADHD diagnosis does more than just describe characteristics of the phenomenon, while the label may provide access to certain treatments and services, it also changes how individuals perceive themselves and relate to others (Werkhoven et al., 2022).

Narrative accounts of these young people's lives provides insight into how their diagnosis or self-identifications with ADHD may have caused or led to their transformation or produced certain "traits, attitudes, beliefs and preferences" (McAdams, 2001, p. 105). For some, these transformations were comparable to a conversion narrative, providing a pivotal moment which presented them with a new identity or way of understanding themselves (Squire, 2007). While hopes are often pinned on labels like ADHD to facilitate the understanding of difficulties encountered and endured, it seemed to have a paradoxical effect. Some participants felt so misunderstood, believing that only people just like them would apprehend the complexities of their lives (Fay, 1996). Imagined futures contained sharp references to inabilities or deficits which were represented and articulated with the use of music lyrics, poetry, and vivid artwork on their collages. Building on these insights, the next chapter delves into the broader institutional contexts of medicine and school, examining the impacts of these structures and how they shape experiences and identities.

Chapter 7 - The Institutions of Medicine and School

As the previous chapter demonstrated, an ADHD diagnosis can signal a turning point accompanied by changes in the way the participants came to understand or view themselves, expressed as 'being different'. In this chapter, the thematic threads of individual experience are linked to the social institutions of health and education. These institutions (along with and interacting with family) provide the critical structures of all children and young people's lives, and for these participants they are the nexus for the diagnosis and management of ADHD.

The medical institution plays a pivotal role in identifying and addressing behaviours that deviate from societal norms. Behavioural challenges and difficulties are increasingly framed as the result of neurobiological deficits or abnormalities, positioning them beyond the control of the child, parent or teacher (Timimi, 2021). This perspective transfers these young people to the remit of medical experts, constituting them as subjects in need of intervention, control and normalisation (Rose, 1999). Pharmacological treatment of ADHD is often the primary intervention strategy, and while medication may 'provide relief' for some, the effects extended beyond the clinical management and are deeply instrumental in the re-shaping identities (Rose, 1999). Similarly, educational institutions are key sites where norms of conformity are valourised and deviations are framed as obstacles to success. Schools mirror the competitive nature of the broader market driven economy characterised by innovation and success through comparison and ranking (Timimi, 2021). The future focus of moulding children into 'docile' and productive citizens (Foucault, 1977), underscores the necessity for schools to define what is considered good or inadequate achievement, acceptable or unacceptable performance, 'normal' or deviant behaviour (Burman, 2008). When children and adolescents struggle to conform, perform or sustain exceedingly high levels of academic

achievement, schools (and parents) often turn to the medical institutions for solutions. This dynamic creates a mutually reinforcing relationship between the institutes of medicine and schooling, where medicalisation of behaviour supports the school's focus on maintaining normative behaviour; and schools sustain the demand for medical interventions by highlighting deviations as obstacles to success.

Squire's (2008) experience-centred analysis and culturally-orientated approach alongside Braun and Clarke's (2006) thematic analysis were valuable methods for providing an understanding of personal stories which prioritised the participants' subjective experiences while recognising the contexts in which these stories developed. The chapter is organised into two central themes, the first theme, the biomedical understanding and management of ADHD explores the participants' own understanding of the phenomenon and experiences with medication which includes five subthemes: 1) Feeling in control and heightened focus, 2) Side effects of ADHD medication, 3) Medication and changes in behaviour, 4) Iatrogenic effects and polypharmacy, and 5) Long term usage. The second central theme focuses on experiences within the institution of school and contains the following subthemes: 1) School anxieties around failure and performance, 2) Navigating school without a sense of belonging, and 3) Relationships with teachers.

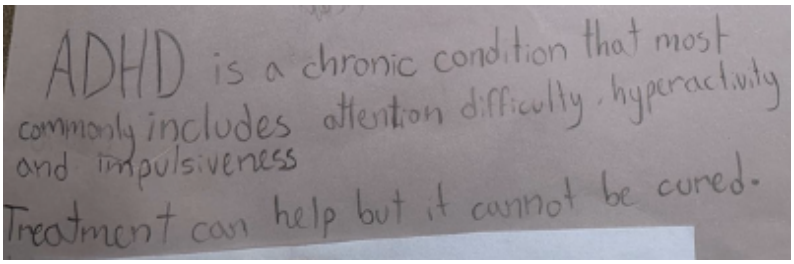
What is ADHD? Participants' understanding of the phenomenon

Although there are no definitive clinical tests, cognitive or neurological markers, discourse that surrounds ADHD remains predominately biomedical (Timimi, 2005, 2021). Within their descriptions of ADHD, most of the participants used some kind of biomedical vocabulary, with particularly strong references to the functioning of their brains.

Lucy's description of ADHD on her collage (see Figure 31 below) resembles a very close approximation of how the phenomenon is inscribed in the DSM-V-TR (APA, 2022) as

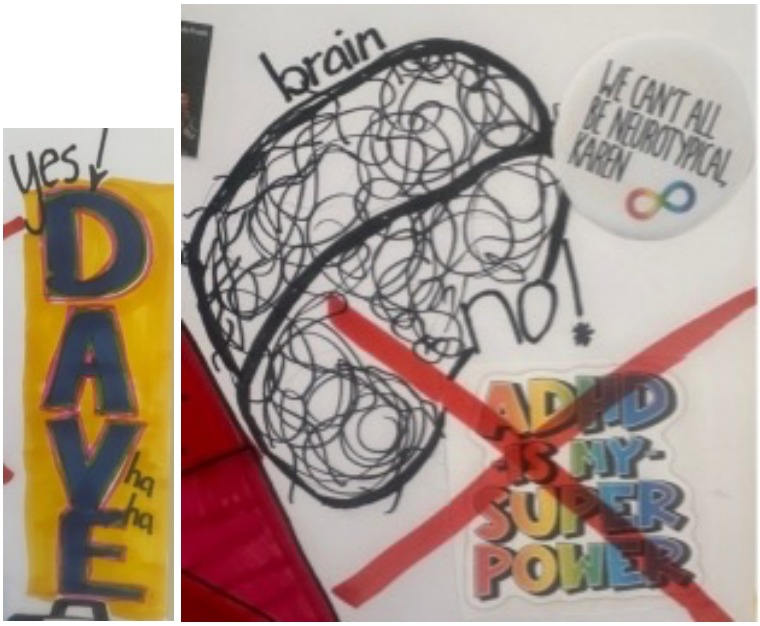
"*a chronic condition that includes attention difficulty, hyperactivity and impulsiveness*" and that while "*treatment can help, it cannot be cured*". She continues to explain, *"my brain is just different, I can't explain how, like it's a bit jungley…if that's even a word [laughs] all I know it's different"*.

Figure 31. *Lucy's Description of ADHD on Her Collage*



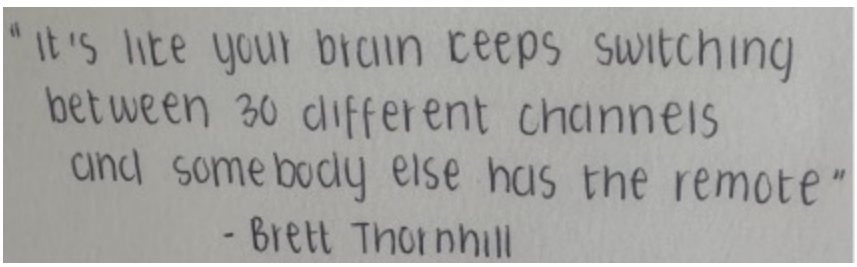
Similarly, Craig points to the image he had drawn on the collage (see Figure 32 below) and tells me, " *this is my ADHD brain filled with tangled wool, I also have plenty of memory issues and can't remember the simplest things like what I had for breakfast this morning"*. He is emphatic that ADHD is not at all a superpower, but that he has a brain that can be described as atypical. Craig continues the theme of a neurobiological underpinning of ADHD and tells me about a TikTok that renames ADHD as "DAVE" (see Figure 32 below), telling me "*I think it stands for 'dopamine, attention, variability, executive dysfunction', that seems to be better than the other stuff"*.

Figure 32. *Craig's Re-Inscription and Description of ADHD*



Emma immediately pairs her ADHD diagnosis with an extreme neurobiological deficit claiming ""*I swear it's like I have dementia, I honestly can't remember anything"*. Emma emphasises her sense of loss of control over the functioning of her brain, with the quotation she included on her collage (see Figure 33 below):

Figure 33. *Emma's Description of the Functioning of Her Brain*



Exploring this theme together, Emma pairs this loss of control with the perceived inevitability of her diagnosis, and that her father "*most definitely has ADHD but he never got diagnosed"* as well as her sister who has "*also had ADHD since she was little*". Emma frames ADHD as a heritable condition, undermining any sense agency or individuality.

While ADHD can be a way to describe difficulties with inattention and forgetfulness, the biomedical engine of discovery makes up a particular kind of person and is enormously influential in the way individuals experience themselves (Hacking, 2007). Understanding the characteristics associated with an ADHD diagnosis in this way gives the participants a biological reason for being different or dysfunctional.

Layla uses music and imagery in profoundly interesting ways to describe her understanding of ADHD. Layla describes ADHD as a feeling inside her head, representing this understanding with three large bees buzzing around a collection of pills (see Figure 34 below) to describe the sensation of constant "*buzzing"* much like having "*bees in her head*". Layla tells me this is a description she borrowed from a song titled 'I've got bees in my head' (Kittydog, 2021) written by the internet persona Kittydog. A talented musician in her own right with a melodic voice, Layla spontaneously sings a few lines from the song:

ABC,123, OMG, I got ADHD

I got ADHD and I wanna fucking kill myself

JK, I don't want to, but I really feel like I need help

I am just a little boy, don't make me take the Adderall

One more second passes, and I feel like my brain's gonna fall

Bees in my head, I got bees in my head

I can't focus, I can't take it, I got sparkles on my face

If another second passes, don't tell me I'm a disgrace

Layla locates her "bees" on her collage within a somewhat futuristic background, filled with images of technology to underscore this constant busyness, likening her brain to the internet which is buzzing with information and ideas. She uses a song from her favourite comedian

Bo Burman and his parody song ‘Welcome to the Internet’ (Burnam, 2021) to reinforce her analogy:

> *Could I interest you in everything?*
>
> *All of the time?*
>
> *A little bit of everything*
>
> *All of the time*
>
> *Apathy's a tragedy*
>
> *And boredom is a crime*
>
> *Anything and everything*
>
> *All of the time*

Figure 34. *Layla's Description of ADHD, "Bees in My Head"*



Riley, pairs her understanding of ADHD with the workings of her brain, personifying it as a restless entity, quite different from the brains of others:

> *I think I have ADD not ADHD as my brain is constantly, like it's constantly fidgeting ja my brain it just works too fast it's like, 'whoa there big fella…wait for me don't leave me behind' …like I think my brain just didn't develop like others [pause] ja, it just functions differently.*

Although genetic and neuro-anatomical links remain weak and unclear, this etiological perspective remains pervasive (Timimi, 2021) and is articulated within participants' stories, understanding ADHD as something firmly rooted in their biology (Te Meerman et al., 2022; Timimi, 2021). Language plays a significant role in the shaping of the subject (Foucault, 1977; Hacking, 1999; Hall, 2000). The participants mirror metaphorical analogies deployed by medical scientists in their construction of categories like ADHD (te Meerman et al., 2022). Alongside Barkley's (2012) notorious 'meat cleaver' metaphor, the participants provide their own rich metaphorical accounts of ADHD as a potent agent that has the capacity to turn their brain into 'jungles', 'tangled balls of wool', 'a TV that is perpetually flicking through the channels', describing their brains as malfunctioning entities which cannot be restrained. Ascribing difficulties to one's faulty biology locates the problem squarely within the individual, obfuscating any contextual factors that may have 'made them that way' (Te Meerman et al., 2022; Timimi, 2005, 2021).

In contrast to of most participants, Sanele's perception of ADHD produces a counternarrative when describing his perception of ADHD (McLean & Syed, 2015). Although Sanele doesn't have an official ADHD diagnosis, he has come to understand himself according to the characteristics of the phenomenon due to his distractibility and

forgetfulness. Sanele writes on his collage (see Figure 35 below) that having ADHD as a "*teen is easy and bomb*[14]". It appears that Sanele has effortlessly assimilated ADHD into his body, describing it as something that feels as natural as "*breathing*" associating it with feelings of "*energy and power*". Sanele resists the master narrative (McLean & Syed, 2015) of ADHD which is often saturated with elements of difficulties, (e.g., a student not achieving according to the norm or fails to master and complete tasks), deviance and dysfunction (Barkley, 2022). Although he mentions some of the characteristics of ADHD he can relate to, Sanele moderates these symptoms, defining them as *"sometimes keeping focus"* and can be *"forgetful at times".* Hacking (1999) describes the process of individuals resisting the knowledge linked to a classification such as ADHD as "negative feedback", making an effort to rid themselves of the characteristics that are ascribed to the category. Sanele reinforces his positioning on his collage, "*just because of ADHD doesn't mean I don't like trivia or chemistry"* and provides a new meaning to the ADHD acronym, redefining it as "*Amazing, Documented, Human Disorder",* subverting the label. For Sanele, ADHD is associated with the unveiling of his 'superpower', he was however the only participant who described ADHD in this particular way.

[14] Something or someone that is very good

Figure 35. *Sanele's Collage About ADHD*



Experiences with ADHD Medication

The DSM-V-TR does not provide any specific guidelines for the treatment of ADHD; however, pharmacotherapy remains the cornerstone of treatment with either stimulant, non-stimulant medications or at times tricyclic antidepressants. Although international treatment guidelines (NICE, 2018) advocate for a multimodal treatment approach (i.e. the combination of medication and psychosocial treatment), psychopharmacotherapy plays a primary role in the treatment of ADHD (Schoeman & De Klerk, 2017). Rojas Navarro and Vrecko (2017), speak about the “pharmaceutical entanglements” between ADHD and the children taking them, indicating that medication can elicit a variety of potential states. Although very few

participants overtly rejected their ADHD medication, their narratives reflect the complex and different ways they experience and perceive the effects of psychopharmaceutical interventions.

Feeling in Control and Heightened Focus

It was evident that the participants' ADHD medication did not only produce the notorious numbed and flat affect, although those states most certainly exist (Rojas Navarro & Vrecko, 2017). Some participants like Jayden valued the medication's ability to make him feel in control. Jayden provides a thought-provoking image on his collage with a symbol of a rat (see Figure 36 below), I was curious as to what it meant in terms of his ADHD diagnosis.

> *So sometimes without my meds I feel like the guy from Ratatouille*[15] *like the guy cooking in the kitchen with the rat on top of his head who is just pulling the strings [gesturing like a puppet master manipulating a puppet] it's like, argh OK I want to do this, but I am actually here now, and I am actually doing these things and then I have to go and I'm doing those things, so I feel a bit out of control of myself, of my life, like of school, everything and the meds, well they help me… have helped me, like it makes the rat on top of my head stay still and quiet and I feel in control [pause] but not all of the time though [laughs].*

[15] Ratatouille is a Disney animated film; Jayden is referring to the scene in the movie where the rat hides under the chef's hat and pulls on the cook's hair like a puppet master to control his movements in an attempt to create culinary masterpieces

Figure 36. *Jayden's Collage Detail Illustrating How the Medication Makes Him Feel in Control*



For Jayden, his ADHD medication has enabled him to change his behaviours and increase his capabilities. He describes the medication as a means to eliminate the consequences of ADHD which makes him feel out of control and manipulated like a marionette, an outcome that Rojas Navarro and Vrecko (2017) define as a positive constraint. Jayden believes that his medication is a conduit to this control and self-management, to stay quiet and still enough to achieve his goals. However, he adds a little caveat "*not all of the time though,"* giving himself a concession for when he uses this increased ability to focus on things that may be a bit more fun and exciting, shifting his sense of agency, reclaiming the role from the puppet master who is pulling the strings.

Lucy reports that when first taking medication, she experienced such a profound difference in her ability to concentrate, it evoked a mixture of relief and fear:

Lucy: Once I finally got the meds, my focus slowly started increasing with every dose increase, it's like I was distracted on what I was supposed to be focused on and then when I snapped back into reality, I realised I was paying attention for the first time in my life, it felt surreal and it kind of scared me because of how well it worked.

LindaM: So, you were afraid of how effective the meds were?

Lucy: I guess…yeah, I think it made me feel scared, cos like it was kinda confirmation that there is something wrong with me…but if it works it works!

For Lucy, the effects of her ADHD medication appear to be a double-edged sword. On one hand, her ability to focus has been augmented, but she understands this as evidence of being biologically flawed. Lucy prefers not to dwell on this fear for too long and moves quickly onto the pragmatics of the medication. Although Lucy feels the medication *"works"* she expresses contradictory sentiments around the experience of her ADHD medication on her collage. Although Lucy speaks about the profound efficacy of the medication, she writes on the collage that *"in the end, not much changes while on meds. sad."*. Ultimately, very little changes for Lucy, any value she gets from increased focus is diminished as she notes on the collage that her improved focus is used *"not always on what I need to focus on",* like binge watching a series on Netflix or constructing a storyline for her anime characters. This sentiment is echoed by (Rojas Navarro & Vrecko, 2017) who argue that stimulant medication can produce a sense of drivenness, describing it as a "strong desire to do something" (p. 7), however as Lucy notes, this drivenness needs to be channelled in the appropriate direction. Lucy included the following meme in her collage (see Figure 37 below):

Figure 37. *Lucy's Meme about Medication in Her Collage*



Lucy uses the meme to satirically point to the act of compliance (by parents and children alike), playfully suggesting that parents administer medication which makes their child more docile and thus more manageable within the school context. Foucault's' (1977) notion of the "docile body" refers to ways in which power structures shape and discipline bodies to conform to societal norms. The use of psychoactive medication thus regulates and controls the behaviour of young people diagnosed with ADHD, aligning them with the expectations of a productive and attentive citizen. Lucy's incorporation of this meme is perhaps a tongue in cheek reference to the power of institutions and adults. She does however add, *"JK*[16] *I love my mom ♡"* perhaps to mitigate her feelings of discomfort when offering her critique of those who have authority over her life. Lucy is acutely aware of the effects of the medication shaping her into a more compliant child, and although she may allude to the loss of control, her understanding of the process is paradoxically agentic (Brockmeier, 2009).

Side Effects of the Medication

The physiological consequences of the participants' ADHD medication were keenly felt and readily expressed visually on their collages and in discussions that followed. Many of the

[16] In adolescent texting, JK is an abbreviation for "just kidding".

participants mentioned various side-effects like headaches, nausea, sleep disturbance and weight loss. When I asked Lucy if she felt there were any disadvantages to taking her ADHD medication she answers:

> *Lucy: What? [laughs] Besides the huge list of side effects? [laughs] I guess they sometimes make me tired during the day and awake at night, sometimes nauseous too.*

Lucy laughs while she is talking about the medication's effect on her energy levels, sleep pattern and appetite, (Deng et al., 2021; Mechler et al., 2022) attempting to make light of these rather grim outcomes. Similarly, Layla comments on the medication's effect on her appetite:

> *Layla: I will literally sit at break like I don't want to eat I have no desire to eat I will eat even if it is a couple of tomatoes and cucumber like just to get something.*

Although many of the initial side effects from his medication had abated, Jayden remembers the physical discomfort and reports having "*such a bad headache I would feel so groggy and everything"*. While the side effects seemed to be transient, Jayden hastens to add the effect he thinks the medication has had on his height:

> *Like, I know I don't come from a family of giants, but I am the smallest in the family, even my little brother is taller than me [laughs], ja so I'm sure cos I have been taking the meds for long it made me short*.

Although the participants spoke about the physical side effects, their stories about how the medication changed their character (Fleishmann & Kaliski, 2017) were imbued with a serious tone, and there were palpable feelings of sadness when they spoke about these changes.

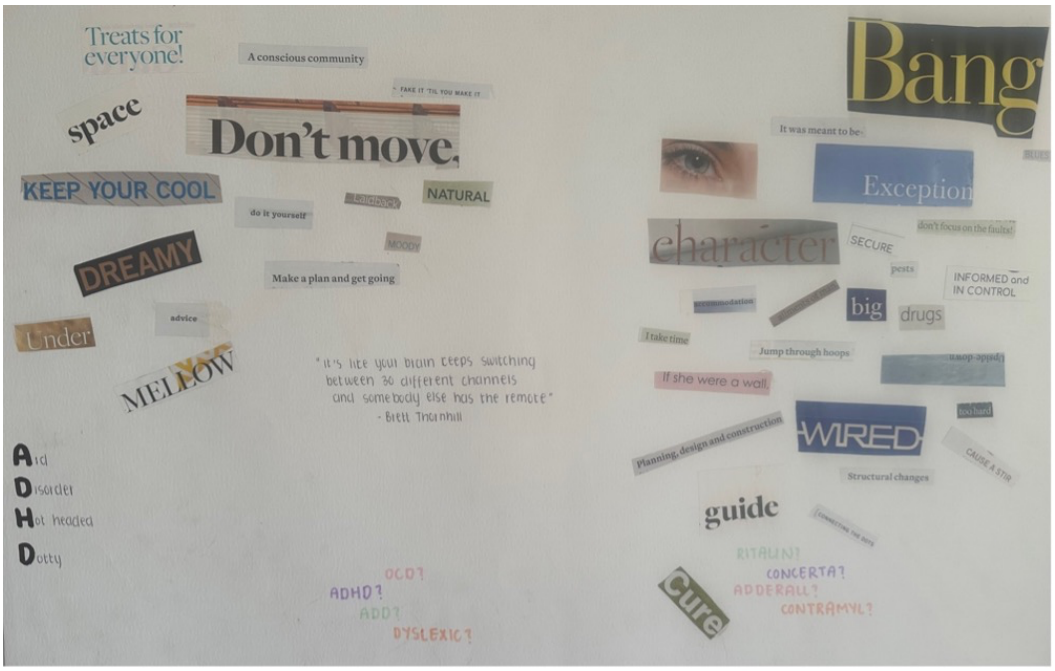
Medication and the Change in Character

Emma remembers the effects of her ADHD medication as having a sudden and powerful effect on her character, which she metaphorically likens to a *"Bang"*. This feeling of distinct change is underscored by Emma's collage (see Figure 38 below) which consists of

fragmentary words, resembling shrapnel from the aftermath of an explosion, or in Emma's case, from "*hitting a wall at high speed"*:

> *Well, I was firstly **slapped** on Ritalin… so yeah it was like there was this **BANG,** cos it definitely **changed my character**, so the medication was a **big change** for me, you know like in the cartoons, when a character is racing toward a wall and then they **hit** it, there's this **bang** and all these **pieces go flying** everywhere, like ja, that was kinda like what it felt like.*

Figure 38. *Emma's Collage About ADHD*



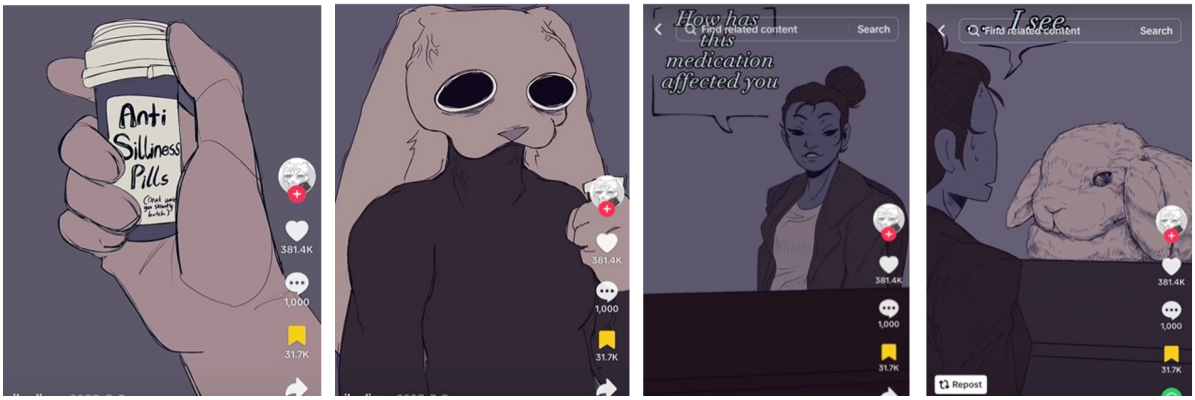
Emma explains her collage, asserting that "*being slapped on Ritalin*" seemed to be paired with a feeling of being caught off guard, and reflects an element of force, lacking a sense of care. Her ADHD *"drugs"* make her feel *"WIRED",* and she believes that they have made "*structural changes*" within her brain. Emma continues to explain the effects of her medication during primary school, "*it made me very, very quiet, my friends, my friends would go play, but then I didn't want to play, I just wanted to sit there and like, ja, it still makes me*

very quiet". After giving it a little more thought, Emma adds, "*like I think the medication, it changes your personality, my friends would literally say to me 'did you take your medicine today?' because there was a complete shift".* Emma summarises the effects of her medication as follows:

> *There are three different parts of being on it – there is part where you feel like you are focused and quiet, and then there's a part of you not on it, you feel like a bit silly, crazy happy whatever, then there's the crash [silence] yeah, that part.*

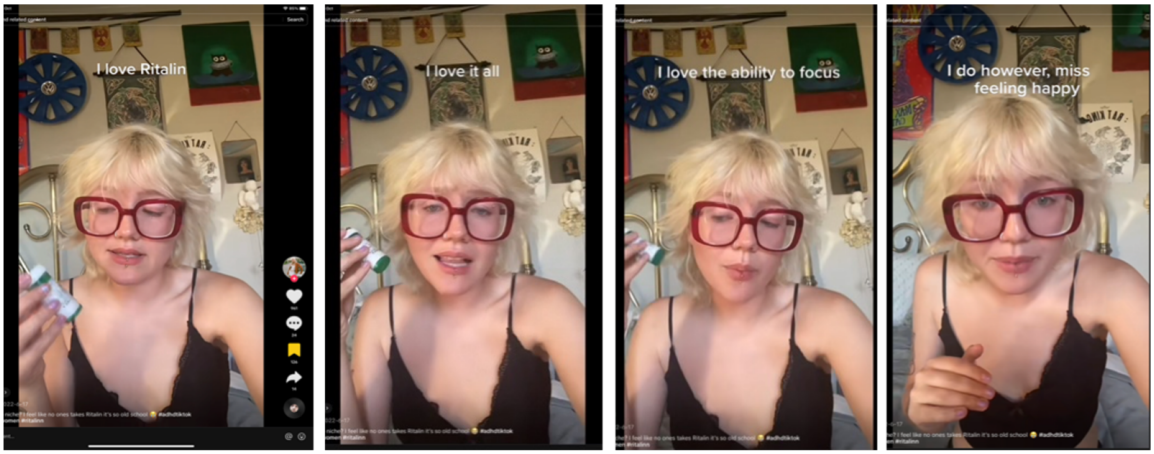
Emma uses the following TikTok (see Figure 39 below) to exemplify some of the changes she feels, visualising her sentiments of medication as "anti-silliness pills", re-charactersing her as something small, demure and docile.

Figure 39. *Emma's TikTok Selection Illustrating How the Medication Makes Her Feel*



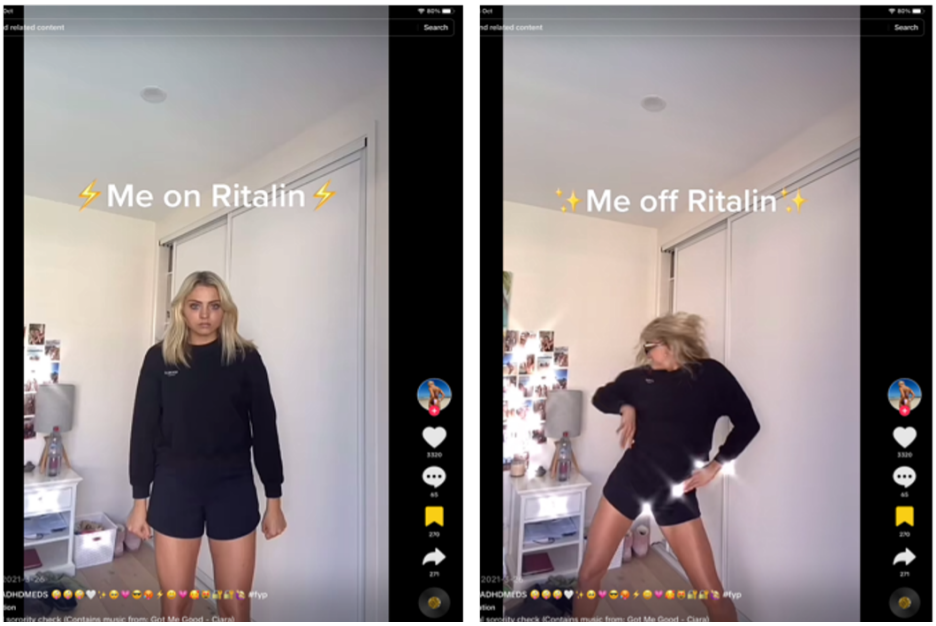
Lucy uses one of her chosen TikToks videos (see Figure 40 below) to demonstrate how she feels about the medication "*this one, it is how my meds make me feel, I also love her glasses, she looks artsy just like me" [laughs].* The clip reinforces her feeling that the ability to focus (and as she previously mentions, sometimes on the wrong things) is pitted against her emotional state and is very much an either/or dynamic.

Figure 40. *Lucy's chosen TikTok to Represent the Effects of Her ADHD Medication*



Sharita takes medication prescribed for her ADHD, "*only, when necessary, like I take it during exams and sometimes during the week when I have a lot of tests and assignments*". I ask her if her friends notice a difference in her if she does not take her ADHD medication, "*oh for sure, I will be all over the show and like fun I think, chatty, like too much, just like extra…you know stuff like that".* To illustrate her point, she tells me this is why she chose the following TikTok (see Figure 41 below) as "*this is how it is for me, like for real*". The young girl in Sharita's chosen video "Me on Ritalin" is expressionless and motionless, yet unmedicated she transforms into someone who is energetic, smiling, and dancing, even the fairy lights in the back seem to glow a little brighter.

Figure 41. *Sharitha's Selected TikTok to Describe the Effects of Her ADHD Medication*



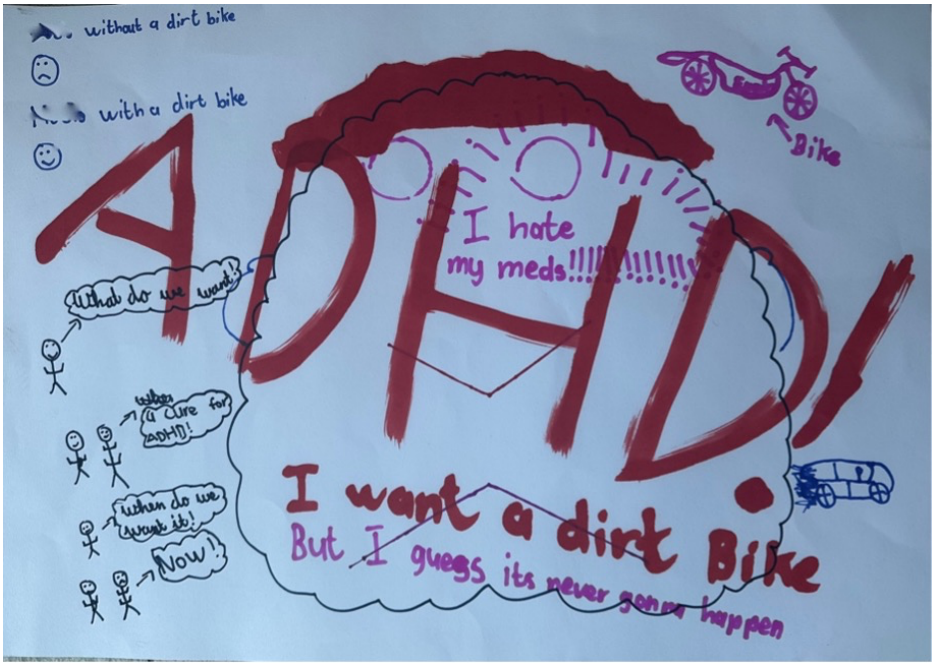
Craig invokes a memory of when he first started his ADHD medication, which seems to have had the opposite effect, harnessing all his "*energy*" and transforming it into "*anger*":

> *The pills, those pills…mmm they made me so angry, I was angry all the time, I would scream, I would swear at my mom, I remember just being in my room, screaming at my mom "fuck you!" and then she hit me on my knuckles with a wooden spoon, so they split open um, yeah, so they made me angry.*

Rose (1999) points out that the act of taking medication is not simply a relationship of cause and effect, triggering a novel ability within the individual or the disintegration of the former self. Stimulant medication operates according to potentiality, yielding a variety of outcomes. When bodily and mental sensations produced by the medication are perceived as purposeful, it thus makes sense as to why the medication needs to be taken. It is quite possible that Craig could not reconcile the purpose for being medicated in the first place, rendering the changes he felt in his body as disruptive and threatening (Rojas Navarro & Vrecko, 2017).

Mphilo was by far the most vocal participant when it came to his ADHD medication. Constructing his collage, Mphilo selected the thickest red marker, inscribing "*ADHD!*" across the entire width of the cardboard (see Figure 42 below). In the middle of the poster, Mphilo writes "*I hate my meds!!!!!!!!!!!!*" making it very clear that he is taking them under complete duress.

Figure 42. *Mphilo's Collage About ADHD*



Mphilo tells me how he is "*forced to take them*" to the point that his mother checks his mouth after she has given them to him in the morning, demonstrating this process to me with an open mouth, saying "*aaah*" much like a doctor inspects one's throat and tonsils. Mphilo describes his medication as having a catastrophic effect on his sense of self and behaviour. If it were up to him, he would stop taking them. Mphilo believes that his medication has changed him to the extent where he does not recognise himself. This corresponds to Rojas Navarro and Vrecko's (2017) findings that when medication changes the previous version of the individual so profoundly that they feel unrecognisable, the medication it is considered a

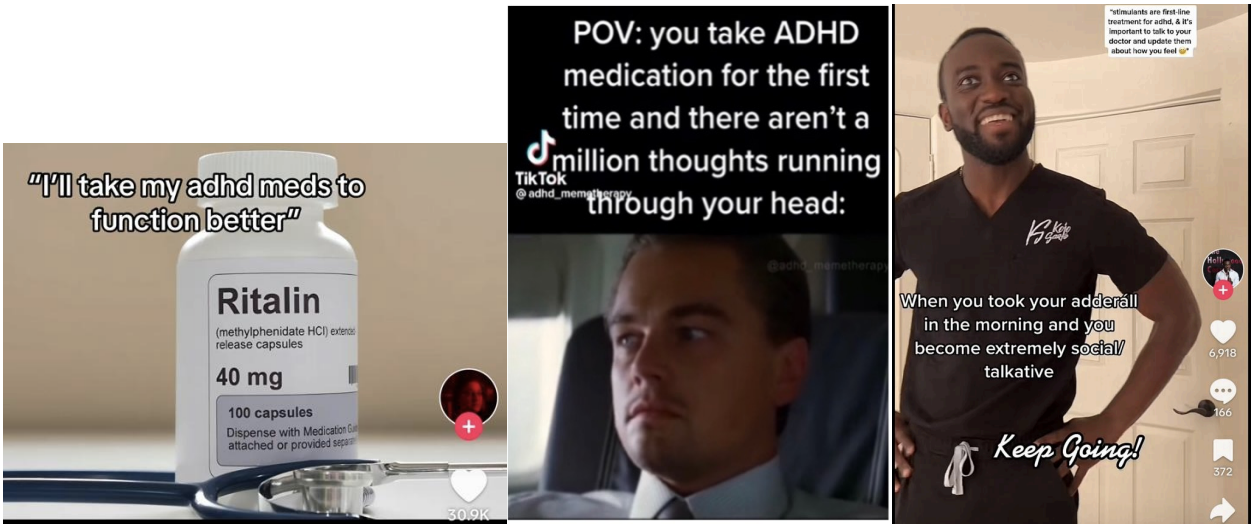
threat, due to its potentiality to modify the child so significantly that previous characteristics are unrecognisable.

> *Mphilo: The medication just makes me feel like I am different it just makes me feel like I am a part like …like I'm not myself you know, like I feel different on them, it's not me.*
>
> *LindaM: Can you tell me about this difference?*
>
> *Mphilo: Like I now get into trouble a lot, I mean, it makes me do bad things, here [pointing to his collage], I crashed my mom's car, umm…into a streetlight…my parents don't know it was a streetlight, I told them it was a gate, ja so like ja, it all happened in the moment I saw the car keys and the gate remote, I and put one and one together.*
>
> *LindaM: So, you think you wouldn't have done that had you not been on the ADHD meds?*
>
> *Mphilo: I don't think so…[Silence] no, no I really don't think so.*

Navigating the complexities of who he is and how he fits into the world, Mphilo is at a crucial turning point in his life, or what Erikson (1968) refers to as the adolescent identity crisis. As part of his self-discovery process, Mphilo's risky and spontaneous behaviour provokes a sense of loss, uncertainty and doubt, which he reconciles as the effect of his ADHD medication. Mphilo feels that his unhappiness about his medication is ignored by his parents: "*They say I have to take those meds as they say it helps me concentrate on my schoolwork, but it doesn't*". While his parents believe they may be providing him with some kind of benefit in the classroom, Mphilo's protests about their inefficacy seem to go unrecognised. Mphilo reinforces his reluctance in taking the medication in his selection of TikTok videos (see Figure 43 below), three of which were about the effects of ADHD medication. The overall theme was some kind of positive benefit of the medication

experienced by creators of the clips, however, above his selection, Mphilo captions all three as "*these are all nonsense*".

Figure 43. *Mphilo's Selection of Three Different TikToks Which He Considers to be "All Nonsense"*



Iatrogenic Effects of Medication and Polypharmacy

The worsening of symptoms once ADHD medication starts wearing off is known as the 'rebound effect' (Timimi, 2010; 2021). Layla describes how she tries to reduce the effect of the crash by eating. "*The comedown is so much worse if you don't eat, the come down is really bad especially on Ritalin not so much Concerta though*". Similarly, Emma explains the physiological symptoms she experiences associated with the rebound effect:

> *Ja, my eyes get sore, when I close my eyes it's like a disco, so ja, some days it's really bad like you can't take any drugs to fix it it's so bad… so that's why my psychiatrist put me on anti-depressants… the come down is a lot better with them, ja like definitely better.*

These adverse symptoms are often interpreted as the worsening of the disorder, precipitating increased dosages of current medication and/or further prescription of additional medication (Timimi, 2005, 2021).

While compiling his ADHD poster (see Figure 44 below), Craig expresses his frustration with his inability to access his creativity "*I so want to show you my art skills, I can really draw I promise you, but these pills make me feel so uncreative, all I can think of drawing is stick figures and pills*". The image of pills seems to take up considerable space on Craig's poster, which he coloured with a giant red marker with much enthusiasm. Craig views his ADHD diagnosis as the catalyst for his anxiety and depression for which he is also medicated.

LindaM: Do you know what you are on now?

Craig: I think it will be easier if I just bring you my pill box.

[Craig returns with an oversized shoebox; he lifts the lid and reveals the contents].

Craig: [Unpacking the contents of his medicine box Craig lists his medication and their purposes] This is my ADHD medication, but they make me anxious so then these are for my anxiety, these…um I think they are my mood pills like to even my mood, yeah stabilisers these are helping, it does suppress my emotions though so it's very hard for me to cry and release tension when I need to cos I do that by crying, so it sort of builds up and builds up and builds up [silence] its really overwhelming, but it does stabilise me for the mood part and makes me more functional. These are my anti-depressants, my happy pills and I think these little guys are for when I can't sleep so yeah, that's it really.

LindaM: Craig, do you remember what medication came first?

Craig: Oh Yeah, my ADHD medication, those guys came first, I went on Ritalin and then Concerta, but now I am on Vyvanse, yeah…so…yeah, man, this is a big box!

Figure 44. *Craig's Collage About ADHD*



There is a rising concern with psychotropic polypharmacy and the shift in child psychiatry toward prescription medication. Craig's veritable cocktail of medicine seemed to start with psychostimulants, followed shortly by anxiolytics to combat the iatrogenic effect of the psychostimulants (Brady, 2014; Timimi, 2005, 2021). Craig's incredible familiarity with his medication regime and his extensive pharmaceutical knowledge at the age of 16 was simultaneously impressive and heart-breaking.

Perceptions of Long-term use of ADHD medication

The redefinition of ADHD as a lifetime disorder has both expanded and extended the market for psychopharmaceuticals (Timimi, 2021). Emma envisions that psychostimulants will probably accompany her into her adult life:

> *Well, if there wasn't work and stuff, and the need to focus, but ja then, if it was a perfect world where like things actually were to happen, I actually had to work then I*

would think I would need to be on Ritalin, I can still be happy on it, especially if I am on my anti-depressants but then like ja, just to be focused otherwise I don't think I would ever get anything done.

Similarly, Lucy believes that she would be incapable of participating in society and accomplishing regular activities that are performed by 'normal' individuals without her medication: *"I never really thought how long I need to take the meds for… but …if it's what it takes to get me to be a normal, functional member of society then I suppose I will".*
Lucy and Emma feel that they would probably need to continue to take their ADHD medication in order to remain productive citizens. Foucault (1977) refers to this dynamic as "normalisation", ensuring that they will act in accord with the social order and also experiencing themselves as endorsing it. Furthermore, relying on medication thwarts the opportunity for young people to build a repertoire of skills and practices that may help them talk about their experiences in a way that builds their own knowledge, and may sustain an attitude of a 'pill for life's problems' (Boyle & Johnstone, 2020; Timimi, 2005, 2010, 2021).

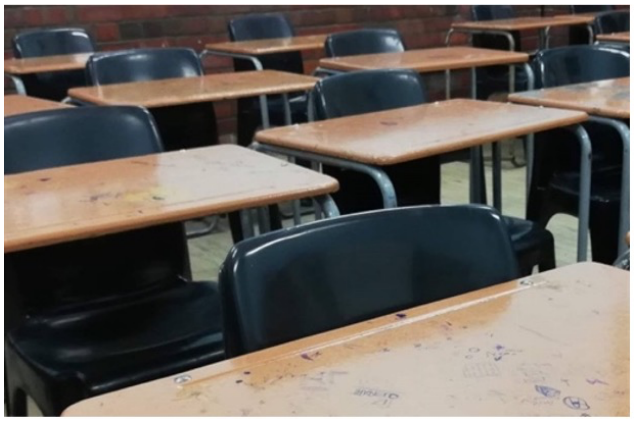
Experiences within the Institution of School

According to the DSM-V-TR (APA, 2022), poor school performance and diminished academic achievement is a common occurrence among children and adolescents with ADHD. Most of the participants reported that they experienced difficulties in school, which ranged from academic and social challenges to the inability to apply themselves to school tasks that required sustained effort. Within the structural institution of school, children are positioned as autonomous agents, personally accountable for their success or failure.

School and Anxieties Around Failure and Performance

When I asked Lucy what she felt the greatest source of stress in her life was, she pointed to the photographic image (see Figure 45 below) in her collection containing rows of school desks: *"School! I'm holding on for dear life trying not to give up and fully accept that I'm a failure and will never graduate and will fail at life! It's pretty scary!"*

Figure 45. *Lucy's Photograph Depicting School as Her Biggest Source of Stress*



Lucy is acutely aware that she is trying to hold onto a more optimistic outlook as if her life depended upon it, rather than acquiescing to a rather bleak realization that failure at school will have a catastrophic domino effect on her entire life. Visualising her biggest fear as a barren classroom, filled with empty desks and chairs provides a vivid representation that while school holds the promise of achievement, it is simultaneously a place that is filled with despair and little hope of accomplishing anything meaningful (Berlant, 2011). Adolescence marks the development of key cognitive structures which allow for elaboration of future possibilities (Inhelder & Piaget, 1958), allowing Lucy to consider multiple variables at the same time. Imagining the worst possible outcome perhaps cushions her mind, against the uncertainty and precarity of her future.

Similarly, school and academic achievement is a source of considerable anxiety for Riley as she tells me about the strain of living up to the expectations of her parents who are both highly accomplished academics:

> *The biggest pressure in my life is my parents, ja just like having to do well and stuff like that, um, they put a lot of pressure on me to do well but I also put pressure on myself…like also they are very smart people and so like…mmm…they never battled in school.*

Parental disappointment with children who are not living up to expectations of control and perfection, can be disabling. The fatigue that Riley feels in keeping up with these expectations is reflected in the lyrics of a song she included in her ADHD collage, "Always Tired" (Weathers, 2019):

> *I'm always tired, it's just a habit, oh*
>
> *I'm always tired, I just can't fight it*
>
> *I'm always picking up my body, oh*
>
> *Down with the fever, and I'm drowning, yeah*

Contemporary society is characterised by increasing levels of growth and success in all arenas of life with expectations of individual achievement raised to significant levels (Steare et al., 2023). Riley uses her parents' academic achievements and effortless performance in school as a barometer of her current functioning and possible achievements, anxious that she may not be able to achieve the same educational heights.

Jayden selected this photograph to represent the challenges he faces just being himself which includes the theme of schooling and performance and what how his current functioning may be a determinant of his future (see Figure 46 below):

Figure 46. *Jayden's Photograph Illustrating "What Makes it Hard to be Me"*



Jayden's chosen image underscores the difficulties he encounters when trying to stay focused while studying, characterising a bored, disengaged learner doing battle with Life Sciences:

> *I chose this photo cos I was studying something about farms, and farms led to cows and cows led to milk, and milk led to cheese, and I was listing all the different cheese…my mind drifts into things that are naturally more interesting to me.*

Jayden expands on this, imagining what it might mean should these difficulties persist:

> *This is a problem for me, it's pressure, especially for later, I really want to be a doctor like my dad, and I know I have to get good marks for it, but it's hard and I worry I won't make it.*

Although Jayden demonstrates a creative and divergent thought process, these qualities are rarely encouraged within an academic context (Béliard et al., 2019) and are considered distractors from success. His family's access to economic, social, cultural capital has granted Jayden entry into a private school system, however, Jayden fears that his academic struggles

may impede his ability to convert this capital, (Bourdieu & Wacquant, 1992) which is a conduit to a prosperous career path, maintaining his position in a stratified society.

During his school's evangelical campaign against illicit drug use during a life orientation lesson, Craig and his friend were quick to recognise the irony of the sentiments expressed in the educational video about drugs and their observations of their peers within the school context:

> *Craig: Like we were watching the movie in LO about drugs, and their effects and stuff, ja me and my friend, it's so bad, like we were laughing, like we were watching this movie about drugs and probably half the class was on drugs, like not coke or anything [laughs], you know drugs for studying, anxiety and pressure and stuff*
>
> *LindaM: What do you think causes the anxiety?*
>
> *Craig: Oh man…school, like you have to perform, like that's why it was so funny, ja we were just laughing, like they flow during exams, just to keep up with the pressure.*

As Steare et al. (2023) observe, academic pressure, demands of success and growth and distinction have serious implications for young people, as they are considered as some of the greatest antecedents of mental health conditions like anxiety and depression. Craig makes an astute observation that a good majority of his classmates are not able to keep up with the pressures and demands of school. These 'variations' are then corrected with certain technologies like medication to achieve a state of 'wisdom' and 'perfection' (Foucault, 1976).

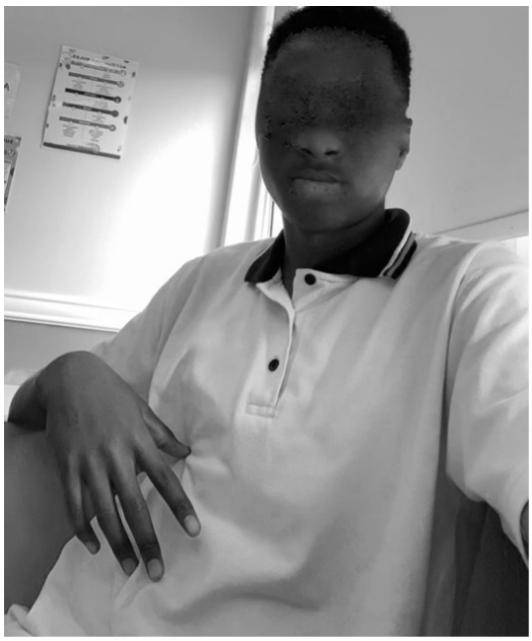
Sanele and Sharitha were the only two participants who did not report any academic difficulties, both were achieving exceptional marks, however the pressure to maintain this level of achievement was keenly felt.

When I asked Sanele what the greatest source of stress was for him he replies:

> *Yoh school, there is lot of pressure to do well, like I work really hard so I can please my parents and my teachers, but it can be really hard cos there is a lot of pressure, like it doesn't stop.*

Sanele offers this photograph of himself within the school environment, captioning it as *"who I am at school".* (see Figure 47). This was the only image among all of Sanele's 15 photographs that was in black and white, the lack of colour making it emotionally intense and compelling. The monotone of his photograph is poignantly meaningful, emphasising the gravity of his academic performance. Using Bourdieu and Wacquant's (1992) analogy of the game, Sanele has come to understand the rules of the game, and that consistent exceptional performance will secure the approval of his teachers and his parents. However, there is a distinct absence of any recognition that he may stand to benefit in any other way. While this level of functioning may allow him to successfully navigate the requirements of school, it appears that little room is left for any other attributes that would make for a more colourful existence.

Figure 47. *Sanele, "This is Who I Am at School"*



Sharita who was diagnosed with ADHD in Grade 8, has internalised her parents' aspirations around remarkable school performance which is embodied by her anxiety she experiences during school award ceremonies:

> *Even from when I was little, prize giving was really stressful for me, like in Grade 4 or maybe 5, I can't remember, but when my dad walked into the hall and all the trophies were on the table he said "I hope most of those are for you", like I know he was probably joking but that kind of stuck with me and so school is a big stress for me, it's lots of pressure, so like when I see the trophy table at prize giving…my, my stomach kind of pains.*

Figure 48. *Sharitha, "My Biggest Pressure in Life"*



Sharitha's photograph of a table (see Figure 48 above) groaning under the weight of shiny trophies is symbolic. Especially within the context of school, trophies are positioned as coveted objects, used to recognise and celebrate success, and are enduring symbols of honour and prestige. The evening of her primary school prize giving, Sharita understood that her value was attached to her academic performance. While she diffuses the significance of her father's utterances as *"probably joking"*, Sharitha recognised that she not only needed to achieve, but her achievement needed to be beyond the norm, characterised by the number of trophies engraved with her name. As Timimi (2021) observes, maintaining this ultimate "top

dog" status is paired with the fear of failure. For Sharitha, the prospect of failure is untenable and produces an unpleasant somatic response to the knowledge of what it might take to consistently live up to these extraordinary expectations.

Pressures experienced within the context of school are not only keenly felt within the confines of the classroom but seep into places like the school sports field. Mphilo uses a photograph of schoolboy rugby (see Figure 49 below) to explain how sport has evolved into one of his biggest stressors:

> *Rugby, yoh it is my biggest stress, it takes a lot of time, like for practices and such, like every day and weekends, like there is not a lot of spare time, to be honest I love the game, but it brings me stress, like there's a lot of pressure.*

Figure 49. *Mphilo's Photograph, "Rugby is My Biggest Stress"*



When I enquire as to what this pressure might be, Mphilo tells me about his struggles with his academics, "*ja like there isn't a lot of time for schoolwork, but also you see I can't focus in class and like I have been failing all the terms".* Although this kind of academic under-performance may have been flagged by the school to be investigated or perhaps even

punished, Mphilo's teachers seem to make allowances for his distractedness in class, to the point where he tells me one of his teachers refers to him as *"her little fairy".* When I asked him to clarify this rather bizarre term of 'endearment' for a tall, muscular young man, Mphilo explains, *"it's because she says I am always somewhere else in my head and never really in class".* He poignantly adds, "*mmm to be honest if I wasn't such a good rugby player they would have probably kicked me out".* Mphilo is acutely aware that his academic troubles are conveniently overlooked by the school due to his talent on the rugby field. Mphilo's sporting prowess mirrors the racialised dynamics inherent in schools worldwide, where male black learners are valued primarily for their physical (i.e. sporting) abilities, ignoring their academic and intellectual potential (Carey, 2021). His teacher's acknowledgement of his inability to focus (to the point where he is failing) with a rather crass appellation, seems to reinforce the stereotype that black boys are good at sport rather than subjects like maths, underscores his academic insignificance and invisibility. This binds Mphilos self-concept to a sense of 'partial mattering', reinforcing the notion that his primary value lies in his athletic ability rather than his intellectual potential, valued only as a means to serve the school's goals (Carey, 2021).

Navigating the School Environment Without a Sense of Belonging

Riley provides the following image (see Figure 50 below) as a metaphorical representation of how she feels about her location in the school environment:

Figure 50. *Riley's Photograph, "School for Me is Like This Impala Lily"*



> *You see for me, school is like me being this Impala Lily, like it's something like in nature that has had to adapt to this like harsh environment, like it's a small slow growing plant, like they don't grow big, and they don't grow pretty, but it tries to fit the conditions where it grows. When it blooms well it doesn't really bloom a lot it opens for a week and then closes again, like I guess that's the best way I can describe school to be honest.*

Riley uses this beautiful analogy to describe how she views school as a place where she has to modify herself to survive hostile conditions. The Impala Lily is believed to have made some well-designed adaptations to the harsh arid environment in which it grows, producing no leaves nor flowers for most of the year. Like Riley, when the plant transcends the constrictions of its environment, it blooms, producing a beautiful, temporary splash of colour, adding a touch of enchantment to an otherwise barren landscape.

Similarly, Craig describes school as a place that he feels he does not belong and recalls how his disruptive behaviour in the classroom was a catalyst for his ADHD diagnosis:

> *Ja, I was **very** [spoken with emphasis] disruptive in school, I would finish my work really quickly and then I would go to other kids and knock their stuff off their*

> *desk…or I would just hide under my desk and make weird animal noises, ca-caw, ca-caw [laughing]. My teacher would be like "Can you come out now please?" and I would be like, "No I am safe here"... so ja my teachers caught onto it, and they were like… "Yeah this one"…[wagging his finger in the air] so my mom took me off to the doctors.*

Craig's reference to himself as a crow squawking from under the desk expresses a devalued subject position of being 'different', indeed so different he considers himself sub-human, like and animal in an environment that feels unsafe and alien. Findings from Grønneberg and colleagues (2023) report that self-esteem is often tied to the status of the group to which one belongs. Craig, like other children diagnosed with ADHD in Grønneberg and colleagues' (2023) study, express a devalued subject position, feeling like his behaviour didn't belong in the school system, unlike his 'more human' counterparts. Hiding under the desk and making squawking noises 'pollutes' the orderliness and disrupts the normative standards and the rational order of a stable classroom (Douglas, 1996). Although Craig's behaviour can be seen as an attempt to create agency in the power relations between him and his teacher, he is marked as subordinate, immature and unable to control his body. Accordingly, developmental psychology positions him as not having met his developmental milestones considered appropriate for his age (Burman, 2008). This behaviour triggers the scrutiny of the teacher and the interventions of countless therapists and psychiatrists (Hjörne & Säljö, 2019). Unable to fit into the school environment, Craig explains how he had to move school several times, describing the process as, "*my teachers kicking me to the curb, cos like there is something wrong with me and I can't be like other kids*". Craig's self-defining memory of moving schools is vivid and affectively intense. He captures this process on his poster with an image of a deflated soccer ball "*me*" left next to a trashcan embellished with the words "BAD, LOW-GRADE, BANISH, Trash" (see Figure 51 below).

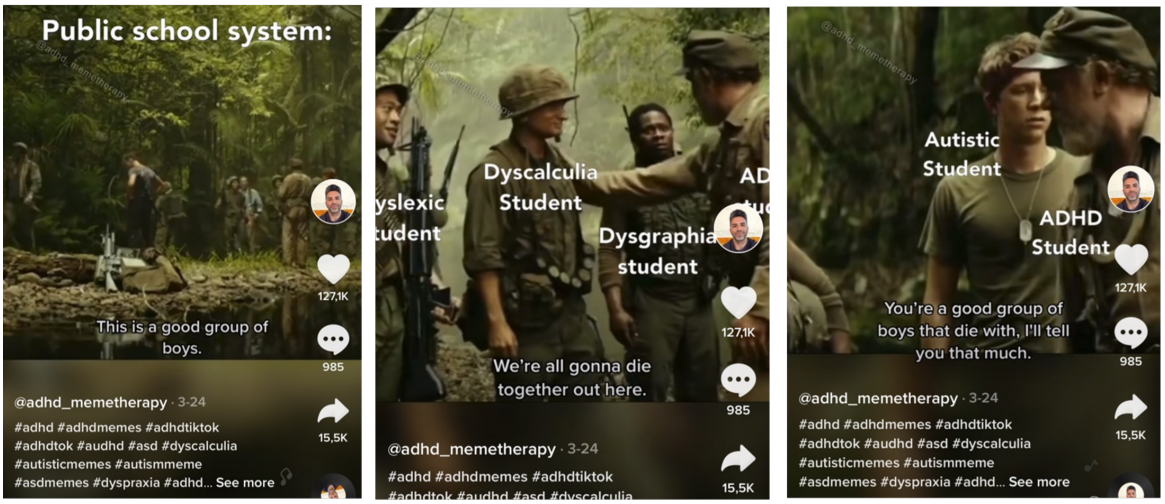
Figure 51. *Craig's Detail on His Collage Illustrating His Feeling of Not Fitting in Or Belonging*



As Bourdieu (1990) notes, successful relations in the field of school are intimately tied to how an individual acquires a disposition that shapes their habitus according to the structures and values of the field. Craig's expression of diminished personal value, demonstrates how his experiences of the relational aspects with his teachers and being markedly different to his peers contributes to feelings of isolation, reinforcing school as a place to which he does not belong (Yuval-Davis, 2006).

The following TikTok clip (see Figure 52 below) was selected by Lucy as it resonated with her experience of ADHD within the schooling system:

Figure 52. *Lucy's Chosen TikTok to Represent Her Experience at School*



Although Lucy is privileged and attends a private school, this video underscores the mismatch of needs she believes neurodivergent learners (i.e. those diagnosed with dyslexia, dyscalculia, dysgraphia, autism and ADHD) experience within the academic environment. The clip is taken from the blockbuster film, *Kong: The Lost Skull*. The movie features a storyline about soldiers and scientists venturing onto an island where humanity is not welcomed. This theme resonates with Lucy's experience of navigating an environment which feels hostile and one within which she must fight for survival and execute an escape.

Within the school system, when one's habitus feels comfortable and at ease within the field, young people feel like a fish in water, able to take their surroundings for granted, moving with ease without having to really consider how to swim (Bourdieu & Wacquant, 1992). Riley, Craig and Lucy's stories about fitting into their school environment are infused with feelings of being weighted down, instead of swimming effortlessly, school is a place where they flounder, experiencing it has a place that is unreceptive to their needs. For some, their bodies felt like they were in conflict with the environment, especially when the structure

and the expectations of the classroom space felt misaligned with their physical, emotional and cognitive needs.

When I asked Lucy if she had any suggestions as to whether there was anything that school could do differently to make it a less stressful environment and experience, she replied:

> *How they accommodate for **neurodivergent** kids, not all of us can be neurotypical and just do the schoolwork normally. I need a **dumbed-down** [spoken with emphasis] version of the work for me to be able to understand what it is I need to do. It may be easier cos teachers would take the time to **dumb-down** the answers in a way that I could understand cos sometimes they are way too technical… I would rather **dumb it down** [spoken with emphasis] so I can remember the total definition of it.*

Referring to herself as being neurodivergent, Lucy uses a common counter-narrative (Singer, 2016) that has emerged around ADHD and autism diagnoses (Timimi, 2021). Although Lucy uses the neurodiversity label as a badge of differentiation, labelling still sorts people into categories, those who are more or less usable, more or less desirable and ultimately those who are more or less human (Cromby & Johnstone, 2024; Timimi, 2021). Lucy's repetitive request to *"dumb down"* the academic content to make it less intellectually demanding, indicates that her need for a more simplified version of the content may have gone unnoticed. Each time Lucy referred to the dumbing down process, her speech slowed considerably, emphasising the importance of this process, ensuring I understood how imperative this was for her. Instead of school being a place where she acquires knowledge and develops her potential, Lucy locates it as a site that overlooks her needs and makes her feel inadequate, with little expectation of nurturing her potential. Furthermore, it appears that Lucy has

accepted that she is ‘neurodivergent’, but this means that she is not only different, but it also means that she is ‘dumber’.

Relationships with Teachers

Teachers make a remarkable and long-lasting impression on learners and can provide so much more than education; they can motivate, guide, and inspire young people, on the other hand, teachers can also do quite the opposite. Although ADHD is a medical diagnosis, conferred outside the boundary of school, the diagnosis seems to have an undeniable effect within the classroom (Hennig et al., 2023). Emma comments on how teachers’ perceptions of young people who struggle academically, can lead to a self-fulfilling prophecy of underperformance:

> *Like even when you go to school and say you are not smart, even if you don’t have ADD whatever, your teachers will mark you on what they think you are, if they think you smart, you will get better marks.*

Although schools advocate for diagnoses like ADHD which may be well intentioned to ‘address and nurture’ learners’ academic needs, Emma reveals how young people who are considered *“not smart”* by their teachers are unlike children who are thriving academically and thus treated differently, leading to self-fulfilling prophecies grounded in teachers’ pessimistic expectations (Hennig et al., 2023; Rosenthal & Jacobson, 1968).

Bonolo speaks about her frustration with teachers’ perceptions and the feeling of being treated differently:

> *I think smart students, like they have it easier with teachers, like if they don’t do their homework or get a bad mark from a test or something, teachers be like, “Oh, shame you having a bad day, shhh…shhh…don’t worry, next time”. But like for the kids who*

> *struggle in school, you don't get the same kind of treatment, like they treat you differently and it can be harsh sometimes.*

I asked Bonolo what this harsh treatment looks like in the classroom:

> *Well, they put you in the back of the class, like they don't care, I mean not all my teachers are like this, but maths and science, yoh, they see I struggle and ja, like, I think they don't have to deal with you in the back of the class.*

Teachers' judgments and 'unofficial segregation strategies' may play a pivotal role in the reproduction and maintenance of social inequalities. Hall's (1996) concept of reading bodies like books offers a lense to understand how teachers may unconsciously interpret and classify learners based on visible or perceived traits. Her teacher's judgements shape Bonolo's classroom experiences in ways that subtly reinforce stereotypes, particularly in maths and science where girls are often viewed as less capable.

Lucy comments on how some of her teachers make her feel when they exchange looks while exams or test results are being handed out:

> *Like they look at you and you can see they just feel very sorry for you, like they can be very patronising, oh… you got 10% for your math tests… and then they give you a nose boop*[17]*… like we are rabid animals or something*.

Just as Craig refers to himself as sub-human, "making animal noises" and squawking like a crow from under his desk, Lucy suggests that she too occupies a devalued subject position in the classroom, feeling sub-human. Lucy's description of being treated like a "rabid animal" appears both in the context of school and during her interaction with her doctor at the time of her ADHD diagnosis. Not only does she feel like she is treated like an animal who has little

[17] The urban dictionary (2019) defines a nose boop as "affectionately poking someone on the nose, often accompanied by saying 'Boop!'"

or no place of value or voice within these particular institutions, she refers to herself as an animal infected with rabies, a word derived from the Latin word “rabere”, which means to “be mad”. Lucy and Craigs narratives align with the results from both Ringer (2020) and other studies (Grønneberg et al., 2023), where social structures like school are instrumental in the production of meanings and experiences; viewing themselves as outsiders, not fitting in due to their behaviour or functioning.

Even when academic performance surpasses teachers’ expectations, for some participants like Emma, it was coupled with unnecessary derogatory remarks and insinuations:

> *Like I am doing much better at school now, but like when say I am getting 40s and then suddenly, I get 70 in a test, the teachers have comments you know, like, “What happened to you?” or “It’s going to snow”. Like I had one teacher who almost made out I cheated, like it was so bad, like she didn’t say it exactly, but I got where she was going.*

As ADHD is considered a state lasting well into adulthood, this status is often considered to be permanent (Liebenberg & Schoeman, 2017), providing ‘legitimate proof’ that academic performance will remain compromised and any functioning to the contrary must either be a fluke or gained by dishonest means.

Mphilo tested his suspicions that his teacher marked his work according to her perceptions of his inability to produce work worthy of an “A” student:

> *Teachers, they are unfair, like they won’t admit it but I have tried it so like for this project this one time I copied this girl’s work, like she was a grade ahead of me and smart and always got in the 90s, so I copy her project like word for word, I just get a*

> *50 and she got a 90, like exact same thing like word for word [laughs] like maybe that's a bad example, even if I did the work myself or why would you give me a different mark, cos we both did what she wanted but ja its cos they have this perception. Ja, it's like let me just do this project and try for 50 cos, ja cos like that's all I can get.*

Mphilo's ADHD diagnosis could be considered as an example of Hacking's (1999) "looping effect", which explains how the attitudes of Mphilo's teacher are modified due to his diagnosis and characteristics of the disorder, reinscribing him within the diagnostic category. However, Mphilo knows that he is capable of achieving so much more, and confirming his teacher's prejudices does little to motivate him to do more than the bare minimum to pass, resolving never to feel that level of humiliation again. Phoenix (2024) argues that there is "ample longstanding evidence that educational attainment at all levels in many countries is patterned by differences of race, social class and gender" (p. 86). While Mphilo may have the financial capital to access a private school education in South Africa, however, as a black boy with an ADHD diagnosis, his teacher may not believe that he possesses the 'right' kind of capital she would consider as markers of success, which may have a direct bearing on how she perceives his abilities (Bourdieu & Passeron, 1990).

Conclusion

When describing how they understand ADHD, half of the participants made mention of the neurobiological underpinnings of ADHD with each one connecting the (mal)functioning of their brains with the phenomenon. Narratives around medication were complex and varied, with some reporting an increased sense of control and improved concentration. However, the extent of the side effects cannot go unrecognised. The most notable effects of the medication were on the participants' characters, making them feel subdued, reinforcing their sentiments and frustrations with a selection of TikTok videos.

Others reported a drastic change in personality, producing effects that appeared to be in conflict with the way they perceived themselves. Some narratives included references to their medication in a pejorative sense, calling them ‘drugs’ and their withdrawal effects as ‘comedowns’ placing them in the same category as illicit substances.

Social structures like school are instrumental in the production of meanings and experiences. The majority of participants mentioned school as a place that provoked considerable anxiety, either due to academic underachievement or maintaining extraordinarily high academic standards. The context of school and deviations from prescribed parameters of academic performance (i.e. either being on the precipice of failing or underachieving) and classroom behaviour seemed to be the prime initiator of an ADHD diagnosis. As a continuation of the sense of mismatch which surfaced within the PINs presented in chapter six, for most participants school seemed to be an environment where they felt they did not belong (Yuval-Davis, 2006), had to modify themselves to fit, and was a place that felt hostile where one had to fight to survival. Measuring up to the norms of academic performance and submitting to the demands of the school is considered to be ‘healthy’ and ‘good’, and any indication that one may be falling short is deemed confirmation of being ‘deficient’, ‘delinquent’, ‘alien’ or that their behaviour was a ‘pollutant’ in the normative order of the classroom. Schools are structured to align with neoliberal values, prioritising conformity, uniformity and efficiency over diversity, inclusivity and creativity, producing individuals who fit seamlessly into a competitive market driven society. Just like society creates a solution to eliminate pollutants (Douglas, 1996), those who don’t align with these rigid demands are penalised and marginalised. Craig’s powerful portrayal of himself as a deflated soccer ball left near a trash can awaiting its removal is a vivid rendering of this process. As McAdams (2001) notes, from as early as two years old, young people develop

ideas about themselves in relation to the way other people respond to them, which may be based on looks or performance traits. The significance of this is underscored in how the participants felt their teachers viewed and treated them, with some narratives containing references to them feeling ‘subnormal’ or even ‘subhuman’ as a result of these encounters. The master narrative of ADHD often frames children and adolescents as lacking the ability to participate in meaningful engagement. However, these young people’s stories and illustrations are rich, articulate, creative and expressive, demonstrating their exceptional abilities to convey complex information, unique perspectives and imaginative ideas. The next thematic chapter focuses on experiences within the virtual realm, another key socialising structure for adolescents.

Chapter 8 – The Online World

In this chapter, the final thematic analysis across the data set moves beyond the social institutions of medicine and school to explore experiences, perceptions and identity construction in the virtual world. Living in a digital society marked by unfettered access to the internet, the prolific use of smartphones which facilitates connection to social media platforms and their associated affordances, influences adolescents in multiple new ways. The virtual world has become a key structural institution for many adolescents, providing a dynamic environment for socialisation, learning and identity formation. Unlike traditional institutions like school and family, the virtual world provides unprecedented access to information and unrestrained connection with others. The chapter explores the unique challenges and opportunities provided by the online world and the effects these virtual engagements may have with respect to the development and construction of identity. The following key themes are presented: 1) Navigating the risks of an online world, 2) TikTok as a subtle kind of activism, and 3) The possibilities and potentials of an online world.

Navigating the risks of an online world

In all the participants' body maps, references to social media and platforms with which they interact were all contained within the outlines of their body, signifying how these platforms have been internalised, embedded as a 'natural' part of them. The majority of participants marked places on their bodymaps to describe the embodied effects of social media. Sanele wittily indicates that his thumbs hurt from incessant scrolling, but also identifies his brain as an area in his body which absorbs a lot of the negativity that is generated by interactions with *"toxic humans"* online. Craig marks the side of his body with red crayon, indicating that online spaces have made him exceedingly conscious of his body shape and that he is not *"sporting a six pack or ripped",* like many of the male bodies he sees online. Similarly, Bonolo also expresses her struggles with the online visual culture which

accentuates unrealistic body ideals (Valkenburg et al., 2021), and includes the following image (see Figure 53 below) in her collection of photographs to describe the pitfalls of her online life. Bonolo elaborates on the image:

> *Like especially on TikTok there's this like clean-girl aesthetic, like 'go to gym', 'be skinny', like that is emphasised a lot and sometimes I feel dissatisfied with the way I look because of that.*

Figure 53. *Bonolo's Photograph, "What Makes it Hard to be Me Online"*



Emma indicates on her bodymap that the requirements to appear socially acceptable are keenly felt in her brain and her heart, and Riley draws multiple messy circles in thick black and red marker to explain the effects of *"the drama"* she witnesses in social media and the muddled effects it has on her brain. Layla describes a long list of physical and psychological effects of encounters in the virtual world:

> *Oh, my brain and my back, they are very much affected, oh and maybe my stomach too cos I get really bad anxiety from a lot of online stuff, but I think mostly my brain, oh my eyes too, like my optometrist said my left eye isn't working so well cos I was on my screen so much during COVID, so that sucks.*

These physical and cognitive effects were also attributed to the dangers the participants encounter in the online world, particularly around vulgar comments, horrific harmful suggestions and exposure to violent imagery that was embedded in seemingly innocuous content that they wish they never saw. They were also acutely aware of the shortcomings of various social media sites like TikTok in upholding their supposed community guidelines to keep their members safe, as Jayden states, "*Yeah the bots that monitor places like TikTok and such only check the first 3 seconds, and they don't check the comments".* When I asked them how they ensure their safety, Lucy tells me that there is a very straight forward procedure of *"kick, ban and report"* to deal with *"sketchy people, and the weirdos"* online. Each participant consistently made mention of online dangers and how they go to great lengths to protect their anonymity in the online world, with some participants like Lucy resorting to extreme measures, telling me, "…*when I do skits of me drawing, I wear gloves or something because you know I have these beauty marks, and I don't want people to identity me".* Bonolo confesses that although she posts pictures of her social activities, but only when she has left the location and adds vague geo-locations like *"circus or 2022, like a location that doesn't exist".*

What emerged from the data, was that the online world is plagued by contradictory rules of engagement (Gorea, 2021). Sharitha confides that, "*posting too much information is literally the kiss of death"* while simultaneously, too little information is viewed as *"being fake and not showing enough emotion".* Most of the participants spoke about their schools' and parents' repetitive warnings about cyber-safety, to the extent that Craig tells me that *"these things have been drilled into our heads"*, however, a number of the rules pertaining to online engagement appear to be unwritten and only gleaned with years of experience.

Although Lucy believes she is particularly cyber-savvy, she laments, "*man, I wish I knew what all these rules were because it's really confusing".*

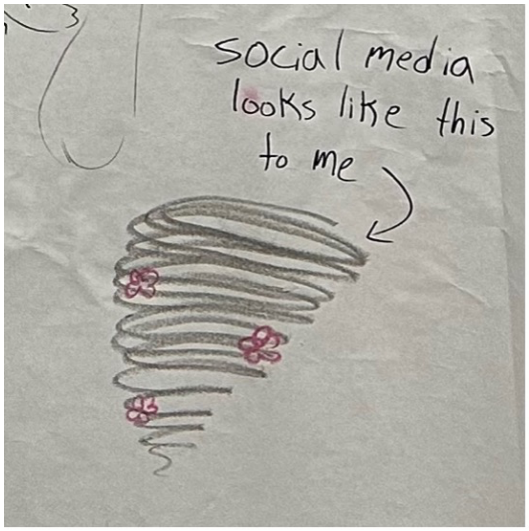
Some of the participants admitted to having fake social media accounts, like Finstas[18], limited to a very small circle of close friends, ostensibly to keep the prying eyes of parents and other adults out of their personal spaces (boyd, 2014). Apart from Jayden who posts a few memes about ADHD in Reddit, his most recent being *"its exam time, man this Ritalin is selling fast!"*, the overwhelming majority of participants disclosed that they never post anything about their personal ADHD status or experiences. When I enquired about this reluctance Bonolo tells me, *"well you might be asked for proof and if you can't provide it, you can get hated on or even cancelled"*. Jayden provides some light-hearted humour about the difficulties encountered with demands for transparency "*I saw a guy on TikTok stating he had multiple personality disorder, and then someone said, 'well let's see the proof from your doctor then', and then he said, 'well one of my personalities is a doctor!'" [Laughing].*

Most participants chose to fly under the (cyber) radar, preferring to remain, as Riley describes *"lookers"* and *"not posters".* Belonging in an online world is gauged by effortless fluency, which ratifies one's membership in a virtual world (Blommaert and Varis, 2015). Identities are offered up (mostly in a visual form) for inspection. If these images found to be lacking in particular configurations [i.e. they need to look good but at the same time appear to be authentic] (Gorea, 2021), there is a distinct possibility of being dismissed as a fake, a 'wannabe' or as Bonolo describes, *"as a pick me, a try hard, or a narcissist"* declaring, *"you*

[18] Finsta is a fake Instagram account, used for content that may be considered inappropriate or too personal for a main account.

just can't win". Lucy provides an insightful synopsis of the online world, describing her experiences of social media with an image (see Figure 54 below) on her body map resembling a tornado embellished with flowers, stating, "*The online world can be like a hornet's nest or a tornado, it can be one or the other – its chaos and sometimes there is a good wholesomeness, so that's what the flowers are for."*

Figure 54. *Lucy's Synopsis of the Online World*



Considering all the dangers and contradictory rules that abound in an online world, I was curious to see if there were any *"flowers"* in this rather complex space. As the next section of this chapter reveals, there are indeed some redeeming qualities and effects of living a life in the virtual world.

TikTok - A Subtle Kind of Online Activism

When I asked the participants in the school group about their sentiments around TikTok during the ice-breaker activity, they provided me with an intriguing insight into the playful activism that young people engage in especially when it comes to school (Wright, 2021). Although they unanimously acknowledged that "*TikTok is a terrible time waster"* they

all agreed that it is one of the most *"entertaining"* social media platforms. Lucy immediately associates TikTok with "*all those dumb challenges*":

> *Sanele: Ja like those devious licks*[19] *ones.*
>
> *Bonolo: I just want to stay away from that cos like I wouldn't want to be associated with the same people that do that, like that stuff can land you up in prison.*
>
> *LindaM: Are all the challenges like this do you think?*
>
> *Bonolo: No, there are some very entertaining ones like the one that's going around where you call your teacher by their first name.*
>
> *LindaM: And then?*
>
> *Bonolo: It's funny cos you film their reaction to when you call them by their first name, I'll see if I can find one for you [going onto her phone].*

The playful humour showcased in the viral challenge of calling teachers by their first name gently prods the power dynamics between teachers and learners. When an address to a superior is transformed in the 'hailing' (Althusser, 1999) of an equal, the thrill of flattening the hierarchy, if only just for a brief moment is evident, and nudges at the notion of respect and why teachers are perhaps so invested in maintaining it (Wright, 2021).

After Bonolo shared a few clips of teachers' reactions to this viral challenge, what then ensued was a wonderful spontaneous showcasing of TikToks about school, with each participant finding examples of video clips around school that they related to. There was certainly no shortage of material offered by the participants, and clips ranged from acronyms about school (see Figure 55 below); how teachers expect learners to react to the "*cringy*" memes included in tests papers (like the baby in the green shirt holding his fist up saying

[19] Devious Licks was a 2021 social media trend, popular in the US where school children recorded themselves stealing or vandalizing school property.

"keep going"), which miss their well-intentioned mark (see Figure 56 below) things teachers say to their students, like the clichéd "*you're the worst class I have ever had in my 99 years of teaching* (see Figure 57 below); and teachers asserting their authority claiming "the bell does not dismiss you, I do" (see Figure 58 below). These somewhat dramatic reenactments may represent minor frustrations in the lives of young people, and while these subtle protests about school have existed for decades, they are no longer experienced in isolation, but circulated and shared by thousands of young people across the world (Wright, 2021).

Figure 55. *TikTok Acronyms About School*

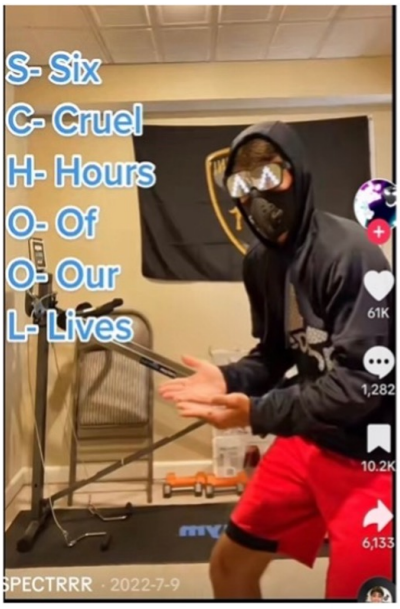


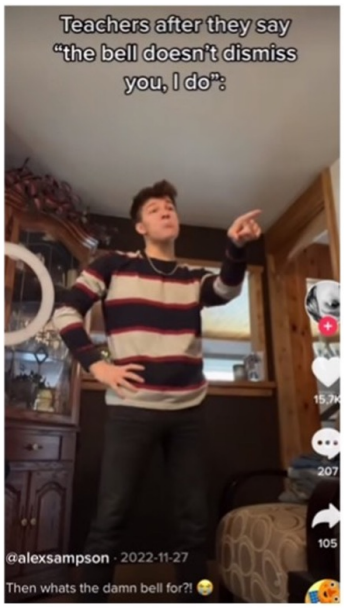
Figure 56. *TikTok, Teacher's "Cringy Memes"*



Figure 57. *TikTok, Teacher's Clichéd Comments*



Figure 58. *TikTok, "The Bell Does Not Dismiss You I Do"*

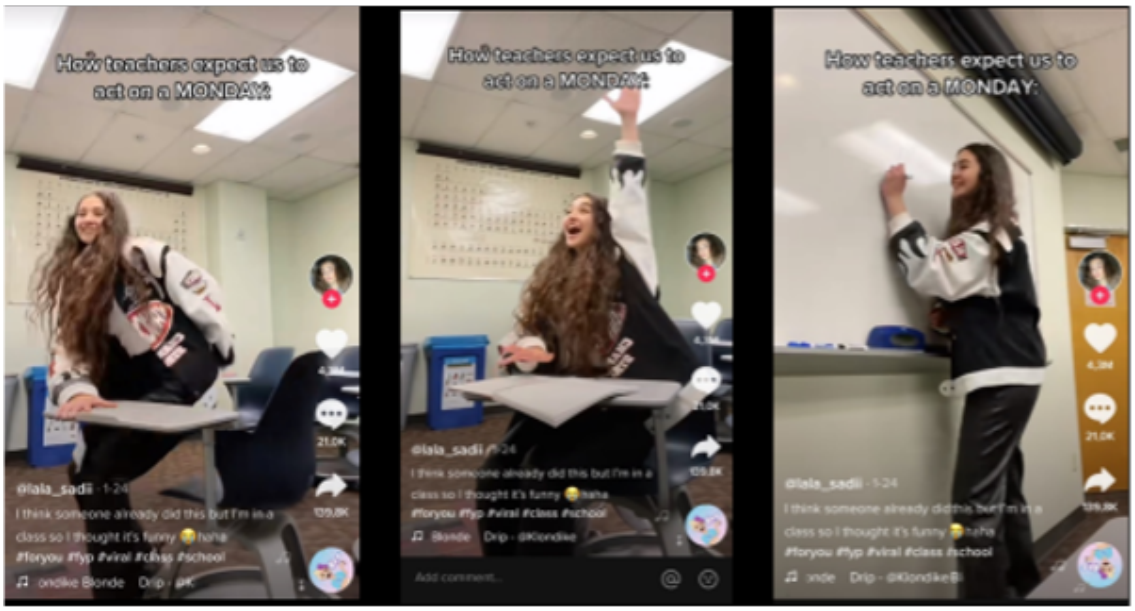


Bonolo provided an interesting TikTok (see Figure 59 below) representing how teachers expect learners to act on a Monday morning. The video which generated an impressive 4,3 million likes depicts an unlikely scenario of a happy, engaged learner, enthusiastically tackling a math problem on the board, first thing on a Monday morning. As the laughter settled, Lucy remarked, *"yeah, like no one acts like that especially on a Monday*

morning, I think if you did it would be social suicide", a sentiment which the entire group agreed with unequivocally.

While these discursive grumblings about teachers' expectations may seem frivolous, it prompts us to be mindful about the holistic needs of young people within an academic environment. Although educators may view TikTok as a negative influence and a distraction, it is a tool young people use to challenge conventional ideas about education and speak back to the discourses around school, and what happens within this institutional frame (Wright, 2021).

Figure 59. *Bonolo's Selected TikTok, "How Teachers Expect You to Act on a Monday Morning"*



While looking for TikTok videos, Bonolo makes a critically insightful comment:

> *Like, I know I use social media to get information and such, but like I have to ask like if these people on TikTok were really having depression, would they really be motivated to post on TikTok I mean. So, I guess like for ADHD, would the same be true? All these people on here saying they have ADHD, do you think they could concentrate long enough to make a video?…and like I think it is really interesting that most of the videos that I am seeing are by pretty white girls, mostly in the bedrooms which are neat and tidy and look like they are from a magazine, yoh, TikTok, it can be white and polite [laughs].*

Bonolo smells a proverbial rat, making rather astute observations about this online space and the individuals who are posting on the platform. The creators of the videos seem to lack the "emblematic features" (Blommaert & Varis, 2015, p. 7) of apparent chaos and disorder that she believes characterises an 'ADHD identity'. Performers who look seemingly perfect, situated in neat and ordered bedrooms, provide Bonolo with imagery of discontinuity and deviation from what she understands ADHD to look like (Blommaert & Varis, 2015). However, Bonolo's statement also captures how power structures and dominant values of societies and institutions permeate online platforms, where *"pretty white girls*" with more cultural capital within this 'field', feel less constrained in talking about their struggles or displaying them as part of their habitus (Bourdieu, 1990). Furthermore, portraying ADHD like this in the virtual world may have distinct aspirational qualities to it, with young people wanting to be 'just like' pretty young girls who are 'immaculately chaotic'. The online world is a place where prevailing patterns of hegemony are embedded and coalesce in the content, as boyd (2014) reminds us, "technology mirrors and magnifies aspects of everyday life, good and bad" (p. 212).

The Possibilities and Potentials of the Online World

Craig draws the TikTok icon to represent the social media platform that allows him to experiment the most with his identity, "*it has really helped me figure out things about myself in terms of uhh, the sexuality gender crisis, umm, TikTok has helped me figure that out, I feel one step closer to figuring out who I am everyday*". Craig differentiates the kind of information he receives online and some of the programs that have been presented in his school:

> *Yeah, my school has been taking some big steps about mental health recently, they have these workshops which are just like talks that kids can go to if they want, like about drugs and sexuality and all that kind of stuff.*

I asked Craig whether he has attended any of these sessions:

> *What? No way, school isn't a place for that, it's a place for working, and that's it, like I get what they are trying to do, but school, it's not a place for figuring these kinds of things out, like cos the stigma, I think that's the right word, yeah, the stigma…no way!*

For a young person like Craig who is struggling to find a space in which he feels like he truly belongs, the anonymity of the online world seems to come to his rescue, escaping the critical scrutiny and surveillance of both his peers and adults. Erikson (1959), believes that "adolescents faced with continuous diffusion would rather be anything than nobody or somebody bad or indeed dead than not quite somebody" (p. 132). This rather static notion of identity is replaced in a postmodern world, where online facilitation of identity exploration allows Craig to be more than "not quite somebody" even if it is in the virtual world and perhaps not even entirely authentic or complete just yet.

Although Riley is not officially diagnosed with ADHD, she tells me, if she were to be medicated for ADHD she would first *"check it out"* online:

> *You can just ask a whole lot of people, "is this medication good?" and you will get so much feedback it's like a refined list of what meds work, it's like, "you don't want to use this" cos a lot of people…cos the doctors don't always tell you about the side effects, they are hidden I think, cos if they tell you, you would be like "whoa, really?" But you go online, and people will tell you… "ok so this is what is going to happen to you when you take these meds, you might not want to take this stuff" …yeah stuff like that.*

Riley places her trust in unknown people in an online space, considering their opinion more comprehensive and even more honest and thus more trustworthy than doctors. The authors, those who have first-hand experience are understood by Riley as authentic experts, bestowing them with authority as opposed to doctors or other professionals (Hacking, 2007).

Emma was very enthusiastic when it came to sharing TikToks about ADHD, sending me four times the number requested. She claims that both TikTok and Instagram are incredible sources of information about ADHD and has helped her gather information about herself, finding *"ADHD life hacks"* that have been *"super useful"*. Emma's selection of TikToks mainly comprised of clips "ADHD what the doctor / psychiatrist didn't tell you", considering the information she gleans from TikTok as extremely helpful as she feels the doctors are not always forthcoming with information:

> *You see places like TikTok are very helpful, like it helps you, I mean doctors will never give you a list of all the possible things you could ever do like, OK you could watch a bee fly for 10 minutes while having a conversation.*

Emma laments, *"like they don't do that, they don't tell you a lot of stuff, so I have to find it for, like out for myself"*. Emma mediates her frustration with 'secretive' healthcare professionals, concealing infinite inventories of 'peculiar behaviour' beyond the conventional

symptoms listed in the DSM-V-TR. She shows me the TikTok about how she can only watch TV if there are subtitles, "*like reading subtitles makes me hear, like my doctor never told me that one*". Emma included a further five TikToks that were about useful techniques or strategies on how to cope with the complexities of the disorder. All five clips contained a variation of the theme of how to be better organised, neater and tidier, all of which Emma refers to as calls "*hacks for her ADHD life"*. Emma finds her own tribe of ADHD people who share their experiences, advice and quirky remedies. Within a Foucauldian framework, these suggested techniques and strategies can be all be seen as disciplinary acts, initiated in a system of self-surveillance, as they are operationalised under Emma's own volition to monitor and keep 'undesirable behaviours' in check (Foucault, 1977).

Online - A Place to Re-define Difference

Layla believes that her ADHD diagnosis seems to fall short of describing the multiplicity of her experiences and difficulties and prefers the term neurodivergent. Turning to online resources, Layla finds an expanded version of neurodivergence which seems to capture not only the messiness, but rather the catastrophe that she feels provides a more appropriate rendering of who she is. Layla tells me how she follows neurodivergent hashtags on TikTok and offers this clip (see Figure 60 below) which she claims, *"this pretty much sums me up".*

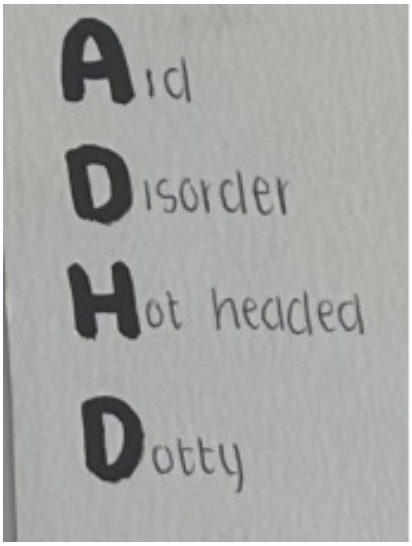
Figure 60. *Layla's Selected TikTok, "This Pretty Much Sums Me Up"*



She continues to explain that being "*neurodivergent*" (Singer, 2016) has made life a lot more complex for her, and quips "*well I'm not sure if I like the term neurodivergent, everyone uses it, I like to think that I am neurospicy*". Layla engages with an ever-expanding version of neurodivergency (Cromby & Johnstone, 2024), describing her difficulties and differences in a way that she finds helpful. However, Layla proposes that she is inherently even more different than those who are considered neurodivergent, making her not only different but a "spicier" or more interesting kind of different. Layla's reluctance to classify herself as simply neurodivergent points to the ever-expanding range of behaviours subsumed under the neurodivergency label. This paradoxically shrinks the number of those considered neurotypical, eroding the significance or utility of 'belonging' to this category as a mark of not fitting the 'norm' (Cromby & Johnstone, 2024).

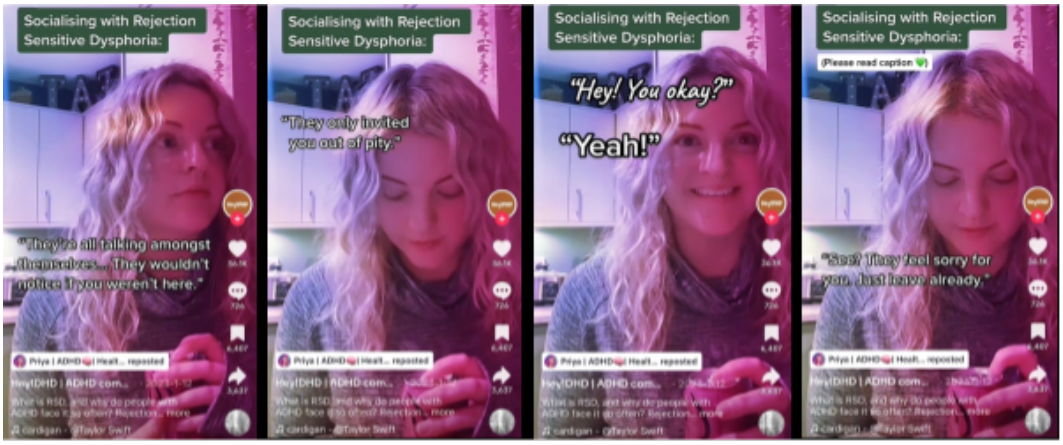
Emma renames ADHD on her poster (see Figure 61 below) and considers the change a far more appropriate reflection of what the diagnosis means for her.

Figure 61. *Emma's More Appropriate Acronym For ADHD*



She continues to explain her reformulated definition of ADHD, "*It's something you need aid for, like it is really a disorder, and it comes with so many other parts that they don't really warn you about".* Emma maintains that online platforms like TikTok and sometimes Instagram have given her a better understanding of what these other parts may be, "*well like I didn't know this, but I found this on TikTok a while ago and it explains ADHD also comes with RSD".* She points to the printout I have made of her selected TikTok videos (see Figure 62 below), *"like here this TikTok, this is like RSD …it's what it is like for me".* Rejection Sensitive Dysphoria (RSD) is defined as feeling of "unbearable pain as a result of perceived or actual rejection, teasing, or criticism" and is considered an innate feature of ADHD (Dodson et al., 2020, para 1). RSD is a controversial condition which is not officially recognised in the DSM-V-TR, nor adopted as a formal condition in mainstream psychiatric literature, however it is extensively referred to in social media and pop-psychology networks.

Figure 62. *Emma's Selected TikTok, "This is Like RSD…It's What It's Like for Me"*



Similarly, Sharitha uses a term, 'task paralysis' which she found many people online pairing with their ADHD diagnosis, affirming that it is relatable:

> *I found out about my ADHD task paralysis thing online, like when there is so much to do, and I just become overwhelmed and then I get really unmotivated, and I overthink. Ja, that paralysis thing is huge for me, like I shut down, like it was nice to know it was also an ADHD thing.*

Riley changes her self-diagnosed ADHD to AUDHD, an unofficial term yet one that is gaining significant popularity among individuals who feel they have traits characteristic of both autism and ADHD (ADDitude, 2024):

> *Like I think I have more ADD, but then like I actually think it is more like AUADHD*
>
> *LindaM: AUADHD?*
>
> *Riley: Ja, like I think I might be on the spectrum and such and so ja…I think that might be a bit more…like ja, I'm bad with texts and stuff I struggle to get those social cues*

The process of adding more characteristics to ADHD can be understood according to Haslam's "concept creep" (2016, p. 1) where psychological categories like ADHD are

expanded and embroidered with a host of other ‘symptoms’. None of the additional characteristics that the participants felt were part of ADHD are contained within official knowledge structures like the DSM-V-TR, but are rather being curated in the virtual world by individuals. In this space, the ‘known’ are repositioned as the ‘knowers’, allowing the participants to redefine their classification, clawing back control from the institutions and experts contained within them (Hacking, 2007).

A Place to Be Yourself, Rewrite Yourself, or Experience Yourself in a Different Way

For most of the participants, an online space was one where they felt far more comfortable just being themselves. Although Layla quickly asserts that she is very mindful of not posting images or other visual content that her *“job in the future will be able to see”.* She feels she can be more authentic in certain virtual contexts where she can express herself in narrative form like Discord and Twitch:

> *I’m a lot more like tame and watered down in real life and like I will go on Discord and be like, like with my friends, be like really hyper and energetic. I act a lot less like myself in real life than I do online cos there feels like there is a like comfortable distance, so if I mess up or if I embarrass myself online, I don’t have to see them again, there are so many people online but if I do that in real life it’s like they are people I care for cos you might go to school with those people.*

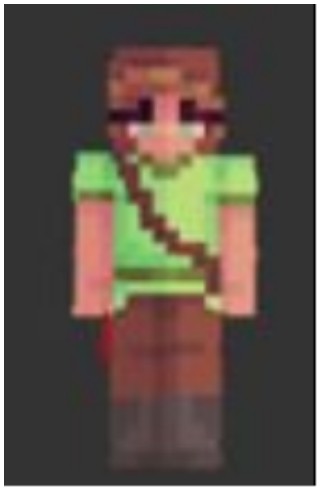
Layla’s heightened feelings of authenticity and confidence in an online world resonates with the findings of Gelles-Watnick (2023). The absence of physical closeness and visibility as well as the ephemeral nature of online interactions, free Layla from judgement or criticism that tend to feel more potent or meaningful in offline encounters. The value of her anonymity in her virtual world as place where she can be less self-conscious “about the nature of [her] embodied experiences” (LeBresco, 2004, p. 179). This sentiment is also underscored in

Layla's photograph (see Figure 70 below) which she uses to visualise the safety and protection of her online world.

Riley tells me that she hardly posts any physical images of herself on social media platforms but rather represents herself visually in the form of an avatar. Riley claims that this is a real version of herself and that her online engagements feel more authentic than those in the real world:

> *I don't cover myself up online, like I am who I am really. Like this is my real self-online, so umm ja, that is why this is like me online, it's my avatar of sorts I guess, well, it's really my Minecraft skin*[20]*, I guess a skin that makes me feel like I'm in my skin (laughs,) this really is so me!*

Figure 63. *Riley's Avatar*



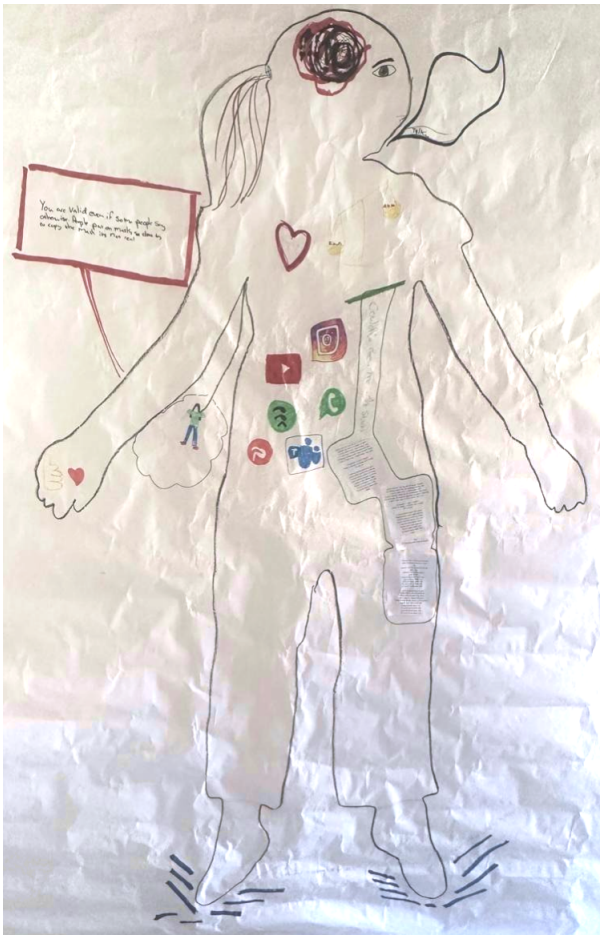
Online culture demands a bewildering blend of self-disclosure, discretion and authenticity which many young people find incredibly stressful (Gorea, 2021). In an

[20] A skin is a graphic download which changes the appearance of characters in video games, to express the player's individuality, used for purely aesthetic reasons.

ingenious attempt to manage these stresses, but still participate in virtual life, Riley uses a pixelated version of her gaming skin (see Figure 63 above) to represent herself visually in online environments. Much like Goffman's (1959) stage where the true identity of the actor is concealed by their costume, Riley's avatar lacks any identifiable human features, making her completely unrecognisable in a virtual world. Ironically, Riley considers this digital representation much like her own skin, providing her with a sense of authenticity. She maintains a presence in this space, but it remains vague and mysterious, an agentic act which establishes a sense of control over an unpredictable environment (Deci & Ryan, 1990).

Riley uses her avatar to confess a truth she feels about herself as being *"weird"* and not *"fitting in"* which she ascribes to not having a significant online presence at all. Her feeling is underscored by her bodymap (see Figure 64 below) which she labels as a *"non-playable character".* This term is usually assigned to characters in online games which are controlled by the game rather than a player. While they may interact with the players, they don't have autonomy or complex decision-making abilities of characters manipulated by players. Riley consciously avoids having a large-scale presence in the virtual world, viewing this rather deliberate choice as something that may set her apart from her peers. This purposeful stance is a conscious and intentional choice, resisting the pressure of digital culture which demands constant engagement and visibility.

Figure 64. *Riley's Bodymap*



As Sanele started to tell me about his online identity, the complexity of this young man became acutely apparent. Sanele uses the virtual world to experiment with different facets of his identity, providing him with endless possibilities of identity play and a somewhat contradictory identity performance in comparison to that of a 'boring student'. Sorting through his photographs Sanele selects the following image (see Figure 65 below), asserting, "*this is how I represent myself online*". Apart from Sanele's earphones, the image differs considerably from the image representing him in an offline world. Capturing himself in what appears to be a bathroom, with no shirt on, the image has an element of vulnerability

to it. It also contains a popular filter[21] of a spider positioned over his nose, which he explains "*represents a lot of my real side, like my funny, smiling side cos offline I'm not like smiling at all*".

Figure 65. *Sanele, "This is Me in an Online World"*



Sanele declares that his online world, seems to feel like a more accurate representation of himself, as it includes a complexity that seems to be missing in the offline world. He is, however, very selective as to who sees this spontaneous side only sharing it with a handful of close friends. Within this space, textbooks are replaced with Manga[22] comic books, representing a part of Sanele he claims he "*loves, enjoys and really pleased with*" (see Figure 66 below). The virtual world provides Sanele an alternative expression of his masculinity, connecting to elements like cooking which is associated with care and nurturing. His interest and enjoyment of manga comics which reflects his creative, non-conventional hobby,

[21] A filter is a digital tool or a feature that enables users to change or enhance videos or photographs typically posted on social media platforms

[22] Exceptionally popular comic books and cartoons originating from Japan that include a broad genre of horror, action, adventure and drama etc.

broadens his identity beyond the confines of being a high-achieving black boy from a private school.

Figure 66. *Sanele, "Manga Comic Books"*



Sanele provides me with a photograph (see Figure 67) which demonstrates that the online world is space where he can showcase his ability to "*cook a lot of dishes*" which he considers adds to his uniqueness, as well as his eclectic and sophisticated choice in music of which Rhythm and Blues is his favourite genre as it makes him feel "*chilled"*.

Figure 67. *Sanele, "I Cook A lot of Dishes"*

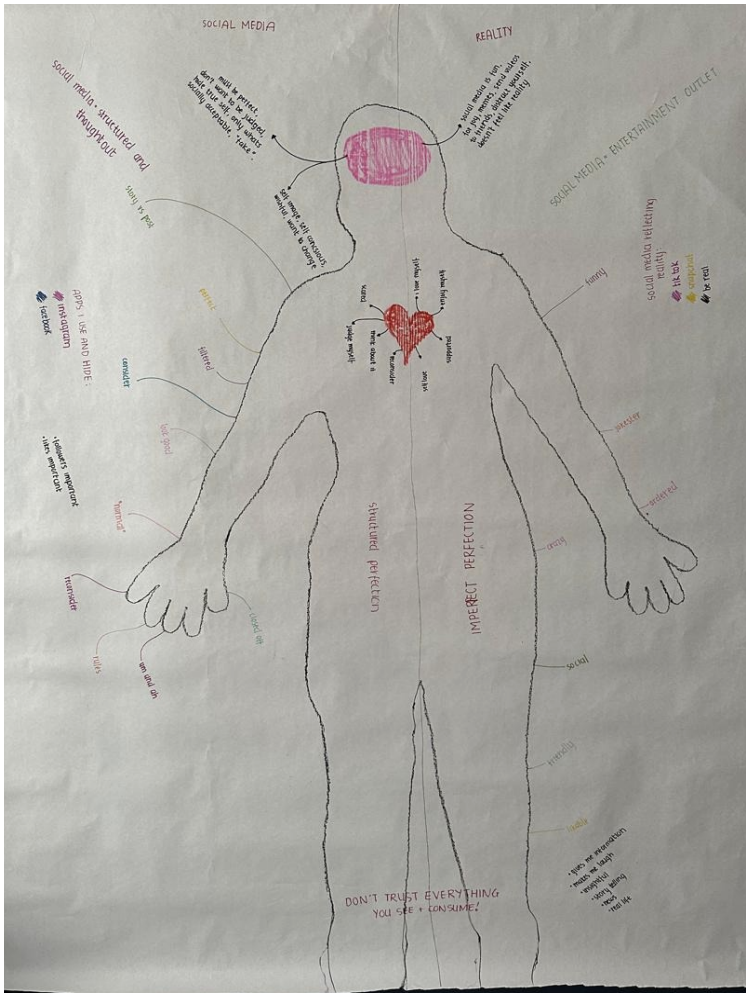


Online spaces are the construction zones of contemporary adolescent identity, and Sanele 'writes himself into being' using the rich materials available in his online world, re-imagining himself in interesting and complex ways that may not seem available to him in an offline world (Turkle, 2017).

Emma's bodymap (see Figure 68 below), like her collage about ADHD contained a distinctive split down the middle. She labelled one side of her bodymap as "*reality*" and the other "*social media*", demonstrating how she uses the space in two very distinct ways. Emma tells me, "*I am really scared of being judged…I don't have that self-esteem thing",* this makes her extremely cautious as to how she positions herself in an online world. Her online behaviour is carefully crafted to make sure she complies with as many of the "*unspoken rules*" as possible:

> *I would never post me giving my opinion, or making a joke, I won't take a selfie like sitting in a restaurant, that's cringe, if I do post anything I will do it at 6pm cos then everyone is on Instagram. Like I wouldn't post something funny like my dog, I would love to but that's just weird, ja I don't like being judged…like the last thing I would want is for someone going off and saying, "Oh Emma is weird cos she posted a picture of a bunny at the side of the road".*

Figure 68. *Emma's Bodymap*

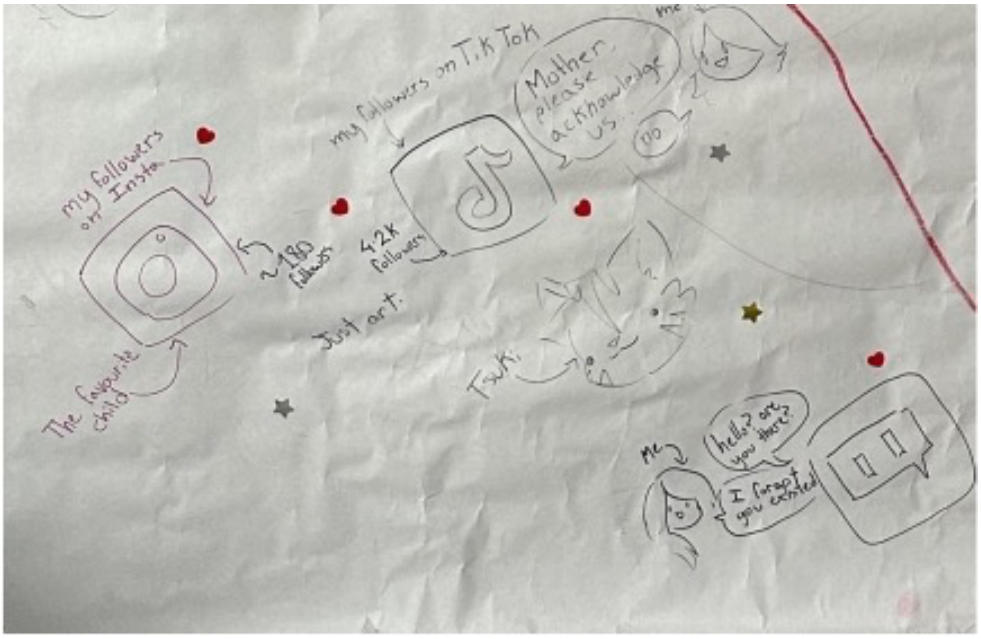


Emma is able to achieve a kind of "*structured perfection*" in one side of her online world, and although she understands that this curbs any spontaneity and feels inauthentic, it is a place where her perceived imperfections can be "*filtered*" out, where she can appear to be "*normal*", only showing others features she considers "*socially acceptable*". On the other side, labelled "*imperfect perfection"*, Emma declares, "*this is how I am…imperfect, I'm crazy, funny and can be a jokester",* however, unlike Sanele, these remain traits that are never revealed in her virtual world. In Emma's "*real*" world, social media is largely used for *"gathering information*", "*distraction*" and "*entertainment",* which provides her with "*a real lift*". Emma's meticulous impression management (Goffman, 1959) requires close attention

to the indeterminate rules that govern the virtual world, curating a contained and somewhat sanitised version of herself to survive the sharpest peer scrutiny.

Although her offline world is filled with insecurity, Lucy's description of her online world assumes a distinctive air of authority. Turkle (2017) maintains that when young people feel like they don't have a voice, they turn to the virtual world to find one. Within her bodymap, Lucy adopts a parent-like figure describing Instagram as her "*favourite child".* She rebuffs the requests "*mother please acknowledge us*" of her some 4 200 followers on TikTok, and snubs her followers on Twitch claiming, "*I forgot you existed*" (see Figure 69 below).

Figure 69. *Lucy's Bodymap Detail of Her Online Authority*



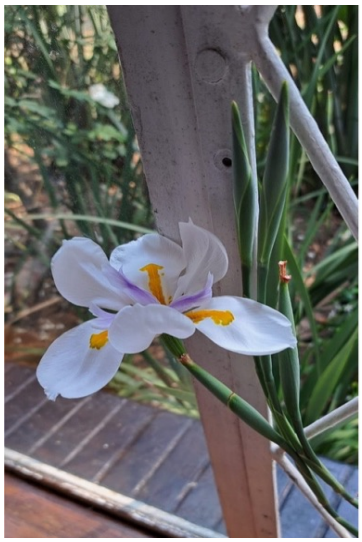
I couldn't help but wonder if this was a way for Lucy to identify herself differently than the way which society positions her, providing a space where there is a "possibility of struggle and resistance" (Yuval-Davis, 2006, p. 203). It is within this virtual world that Lucy reformulates the relationships she has in the offline world, reconfiguring them in a place

where she is the one metering out the silence and rejection as opposed to the other way round.

Layla uses platforms like Discord, YouTube and Twitch as places where she can showcase her creative talents, posting clips of animation she has created, songs she has composed, playing her ukulele, and streaming[23] content ideas for her latest Dungeons and Dragons game. Layla selects this photograph (see Figure 70 below) of a flower growing through her open bedroom window as an apt analogy of how she views her life in an online world:

> *Like this flower, it is poking through my bedroom window, although it grows in the garden, it has come into my bedroom, I guess it is safe, umm protected in there from being outside, so ja, but also like you can't go outside and do stuff, so you do stuff online.*

Figure 70. *Layla, "My Life in an Online World"*



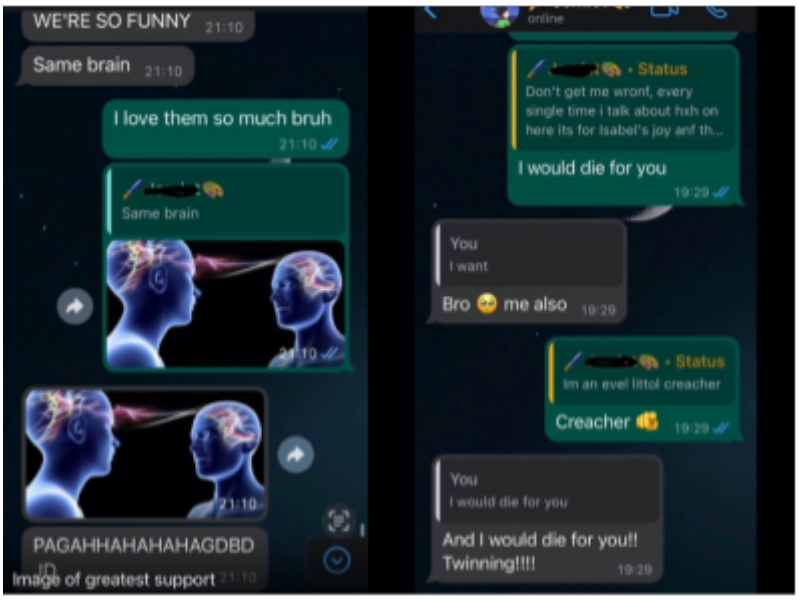
[23] An activity where one typically broadcasts their approach when playing online games, or sharing their screen while they engage in some kind of activity like art, singing, cooking, and subscribers can hear and watch it live

Although Layla does not make any explicit references to Covid-19 and the social restrictions imposed during the country's lockdown period, the online world may retain potent associations of being the only means of connection to peers from the safety of their homes. Layla acknowledges the freedom she feels when transcending the confines of an offline world. Her photograph reiterates the sanctuary of a virtual world where her anonymity provides protection against the harsh criticism of others, allowing her a freedom of expression not permitted or tolerated in her offline world. Adolescents' social connections are often tightly regulated by parents, however in the virtual world, Layla seems to have greater autonomy. As boyd (2014) contends, connection in the virtual world doesn't supplement face-to-face friendships and connectivity, but is sometimes the only means through which young people can maintain social bonds, seek validation and belonging.

A Place of Connectivity to Those Who Truly Understand You

The online world has made it possible for Lucy to continue her connection with her friend who moved overseas two years ago, telling me that her friend "*is the only person who actually cares about what I have to say*" and "*she lets me ramble on about my interests, I have never felt so appreciated in my life*". Lucy looks at me earnestly and with a tone of utmost sincerity says, "*I honestly don't know what I would have done without her, she is my rock and here* [passing me a photograph], *that's why she is my greatest resource"* (see Figure 71 below).

Figure 71. *Lucy, "My Greatest Resource"*



Lucy's love and appreciation of her friend is reflected in her image which is a screenshot of a recent WhatsApp chat. The image of two cyborg like humans who are connected by wave-like energy, underscore the deep connection between two friends. Although the image within the chat appears to have been created by artificial intelligence and may lack the complexity of the 'fleshiness' of what it means to be human, it underscores the importance of connection, friendship and belonging, all of which are mediated by her online world (Turkle, 2017).

Riley tells me that being able to communicate with her friends online transcends difficulties of finding time to connect face to face due to demanding schedules:

> *Like when you are having problems you don't have your friends right there, but you can contact them online…we are all so busy, like with school and sport and stuff after school it's hard to find time to be with one another, like even if they respond with a heart or something, I know I am not alone.*

The “always on”, and “always with” you qualities of today’s technology (Turkle, 2017, p. 154) allows Riley to postpone independently managing and expressing her feelings. Access to friends any time of the day provides the potential to communicate whenever one has a feeling, facilitating a coupling that Turkle (1995) defines as “I have a feeling, get me a friend” (p.127). While there are mounting concerns that social media is responsible for diminishing real life interactions with others (Gelles-Watnick, 2023), Riley reveals that the online space often feels like the only space that can facilitate connections with friends, even if these connections are transmitted via the digital shorthand of emoticons.

Craig feels he has a “*mountain of possibilities*” when it comes to finding a community where he feels he can belong and connect to people who are likeminded. Using TikTok as an example, Craig lists all the micro-communities he finds within this space, “*like there’s BookTok, ADHDTok and GayTok*”. Craig tells me how the online world more particularly TikTok has helped him:

> *I like came to peace with my ADHD diagnosis through TikTok, cos I saw there were so many people sharing this experience and it was really helpful for me to see all these other people going through the same thing I was going through*.

Adolescence is characterised by experimentation with ideas, people and notions of the self (Erikson, 1968). Craig uses his online world to explore his identity, finding comfort in connecting with others about things which in the real world have the potential to make him feel isolated or different (Turkle, 2017).

Place to Relax and Escape or Distract from the Pressures of Life

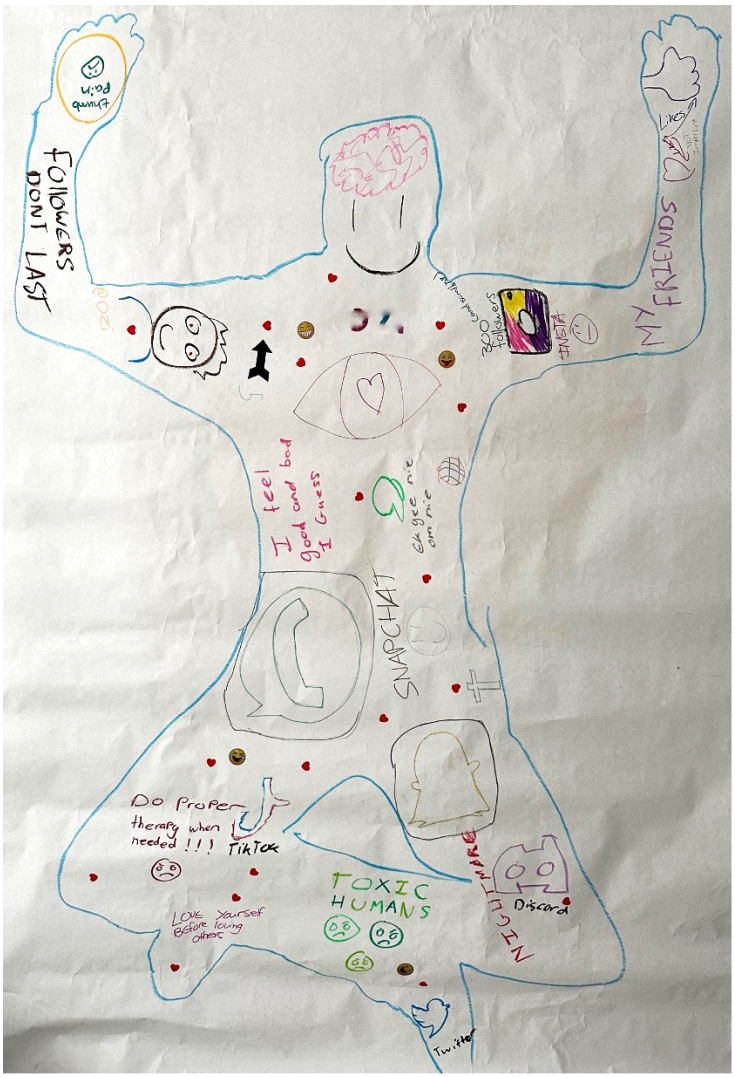
After Sanele completed his body map (see Figure 72 below) he stands back and nods approvingly, stating “*my body looks like I am in a yoga pose, yeah, that’s pretty accurate for*

me". In an online space, Sanele's body assumes a Zen like figure, when I ask him if his virtual world makes him feel more relaxed, he responds:

> *You see all the pressure from school and life, like it's not like it goes away, it's just not in my face, like it's on the side, like there is drama online but you can choose to be a part of it or not.*

The peace that Sanele experiences in his online world is paired with an escape from the pressures of life, it is also linked to the feeling that he has more choice in this space than the real world has to offer.

Figure 72. *Sanele's Bodymap*



Similarly, Sharita includes a photograph of a mandala which represents what an online world means to her (see Figure 73 below). *"You see, this Mandala, it is how I feel when I go online, like its chill".* Traditionally a mandala is made up of geometric patterns and is viewed as a symbol of the universe in its ideal form. Mandalas are used as meditative guides to locate a sacred space of tranquillity, away from external influences in a bid to restore body, mind and heart.

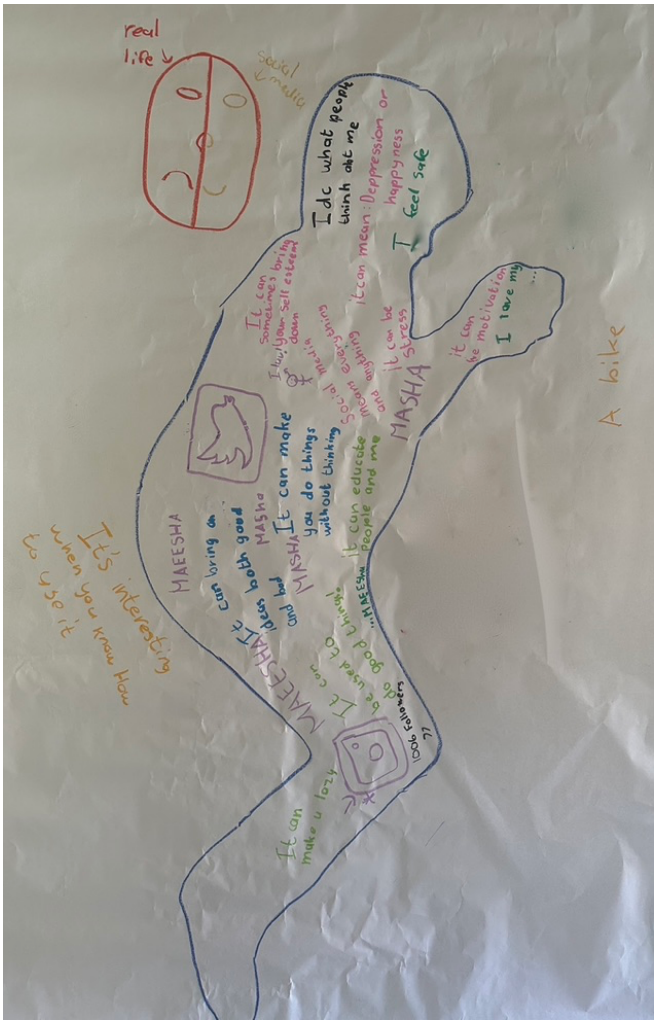
Figure 73. *Sharitha's Photograph, "What the Online World Means to Me"*



Mphilo also comments on how he regains a sense of equanimity in the online world which is exemplified in the outline of his bodymap (see Figure 74 below):

> *[Laughing] Yoh! I look like a baby, in my little bed [laughs] but it is a place that makes me feel relaxed, you see, if I am being honest, it is a place I can dream about fast cars and fun like you know, it's not serious, ja, like it's fun and peaceful.*

Figure 74. *Mphilo's Bodymap*



Sanele, Sharitha and Mphilo describe their online world as a unique zone, that is, it is a place that affords them the opportunity, time and space to explore what they find meaningful and beneficial. Their virtual worlds are ecosystems where they can linger, scroll, browse and float from one interest to another, in the comfort and privacy of their homes, free from academic pressure, gruelling schedules, curfews and finish lines. Just as Bruner (1986) considers narrative as a tool for imagining or subjunctivising the world in what it might be, the online world is a place where these young people can visualise themselves in different ways, allowing them to explore ‘what could be’ as opposed to ‘what is’.

Conclusion

The online world seems to be embodied as a 'natural' part of most participants' identities. Each person's narrative contained accounts about the dangers and pitfalls of the online environment, with some indicating physical effects in the embodied world, affecting their brains, eyes and other parts of their bodies. Maintaining privacy was a key factor while navigating virtual worlds, with most participants electing not to disclose any form of identifying or confidential information. There is a particular sassiness in the way these young people defend their privacy and boundaries. Their quick wit, humour and the swift deployment of online tools and mechanisms, enable them to assert themselves during interactions which may otherwise have the potential to diminish their sense of agency.

The spontaneous presentation of the TikTok videos can be viewed as a subtle kind of activism. As Wright (2021) notes, adolescents are using TikTok to challenge and respond to the narratives of schooling making use of "a digital platform that backchannels a largely resistant attitude toward the institutional framing of school(ing) upheld by many adult educators today" (Wright, 2021, p. 63). The selection of videos is perhaps reminiscent of Pink Floyd's protest song in the 1980s, "We don't need no education". While this song captured the hearts of a great deal of learners of that era, it is a reminder of the age-old critique of education systems (which have ostensibly remained unchanged) which tend to mould children into identical, obedient conformists, with little consideration of their holistic needs.

The online world, especially TikTok, is acknowledged as an alternative space to gather information that either may not be forthcoming from adults in their world or feel too self-conscious to explore in the physical world where anonymity may not be guaranteed.

Furthermore, TikTok was a conduit for them to find alternative ways to understand themselves, labels like neurospicy and RSD seemed to provide comfort that behaviour or the messiness of life could be tempered or reduced into succinct acronyms.

Some participants articulated that the online world is an uninhibited space where they felt authentic and free from the constraints of their physical environments and social expectations. However, this space can also be constraining and homogenising, as conformity to cultural constructions of beauty, body shape ideals and intelligence are perpetuated in online forums. Although online platforms claim to facilitate authentic self-expression, the freedom of such expression is not entirely self-determined as digital spaces are penetrated by the pervasive influence of societal norms and discourses, reflecting how even the quest for individuality is actively shaped by collective cultural expectations. Although some participants experienced a sense of belonging through shared identities and digital communities, in some cases, a sense of belonging was contingent upon conforming to specific social norms embedded within these spaces (Yuval-Davis, 2016).

Online representations varied in fascinating and multiple ways, with participants either expanding their identity to represent an eclectic mix of their remarkable attributes or narrowing their self-presentation, sanitising it from any human vulnerabilities. Notably, the golden thread of choice ran distinctly through these narratives. Finally, the online world, with all its pitfalls and dangers felt like a safe place, for some a temporary refuge from the unyielding demands and pressure in an offline world.

Chapter 9 - Conclusion

Through listening to and analysing the stories of adolescents who have been diagnosed with ADHD (by a medical professional) or who self-identify with the characteristics of the phenomenon, it was hoped that some insight would be gained into the lived experiences of these young people as they navigate their offline and online worlds. By way of concluding this study, a summary in relation to the following research aims is presented below. By engaging creative methodologies, the research project aimed to:

1. Contribute to the knowledge about adolescents' own understandings and perceptions and experiences of ADHD, their interactions with parents, teachers, medical professionals and medication.
2. Capitalise on rich, personal perspectives of how these particular adolescents navigate their offline and online worlds and how their experiences within these spaces contribute to their identity, agency and connection to others.
3. Discover how these young people engage with and perceive information and content posted about ADHD in the popular youth focused platform TikTok.
4. Narrow the gap in understanding the benefits and risks the online world may present to these particular adolescents.

The data for this study included visual components comprising of the participants' selection of TikTok videos, collages, bodymaps, photographs and music lyrics. In addition to the visual data, transcripts of verbal discussions generated during the construction and explanation of the visual data in the final semi structured interview formed part of the analysis. Two levels of analysis were conducted according to the aims of the study. Firstly, the construction of four descriptive narrative portraits which presented participants' experiences and perceptions within their offline and online worlds. Secondly, thematic

analysis across all the data sets, identifying similarities and differences between the participants, expanding them according to generalised themes.

It has been argued that ADHD is not a natural (and even less homogenous and uniform) phenomenon, nor is it independent of environmental and social influences such as gender, race and class (Timimi, 2021). Instead, the label may be more appropriately conceptualised as something which is discursively and socially constructed. ADHD is predominately constructed within a medical field of knowledge. The scientific status of the medical model and its associated experts who generate and legitimate knowledge, wield enormous power within Western society. Although this biomedical regime may appear to be very distant from the individual, it has significant penetrative capacities into the lives of young people. The label not only mediates the individual's experiences of the world, but it also mediates the way they think about themselves and the world. The moment an ADHD label is applied to an individual either in the articulations of a parent, doctor, teacher or self-imposed by the individual, it produces particular kinds of interpersonal relationships, expectations and understandings. The label also functions according to the practices of a neoliberal society where competition, conformity, productivity and individuality are prioritised. Institutions like families, schools and healthcare are inscribed with particular mechanisms to ensure compliance and remediate any deviation from the 'norm'. By focusing on the deficits of the individual, very little attention is given to the broader context in the creation and perpetuation of young people's challenges and struggles.

The Understanding of ADHD

The majority of participants viewed ADHD according to the neurobiological framework, considering it a potent, invisible agent that affects their brains in a myriad of ways. Participants explicitly referenced neurobiological attributes with some implicating

insufficient dopamine levels and genetic transmission in the aetiology of their ADHD (official and unofficial) diagnoses. Ascribing their difficulties to the (mal)functioning of their brains are not ruminations of their own making, but rather points to the penetrative capacities of the psy disciplines into these young people's worlds (Rose, 1999). The participants' understanding of ADHD as a neurobiologically brain-based disorder implies that it is not only associated with inattentiveness, hyperactivity and impulsivity but a phenomenon that has a direct bearing on their self-concept and their identity. Considering difficulties as neurobiologically based, allows for particular management of these behaviours, which for most participants was through pharmacological intervention, this transferred some of these young people into the institution of medicine and the experts who dwell within them.

Medical Professionals

Interactions with medical professionals seem to elicit feelings of being marginalised, misunderstood, infantilised and excluded. For some participants exchanges within doctors' offices felt rushed, suspecting a lack of careful consideration for who they are as a person, treating them as just a body that needed to be categorised and regulated, prioritising clinical definitions and treatment over their lived experience. Furthermore, some participants felt that medical professionals' knowledge may be confined to diagnostic manuals and clinical treatment regimens, having a limited understanding of what it must 'be like' to have ADHD (Fay, 1996). Others felt that doctors may be deliberately economical with the truth, particularly about the variable efficacy of ADHD medication and the wide swathe of side effects that accompany them. Notably, the participant who expressed a positive view about his interactions with his psychiatrist, points to the immense value in medical professionals taking time to engage and involve young people around important matters within their lives (Boyle & Johnstone, 2020). The surfacing of agency emerged within narratives about interactions they felt particularly strongly about, however, some of these agentic articulations

were not always overt and explicit. As Harré (1995) points out, there is "no Machiavellian knowingness" behind the stories we tell:

> We generally shift from one narrative stance of agency to another, according to what is dictated to by the situation, the level of moral justification, and the narrative genre – in other words, what is called for by the meaning context in which we position ourselves". (p.123)

Within the presence of medical professionals, some participants chose to remain silent, electing not to voice any protests or different opinions as they had a keen sense that their contribution may reinforce their perceived inability or undermine their attempts to procure help. One participant attempted to demonstrate agency by anchoring his body to the floor, refusing to be subjected to any further psychiatric interactions and the perceived harm inflicted as a result. However, his verbal and physical protest was short-lived.

Medication

Most of the participants with an official ADHD diagnosis indicated that medication was used as the primary intervention. Experiences of ADHD medication were complex and at times contradictory, with only one participant rejecting his medication unreservedly. All participants mentioned the physical side effects of the medication, some of which appeared to be transient and others which were believed to have a permanent effect. Some spoke about the transformative effect of their ADHD medication, producing feelings of being in control and augmenting the potential for improved ability to focus. However, in other cases this effect of the medication seemed to be incontrovertible evidence of their brain-based flaws. Perceived pharmacological effects were markedly influenced by the participants' attitude toward their medication (Rojas Navarro & Vrecko, 2017). Although medication expanded their ability to focus, many ascribed their own shortcomings of not capitalising on this enhanced state for their schoolwork, but rather on other more exciting or interesting aspects

of life. Visual representations of the perceived effect of the medication and changes in character were powerful. Some expressed the transformation as a shattering of their former selves. Others provided TikTok videos to underscore how the medication altered their personality or to signify frustrations with its inefficacy which made the loss of agency patent. Most of the participants felt that their ADHD medication would remain a part of their lives in the foreseeable future. Furthermore, the knowledge about different kinds of medications and their effects was astounding. Just like 'young pharmacists' a good number of participants could recite names of ADHD medication (and other psychopharmaceuticals) as well as their effects with considerable ease, with most knowledge gleaned through personal experience. Agentic themes around medication were expressed in subtle and explicit ways, particularly around the acknowledgment of the normative effect of medication in a school environment that demands docility and compliance, nudging against the status quo and disciplinary power (Foucault, 1977).

School and Teachers

Master narratives are frameworks which offer familiar and acceptable structures within which young people can construct their experiences. As McClean and Syed (2015) argue, master narratives are embedded in the fabric of society and dictate the normative framework against which an individual's life is expected to unfold. Academic journeys are biographical master narratives which contain a collective storyline or normative trajectory of how young people's lives should unfold, establishing a template for what a successful or 'good' life should look like (McClean & Syed, 2015). An ADHD label may provide a protective framework by describing challenges and behaviour as neurobiological deficits, beyond the individual's control and own volition. An ADHD diagnosis may facilitate access to support, academic accommodations and other interventions that may be helpful while navigating the demands of schooling. However, the label may also marginalise young people,

especially within academic settings, positioning individuals within a narrative of disorder, dysfunction and deficit, overshadowing strengths such as creativity, energy and the capacity for divergent thinking.

Narratives about school were replete with frustration, perceived lack of ability, filled with transgressions in the classroom and shortfalls in performance. Most participants considered academic difficulties to be the key drivers of their ADHD diagnosis or how they came to understand themselves according to the characteristics of the phenomenon. The only two individuals who weren't struggling academically articulated a different kind difficulty, primarily connected to maintaining inordinately high levels of academic functioning. Young people's value and worth within our contemporary society is inextricably tied to the ability to conform to master narratives of academic success and normative behaviour. According to this framework, cultural capital is the currency which determines recognition, belonging and future opportunities. Schools are the gatekeepers of this capital, shaping a hierarchy of value that privileges those who are extraordinary academic achievers while often marginalising those who are not.

For many participants, school felt like a harsh, hostile environment, a place or experience they needed to survive as opposed to thrive. In some narratives, there seemed to be a profound mismatch between young people's needs and what the school could supply to facilitate their development, ironically make them feel "dumber" as opposed to "smarter". Schools like many other communities draw sharp boundaries which often determine what young people need to do and be, which ultimately determines who fits in and who doesn't (Yuval-Davis, 2006). School seemed to be a place where some simply did not belong, with the (mis)fit feeling so profoundly awkward and foreign, they described it metaphorically as

feeling like animals, rabid ones to boot, categorising themselves as sub-human, their presence violating the "purity" or orderliness of the classroom (Douglas, 1996). Furthermore, in many instances, experiences within the institution of school seemed to provide a sense of "cruel optimism", a place that could "ignite a sense of possibility" for success, self-improvement or future opportunities, yet is simultaneously paired with impossibility to achieve these strivings (Berlant, 2011, p. 2).

Participants' attempts to locate their place in the world is evident within the narratives around interactions with teachers, where the desire to find meaning and purpose along with a feeling of recognition and belonging were salient (Erikson, 1968). Most expressed a need to please their teachers or a desire for an authentic relationship with them, hoping to be seen as full human beings and not just according to their abilities or in many cases perceived inabilities. Feelings of insignificance and invisibility were apparent during some interactions with teachers and belonging felt conditional, which seemed to be determined by academic ability and conduct within the classroom. Moments of agency within the context of school emerged from teachers' discriminatory treatment which felt like an unofficial segregation strategy of the "smart" from the "not so smart". One particular participant tested his suspicions of his teacher's biased conduct in a covert way, asserting a form of agency and resistance, reversing the roles of surveillance and authority (Foucault, 1977). The three individuals who believed their teachers were the catalyst for their official ADHD diagnosis, all mentioned that it was due to their disruptive behaviour in class, two of these participants were girls and all three were white. This underscores the historical bias toward the kind of behaviour that may initiate an ADHD diagnosis, however, these types of behaviours are usually attributed to boys. It is interesting to note that all black participants with official ADHD diagnoses were all initiated by their parents as opposed to the school. This may allude

to deep-rooted stereotypes in the social institutions of school about black boys who may be viewed as athletically gifted but lack academic potential, and unlike their white counterparts, may remain beyond the realm of concern (Carey, 2021; Harrison et al., 2011). It is possible that black parents may initiate an ADHD diagnosis in an attempt to protect their children from more punitive measures of discipline which is often applied in a racially disparate way (Little & Tolbert, 2018; Moss, 2017).

Parents and Connection to Others

The majority of participants indicated that their parents seemed to be a diagnostic catalyst, citing their parents' anxieties around their academic performance, either at risk of failing or needing something to augment ordinary or sustain already superior academic accomplishments. Parents often view their children's academic functioning as a barometer of their own success and reflection of their parental effort, guidance and values. Hacking (1999) suggests that mental illnesses can be viewed as transient, not in the sense that they are short-lived but rather that they "show up only at some times and places, for reasons which we can only suppose are connected with the culture of those times and places" (p. 100). In knowledge-based global economies, parents are acutely aware that exceptional academic achievement is the idealised and coveted portal to university entrance and increasingly shrinking future prospects of employment. The internalisation of parents' anxieties around school achievement were obvious and palpable among all participants. These anxieties around academic performance are perhaps exacerbated by attending private schools, who are notorious for their vigorous and gruelling academic programs to remain competitive in a very narrow market and an economy of increasing financial constraint.

Adolescence is a time in life where self-concepts are discharged into the world to gain recognition and establish a sense of belonging, and peers are central to this process (Erikson,

1968). Although there was no apparent absence of friendships, or instances of overt rejection by their peers, a key theme of feeling different to their friends was clear. Comparisons were made particularly in the school setting where participants' expressions of academic performance or behaviour in the classroom made them feel distinctly different from their peers. Descriptions of their friends' perceptions of them included references of being excessively talkative, deranged, annoying and having markedly different interests. Some described offline friendships as feeling superficial, sensing that their friends simply tolerated them, while others believed that their spontaneous or impulsive behaviour may be viewed as a redeeming quality, providing others with an endless source of entertainment.

The online world facilitated connections to friendships, continuing meaningful connections made in the offline world despite their geographical location. The value of this connectivity was particularly salient for those who had developed deep and meaningful bonds with friends in the offline world who understood and appreciated their 'quirkiness'. Connection to friends beyond the confines of the physical world, in their own time, transcended difficulties imposed by demanding academic and extramural schedules and other logistical arrangements which were invariably dependent on their parents (Gelles-Watnick, 2023). More especially, the online world provided unlimited options in locating communities filled with people who shared similar interests (Ehrenreich, 2022).

Identity

For most participants the ADHD label was a filter through which they viewed their academic struggles, social difficulties or life in general. It seemed to provide a plausible and simplified reason for the complexities experienced within their lives, and validation of their problems, frustrations and disappointments. Stories about the consequences of belonging to the category of ADHD were either recollections from the past, or explained their current

functioning, and for some it provided a "projection of their future" (Yuval-Davis, 2006, p. 202). For some participants the application of an ADHD label was comparable to a conversion narrative, providing a pivotal moment which presented them with a new identity and way of understanding themselves (Squire, 2007). Although the concept of the conversion narrative is often associated with stories that culminate in resolution, testimony or personal transformation, many of the narratives did not conform neatly to this narrative arc. While some accounts of transformation took the form of redemption or closure, others moved toward narrative complexity, which can be understood as a form of transformation.

Whether it was at a specific event around the dinner table, functioning in school, a moment in a doctor's office, an immediate or slow process of self-identification with the characteristics associated with ADHD, the participants were hailed into this particular subject position, determined by the ideologies attached to social discourses (Althusser 1999) and the ever-narrowing categories of what is believed to be a 'normal child'. Identities were constructed through the internal process of identification, as they became attached or expressed feelings of belonging to the category of ADHD (Bauman, 1996; Hall, 1996). The master narrative of ADHD is replete with negative connotations of a wide range of dysfunction, deficit, disorder and a life trajectory filled with adverse experiences. As Hacking (2007) argues, humans are 'interactive kinds', when individuals are classified in a particular way, they "tend to conform to or grow into the ways they are described" (p. 21). An overwhelming majority of the participants identified themselves as being weird, goofy, chaotic, talkative, dumb, silly, ill-disciplined and lacking in social/academic ability, effectively "suturing" the master narrative of ADHD to their identity (Hall, 1996). However, these negative or pejorative references also provided them with an opportunity to belong, with these articulations of their "enoughness" serving as confirmation as authentic members

of an ADHD category (Blommaert & Varis 2015). As Hall (1996) reminds us, the process of identification is not passive but involves negotiation and resistance. Contestation is at the heart of counter-narratives, demonstrated by one participant positioning his understanding of ADHD as a super power and unique asset. Moreover, some participants engaged the neurodiversity narrative in an attempt to express their need to be recognised as unique in a non-pathologising way. However, this counter narrative still seemed to have the effect of differentiating young people into categories according to those who are more or less abled and ultimately more or less human.

Hall's (1996) notion of identity being complex, dynamic, multifaceted, fluid and context dependent is beautifully demonstrated by the participants through their narratives about life in the online world and (virtual) identities. Empowered by the affordances of social media, notably the ability to communicate asynchronously and manage the visibility of their online representation (Valkenberg & Piotrowski, 2017) provided most participants with a different sense of being in the world, a place where they could construct their own kind of story (McAdams, 2001). Although counter narratives were expressed in stories about life in the offline world, counteractive narratives also surfaced within the online world. Andrews (2014) argues that "individuals tell their stories as members of a historically specific generation" with each generation constructing their stories in their own individual way (p. 85). The virtual world can open multiple possibilities for young people to "reclaim their identity" (Hacking 2007, p. 306), taking back of control from experts and institutions who are no longer considered the primary source of information about ADHD behaviour, diagnoses, and medication.

While it was anticipated that these young people may use the online world as a 'confessional space' for their experiences around ADHD, it did not seem to feature as a presence at all. The narrative tone (McAdams, 1996) of stories about online worlds felt agentic, especially when it facilitated transcending perceived impediments of their appearance or the functioning of their physical body. Interestingly, some participants felt more authentic within their online engagements as opposed to the physical world, as they felt less self-conscious, free from stifling restrictions imposed by their physical world. However, the concept of authenticity itself is deeply contested within social research, where it is increasingly viewed not as an inherent or stable quality, but as a discursively produced and contextually mediated performance. From a narrative identity perspective, what counts as "authentic" is shaped by the available cultural scripts, the audience to whom one is performing, and the technologies through which identities are mediated (Hall, 1996; McAdams, 2001). Bradbury (2020) reminds us that social environments intrude in multiple ways, shaping how identity is expressed, felt and understood. Even when participants believed they were "being themselves" their performances were inevitably mediated by an internalised gaze, an imagined audience whose approval, recognition, or validation informed how they constructed their online presence.

The demonstration of online identities was exquisitely visualised in the creation of some of the participants avatars which could be considered a version of imagoes, "an idealised personification of the self" (McAdams, 2001, p.106). Participants' imaginative construction and engagement with their avatars facilitates identity play, exploring facets of themselves, most of which were not readily accessible, acknowledged or imaginable in the offline world. As Andrews (2014) states "(t)he point here is not that everything we imagine is in fact realisable…but, rather, if something can be imagined it is not 'absolutely

impossible'…" (p. 5). Although some avatars still bore the scars of the offline world symbolised by a diminutive stature, feelings of being invisible, broken horns and red eyes, they also embodied traits that provided the participants with a galvanising effect, providing them with a new, agentic way of being in the world (Franck, 1995). As McAdams (1996) suggests "an individual's favourite metaphors and symbols are reflective of what his or her identity is about" (p. 308). In the virtual world participants could craft the kinds of bodies they wanted people to read, where vectors of race, gender, class, sexuality and ability (Hall, 1996) could be redacted or reformulated, limited only by their imaginations. The participants' body maps were creative and imaginative representations of their experiences within the online world. The outlines varied from an arctic fox, the representation of a body in a crime scene, a non-playing character, assuming an aesthetic position, to a figure divided in half. A large number of outlines visualised their online worlds as a place that felt peaceful and serene. Some assumed a yoga pose, stretched out or curled up in a foetal position, symbolising a reprieve from a demanding and sometimes unforgiving world, or perhaps in preparation to deal with it. These imaginative depictions (Andrews, 2014) provide a vivid sense of the diversity, complexity and utility of their virtual world, a distinctive space where they offer a deliberate portrayal of who they are, which may not be entirely the same as they are in the physical world.

The Online World

The online world is a complex and paradoxical space, with each participant acknowledging the dangers and pitfalls that needed to be navigated. Narratives were filled with virtual horror stories and horrific experiences and encounters with people with nefarious intent. Consequently, most of the bodymaps were filled with marks (most notably in the area of their brain) symbolising the effect of their virtual encounters on their physical bodies as a kind of cyber scar. However, much like the cyborgs Turkle (2017) encountered in the halls of

MIT, most participants remained indifferent to these injuries, ascribing them to the costs of being connected. Although the explicit rules provisioned and reinforced by adults about safe conduct in the online world seemed to be helpful and effective, the implicit rules among young people about online engagement are confusing and contradictory. Most reported that navigating these online conventions felt like they were building the (virtual) ship as they were sailing it. The online world does not exist in its own strata and is penetrated by patterns of hegemony with respect to ideals about body image, beauty, race and class which can be homogenising and constraining.

Initially, the virtual world was considered as a place to enrich experiences during Erikson's (1968) moratorium phase, a time he considers essential for the development of the 'core self'. Most participants recognised that the online world provides more freedom and possibility to explore different roles and identities, a place they describe as feeling ephemeral, private and ostensibly free from adult supervision and surveillance. Apprehension about the enduring nature of images and associations within their virtual worlds was keenly expressed by most participants, acknowledging that they could be forever tethered to their past (Eichhorn, 2019), much like Peter Pan, the archetype of unending youth. Consequently, exceptional care was taken during online activities especially those which could be linked to their identity in the physical world.

Engagement and perception of content on TikTok

The aim of the project was not to analyse or evaluate the videos and produce comment on the functioning of the platform. The focus was how this particular group of adolescents interact with the platform and the kind of information they find meaningful and relevant. Every participant acknowledged TikTok's entertainment value, describing it as a portal into which they could disappear for hours, wasting valuable time. Most of the

participants included the TikTok icon into their bodymaps, confirming perhaps not only the popularity of the space, but its ubiquity among adolescents. It was widely acknowledged that content could be extremely misleading and sometimes pointless, earning it a one-star rating from one of the individuals on his body map. Only two participants spoke about actively posting videos on the site, using it to showcase creative talents such as art and dance, skills they believed were not appreciated by others in their offline world. While the participants were given an open mandate with respect to which to the kinds of videos about ADHD, they felt resonated with them, an overwhelming majority of the content offered included clips about the effects of ADHD medication. The participants' selection of TikTok videos also captured and vocalised their attendant frustrations with school in humorous and subversive ways. Bourdieu (2000) argues that those who occupy devalued subject positions are more likely "to bring to consciousness that which, for others is taken for granted, because they are forced to keep watch on themselves" (p. 193). This was indeed the case with some individuals who admitted to using TikTok to find ways to be better organised, neater and tidier, or an explanation for the 'messiness' of their life. Some stated that they use information gleaned through TikTok videos to "come to terms with their diagnosis" or experiment with their gender and sexuality. Others refashioned their ADHD according to unofficially recognised criteria, extending it with traits like RSD, (re)creating a label that seemed to be sympathetic to their experiences and understanding of themselves. A few participants followed the ever-expanding category of neurodiversity, feeling that it resonated with their struggles and sense of being different. TikTok has a massive reach with endless possibilities and was thus the gateway to procure information which was not always forthcoming in their offline worlds. Although the participants were not instrumental in crafting or posting videos, viewing and sharing them appears to give them an acute sense that

they are not alone and that they find these kinds of frustrations resonate with millions of people across the world, providing them with a sense of validation and belonging.

While other platforms like Instagram, YouTube and Discord were also referenced by the participants, they received less analytical focus in this study. These alternative modalities may shape the experiences of adolescents who have been diagnosed with ADHD or who self-identify with the phenomenon in varied and unexamined ways, which may warrant deeper exploration in future research.

Concluding comments

Neurobiological discourse provided the participants with a clear and intelligible way to make sense of their struggles and difficulties and were instrumental in the way they constructed and viewed themselves. These neurobiological explanations point to individual functioning that is inherently flawed, obfuscating any collective or contextual issues and demands that may be implicated in the manifestation of characteristics associated with ADHD (Timimi, 2005, 2021). The data collection for this study took place shortly after the country emerged from a gruelling lockdown period due to the Covid -19 pandemic. Although the participants were all fortunate enough to attend online school, this was a new and complex process, filled with frustrations, steep learning curves and inadequacies where they ostensibly taught themselves. Furthermore, adolescents relied heavily on social media platforms to stay connected to their peers, and while Covid was not the main instigator of their extended online use, it certainly exacerbated it. Barring a few feint and indirect suggestions, references to engagement with technology and how it may be implicated in their diminished sense of focus and concentration were completely absent in the participants' narratives.

Apart from one participant's reference to her parents' reluctance to talk about mental heal concerns which she attributes to patterns observed within black South African families,

the participants did *not* foreground race within their narratives. This is particularly interesting in such a highly racialised context like South Africa, more especially where incidents of racism remain remarkably evident within the country's schools. White participants made no mention of race and appeared to speak from a position in which race was invisible, irrelevant or taken for granted. White participants' silence on race may be read as a reflection of the structural comfort and normative positioning afforded by whiteness in post-apartheid South Africa. The lack of overt references to race by the black participants may be interpreted as perhaps a conscious refusal or reluctance to confront distressing situations, or difficulty in articulating fears around being considered different. It may have also be an attempt to avoid the criticism that is often pejoratively described in South Africa as 'playing the race card' which implies the individual may be using their race as a strategic tool to gain sympathy or avoid accountability. The lack of racial discourse may suggest that race plays a less central role in the identification of these middle-class adolescents.

> In South Africa we speak about the "legacy of apartheid" as referring to the continued material effects of inequality and poverty". However, this legacy is also less material or tangible and forcefully felt in the visceral traces of racism that the segregationist system that no longer exists has left our collective (un)consciousness. (Bradbury, 2020, p. 22)

While this study engaged critically with issues of structural inequality, race was not a central analytic lens. Future research could explore more directly how ADHD is differently understood, diagnosed and lived across racial lines.

Narrative enquiry provides a vivid and deep understanding of people, allowing us to grasp the complexity, multiplicity and contradiction within their lives through stories (Reissman, 2008). An ADHD label, whether it is conferred by a medical professional, or as a

way of understanding oneself, tends to have a flattening or homogenising effect. The combination of the visual representations and verbal explanations elicited rich and nuanced data about how these young people construct their identities which are fluid and multiple. The visual images could be seen as creating counternarratives that "might not only be a different kind of story but even a different way of telling a story" (Andrews, 2014, p. 1). Invited into their worlds through colour, images and sounds, "weaving the textured threads" (Bradbury, 2017, p. 15) of data together, allowed for a more creative and open-ended understanding of how these adolescents experience themselves as opposed to traditional methodologies. Creative methodologies also provided a different way of conceptualising young people diagnosed with or who self-identify with ADHD, producing a less deterministic way to understand these young people's subjectivities and is thus considered a particular strength of the study. The small sample size and the recruitment of participants who attend private school may limit the study's generalisability and inclusivity. This small sample cannot capture the diversity of experiences of adolescents from less privileged backgrounds who attend poorly resourced government schools. Future studies could address these limitations by including a larger and more diverse sample, including adolescents from a variety of educational settings, allowing for a deeper understanding of the phenomenon across broader socio-economic contexts.

Narrative is central to the understanding of human lives, we are all inherently storytelling beings, using stories to make sense of our experiences, relationships and the world around us (Bradbury, 2020). The narratives of the participants provide a rich illustration of how these young people construct their identities across time, in relation to others and through their embodied experiences. While their lives unfold biologically in a linear fashion, the participants' stories demonstrate magnificent oscillations between the past,

present and future (Bradbury, 2020). This dynamic interplay allows them to continually revise versions of themselves in their articulations about who they are (and who they are not) by fusing later events to earlier happenings and rethinking earlier events in light of future imaginings. Narrative identity is deeply relational as the participants' stories reveal the significant influence of parents, teachers, friends and medical professionals in shaping their understanding of themselves in the world. These relationships are described in varied ways, where connections made some feel misunderstood, infantilised and excluded, to others which were meaningful, empathic and affirming. In addition to their individual stories, the participants narratives were interwoven with generational and societal narratives about performance, expectations, values and ideals that reflect the broader cultural and institutional contexts. The embodied component of narrative identity emphasises the role of the physical body, anchoring identity in the lived, physical experiences of the body. This embodied dimension is especially pertinent in these young people's lives as physical experiences and perceptions of their bodies are markedly influential in how they engage with the world and are understood by others. In addition to their verbal stories, the visual elements of their bodymaps, photographs, music lyrics and collages provides one with a visceral sense of who these young people are. Engagement with an online world challenges the embodied aspect of their narrative identity through the construction of digital selves that transcend their physical realities. Online personas and avatars facilitate the crafting of identities free from the constraints of their embodied lives, enabling them to explore facets of themselves that may not be acknowledged or accessible in the material world. While this freedom from their physical bodies can be refreshing and empowering, the virtual world is a paradoxical space and introduces new pressures with respect to safety, visibility and the permanence of digital representations.

Participants of the study, like all individuals across the globe, are living in an exceptionally precarious and competitive world. The pressures of a modern world are internalised and expressed in multiple ways. The internet is a vital connective tissue that links individuals across the globe, amplifying the pressures and possibilities inherent in modern life. Living in such untenable states of heightened anxiety needs to be managed, and while biomedical interventions in the form of medication may provide temporary relief from this chronic unease, they are not a panacea for the complexity of these challenges and anxieties. It is hoped that this study illuminates the effects of society on the subjectivities of young people and that their stories provide insight into their lived experiences. However, the stories of these young South Africans are not stories of 'failure', 'dysfunction', 'deficit' or 'disorder' as the master narrative of ADHD may imply. They are quite the opposite, bringing into sharp relief their generative forms of solidarity, agency, expressiveness and creativity which help them navigate an exceptionally complex and tenuous world. As the beloved icon of our democracy often emphasised, "young people are special not only because they are vulnerable and are the first to suffer when we adults get things wrong, but also because of their remarkable spirit, their ability to heal not only themselves but their societies as well" (Mandela, 2000).

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Appendix 1: Research Information Letter to the School Principals

Psychology

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Tel: (011) 717 4500 Fax: (011) 717 4559

To the Principal / Director

My name is Linda Moss, and I would like to invite your school to participate in a research study that I will be conducting as part of my PhD degree in Psychology, under the supervision of Prof. Jill Bradbury. The study is titled, *What makes adolescents Tik(Tok)? : The lived experience of ADHD in online and offline worlds.*

In the last decade, the world had experienced digitalisation of all aspects of people's lives at an incredible pace. Smartphones and social networking services (which are almost ubiquitous among most adolescents) are transforming the social life, acts of communication and self - expression of today's youth. This in-depth phenomenological exploration acknowledges that with smartphones as constant companions, the lives and experiences of young people cannot be considered independently from a digital reality, as the boundaries between online and offline worlds are becoming increasingly indistinct. The aim of this study is to contribute to the knowledge about the lived experience of adolescents diagnosed with ADHD or who self-identify with the symptoms of the phenomenon, and how they interact with the world online and offline to create their own (virtual) identities, understand and express themselves. Furthermore, this study will examine how ADHD is positioned, framed, embraced or resisted in popular youth-focused social media and how adolescents diagnosed with ADHD or who understand themselves in this particular way, perceive and experience content posted about the phenomenon in these forums. Drawing on the experiences and perceptions of a group of adolescents may provide a broader understanding of the benefits and risks these online environments may provide young people who are positioned or who understand themselves in this way.

I would like to request permission to work with the children in your school, in particular the

Grade 9 and 10 learners aged 15 and 16 years old whom have either been diagnosed with ADHD or who self-identify with the symptoms of the phenomenon. Please be assured that the purpose of this study is not to diagnose participants with ADHD nor provide them with any therapeutic intervention.

The study consists of two phases, the first requires participants to work within a group comprising of approximately 6 people. This phase of the project will examine how ADHD is positioned in youth-focused social media (e.g. TikTok) and how young people perceive and experience the content posted in these forums. During the second phase of the study, participants will be asked to take part in individual multi-activity orientated sessions and a semi-structured interview to explore the more in-depth phenomenological experience of ADHD in online and offline worlds. The option to conduct the individual sessions with the participants at their home or on the school premises after school will be provided. It is anticipated that three sessions 50-minute sessions will be required to collect the data for this phase of the study. I would therefore request that the school grants me permission to send letters about this study to the parents/guardians of Grade 9 and 10 learners.

Should the parent's child meet the criteria to participate in the study (i.e. the child has been diagnosed with ADHD or self-identifies with ADHD symptoms) they will be asked to consider their child's participation in the study. Once satisfied with the information provided to them about the project, parents/guardians will be asked to complete consent forms and participants will be asked for their verbal and written assent. Data gathering sessions will be scheduled at a time convenient for the school and participants at an appropriate venue on the premises. As the interactions with the participants will be audio-recorded, written consent for this process from the parent/guardian, verbal and written assent from the participant will also be secured. Participants will be provided with a pseudonym and images will be blurred out along with any other information that may disclose the identity of the participant in research reports made available to public audiences.

All participants will be provided with a pseudonym and images contained within any photographs will be blurred out along with any other information that may disclose the identity of the participant or the school in research reports made available to public audiences. Results of the study will be used for my PhD research dissertation and may be used in presentations to other professionals or published in academic journals. All research

data will be deleted after 5 years after the conclusion of the study. In the interim, it will be stored (without any identifying information) on a password protected computer. Only myself and my supervisor will have access to this information, and data will only be used for research or educational purposes. Participants will not be paid for taking part in the study. They will be required to use their cell phones during some of the sessions, however, they will not be required to use any of their own data and as a result not incur any expense while participating in this study.

By taking part in this study, participants will not be disadvantaged in any way, they may withdraw from the study at any time without any penalty. Although it is anticipated that learner's participation in the study will not cause them any distress or harm, should they experience any emotional discomfort as the result of their participation, they may contact the researcher who will arrange counselling (free of charge) with Dr Annemarie Novello (annemarie@drnovello.com).

I would be most grateful if I was permitted to collect this data from your school and the learners and therefore request that permission to do so will be granted in writing. The permission letter should be on your organisation's letterhead, signed and dated, and specifically refer to myself by name and the title of my study.

Please let me know if you would like any further information. I look forward to your response as soon as it is convenient.

My contact details are as follows:

Researcher :Linda Moss
Phone: 082 990 9760
E Mail: 1203936@students.wits.ac.za

Supervisor: Prof: Jill Bradbury
Phone: (011) 717 4515
E Mail: jill.bradbury@wits.ac.za

Yours Sincerely
Linda Moss

Appendix 2: Research Information Letter to the Parents (School Participants)

Psychology

School of Human & Community Development

Witwatersrand

Private Bag 3, WITS, 2050

Tel: (011) 717 4500 Fax: (011) 717 4559

RESEARCH INFORMATION LETTER

Dear Sir / Madam

My name is Linda Moss, and I would like to invite your child to participate in a research study that I will be conducting as part of my PhD degree in Psychology, under the supervision of Prof. Jill Bradbury. The study is titled, *What makes adolescents Tik(Tok)? The lived experience of ADHD in online and offline worlds.*

What is the purpose of the study?

In the last decade, the world had experienced digitalisation of all aspects of people's lives at an incredible pace. Smartphones and social networking services (which are almost ubiquitous among most adolescents) are transforming the social life, acts of communication and self - expression of today's youth. This in-depth phenomenological exploration acknowledges that with smartphones as constant companions, the lives and experiences of young people cannot be considered independently from a digital reality, as the boundaries between online and offline worlds are becoming increasingly indistinct. The aim of this study is to contribute to the knowledge about the lived experience of adolescents diagnosed with ADHD or who self-identify with the symptoms of the disorder, and how they interact with the world online and offline to create their own (virtual) identities, understand and express themselves. Furthermore, this study will examine how ADHD is positioned, framed, embraced or resisted in popular youth-focused social media (e.g. TikTok) and how adolescents diagnosed with ADHD or who understand themselves in this particular way, perceive and experience content posted about the phenomenon in these forums. Drawing on the experiences and perceptions of a group of adolescents may provide a broader understanding of the benefits and risks these

online environments may provide young people who are positioned or who understand themselves in this way. Please be assured that the purpose of this study is not to diagnose participants with ADHD nor provide them with any therapeutic intervention.

What will my child be asked to do?

If your child has been diagnosed with ADHD or self-identifies as having ADHD (without any official diagnosis), he/she is invited to participate in this study. Should you agree to your child's participation in the study, I will ask you to complete a consent form, and your child will be asked to provide his/her verbal and written assent. During the first phase of the study, your child will be asked to participate in a group session comprising of approximately 6 participants of similar age. This phase of the project will examine how ADHD is positioned in youth-focused social media (like TikTok) and how young people perceive and experience the content posted in these forums. The session will last approximately 50 minutes and will take place in a private setting on the school premises, during a time that is appropriate and convenient to both the school and the participants.

During the second phase of the study, participants will be asked to take part in individual multi-activity orientated sessions (which will include photography, music, the creation of art-based collages, bodymaps) and a discussion to explore the more in-depth personal experience of ADHD in online and offline worlds. These individual sessions with the participants may be conducted in their home or on the school premises after school. It is anticipated that three sessions 50-minute sessions will be required to collect the data for this phase of the study. With your permission, the interactions that take place will be recorded using a voice recorder.

Will my child's participation in the study put him/ her at risk or cause him/her any convenience?

The sessions will be arranged and conducted in a way that no other children at school know that your child is participating in this study. It is not anticipated that your child's participation will cause him/her any inconvenience and it will not interfere with his/her school work. Participating in this study is completely voluntary. Your child does not have to answer any questions he/she prefers not to answer. If you choose for your child to participate in the study and he/she feels any discomfort at any time, we will stop and resume another time. Should you change your mind about your child's participation, you may remove your child from the study at any time. If you want the data in which your child appears to be withdrawn from the

study, even after the focus group and or individual sessions have been concluded, you can request withdrawal at any time by contacting me directly.

What will the recording be used for and how will they be stored?

The data collected from this project will be used for my PhD research dissertation and may be used in presentations to other professionals or published in academic journals. All research data will be deleted 5 years after the study has been concluded. Until then, it will be stored (without any identifying information) on a password protected computer. Only myself and my supervisor will have access to this information, and data will only be used for research or educational purposes. With your permission, the data collected from this research project may be used by other researchers, however, this will be done in an anonymised format and will also be subject to clearance of their own ethical review boards.

Access to free counselling services

Should your child experience any distress as a direct result of their participation in this study, please make contact with me to arrange counselling (free of charge) at a time and place that is convenient to both you and your child with Dr Annemarie Novello who may be contacted via her email address (annemarie@drnovello.com) or cell phone 082 5570803.

Will the information my child provides be confidential?

Your child will be provided with pseudonyms (false name), and his/her image blurred out along with any other information that may disclose your child' identity in videos or any photographs. You may be concerned that the things your child does or says might be made public and used against him/her in some way. I would like to reassure you that his/her identity will be kept private, and your child will not be personally identified in any research reports or presentations that are made available to public audiences. The researcher will personally transcribe the audio tapes, and all identifying information will be excluded from the transcript. Your child will not be identifiable from the transcripts or photographs.

What are the potential benefits to me, my child and society?

Drawing on the experiences and perceptions of a group of adolescents diagnosed with ADHD may provide broader understanding of the function, value and challenge these online environments offer young people. This study hopes to inform practical recommendations and interventions that are based on the understanding of young people's experiences, challenges

and concerns surrounding their diagnosis of ADHD.

Will my child be paid to participate?

Your child will not receive any payment for participating in the study. They will be required to use their cell phones during some of the sessions, however, they will not be required to use any of their own data, and as a result will not incur any expense while participating in the study.

Rights of research participants

You may withdraw your consent at any time and discontinue your child's participation without penalty. You are not waiving any legal claims or rights due to your child's participation in this research study. Should you have any concerns or complaints regarding the ethical procedures of this study, you are welcome to contact the University's Human Research Ethics Committee (Non-medical), by telephoning +27 (0)11 717 1408 or email hrecnon-medical@wits.ac.za.

How to get in touch with the researcher

If you have any questions during or afterwards about this research, please feel free to make contact with me on the details listed below.

Linda Moss
Phone: 0829909760
E Mail:1203936@students.wits.ac.za

Supervisor: Prof: Jill Bradbury
Phone: (011) 717 4515
E Mail: jill.bradbury@wits.ac.za

Thank you for your consideration.

Yours Sincerely
Linda Moss

Appendix 3: Research Information Letter (School Participants)

Psychology

School of Human & Community Development
University of the Witwatersrand
Private Bag 3, WITS, 2050
Tel: (011) 717 4500 Fax: (011) 717 4559

RESEARCH INFORMATION LETTER

My name is Linda Moss, and I would like to invite you to take part in a research study that I will be doing as part of my doctorate in Psychology under the supervision of Prof. Jill Bradbury. The title of my study is, *What makes adolescents Tik(Tok)? The lived experience of ADHD in online and offline worlds.*

What is this study about study?

My study is about teenagers who have either been told by a doctor that they have Attention Deficit Hyperactivity Disorder (ADHD) or who understand themselves as having ADHD without a doctor telling them. This project is interested in the experiences of these young people and how they use social media. Another goal of the project is to understand how online spaces can either be helpful or unhelpful for these teenagers. The study has been divided into two main parts. The first part explores what is being said about ADHD in popular social media platforms like TikTok and what young people think about what is being said about ADHD. The second part of study will focus on how young people with ADHD use the online and offline world to express themselves, understand who they are, find information and support.

What will I be asked to do?

If you would like to take part in the study, I will ask you to join a group session with other teenagers of a similar age from your school, who also have ADHD or who understand themselves as having ADHD. During this first session you will be asked about your thoughts on what is being said about ADHD on social media platforms like TikTok. The session will last about 50 minutes and will take place at school during a time that will suit your timetable. What is said during the session will be audio recorded using a cell phone. The next part of the project is made up of 3 individual sessions each lasting about 50 minutes. During these

sessions you will be asked to take part in activities such as photography, music, the creation of art-based collages, bodymaps and informal talks. The sessions will be set up after school hours in a private place either at school or in your home or other venue that suits you and your parents/caregiver. The talks we have during the sessions will be recorded using an audio recorder on a cell phone.

Will being part of this study put me at risk or cause any problems for me?

The sessions will be set up in a way that no other children (other than those who also choose to be part of the group) at school will know that you are taking part in this study. The sessions will be planned so that it will not interfere with your schoolwork. It is your choice as to whether you take part in this study. If you decide to take part, you do not have to answer any questions that you feel you do not want to answer. If at any time you feel uncomfortable, you can change your mind and leave the study. If you decide to leave the study, you can ask that anything you have said or done to be deleted, even after the sessions have ended. You can ask to be taken out of the study by phoning or emailing me or asking your parent/guardian to contact me.

What will the recordings be used for?

The recordings will be used for my PhD (Doctorate) research project and may be used in during meetings with other professionals or it might appear in academic magazines (journals) or books. All the information that is collected during the study will be deleted 5 years after the study ends. Until then, all the information will be kept (without any information that may identify you) on a computer that is protected with a password. Only myself and my supervisor will be able to access the information which will only be used for research or for educational reasons.

Will the information I give be kept private?

The researcher will do everything possible to make sure that people outside of the group will not know you are taking part in the project and what you say during the groups. However, the researcher can't be completely sure that other group members will do the same. To protect everyone's privacy, all group members will be asked not to share any details about who is taking part and what is being said with anyone outside the group.

When writing up the research report, I (the researcher) will keep you our identity completely private. I will personally write down the information from the audio tapes I use to record the

sessions. You will be given a pseudonym, which is a false name so no one can identify you. Any other information that may identify you will be blurred out on the video you might take part in during the last session. Even so, you may feel that some things you have said or done in the sessions may make your identity known to others. Please be sure that none of this information will be included in my project.

How will this study help me and society?

This study may be able to help us understand more about teenagers with ADHD and add to what we know about how useful (or not) online spaces can be for young people. This study hopes to offer helpful ideas that are based on young people's experiences, challenges and worries about their ADHD.

Will I be paid to participate?

You will not be paid for taking part in the study. You will be given juice, water and light snacks during the sessions. As you will be asked to access TikTok on your own cell phone, data to do so will be provided by the researcher so that you don't have to pay anything while taking part in this project.

Access to free counselling services

If you feel that by taking part in any of the sessions has made you feel upset, you can tell the researcher and she will make a plan for you to talk to a counsellor by the name of Dr Annemarie Novello, her email address is (annemarie@drnovello.com) or her cell phone number is 082 5570803. This will not cost you or your family any money.

Should you have any worries or complaints about how this study is being carried out, you are welcome to contact or ask your parents to contact the University's Human Research Ethics Committee (Non-medical), by telephoning +27 (0)11 717 1408 or email hrecnon-medical@wits.ac.za

How can I get in contact with the researcher?

Linda Moss
Phone: 0829909760
E Mail. 1203936@students.wit.ac.za

Supervisor: Prof: Jill Bradbury
Phone: (011) 717 4515
E Mail: jill.bradbury@wits.ac.za

Appendix 4: Consent Form – Parent/Guardian for Child to Participate in the Study

(School Participants)

Psychology

School of Human & Community Development

University of the Witwatersrand

Private Bag 3, WITS, 2050

Tel: (011) 717 4500 Fax: (011) 717 4559

CONSENT OF LEARNER'S PARENT / GUARDIAN TO PARTICIPATE IN RESEARCH

Name of Study: *What makes adolescents Tik(Tok)? The lived experience of ADHD in online and offline worlds.*
Name of Researcher: Linda Moss

I ……...agree for my child……..……..*(Child's name)* to participate in this research study. The research has been explained to me and I understand what my child's participation will involve. I agree to the following: (Please circle the relevant options below).

The group session conducted on school premises will be arranged in a manner that other children in the school outside the group will not know that my child is taking part in the study	YES	NO
The individual research sessions will be conducted either on the school premises or at my home. Should I choose for the sessions to take place on the school premises, they will be arranged after school in a manner that other children in the school (outside the group) will not know that my child is taking part in the study	YES	NO
I agree that the researcher may use anonymous quotes in her research report.	YES	NO
I agree that the sessions may be audio recorded.	YES	NO
My child's participation in this study is completely voluntary.	YES	NO
My child does not have to answer any questions that he/she would prefer not to answer.	YES	NO
If I choose for my child to participate in the study and he/she feels any discomfort as a result of participating, I can change my mind and withdraw my child from the study at any time.	YES	NO

If I want the data in which my child appears to be withdrawn from the study, even after the interviewing and recording is complete, I can request withdrawal at any time by contacting the researcher directly.	YES	NO
My child's identity will be kept private and will not be identified in any research reports or presentations that are made available to public audiences.	YES	NO
I agree that the information my child provides may be used anonymously after this project has ended, for academic purposes by other researchers, subject to their own ethics clearance being obtained.	YES	NO
My child will not be paid for participating in this research.	YES	NO
My child will provide verbal and written assent to take part in the study.	YES	NO
Should my child's participation cause him/her any significant distress, access to free counselling service provided by Dr Annemarie Novello who is contactable via email (Annemarie.drnovello.com) or on her cell phone number 082 5570803.	YES	NO

Please print your name and sign in the space below.

_____	_____
Name of Parent	Telephone Number
_____	_____
Signature of Parent	Date
_____	_____
Signature of Researcher	Date

Linda Moss
Phone: 0829909760
E Mail: 1203936@students.wits.ac.za

Supervisor: Prof: Jill Bradbury
Phone: (011) 717 4515
E Mail: jill.bradbury@wits.ac.za

Appendix 5: Participant Assent Form To Participate in the Study (School Participants)

Psychology

School of Human & Community Development

University of the Witwatersrand

Private Bag 3, WITS, 2050

Tel: (011) 717 4500 Fax: (011) 717 4559

VERBAL / WRITTEN ASSENT TO PARTICIPATE IN RESEARCH

Name of Study: *What makes adolescents Tik(Tok)? The lived experience of ADHD in online and offline worlds.*

Name of Researcher: Linda Moss

I agree to take to part in this research study. The researcher has explained what the study is about and what I would need to do if I decided to take part. I agree to the following: (Please circle the relevant options below).

- The group session will take place on school property in a way that no other children outside the group will know that I am taking part. YES NO
- The individual sessions between me and the researcher will include activities with music, photography, art and discussions. They will take place either at school or at my home. If these meetings take place at school they will be set up in a way that no other children outside the group will know that I am taking part. YES NO
- The researcher will not tell anyone outside the group that I am taking part and what I say during the sessions. She can't be completely sure that other group members will do the same, but the researcher will tell all group members how important it is to not share any information about who is taking part and what is said when we are together. YES NO
- I will not tell anyone outside of the group who is taking part and what they say during our time together. YES NO
- I agree that the researcher may use quotes (what I say during the group session), but she will not tell others who said it. YES NO

- I agree that what is said during the sessions will be audio recorded. YES NO
- It is up to me to decide if I want to take part in this study. YES NO
- I don't have to answer any questions I would wish not to answer. YES NO
- If I take part in the project, and I don't feel comfortable, I can change my mind and leave the group at any time. YES NO
- If I want the information to be taken out of the study, (even after the sessions) I can asked to be taken out of the study by contacting the researcher or asking my parents / guardian to phone or email her. YES NO
- My identity will be kept private, my name or any photos /videos of me taken during the project will not appear in any information that is open to the public. YES NO
- Other researchers may want to use the information collected from this study, none of my private information will be given to them and they can only use it for educational reasons. YES NO

.

- I will not be paid for taking part in the research. YES NO
- If I feel that by taking part in this research has made me feel upset, I can ask the researcher who will plan for me to talk to a counsellor for free. This person's name is Annemarie Novello and can be contacted via her email address (annemarie@drnovello.com) or on her cell phone number 082 5570803. YES NO

Name of person taking part	Telephone Number
Signature of person taking part	Date
Signature of Researcher	Date

Contact Numbers:
Researcher:
Linda Moss
Phone: 0829909760
E Mail: 1203936@students.wits.ac.za

Supervisor:
Prof: Jill Bradbury
Phone: (011) 717 4515
E Mail: jill.bradbury@wits.ac.za

Appendix 6: Research Information Letter to the Parents (Independent Participants)

Psychology

School of Human & Community Development

University of the Witwatersrand

Private Bag 3, WITS, 2050

Tel: (011) 717 4500 Fax: (011) 717 4559

RESEARCH INFORMATION LETTER

Dear Sir / Madam

My name is Linda Moss, and I would like to invite your child to participate in a research study that I will be conducting as part of my PhD degree in Psychology, under the supervision of Prof. Jill Bradbury. The study is titled, *What makes adolescents Tik(Tok)? The lived experience of ADHD in online and offline worlds.*

What is the purpose of the study?

In the last decade, the world had experienced digitalisation of all aspects of people's lives at an incredible pace. Smartphones and social networking services (which are almost ubiquitous among most adolescents) are transforming the social life, acts of communication and self - expression of today's youth. This in-depth phenomenological exploration acknowledges that with smartphones as constant companions, the lives and experiences of young people cannot be considered independently from a digital reality, as the boundaries between online and offline worlds are becoming increasingly indistinct. The aim of this study is to contribute to the knowledge about the lived experience of adolescents diagnosed with ADHD or who self-identify with the symptoms of the disorder, and how they interact with the world online and offline to create their own (virtual) identities, understand and express themselves. Furthermore, this study will examine how ADHD is positioned, framed, embraced or resisted in popular youth-focused social media (e.g. TikTok) and how adolescents diagnosed with ADHD or who understand themselves in this particular way, perceive and experience content posted about the phenomenon in these forums. Drawing on the experiences and perceptions of a group of adolescents may provide a broader understanding of the benefits and risks these online environments may provide young people who are positioned or who understand

themselves in this way. Please be assured that the purpose of this study is not to diagnose participants with ADHD nor provide them with any therapeutic intervention.

What will my child be asked to do?

If your child has been diagnosed with ADHD or self-identifies as having ADHD (without any official diagnosis), he/she is invited to participate in this study. Should you agree to your child's participation in the study, I will ask you to complete a consent form, and your child will be asked to provide his/her verbal and written assent. It is anticipated that four 50-minute sessions will be required to collect the data for the study. The first session will examine how ADHD is positioned in youth-focused social media (like TikTok) and how young people perceive and experience the content posted in these forums. The next three sessions will include multi-activity orientated sessions (which will include photography, music, the creation of art-based collages, bodymaps) and a discussion to explore the more in-depth personal experience of ADHD in online and offline worlds. The sessions will last approximately 50 minutes and will take place in a private setting either in your home or other suitable venue that is convenient to both you and your child. With your permission, the interactions that take place will be recorded using a voice recorder.

Will my child's participation in the study put him/ her at risk or cause him/her any convenience?

The sessions will be arranged and conducted in a way that no one will know that your child is participating in this study. It is not anticipated that your child's participation will cause him/her any inconvenience and it will not interfere with his/her school work. Participating in this study is completely voluntary. Your child does not have to answer any questions he/she prefers not to answer. If you choose for your child to participate in the study and he/she feels any discomfort at any time, we will stop and resume another time. Should you change your mind about your child's participation, you may remove your child from the study at any time. If you want the data in which your child appears to be withdrawn from the study, even after the sessions have been concluded, you can request withdrawal at any time by contacting me directly.

What will the recording be used for and how will they be stored?

The data collected from this project will be used for my PhD research dissertation and may be used in presentations to other professionals or published in academic journals. All research

data will be deleted 5 years after the study has been concluded. Until then, it will be stored (without any identifying information) on a password protected computer. Only myself and my supervisor will have access to this information, and data will only be used for research or educational purposes. With your permission, the data collected from this research project may be used by other researchers, however, this will be done in an anonymised format and will also be subject to clearance of their own ethical review boards.

Access to free counselling services

Should your child experience any distress as a direct result of their participation in this study, please make contact with me to arrange counselling (free of charge) at a time and place that is convenient to both you and your child with Dr Annemarie Novello who may be contacted via her email address (annemarie@drnovello.com) or cell phone 082 5570803.

Will the information my child provides be confidential?

Your child will be provided with pseudonyms (false name), and his/her image blurred out along with any other information that may disclose your child' identity in videos or any photographs. You may be concerned that the things your child does or says might be made public and used against him/her in some way. I would like to reassure you that his/her identity will be kept private, and your child will not be personally identified in any research reports or presentations that are made available to public audiences. The researcher will personally transcribe the audio tapes, and all identifying information will be excluded from the transcript. Your child will not be identifiable from the transcripts or photographs.

What are the potential benefits to me, my child and society?

Drawing on the experiences and perceptions of a group of adolescents diagnosed with ADHD or who self-identify with the characteristics of the phenomenon may provide broader understanding of the function, value and challenge these online environments offer young people. This study hopes to inform practical recommendations and interventions that are based on the understanding of young people's experiences, challenges and concerns surrounding their diagnosis of ADHD.

Will my child be paid to participate?

Your child will not receive any payment for participating in the study. They will be required to use their cell phones during some of the sessions, however, they will not be required to use

any of their own data, and as a result will not incur any expense while participating in the study.

Rights of research participants

You may withdraw your consent at any time and discontinue your child's participation without penalty. You are not waiving any legal claims or rights due to your child's participation in this research study. Should you have any concerns or complaints regarding the ethical procedures of this study, you are welcome to contact the University's Human Research Ethics Committee (Non-medical), by telephoning +27 (0)11 717 1408 or email hrecnon-medical@wits.ac.za.

How to get in touch with the researcher

If you have any questions during or afterwards about this research, please feel free to make contact with me on the details listed below.

Linda Moss
Phone: 0829909760
E Mail:1203936@students.wits.ac.za

Supervisor: Prof: Jill Bradbury
Phone: (011) 717 4515
E Mail: jill.bradbury@wits.ac.za

Thank you for your consideration.

Yours Sincerely
Linda Moss

Appendix 7: Research Information Letter to the Participants (Independent Participants)

Psychology

School of Human & Community Development

University of the Witwatersrand

Private Bag 3, WITS, 2050

Tel: (011) 717 4500 Fax: (011) 717 4559

RESEARCH INFORMATION LETTER

My name is Linda Moss, and I would like to invite you to take part in a research study that I will be doing as part of my doctorate in Psychology under the supervision of Prof. Jill Bradbury. The title of my study is, *What makes adolescents Tik(Tok)? The lived experience of ADHD in online and offline worlds.*

What is this study about study?

My study is about teenagers who have either been told by a doctor that they have Attention Deficit Hyperactivity Disorder (ADHD) or who understand themselves as having ADHD without a doctor telling them. This project is interested in the experiences of these young people and how they use social media. Another goal of the project is to understand how online spaces can either be helpful or unhelpful for these teenagers. The study has been divided into two main parts. The first part explores what is being said about ADHD in popular social media platforms like TikTok and what young people think about what is being said about ADHD. The second part of study will focus on how young people with ADHD use the online and offline world to express themselves, understand who they are, find information and support.

What will I be asked to do?

If you would like to take part in the study, I will ask you to be part of four individual sessions each lasting about 50 minutes. During this first session you will be asked about your thoughts on what is being said about ADHD on social media platforms like TikTok. The next three sessions will include activities such as photography, music, the creation of art-based collages,

bodymaps and informal talks. The sessions will be set up after school hours in a private place in your home or other venue that suits you and your parents/caregiver. The talks we have during the sessions will be recorded using an audio recorder on a cell phone.

Will being part of this study put me at risk or cause any problems for me?

The sessions will be set up in a way that no one (other than your parent or guardian) will know that you are taking part in this study. The sessions will be planned so that it will not interfere with your schoolwork. It is your choice as to whether you take part in this study. If you decide to take part, you do not have to answer any questions that you feel you do not want to answer. If at any time you feel uncomfortable, you can change your mind and leave the study. If you decide to leave the study, you can ask that anything you have said or done to be deleted, even after the sessions have ended. You can ask to be taken out of the study by phoning or emailing me or asking your parent/guardian to contact me.

What will the recordings be used for?

The recordings will be used for my PhD (Doctorate) research project and may be used in during meetings with other professionals or it might appear in academic magazines (journals) or books. All the information that is collected during the study will be deleted 5 years after the study ends. Until then, all the information will be kept (without any information that may identify you) on a computer that is protected with a password. Only myself and my supervisor will be able to access the information which will only be used for research or for educational reasons.

Will the information I give be kept private?

When writing up the research report, I (the researcher) will keep you our identity completely private. I will personally write down the information from the audio tapes I use to record the sessions. You will be given a pseudonym, which is a false name so no one can identify you. Any other information that may identify you will be blurred out. Even so, you may feel that some things you have said or done in the sessions may make your identity known to others. Please be sure that none of this information will be included in my project.

How will this study help me and society?

This study may be able to help us understand more about teenagers with ADHD and add to what we know about how useful (or not) online spaces can be for young people. This study

hopes to offer helpful ideas that are based on young people's experiences, challenges and worries about their ADHD.

Will I be paid to participate?

You will not be paid for taking part in the study. You will be given juice, water and light snacks during the sessions. As you will be asked to access TikTok on your own cell phone, data to do so will be provided by the researcher so that you don't have to pay anything while taking part in this project.

Access to free counselling services

If you feel that by taking part in any of the sessions has made you feel upset, you can tell the researcher and she will make a plan for you to talk to a counsellor by the name of Dr Annemarie Novello, her email address is (annemarie@drnovello.com) or her cell phone number is 082 5570803. This will not cost you or your family any money.

Should you have any worries or complaints about how this study is being carried out, you are welcome to contact or ask your parents to contact the University's Human Research Ethics Committee (Non-medical), by telephoning +27 (0)11 717 1408 or email hrecnon-medical@wits.ac.za

How can I get in contact with the researcher?

Linda Moss
Phone: 0829909760
E Mail. 1203936@students.wit.ac.za

Supervisor: Prof: Jill Bradbury
Phone: (011) 717 4515
E Mail: jill.bradbury@wits.ac.za

Appendix 8: Consent Form – Parent / Guardian for Child to Participate in the Study

Psychology

School of Human & Community Development

University of the Witwatersrand

Private Bag 3, WITS, 2050

Tel: (011) 717 4500 Fax: (011) 717 4559

CONSENT OF LEARNER'S PARENT / GUARDIAN TO PARTICIPATE IN RESEARCH

Name of Study: *What makes adolescents Tik(Tok)? The lived experience of ADHD in online and offline worlds.*

Name of Researcher: Linda Moss

I ……...agree for my child……..……..*(Child's name)* to participate in this research study. The research has been explained to me and I understand what my child's participation will involve. I agree to the following: (Please circle the relevant options below).

The research sessions will be conducted either at my home or any other appropriate private venue. The sessions will be arranged in a manner that no one will know that my child is taking part in the study	YES	NO
I agree that the researcher may use anonymous quotes in her research report.	YES	NO
I agree that the sessions may be audio recorded.	YES	NO
My child's participation in this study is completely voluntary.	YES	NO
My child does not have to answer any questions that he/she would prefer not to answer.	YES	NO
If I choose for my child to participate in the study and he/she feels any discomfort as a result of participating, I can change my mind and withdraw my child from the study at any time.	YES	NO
If I want the data in which my child appears to be withdrawn from the study, even after the interviewing and recording is complete, I can request withdrawal at any time by contacting the researcher directly.	YES	NO
My child's identity will be kept private and will not be identified	YES	NO

in any research reports or presentations that are made available to public audiences.

I agree that the information my child provides may be used anonymously after this project has ended, for academic purposes by other researchers, subject to their own ethics clearance being obtained.	YES	NO
My child will not be paid for participating in this research.	YES	NO
My child will provide verbal and written assent to take part in the study.	YES	NO
Should my child's participation cause him/her any significant distress, access to free counselling service will be provided by Dr Annemarie Novello who is contactable via email (Annemarie.drnovello.com) or on her cell phone number 082 5570803.	YES	NO

Please print your name and sign in the space below.

_____	_____
Name of Parent	Telephone Number
_____	_____
Signature of Parent	Date
_____	_____
Signature of Researcher	Date

Linda Moss
Phone: 0829909760
E Mail: 1203936@students.wits.ac.za

Supervisor: Prof: Jill Bradbury
Phone: (011) 717 4515
E Mail: jill.bradbury@wits.ac.za

Appendix 9: Participant Assent Form to Participate in the Study (Independent Participants)

Psychology

School of Human & Community Development

University of the Witwatersrand

Private Bag 3, WITS, 2050

Tel: (011) 717 4500 Fax: (011) 717 4559

VERBAL / WRITTEN ASSENT TO PARTICIPATE IN RESEARCH

Name of Study: *What makes adolescents Tik(Tok)? The lived experience of ADHD in online and offline worlds.*

Name of Researcher: Linda Moss

I agree to take to part in this research study. The researcher has explained what the study is about and what I would need to do if I decided to take part. I agree to the following: (Please circle the relevant options below).

• The private sessions between me and the researcher will include activities like TikTok videos, music, photography and art. These sessions will take place at my home or any other place that is suits me and my parents/guardian.	YES	NO
• I agree that the researcher may use quotes but she will not tell others who said it.	YES	NO
• I agree that what is said will be audio recorded using a cell phone	YES	
• It is up to me to decide if I want to take part in this study.	YES	NO
• I don't have to answer any questions I would wish not to answer.	YES	NO
• If I take part in the project, and I don't feel comfortable, I can change my mind and leave at any time.	YES	NO
• If I want the information to be taken out of the study at any time (during or after the sessions) I can asked to be taken out of the study by contacting the researcher or asking my parents / guardian to phone or email her.	YES	NO
• My identity will be kept private, my name or any photos /videos of me taken during the project will not appear in any information	YES	NO

that is open to the public.

- Other researchers may want to use the information collected from this study, none of my private information will be given to them and they can only use it for educational reasons. YES NO

.

- I will not be paid for taking part in the research. YES NO

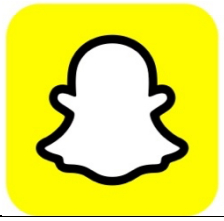
- If I feel that by taking part in this research has made me feel upset, I can ask the researcher who will plan for me to talk to a counsellor for free. This person's name is Annemarie Novello and can be contacted via her email address (annemarie@drnovello.com) or on her cell phone number 082 5570803. YES NO

Name of person taking part	Telephone Number
Signature of person taking part	Date
Signature of Researcher	Date

Contact Numbers:
Researcher:
Linda Moss
Phone: 0829909760
E Mail: 1203936@students.wits.ac.za

Supervisor:
Prof: Jill Bradbury
Phone: (011) 717 4515
E Mail: jill.bradbury@wits.ac.za

Appendix 10: Sample of Ice-Breaker Activity – Introductory Session

How We See Social Media – Same / Different		
	Love it! Keep in contact with my family and friends Post pictures of my holiday	Isn't this what old people use?
	Check out these pics of my dog!	Check out these super cool selfies of me with duck lips
	A source of inspiration for decorating my home, garden and cooking	Isn't this what old people use to procrastinate?
	# let's not go there – those filters are dreadful!	Loving it, one of my favourites Love those filters
	This is what teenagers use to entertain themselves # down the rabbit hole Isn't this dangerous? Place for predators?	#dance #challenge #fyp
	Great when I have to vent about something #nevergoingbackthere	Awesome to voice my opinion # Sarahs party # Idontcarethisispublic
	What???	Great for Gamers! Hang out with friends

Appendix 11 – Sample Questions / Instructions– TikTok Videos

Warm up Questions:

What do you think about TikTok?

Is it useful or a problem for young people?

What is the greatest advantage or disadvantage of the app?

How often to you use the App?

Do your friends use the App?

Do you post content on the App?

Do you comment on videos?

How many people do you follow, and follow you on TikTok?

What do you think will happen with TikTok in the future? Are there any other apps you think will replace it?

Initial Instruction:

Please use your mobile phones and log into the TikTok app. Select 2 to 3 videos about ADHD that you think may be important to share in a later discussion about what is being said about ADHD in this space, how it is being described, how it is experienced by those who are diagnosed or who identify with the symptoms of the disorder. There are no right or wrong selection of the videos, they may include anything you think may be important, they can include ADHD challenges, checking for ADHD symptoms, hacks on how to ADHD etc.

Sample questions about the video selection:

- What videos do you think describe ADHD the best?
- Which videos are the most accurate and inaccurate?
- Are they trustworthy?
- Are they helpful? Unhelpful?
- Would you use any of them to explain what it is like living with ADHD to someone who didn't know anything about it?
- Can you relate to these videos?
- Do any of these videos frustrate or irritate you?
- Which are the most entertaining?
- Do you think these videos are relevant to South African teenagers?

- Are there videos or aspects of the videos that you wish were applicable to you in South Africa?
- What do you think the main themes of the videos are?
- Do you think your parents, teachers, therapists would benefit from watching these videos
- Would you suggest that other teenagers should watch them?
- Do you think TikTok is a good source of information about ADHD?
- If you were to make a TikTok video about ADHD, what do you think would be important to include, what would you like other people (teachers, parents, doctors, friends etc.) to know?
- Have you ever posted videos about ADHD on TikTok
- Do you follow any #ADHD
- Have you used the app to check symptoms for any other condition (physical health, mental health)
- Do you think there are better apps that are more accurate sources about ADHD?
- Do you think it is a good place for professionals to post information about ADHD?

Appendix 12: Collage about Perceptions and Experiences of ADHD – Instructions and Sample Questions

Today I am going to ask you to construct a collage about what it is like to be a teenager with ADHD. Please make use of any of these items (markers, pens, magazines, stickers, glue, cardboard, coloured paper and other art materials). You can draw, cut out pictures, write on your cardboard to describe thoughts, feelings and experiences about ADHD. There is also a printer for you to use if you would like to print any images for your collage.

Here are just some ideas to get you started:

What it's like being a teenager with ADHD

What are your experiences with the ADHD – this can include how old you were when you were diagnosed, who diagnosed you, what happened once you were diagnosed, how you feel about taking medication for ADHD if you are currently taking any.

What life was like before or after your diagnosis?

As teenagers, music can play an important role in your lives, it is closely linked with our memories, our emotions and experiences. There are a lot of tracks that feature ADHD in the lyrics… here is an example (play ADHD by Joyner Lucas).

While you are constructing your collage about ADHD, I would like you to think of any music (with or without lyrics/words) that may represent what it is like having ADHD. There is no right or wrong choice, the track must just be meaningful to you. The music doesn't have to contain ADHD in the lyrics. Please include your selection of music on your collages.

Appendix 13: Body Maps Exploring Online Experiences - Instructions

Today we are going to explore how you use social media, what these spaces mean to you, which platforms you use the most. To start the exercise, you will be asked to draw a life-size representation of yourself on this paper. We will use this outline to add different kinds of information. Firstly, think about the position of your body outline, perhaps you can draw it in a way that shows something about you when you are using social media. Let's add some detail:

- *Use any of the paints, pastels, thick markers etc. to make an outline around your body shape.*
- *Draw symbol to represent what social media means to you*
- *Draw in which social media platforms are the most important to you or the ones you use or rely on the most*
- *Add in details of who or what supports or helps you the most – these could be people, online groups, systems or apps in the online world*
- *Mark points on your body where you think by being on social media has any kind of physical effect on your body*
- *Mark points in a different colour where you think by interacting with online worlds has an effect on you emotionally*
- *Add details to your face, like a self-portrait, of how you look or how you would like others to see you in an online world.*
- *Add a message, something you think is important for others to know about teenagers using social media.*
- *Think about a personal slogan (this is a kind of saying) you would like to add, it can also be a poem, a prayer of any kind, a saying that is important to you.*
- *Somewhere on your body map, draw in an avatar (explain what an avatar is to those who are unsure) that you use or would like to use to represent yourself online, if you have any usernames for Snapchat, TikTok, Instagram etc. you can also add these too.*
- *Continue to decorate and add detail to your body-map until you are happy with the results.*

Once the body-map is complete, the participant will be asked to tell their story behind their construction, the researcher will ask questions to clarify the use of colour, shapes and symbols if this does not form part of the personal narrative provided at the end of the activity. Should participants add in an avatar, the similarities and differences between these avatars and their physical body will be explored.

Appendix 14: Photo-Elicitation Instructions

Please take or collect 10-15 photos that represent the following areas, they can include objects, places, people or moments. Try and collect photos that may represent the following:

Who am I?
How do I see myself when I am online?
How do others see me (friends, family, teachers) in my online and offline life?
What makes it hard for me to be me? Are there challenges you face when you are trying to be yourself?
What gives me strength to cope with challenges?

We will be talking about these topics during our discussions together.

All photos will be welcomed, however, when taking photos which may include other people, please don't take photographs of their faces.

Once you are happy with the images that you have taken, I will ask you to send me your selection by using this email address (1203936@students.wits.ac.za). We will be discussing your collection when we meet with one another.

Appendix 15: Semi-Structured Interview Guide

Samples of questions that may be used while looking at the pieces that the participant has constructed.

Could you tell me a little about this collage / body map?

What story does this collage / bodymap tell?

What is the most important part of this collage / bodymap you have created?

What emotions do you feel when looking at it?

If you were to give it a title, what would you call it?

Is there anything that surprises you when you look at it?

Are there parts of this image you would like to change?

Are there parts of this image you would like to remove, or are there parts you would like to make more obvious?

Is there anything you feel is missing?

If this piece were to come with sound effects, what would they be?

What do think others would think if they saw this image?

If others saw this image, would they understand / know something about you that they didn't before?

If others saw this image, what would you like them to understand / know about you?

Do you think is says anything about the world that you live in?

Samples of questions that may be used while looking at the photographs the participants provided.

Tell me a little about why you decided to take this photo to represent…

- *Who you are in an offline world?*
- *How do you think others see you in your offline life?*
- *Are then any challenges you have to deal with?*
- *Is there anything you have found to be helpful or supportive with these challenges?*

Sample of some potential probing questions that may be used during discussions:

If you had to say what things make you, you, what do you think these things are?

Are there any parts of what makes you, you, that don't fit in certain places like home, school or when around your friends?

Are there parts of yourself that you are really pleased about?

Are there parts of yourself that annoy you, or feel that they get in the way?

Are there parts of you that may annoy others?

Are there parts of you that other people around you really like?
If I had to ask a friend from your offline world to describe you how, what do you think they would say, what words do you think they would use to describe you?
If I had to ask a friend from your online world, what do you think they would say, what words do you think they would use to describe you?

Appendix 16: Research Proposal Approval – School of Human and Community Development

UNIVERSITY OF THE WITWATERSRAND, JOHANNESBURG | FACULTY OF HUMANITIES

Mrs Linda Louise Moss
14 Nakuru Road
Sunninghill Gardens
Sunninghill Ext 30
Johannesburg 2157
Gauteng
South Africa

Student Number: 1203936

28 April 2022

CC. Prof. Jill Bradbury

Dear Mrs Linda Louise Moss

DECISION ON RESEARCH PROPOSAL SUBMITTED FOR THE DOTOR OF PHILOSOPHY

I am pleased to advise you of the decision reached by the reader/readers of the Graduate Studies Committee on your proposal entitled: ***"What makes adolescents Tik(Tok)? : The lived experience of ADHD in online and offline worlds."***

Reader's decision on proposal:
Revised proposal accepted.

I confirm Prof. Jill Bradbury has been appointed as your supervisor.

Please take note of the information on the Criteria for submitting research for examination which is attached and ensure that the Faculty is informed of any changes of address during the year. **Kindly note** that all MA and PhD candidates who would like to graduate as soon as possible must ensure that they meet the ETD requirements within six (6) weeks of receipt of the examiners' reports by the supervisor. **A student is required to remain registered in the Faculty until his/her graduation.**

Yours Sincerely

Ntseare

Mpho Ntseare (Ms)
Faculty of Humanities
Private Bag X 3
Wits, 2050

Appendix 17: Human Research Ethics Committee (Non-Medical) Approval Letter

UNIVERSITY OF THE WITWATERSRAND, JOHANNESBURG

Research Office

HUMAN RESEARCH ETHICS COMMITTEE (NON-MEDICAL)
R14/49 Moss

CLEARANCE CERTIFICATE	**PROTOCOL NUMBER: H21/11/57**
PROJECT TITLE	What makes adolescents Tik(Tok): A lived experience of ADHD in online and offline worlds
INVESTIGATOR(S)	Mrs L Moss
SCHOOL/DEPARTMENT	Human and Community Development/
DATE CONSIDERED	26 November 2021
DECISION OF THE COMMITTEE	Approved Risk Level: Low
EXPIRY DATE	21 April 2025

DATE 11 October 2022 **CHAIRPERSON** _____
(Professor J Watermeyer)

cc: Supervisor : Professor J Bradbury

DECLARATION OF INVESTIGATOR(S)

To be completed in duplicate and **ONE COPY** returned to the Secretary at Room 10004, 10th Floor, Senate House, University. Unreported changes to the application may invalidate the clearance given by the HREC (Non-Medical)

I/We fully understand the conditions under which I am/we are authorized to carry out the abovementioned research and I/we guarantee to ensure compliance with these conditions. Should any departure to be contemplated from the research procedure as approved I/we undertake to submit an amendment of the protocol to the Committee. **I agree to completion of a regular progress report. For Minimal and Low studies, this is due annually on 31 December. For Medium and High Risk studies, this is due twice annually on 30 June and 31 December.**

_____ 12 / 10 / 2022
Signature Date

PLEASE QUOTE THE PROTOCOL NUMBER ON ALL ENQUIRIES

Appendix 18: Agreement with Dr Novello for the Provision of Free Counselling

DR. ANNEMARIE. NOVELLO
CLINICAL PSYCHOLOGIST
PR NO: 0860008615829 HPCSA REG NO : PS0025690
10 ROBIN DRIVE NORTHCLIFF, 2195

annemarie@drnovello.com or 0825570803

Hours: Monday—Thursday 08h30 - 18h00
Fridays 08h30 - 16h00

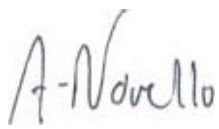
University of Witwatersrand
Human Research Ethics Committee (Non-medical)
17 March 2022

To Whom it may concern

Re: Agreement to provide counselling

This letter serves to confirm the agreement in place between Linda Moss (student number 1203936) and Dr Annemarie Novello regarding the provision of counselling services during the data collection process for the study titled, *What makes adolescents Tik(Tok)? The lived experience of ADHD in Online and Offline worlds.*
Should any participant in the student's research study experience any distress as a direct result of being part of the project, I will provide my services free of charge to the participant.

Yours Sincerely



Dr Annemarie Novello