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‘Square pegs, round holes’- A qualitative case study investigating pupils with Attention Deficit Hyperactivity Disorder and their perception of barriers to inclusion in classrooms in the North of England.’

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Abstract

Attention Deficit Hyperactivity Disorder (ADHD) is a commonly diagnosed disorder in children and young people. The majority of research focuses on a biomedical management model of the disorder, aiming to limit the impact of symptoms and behaviour typically associated with the disorder. Quantitative research has typically been used to investigate ADHD, with studies failing to take into account the voice of young people. A significant proportion of research has taken place in America and the South of England. Research with young people in the North of England is limited. Recent research focusing specifically on educational experiences is also limited.

This study aims to present the views and experiences of young people with ADHD through a qualitative approach, specifically focusing on their experiences in education. This study contributes to current literature by voicing the experiences of young people in the North of England. Six participants took part in a qualitative study answering questions in a semi-structured interview. Qualitative methods were employed to enable the voice of participants to be fully heard and presented in the research. Reflexive thematic analysis was used to analyse the interview transcripts to identify themes from participant voice. Four main themes were identified through reflexive thematic analysis: students with ADHD feel unwanted in mainstream education, mainstream education excludes students with ADHD, medication use to make students with ADHD fit and advice and important observations from students with ADHD on making mainstream education more inclusive. The findings are discussed and framed within the metaphor of 'square pegs-round holes', and explored, compared and contrasted with relevant literature. The findings highlight that participants reported that the rigid and performative structure of mainstream schooling, including inflexible routines and behaviour policies, made it difficult to engage and intensified their ADHD symptoms. These conditions contributed to feelings of exclusion, misunderstanding and stigma from both teachers and peers. By foregrounding the voices of young people with ADHD in the North of England, including their perceptions and advice for improvement, this work adds to the current field of literature.

Keywords

Attention Deficit Hyperactivity Disorder (ADHD), barriers to classroom inclusion, special education, pupil voice.

Key Points

- This study provided students with ADHD, in special education, an opportunity to voice their experiences of mainstream classrooms in the North of England. It provided pupils space to provide suggestions and opinions on how mainstream education can be made more inclusive for students with ADHD.
- This study highlighted several ways the impact of stigma from an ADHD label had on young people with ADHD. These were, students with ADHD feel unwanted in mainstream education, mainstream education excludes students with ADHD, and that medication is used to make students with ADHD fit.
- Suggestions for teachers on how mainstream education can be made more inclusive for students with ADHD highlighted that teachers should be kind, nice and patient, listen to them, recognise their strengths, allow regular movement breaks and time for the development of self-management / regulation strategies and allow fidget toys.

Introduction

This case study focused on exploring the educational experiences of students with ADHD in classrooms in the North of England. The impact of failed mainstream placements on students has a profound impact on their education and personal identity; a notion used as a rationale for the study. This study aimed to investigate the difficulties faced by students with ADHD in mainstream classrooms, from their perspective. Research around ADHD is often quantitative in nature and considers the voice of others in their observations (Christensen & James, 2017). The aim of the research was to present young people's points of view and also give space for them to make suggestions on how to make education more inclusive and accessible.

ADHD is defined as 'a persistent pattern of inattention and/or hyperactivity -impulsivity that interferes with functioning or development' (American Psychiatric Association, 2013:59). In the early 2000s, ADHD was considered one of the most common childhood disorders (O'Regan, 2010; American Psychiatric Association, 2013).

Studies by Cooper & Shea (1998), Gallichan & Curle (2008) and Eccleston et al., (2019) outline difficulties faced by individuals because of ADHD. Increased difficulty at school is acknowledged as a key factor (O' Regan, 2010; Beiderman, 2005; Harrison et al., 2020; Zendarski, 2020; Brady, 2004; Loe & Feldman, 2007; McDougal et al., 2022; Bury et al., 2025), alongside 'poorer' understanding of social cues and interactions (Beiderman, 2005; Gentschel & McLaughlin, 2000; Eccleston et al., 2019) which leads to strained relationships with peers and family. Poor mental health, poorer later life outcomes and a predisposition to drug and alcohol abuse are also listed in research as potential difficulties as a result of ADHD (Brady, 2004; Beiderman, 2005; Gentschel & McLaughlin, 2000, Moore et al., 2017).

A wealth of research, spanning over thirty years (Cooper & Shea, 1998; Sonuga-Barke et al., 2023; Bury et al., 2025; Urquart et al., 2025), consistently outlines ADHD as 'disorder', 'dysfunction' or 'delinquency', contributing to the stigmatisation of a negative ADHD paradigm. Our understanding of the phenomena surrounding ADHD leads to those with a diagnosis described as 'other' or, someone who cannot fit into the norm (Carr-Fanning, 2024).

Several pieces of research identify ADHD being viewed differently to other neurodevelopmental disorders or disabilities. It was found that peers (and parents of peers) preferred not to befriend a child with ADHD (Varmer & Weiner, 2020; Krtkova et al., 2022; McDougal et al., 2023). Similarly, O'Driscoll et al., (2012) found peers display more anger towards those with ADHD and viewed them as responsible for their condition, compared to other mental health conditions. While this attitude towards students with ADHD could be understood from other children's perspectives, research shows that

teachers also view ADHD more negatively compared to other disabilities (Brown & Fisher, 2023; Carr-Fanning, 2024). Educational research indicates that learning difficulties such as dyslexia are perceived to be more socially acceptable than ADHD, and ADHD is often viewed differently to other neurodiverse diagnoses. (Moore et al., 2017; Wilson et al., 2024). Other studies suggest that teachers who view ADHD positively are likely to use more supportive strategies, whereas teachers who view ADHD as a problem inherent to the student are less likely to use supportive strategies (Gaastra, et al., 2019; Giannakopoulos, 2025). The literature review highlights a significant lack of research into how students with ADHD feel they are perceived and treated within the mainstream education system. This rationale led to this study further exploring how students with ADHD feel that others perceive them. This is particularly relevant as student perceptions of ADHD in the North of England have been overlooked. Understanding this from the student's perspective is a key aim, for educators to better provide inclusive practice for students with ADHD.

Methods

This case study adopted research paradigms aimed at systematically investigating young people's perceptions of barriers to their inclusion with ADHD (Gratton & Jones, 2015). Therefore, an interpretivist approach was used in the research design. This enabled the researcher to gain insight into the experiences of young people with ADHD who had experienced mainstream education in the North of England. This also addressed some concerns highlighted in current literature around a positivist, quantitative approach to research around understanding ADHD in education, where student voice was often omitted and a focus on treatment and management was highlighted. To achieve this, semi-structured interviews were undertaken with students from one special school in the North of England.

Gatekeeper consent was gained from the principal of the school prior to engaging with participants. Once granted, informed consent from parents/carers was also gained. Once parent/carer consent had been gained, participants were approached about the study. Participants were provided with a clear participant information sheet, their key person was present during the discussion, and support was given in helping them to fully read and understand participant consent forms using their preferred method of support.

Six male participants aged between thirteen and seventeen were recruited using purposive sampling. All participants were male, with a diagnosis of ADHD from a consultant psychiatrist or consultant pediatrician and were students at a specialist school.

Individual, semi-structured interviews were used with all participants and took place within their school setting. Some participants opted to have their additional support worker with

them. Support workers were briefed on the semi-structured interview process prior to joining the interviews and made aware that all answers must be from participants alone, and to only support where necessary. Participants were able to choose a space they felt comfortable and safe to undertake the interview process. Parsons (cited Strunk & Locke, 2019) outlines that a safe space may not be the same for everyone (participant / researcher). This approach allowed the participant to have choice over the interview space and gave some autonomy to the participant. Interviews lasted no more than twenty minutes and were recorded using a digital voice recorder. Participants were asked about their experience in mainstream settings, their experience of inclusion and their suggestions for improving inclusive practice for students with ADHD. Reflexive thematic analysis was used for the data analysis (Braun & Clarke, 2022). Initial coding took place to identify key themes which appeared in the raw data. These codes were then refined during the third round of data analysis. Once all raw data had been coded, initial themes were then grouped into four main themes.

Results and Discussion

The four main themes identified through reflexive thematic analysis were: students with ADHD feel unwanted in mainstream education, mainstream education excludes students with ADHD, medication is used to make students with ADHD fit, and participants presented advice and important observations on making mainstream education more inclusive. The findings were discussed and framed within the metaphor of 'square pegs-round holes'. The metaphor has been previously used to demonstrate the feeling of young people with SEND trying to fit into a mainstream school setting. Specifically, Gallichan & Curle (2008:343) use this metaphor to describe the 'mismatch between the two' when investigating experiences of young people with ADHD. Recent literature also acknowledges the metaphor to demonstrate the difficulties students with SEND face in mainstream education ('Square Pegs: Inclusivity, Compassion and Fitting in - a Guide for Schools' (Morgan & Costello, 2023).

'Square Pegs' - Students with ADHD feel unwanted in mainstream education

A number of refined codes contributed to the subthemes of students feeling disliked because of ADHD, leading to the main theme of 'feeling unwanted' being formed during data analysis. All six participants discussed points which contributed to them feeling this way. The sub themes were: *Poor Teacher/Peer Relationships, Being Excluded, Diagnosis and negativity around an ADHD label.*

All six participants experienced poor relationships with teachers and peers noted this as a barrier to inclusion. Participants felt strongly that teachers and peers disliked them because of their ADHD diagnosis and felt they were treated differently. Poor peer relationships was acknowledged by three of the participants, with a fourth not able to remember friendships prior to attending the current school.

Lucas: *'This teacher was Christian. She pretty much thought I was the spawn of Satan, so therefore would try and find any reason to get me kicked out of the school. So that was fun'*

Adam: *'They just saw me. They just didn't. Like...They just I I don't know how to explain it, but. Yeah, they weren't very kind to me because of what of that, because I've got ADHD?'*

Lucas: *'I didn't care that much about my school life and didn't really care that much about life in general, but, on that on that day, I genuinely was like really upset and I didn't want to leave'*

In addition, all participants discussed a feeling of injustice around being excluded from their mainstream school. This ranged from not being allowed on trips, to being excluded from the school. These findings would suggest this is a recurrent theme for students with ADHD, and also apparent in the North of England, with the majority of other studies taking place in America and the South of England.

These findings indicate a recurrent theme of exclusion for students with ADHD and highlight its presence in the North of England, where existing research has predominantly focused on the United States and the South of England.

'Round Holes'- Mainstream education excludes children with ADHD

The perception that mainstream education settings fail to accommodate students with ADHD, becoming the 'round holes' the 'square pegs' were unable to fit into lead to the above theme formation. The below points summarise findings relating to this theme. The sub themes were: *Mainstream Education Structure/Expectation, Lack of Training and Understanding, Behaviour Policies and Punishment, Lack of Positive Recognition.*

The difficulties caused by the structures, expectations and policy landscape in mainstream education are evidenced in the literature review. Lamb (2023 cited Morgan & Costello) states our current system of education 'operates to celebrate uniformity' rather than celebrating the diverse needs of students. The demands of the school day structure, along with a curriculum that fails to meet need of students with ADHD is outlined by participants as a barrier to their inclusion.

Adam: *'You know, I just got given my work and told here, do it, rather than, you know, sitting down and actually going through it with me and breaking it down.'*

All participants referenced feeling that staff in their mainstream school lacked the necessary understanding and training to support them:

Lucas: *'Around the start of year six, I had a teacher there who also didn't really know what to do with me because they didn't know... how it worked?'*

All participants discussed the impact of their mainstream school's behaviour policy as a barrier to inclusion. As outlined previously, 'persistent disruptive behaviour' and ADHD symptoms are often blurred, meaning students with ADHD are sometimes penalised. A sense of injustice at rigid behaviour policies and punishments came through strongly in participant responses.

Chris: *'Ohh, and the reading. Ohh they literally wanted me to read these books. But I I told him I couldn't read them and they just said read the book and I just said I cant. So they got angry with me.'*

All participants discussed not feeling their strengths were recognised in their mainstream settings. This was acknowledged in the research to fill the gap where students have not been asked about their strengths. Some participants were able to identify some of their strengths they have been able to work upon in their current school, but felt these were ignored within mainstream settings.

Adam: *'Yeah, like I've always had my humour, you know? But you know, at the end of the day, it sort of gets pushed aside all your strengths in mainstream because you know, everything's focused on their learning.'*

Adam's comment would suggest that the current structure of mainstream education didn't allow for recognition of his personal strengths, a recommendation acknowledged by the students to improve inclusive opportunities.

'Adapting the Peg?' – Medication use to make students with ADHD 'fit'

In this study, all participants take or have taken medication and discussed their experiences and thoughts on its effectiveness. Participant experiences were mixed, with some who embraced the medication as helpful, while others discussed this as something they felt they 'had' to do to cope with school, compromising their identity and feeling of inclusion. The sub themes were: *Pros and Cons, Having to take medication to cope with school, Teach Strategies- Don't just give out tablets*

ADHD medication is found to reduce symptoms, improve academic performance, reduce functional ‘impairment’ and make a difference to young people’s lives. While these findings can be presented as positive, research and ‘treatment’ of ADHD is often centered on a biomedical model, focused on fixing the ‘problem’ or ‘impairment’. If we are to look through a lens of neurodiversity, it could be suggested we should look to adapt the ‘round hole’, rather than placing the responsibility of the individual to change themselves (adapting the peg).

Pros and Cons

Alife: *‘No, I think it’s just to help me, like, sit down and actually concentrate.’*

Having to take medication to cope with school

Jamie: *‘Yeah, after school, I think. I mean, I might take a lower dose for college because that’s what mum was saying higher dose while I was doing my exams and then maybe go down to a lower dose’.*

Chris: *‘No I don’t like taking tablets, but if I have to take them then I have to take them. But you know, I’m still. I just feel it doesn’t do anything for me?’*

Teach Strategies- Don’t just give out tablets

An interesting notion discussed by Adam, are the benefits of supporting him to achieve and progress without simply focusing on medication.

Adam: *‘Used to take, yeah, but you know, I don’t really need medication now because this, if it want for the school, I’d probably still be on it.’*

Adam: *‘But the schools helped me to find different ways to adapt to it rather than just a pill down my neck, you know?’*

Adam, like the other participants, received weekly therapeutic and key-working sessions, along with speech and language support throughout his time at the school. This aligns with recent research advocating a holistic approach to ADHD support (Ringer, 2019; Pellicano & Den Houting, 2022; Sonuga-Barke & Tharpar, 2021; Sonuga-Barke et al., 2023; Fidosievai, 2024; Giannakopoulos, 2025). The study’s findings therefore reinforce calls for holistic inclusion rather than expecting students to rely on medication to simply “fit” (Armstrong, 2014).

‘Adapting the Hole’- Advice and observations from students with ADHD on making mainstream education more inclusive.

Participants made a number of suggestions to make mainstream education more inclusive; *being more flexible in the school day, allowing regular movement breaks, allowing fidget and fiddle toys to help them regulate in classroom, 'Just listen to them'- Robert, get to know them, ask them about their interests/hobbies/family, recognise their strengths and give them space to work on them, be kind, nice and patient with them, smaller class sizes, help them to develop self-management strategies, and not just rely on medication, ensure staff working with them have the right training to support them and make sure staff are supported in their difficult roles.*

Participants described a range of changes they felt would make mainstream education more inclusive, emphasising greater flexibility in the school day, opportunities for regular movement, and the use of fidget or fiddle toys to support regulation. They stressed the importance of relationships, urging staff to “Just listen to them” (Robert), get to know their interests, recognise their strengths, and respond with kindness, patience and smaller class sizes. Similar findings were also reported in Krtkova et al, 2022, which suggests this is not just a UK inclusion issue. They also highlighted the need for support that goes beyond medication, including help with developing self-management strategies and ensuring staff receive appropriate training and support in their roles.

Conclusion

This article aimed to provide students with ADHD an opportunity to voice their experiences in classrooms in the North of England. It also aimed to give them space to provide suggestions and opinions on how mainstream education can be made more inclusive for students with ADHD. This study adopted a qualitative approach to research, addressing a research gap and gave voice to participants. This study gave students space to talk about their strengths and how they felt these have been addressed in mainstream and specialist settings. The impact of stigma from an ADHD label from the voice of participants was an identified research gap.

Findings from this study highlighted that the structure and performative nature of mainstream education made it difficult for them engage with and be included in the classroom setting. Lack of flexibility in the school day and an expectation to adhere to a curriculum which did not meet the needs of their ADHD diagnosis exacerbated their symptoms, leading to a feeling of exclusion not only from the school itself, but also from teachers and peers. A strong feeling of injustice was felt throughout the data, particularly in relation to rigid behaviour policies which actively penalise students ADHD presentations, despite feeling the ‘round hole’ made symptoms worse. A lack of understanding of ADHD, alongside experiences of stigmatisation led to participants feeling sad, upset and disliked by a large majority of staff and peers in their mainstream

settings. It is clear participants wanted their strengths to be acknowledged and recognised.

The findings both support prior research and address gaps within the North of England, showing that individuals with ADHD face academic, social, and mental health challenges and are often perceived as “other” due to stigma (Cooper & Shea, 1998; Beiderman, 2005; Moore et al., 2017; Sonuga-Barke et al., 2023; Urquhart et al., 2025). Peers and teachers frequently view ADHD more negatively than other neurodevelopmental conditions, influencing social relationships and support strategies (Varmer & Weiner, 2020; O’Driscoll et al., 2012; Gaastra et al., 2019; Krtkova et al., 2022; Giannakopoulos, 2025). Importantly, the study contributes to the literature by exploring student perceptions and their suggestions for improving practice.

Recommendations

The findings highlight several areas for further research, including the experiences of young people with ADHD in the North of England, exclusion rates, the effectiveness of staff training, and the impact of different interventions on inclusion. Future research should prioritise the voices of participants and adopt a neurodiversity perspective rather than a deficit-focused approach. Based on research findings, teachers in mainstream settings should aim to speak to and get to know students with ADHD, recognise their strengths and focus on building positive relationships with them. They should be flexible with classroom routines, allowing for movement breaks and aim to reduce cognitive load. Schools should support teachers to better understand and implement strategies that go beyond medication, such as helping them develop self-management, organisational, and social skills. Peer Understanding should be promoted, developing awareness and empathy among classmates to reduce social exclusion and improve relationships. Whole school approach's to neuroaffirming practice should be considered by school leaders, to develop a better inclusive culture.

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The authors declare no conflict of interest.

Data Available Statement

Data is unavailable due to ethical restrictions.

Ethics Statement

Ethical approval for this study was granted through York St John University.

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