

**Objective:** While attention-deficit/hyperactivity disorder (ADHD) symptoms, including inattention, hyperactivity, and impulsivity, are normally distributed within the population, features of ADHD have been associated with poor functional outcomes across various domains of life, such as academic achievement and occupational status. However, some individuals with even strong ADHD features show normal or above-average success within these functional domains. Executive dysfunction and emotion regulation abilities are associated with educational attainment and occupational status and may therefore explain some of the heterogeneity in functional outcomes in individuals with mild, moderate, and high levels of ADHD symptoms. In this study, we investigated whether emotion regulation strategy use (i.e., emotion suppression or cognitive reappraisal) and executive function abilities moderate the relationship between ADHD symptoms and occupational status and education attainment in adults.

**Participants and Methods:** Data were collected from 109 adults aged 18 – 85 ( $M = 38.08$ ,  $SD = 15.54$ ; 70.6% female) from the Nathan Kline Institute Rockland Sample. All participants completed measures of ADHD symptoms (Conners Adult ADHD Rating Scale), emotion regulation strategy use (Emotion Regulation Questionnaire), and executive functioning (composite scores of inhibition, shifting and fluency from the standardized Delis-Kaplan Executive Function System). In this study, executive function abilities and emotion regulation strategy use were tested as potential moderators of the relationship between ADHD symptoms and functional outcomes using hierarchical regression models.

**Results:** Several two- and three-way interactions predicting occupational status and educational attainment were observed. Education attainment was predicted by hyperactivity and reappraisal ( $\beta = -0.26$ ,  $p = .006$ ); inattention, shifting, and reappraisal ( $\beta = -0.52$ ,  $p = .029$ ); inattention, shifting, and suppression ( $\beta = -0.40$ ,  $p = .049$ ); inattention, fluency, and reappraisal ( $\beta = 0.24$ ,  $p = .038$ ); hyperactivity, fluency, and reappraisal ( $\beta = 0.27$ ,  $p = .034$ ); and impulsivity, fluency, and reappraisal ( $\beta = 0.44$ ,  $p = .004$ ). Occupational status was predicted by inattention and reappraisal, ( $\beta = -0.27$ ,  $p = .032$ ), hyperactivity and reappraisal ( $\beta = -0.26$ ,  $p = .004$ ); and impulsivity, fluency, and reappraisal ( $\beta = 0.35$ ,  $p = .031$ ).

Fluency was positively associated with educational attainment when controlling for inattention and impulsivity.

**Conclusions:** Consistent with the hypothesis, the association between ADHD symptoms and both occupational status and educational attainment were moderated by the interaction between emotion regulation strategy use, executive function abilities domains. The observed interactions suggest that both occupational status and educational attainment may depend heavily on one's intrinsic abilities and traits. Contrary to previous literature, we found no evidence that ADHD symptoms, emotional regulation strategies were independently associated with either educational attainment or occupational status, but this should be validated in a sample with greater representation of adults with clinically significant ADHD.

**Categories:** ADHD/Attentional Functions

**Keyword 1:** executive functions

**Keyword 2:** emotional processes

**Keyword 3:** everyday functioning

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### 35 Social Media Use Relates to Beliefs about Attention-Deficit/Hyperactivity Disorder (ADHD) Among Emerging Adults

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**Objective:** There has been a surge in individuals seeking neuropsychological assessment for attention-deficit/hyperactivity disorder (ADHD) after watching social media created by people claiming to have ADHD. While online content may promote destigmatization of ADHD, self-diagnoses derived from social media use may contribute to the development of inaccurate illness beliefs. Individuals who feel strongly connected to social media that mentions personal anecdotes of ADHD might be more likely to believe they also have ADHD. We examined associations between social media search for ADHD and beliefs about everyday experiences being diagnostic of ADHD among adults concerned

about having ADHD, as compared to a control group.

**Participants and Methods:** A cross-sectional online study included 320 university students ( $M_{age}=19.56\pm 2.92$ ; 72% female; 81% White) without history of ADHD. Participants who reported concern about having ADHD, with ( $n=43$ ) or without other psychological history ( $n=73$ ) rated whether 100 experiences taken from social media were diagnostic of ADHD, and then rated the amount of time they spent on social media searching for ADHD content. They then rated how often they personally experienced the symptoms. Participants who reported no concern about having ADHD ( $n=184$ ) only rated how often they personally experienced the symptoms.

**Results:** Social media search for ADHD was related to total number of experiences believed to be diagnostic of ADHD among participants concerned about having ADHD without psychological history ( $r=.28, p=.03$ ), but not for those with psychological history ( $r=.09, p=.57$ ). For participants concerned about having ADHD (regardless of psychological history), social media search for ADHD was related to total number of symptoms personally experienced ( $r_s=.48-.56, ps\leq .001$ ) and to the number of symptoms endorsed at a clinical level ( $r_s=.48, ps\leq .001$ ). Total number of experiences believed to be diagnostic of ADHD was related to the number of symptoms personally experienced among participants concerned about having ADHD with psychological history ( $r=.53, p<.001$ ; clinical level  $.47, p=.002$ ), but not for those without psychological history ( $r=.14, p=.31$ ; clinical level  $.19, p=.15$ ). Of the 100 symptoms, 56 were believed to be diagnostic of ADHD by at least 50% of participants concerned about having ADHD. Of the 56, 43 were personally experienced at a clinical level by controls. For the 13 remaining symptoms not endorsed at a clinical level by controls, symptoms believed to be diagnostic of ADHD was related to symptoms personally experienced among participants concerned about having ADHD with psychological history ( $r=.53, p<.001$ ; clinical level  $.52, p<.001$ ), but not for those without psychological history ( $r=.14, p=.30$ ; clinical level  $.19, p=.15$ ).

**Conclusions:** Greater social media search for ADHD is related to higher symptom report among individuals concerned about having ADHD regardless of psychological history. However, individuals concerned about having ADHD without psychological history who engage

in greater social media use appear to be more likely to believe that general symptoms are specifically due to ADHD. These individuals may be more prone to misattribute symptoms to ADHD. Nearly 77% of symptoms rated as diagnostic of ADHD were frequently experienced by individuals without concern about having ADHD, which demonstrates the high base rate of ADHD-like symptoms in the general population.

**Categories:** ADHD/Attentional Functions

**Keyword 1:** attention deficit hyperactivity disorder

**Keyword 2:** self-report

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### 36 Reactivity to Loss and Its Relationship to Clinical Symptoms of ADHD in Adults

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**Objective:** Individuals with attention-deficit/hyperactivity disorder (ADHD) exhibit deficits in reward-based learning, which have important implications for behavioral regulation. Prior research has shown that these individuals show altered patterns of risky decision-making, which may be partially explained as a function of dysfunctional reactivity to rewards and punishments. However, research findings on the relationships between ADHD and punishment sensitivity have been mixed. The current study used the Balloon Analog Risk Task (BART) to examine risky decision-making in adults with and without ADHD, with a particular interest in characterizing the manner in which participants react to loss.

**Participants and Methods:** 612 individuals ( $M_{age} = 31.04, SD_{age} = 78.77$ ; 329 females, 283 males) were recruited through the UCLA Consortium for Neuropsychiatric Phenomics