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The Psychosocial Functioning of Children and Spouses of Adults With ADHD

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The authors of this study sought to examine the psychosocial functioning of families with attention-deficit/hyperactivity disorder (ADHD) caretakers. They sought to (1) assess the prevalence of ADHD in offspring of adults diagnosed with ADHD, (2) assess risk for psychopathology and maladjustment in these offspring, (3) assess the mental health and marital relationship of the spouse of the ADHD adult parent.

Participants in the study included 33 adults with ADHD, 23 spouses, and 63 children. The control group included 26 non-ADHD adults, 20 spouses, and 40 children. The adults with ADHD were selected from a large study looking at the psychosocial functioning of 191 clinic-referred adults with ADHD. Inclusion for the second study required the presence of children between 4 and 17 years of age. The comparison group was recruited through advertisements in the community newspaper.

Results were as follows: 43% of children with ADHD parents met criteria for ADHD vs 2% of comparison children. One family had 2 parents with ADHD and 3 offspring with ADHD. There was no intergenerational continuity for subtype. ADHD mothers had more boys with ADHD (4 of 11). ADHD fathers had more boys with ADHD (15 of 16). In terms of comorbidity, 70% of ADHD adults had other disorders vs 15% of the comparison adults. Spouses of adults with ADHD had more psychiatric disorders but not of a statistically significant increase. Male spouses of ADHD women were more symptomatic than comparison males with non-ADHD wives. Marital adjustment was much poorer in families of ADHD adults, regardless of gender of the parent; 58% of these parents reported maladjustment (vs 25% of comparison group). However, spouses of the ADHD parent did not always rate the marriage as poorly. Divorce rates

were not significantly different in the 2 groups. Assessment of the children showed that those offspring diagnosed with ADHD had more anxiety and oppositional defiant disorder than controls. The children with ADHD also had poor psychosocial functioning, an effect not significantly influenced by the presence of at least 1 healthy adult. However, children without ADHD had improved functioning when at least 1 parent was healthy.

In their discussion, the authors noted that only 40% of ADHD adults lived with a partner and only 31% had children. Average age was 32.5 years for ADHD males and 34.7 for ADHD females. Higher rates of marriage and children had been expected. ADHD-related emotional immaturity might have contributed to their delays in marriage and entry into family life. It was hypothesized that children with an ADHD parent would have more psychiatric disorders. The presence of ADHD predicted comorbidity (73%) not presence of an ADHD parent. The authors also had hypothesized that family and marital functioning would be compromised by an adult with ADHD. It seemed that men married to ADHD women were quite distressed and critical of their wives but that women married to ADHD men were more supportive and willing to compensate for the husband's impairments.

Another hypothesis was that parental psychopathology, marital discord, and child psychopathology would be correlated. It seems that the presence of ADHD in a child did not influence parental mental health and that non-ADHD children seemed protected from impaired functioning when at least 1 parent was mentally well. On the other hand, almost half of the children with an ADHD parent had current psychiatric disorder and 25% of spouses met criteria. These findings underscore the importance of assessing family members when treating an ADHD adult.

[Abstract](#)