

Mine and my team's issue that we had to try and solve was Attention-Deficit/Hyperactivity Disorder (ADHD) waiting lists, we had to come up with a possible solution to this problem. Myself and my team all sat down and discussed this, and each had ideas on how we could possibly solve the waiting list times. Firstly, we followed the design thinking process step by step to come up with a solution. The first step to this process was Empathise, which meant 'what people think and how they feel', we all had a conversation about this, and each had our own input. We came up with the idea that people on the waiting list would feel let down by the system and that people would experience a range of mental health issues due to the continuing stress of having to wait. Individuals would feel an overwhelming sense of stress and frustration due to the wait list. Whilst doing our research into this continuing problem we found that, in 2023 an estimated 15.5 million people from the US had an ADHD diagnosis, one and a half of which were diagnosed in adult hood. ADHD also effects 3 to 9% of all school aged children and diagnoses rates have increased from 62% to 78% due to more appropriate referrals also more exposure to social media (Roughan, L.A. and Stafford, J., 2019) These statistics come from the second stage of the design thinking process which is Define. We then went on to the third stage of the design thinking process, which is Ideate, this means 'how may we come up with a solution, how might we question this?' we went over ways in which we could solve this issue such as having workshops based around ADHD and within these workshops we could then gather peoples feedback on the waiting list so that the people living on these wait lists would be at the for front of the work done to try and tackle this ongoing issue. Within these workshops we would provide advice for people on how to recognise the signs and symptoms of ADHD and tips on how to manage these symptoms whilst being on the wait list. We also all discussed how we could put together a survey for people to fill out so we would know there thoughts and feeling of being on the wait list, we could then use the surveys as feedback to come up with different solutions on how to tack this issue in the future. Lastly, we used 'prototype' and 'test' as the final two steps in the design thinking process, we all had a discussion on how we could introduce the workshops and how we could define whether this idea would work. We searched up whether anyone had done this kind of thing before and whether it had worked for them, we found that it has been done before and from this we took all the good points and the bad point. The bad points that we found were things like not enough promotion, so therefor we could do our workshop better by having more promoting such as social media ads. By having learn from other people's past experiences, we could improve on future experiences for people waiting on the list.

The ADHD waiting list is a continuous issue within health and social care because of the growing demand on the Nation Health Service and how the NHS is under so much pressure right now. The growing media has a part to play because there is so much

more information out there on ADHD and the effects that it has on people. Everyone is on social media platforms this day and age which means that the ADHD problem is more recognised and there is a lot more information to be accessed around ADHD. Due to the increased media on ADHD people may think they have this disorder even if they only have one or two symptoms, therefore they are seeking their doctors advice and requesting to be put on the wait list for a diagnosis. After a diagnosis has been made the patient would be given the opportunity to go on medication such as Psychostimulants or Norepinephrine reuptake inhibitor, atomoxetine (Charach, A. and Fernandez, R., 2013) Having an increased number of patients on such medication has an impact on the NHS service. Getting diagnosed for ADHD in childhood would be more efficient not only for the individual but for the NHS as well but now this is not happening as many adults are now coming forward with their struggles and wish to go on the wait list so that they can get an official diagnosis. Having an official diagnosis of ADHD means that people can get the help that is needed such as medication which would help with individuals' symptoms. Whilst this may help some people it may not help everyone because ADHD medications carry some sort of side effects which people may not be able to cope with. (Pan. P.Y., et al 2022) Some ADHD medications may also carry long term side effects such as increased headaches.

In conclusion ADHD is described as a neurobehavioral condition of childhood (Furman. L., 2025) Adult ADHD can differ from childhood-onset ADHD, Data shows the difference in genetic, environmental, epigenetic and brain structure changes, when all this is combined it can impact the behavioural presentation in adults (Custodio, R.J.P., et al 2024) Due to the increase in social media usage there is more information on ADHD out there therefore adults who are recognising the signs and symptoms in themselves are now seeking the help that they deserve, although this is a good thing this also means that it puts added pressure on the NHS to get everyone a diagnosis and quick. There is an increased waiting list for individuals who believe that they may have some sort of ADHD therefore the NHS has to come up with solutions to get this issue under control. This has an increased effect on health and social care because of the vast number of individuals on the ADHD wait list.

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