

ADHD Symptoms in Teens: Your Guide to Warning Signs & Treatments for Adolescents

With its mood swings and hormonal changes, adolescence also brings new and unnerving ADHD symptoms in teens — challenges that require patience, understanding, and pinpointed strategies. Here, learn how changing biology impacts executive functions, emotions, and decision-making skills, and how you can protect your teen against the greatest risks to their health.

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Though symptoms differ according to ADHD subtype — inattentive, hyperactive/impulsive, or combined — teens with attention deficit hyperactive disorder [commonly experience some or all](#) of the following symptoms more than other teens their age:

- Distractibility and lack of focus
- Disorganization and forgetfulness
- Self-focused behavior
- Hyperactivity and fidgeting
- Heightened emotionality and rejection sensitive dysphoria
- Impulsivity and poor decision making

- Poor concentration and trouble finishing tasks

ADHD Symptoms in Teens: Chronic, Not Constant

Despite their chronic difficulties with these symptoms (*listed above*), virtually all of those with ADHD have a few specific activities or tasks for which they have no difficulty in exercising their executive functions quite well which can be a source of confusion among parents, physicians, and psychologists. This may be in playing a favorite sport or video games; it could be in making art or music or some other favorite pastime. Seeing these exceptions, some parents assume that ADHD is simply a lack of willpower when, in fact, ADHD is not a willpower problem. It is an impairment with the chemical dynamics of the brain.

How Common are ADHD Symptoms in Teens?

The Centers for Disease Control and Prevention (CDC) reports that about 9.4 percent of U.S. children between the ages of 2 and 17 have been diagnosed with ADHD, making it one of the most commonly diagnosed neurodevelopmental conditions today. Experts say that 80 to 85 percent of preteens continue to experience symptoms into their adolescent years, and 60 percent of children with ADHD become adults with ADHD. The impact of ADHD symptoms may increase or decrease over time depending on the individual's brain development and the specific challenges faced in school or at work.

How Do ADHD Symptoms in Teens Get Worse During Puberty?

Even the most well-adjusted teen struggles with peer pressure, academic expectations, and emotional and physical changes. Teens with ADHD face an extra set of challenges: puberty aggravates their symptoms, higher academics tax their executive functions, and a drive for independence sometimes triggers their dangerous impulsivity just at the time they're facing transitional milestones like learning to drive, engaging in sexual activity, experimenting with drugs and alcohol, and forming relationships with new or different friends. For many families, moving through the teen years is a bumpy ride.

Parents navigating these challenges benefit by working closely with school officials and finding a clinician experienced in treating teens with ADHD. **With treatment — a combination of medication, behavior therapy, and family-management training is recommended** — and timely intervention, caregivers can help their teens avoid or minimize risks for negative outcomes.

Many of your teens' problems at home, at school, and in social settings arise due to neurological delays. ADHD is tied to weak executive skills — the brain-based functions that help teens regulate behavior, recognize the need for guidance, set and achieve goals, balance desires with responsibilities, and learn to function independently. **Executive dysfunction** hinders the following key skills, critical to school and life success:

- Response inhibition (being able to stop an action when situations suddenly change)
- Working memory
- Emotional control
- Flexibility
- Sustained attention
- Task initiation
- Planning/prioritizing, organization
- Time management
- Goal-directed persistence (sticking with a task when it becomes “boring” or difficult)
- Metacognition (the awareness and understanding of your own thought processes)

Teens with ADHD are unfairly labeled lazy or oppositional because these neurological deficits are largely invisible and misunderstood.

As their bodies grow and change, teens with ADHD tend to **lag behind their peers in emotional maturity** as well.³ Experts say a young person with ADHD will not achieve the emotional maturity of a neurotypical 21-year-old until they reach their mid or late 30s due to developmental delays in the brain's frontal lobes.

How are ADHD Symptoms in Teens Diagnosed?

ADHD is most often diagnosed in elementary school — the average age of diagnosis is 7, and hyperactive boys are still the most likely to be evaluated. But if your child has the [inattentive type of ADHD](#), as is often the case with girls (quietly staring out the window rather than paying attention to the lesson, or leaving their work undone), signs may be missed through elementary school — ADHD doesn't suddenly develop during the teenage years but it may not be fully apparent until the challenges of high school. For some teens, ADHD symptoms are not clearly noticeable until they move away from home and enter college. Research suggests that males are diagnosed with ADHD six times more often than females in childhood and three times more often in adolescence.⁴

To be diagnosed with ADHD, a teenager must demonstrate a history of ADHD symptoms in at least two settings (usually at home and at school) that began before the age of 12. What's more, the symptoms must interfere with the teen's functioning or development.

Diagnosis is seldom accomplished with a quick visit to a general pediatrician. Proper diagnosis involves gathering information from parents, teachers and family members, filling out checklists, and undergoing a medical evaluation (including vision and hearing screening) to rule out possible medical issues and differential diagnoses.

According to the *Journal of Adolescent Health*⁵ assessing ADHD in teens is challenging due to variability in access to pediatricians who provide care for mental health issues. Another complicating factor is that many primary care physicians (PCPs) aren't sufficiently trained in the idiosyncrasies of ADHD and its overlapping comorbid conditions, and as a result, are not equipped to perform the in-depth evaluation needed. Diagnosis rates diminish as children age through middle and high school.

What Are the Greatest Risks Facing Teens with ADHD?

As a group, teenagers make notoriously bad decisions. Among the most serious risks facing teens with ADHD are:

- drug use and habitual abuse
- unwanted pregnancy
- sexually-transmitted diseases
- lower test scores
- higher rates of not completing high school
- regrettable internet and social media use
- serious car accidents

Thanks to the popularity of vaping, there are renewed worries about nicotine and marijuana and the more debilitating way these substances may impact the ADHD brain.

But perhaps more dangerous is the fact that ADHD impulsivity — exacerbated by peer pressure and disrupted treatment — may prompt teens to make some very unwise and potentially fatal decisions. Research overwhelmingly concludes that long-term use of ADHD medication lessens the risk of poor and/or impulsive decision making among adolescents.⁶

To further counter this threat, teens need continued guidance. However difficult, parents must keep the lines of communication open, closely monitor their teens' behavior, and set clear limits.

A recent study found that PCPs fail to educate and assess their teen patients with ADHD for driver readiness, risky sexual behavior, and medication diversion during checkups and sick visits. School counselors and medical practitioners are no substitute for a caregiver's guidance and hard questions regarding sexual activity, safe driving, drug, and alcohol use.

The following are the most common and potentially dangerous problem areas for teens with ADHD:

Drug and Alcohol Abuse Among Teens with ADHD

A teen's need to belong puts them at heightened risk for alcohol and drug use; low-self-esteem makes them more susceptible to peer pressure. The [three leading causes of death in adolescents](#) are accidents (unintentional injury), homicide, and suicide. Sadly, alcohol is frequently involved with each cause.

Most research shows no clear association between greater alcohol use in teens with ADHD compared to their peers without it. One study, however, found that 40 percent of children with ADHD had used alcohol before age 15, compared to only 22 percent of children without ADHD.⁷ What's more, studies do show elevated alcohol use among adolescents with both ADHD and [oppositional defiant disorder](#). More research is warranted, however, parents are advised to know the following signs of substance abuse:

- Sudden and dramatic mood changes, particularly after a night out with friends.
- Red or heavy-lidded eyes with dilated pupils
- Deceit and secretiveness; stories that don't add up

Automobile Accidents and Teens with ADHD

[Learning to drive](#) is a scary time for most parents. When you have a teen with ADHD, the fear is more than justified. Motor vehicle accidents (as a category) are the [leading cause of death in teenagers](#) and research shows that untreated ADHD is more likely to impair a driver's ability due to core symptoms of distractibility, inattention, and impulsivity.

A 2019 study conducted by the Children's Hospital of Philadelphia (CHOP) and published in *Pediatrics* found that drivers with ADHD had a 62 percent higher rate of injury crashes, and a 109 percent higher rate of alcohol-related crashes than did their neurotypical counterparts.⁸

What's more, delaying the driving age to 18 doesn't appear to remedy the problem since many state laws designed to protect new drivers — stiffer penalties for the use of phones, limits on the number of passengers permitted in the vehicle, etc. — do not apply to drivers age 18 and older.

Since executive functioning skills and emotional maturity may lag significantly behind in children with ADHD, parents must carefully consider whether their teens are mature enough to drive. While some teens with ADHD are very careful drivers, others are not ready to manage driving safely. High impulsivity and emotionality may indicate that a child is not ready for this responsibility.

Comorbid Conditions in Teens with ADHD (conditions that may be present with ADHD)

Anxiety and mood disorders are common comorbid conditions that often appear alongside ADHD for the first time between the ages of 8 and 12. Adolescents with ADHD are at higher risk of developing them.

Common signs of depression and anxiety in teens include the following:

- Loss of interest or pleasure in usual activities
- Feelings of worthlessness or guilt
- Fixation on past failures and self-blame
- Extreme sensitivity to rejection or failure
- Changes in appetite
- Self-harm such as cutting or burning

Oppositional Defiant Disorder and Conduct Disorder, two other common ADHD comorbidities among teens, are marked by antisocial, hostile, and unusually adversarial behavior. These disorders may place teens with ADHD, especially impulsive boys, in dangerous or even criminal situations. If symptoms emerge, quick and effective intervention with a trained professional is imperative.

[Could Your Teen Have ODD? Take This Self-Test]

Risks Specific to Teen Girls with ADHD: Pregnancy, STDs, and Depression

Because girls with ADHD may appear less symptomatic and internalize their problems, they often suffer silently. In the early teen years, girls with ADHD have more academic problems, more aggressive behavior, higher rates of depression, and earlier signs of substance-related problems than do their neurotypical peers. Some studies suggest that girls with ADHD may be at greater risk for self-harm, eating disorders, suicidal thoughts, and unplanned pregnancy than are girls without the disorder. These findings hold true even after adjusting for factors such as stimulant medication use, IQ, and age at diagnosis.¹¹

The hormones that lead to rebellion and risky behavior in neurotypical teenagers can have profound effects on girls with ADHD, who typically start puberty between the ages 9 and 11, and begin menstruating between the ages of 11 and 14. Hormonal changes can affect how ADHD medication is metabolized; medication and dosing schedules may need frequent adjustment in the teen years.

By the age of 20, about [75 percent of American teens have had sexual intercourse](#). That number is likely higher for teens with ADHD; numerous studies have linked ADHD to a higher rate of teen pregnancy, promiscuity, and sexually transmitted infections (STIs).

One recent study of more than 7,500 adolescents with ADHD and 30,000 without ADHD in Taiwan found that participants with ADHD became pregnant younger, more frequently, and had a higher risk for early pregnancy than did their neurotypical counterparts.¹²

School is often a source of intense frustration and shame for girls with ADHD, especially if their symptoms are misunderstood or discounted at school. Teacher education is key, as is instituting [a 504 plan](#) or an Individualized Education Program (IEP) to address common challenges in middle and high school.

[Download This Free Resource: Evaluate Your Teens Emotional Control]

Treatment for ADHD Symptoms in Teens

ADHD symptoms in teens are treated with medication, behavior therapy, and/or through changes to diet and nutritional supplements. Regular exercise and sufficient sleep are also very important.

Treatment plans often become more challenging during the teen years as physical growth, metabolism, hormones, and frequently changing schedules impact daily life. If your child is already diagnosed with ADHD and has been taking medication for several years, expect dosage adjustments to address hormonal changes and any new tolerance to long-acting medication. New medication side effects may also emerge alongside the acne and drama so common during the teen years.

Though ADHD treatment with medication is still the most effective way to achieve symptom control in adolescence, it's not unusual for teens with ADHD to rebel by refusing to take their medication during high school. This refusal may be an unhealthy attempt to establish independence or a response to feeling "controlled."

Reports show that teens receiving ADHD treatment say that stimulant medications largely trigger positive effects on attention, behavior, and social function. At the same time, less than one-half of teens say they want to continue taking medication due to side effects like lack of appetite and sleep problems, and stigma associated with treatment. Effective dosing of stimulant medications for ADHD is not determined by age, weight, or symptom severity. It's important for prescribers to carefully find the dose and timing that best fits the sensitivity of the individual's body.

How Can I Help My Teenager with ADHD?

Teenagers with ADHD face more peer rejection, frustration, and isolation than do neurotypical adolescents. They may take out these frustrations at home, which requires parents to practice extra patience and keep in mind that teens with ADHD need support — not criticism. No amount

of nagging and pleading will transform a teen with ADHD into a neurotypical adolescent; a family's time is better spent teaching executive function skills.

This process starts with accepting the realities of teen brain development. Brain chemistry changes dramatically during adolescence and puberty, causing a marked spike in emotional turmoil. Their minds are changing daily; and so, too, should coping strategies.

Success begins with realistic goals. Even with school support and a great IEP, tutoring help, behavior therapy, and the right medication at the right dose, most teens will struggle at times. Unrealistic expectations are a shortcut to failure.

Instead, experts recommend that parents do the following:

- Teach life skills gradually. Take baby steps back from scheduling, organizing, and planning your child's life. Teach life skills consciously, step by step.
- Stay on top of your child's schedule. Insist on knowing who your teen is with and where he's going. Make sure rules ("Call to let us know where you'll be if your plans change") and consequences are clear, and stick to them.
- Help him understand when to ask for help. Help your child understand that knowing when to ask for advice is a sign of greater maturity than repeating the same mistakes.
- Avoid overreactions to overreactions. The neurological system in teens with ADHD is delayed. Your teen is still a "work in progress." When mistakes happen, stay involved and know that this, too, shall pass.