

ADHD and Stigma

WHAT DOES THE CURRENT RESEARCH SHOW about stigma and ADHD? This research update reviews two recent studies examining stigma surrounding individuals with ADHD. Stigma can include public stigma and internalized stigma. Public stigma involves the negative perceptions of society. Internalized stigma involves an individual internalizing, or taking on within themselves, public stigma.

The first study is a review of public stigma, that is, the attitudes that the broader community holds regarding ADHD. This review found that the wider public continues to hold negative perceptions of individuals with ADHD and misconceptions surrounding ADHD, such as needing to have social distance from individuals with ADHD, believing that those with ADHD are likely to have problematic behaviours, seeing ADHD as being overdiagnosed, and having difficulty accepting use of medication treatment for ADHD.

The second study examined levels of internalized stigma among youth with ADHD and their parents to determine whether parental perceptions of stigma are related to youth perceptions. Results showed that parents and youth had generally similar levels of internalized stigma.

Taken together, these studies show an association in internalized stigma among parents and youth with ADHD as well as stigma against ADHD among the broader public. Continued efforts to combat stigma are crucial, such as mental health education programs for

families and communities along with research, clinical work, and advocacy.

Public attitudes toward ADHD

Research indicates that individuals with ADHD are likely to hold negative perceptions of themselves. As well, those around individuals with ADHD, such as parents, teachers, and primary care providers, are likely to hold similarly negative views of these individuals. In addition, a prior review of public stigma toward those with ADHD found that the broader public reported a need to maintain social distance from individuals with ADHD. Such stigma has significant negative consequences, as it is associated with adverse outcomes for those with ADHD such as a reluctance to engage in mental healthcare, low self-esteem, and social rejection.

This current and more recent review examined research from ten studies from various countries (Indonesia, Korea, Finland, Australia, Germany, and the United States). These studies investigated perceptions of the larger community regarding ADHD and ADHD-related behaviors. Findings showed that the broader community continued to hold generally negative perceptions toward ADHD, such as a need to maintain social distance from individuals showing behaviours related to ADHD, a belief that individuals with ADHD are likely to show challenging behaviours, a view that ADHD is overdiagnosed, and difficulty with the acceptability of medication treatment for ADHD.

The results of this review point to the importance of programming to enhance mental health literacy among the wider public in order to reduce stigma. Being familiar with ADHD allows for better recognition and understanding of it, which may buffer against stigmatizing perceptions. Indeed, research demonstrates that attributing ADHD symptoms to the disorder rather than the person themselves may be related to lower social rejection. Overall, more research is needed to better understand stigma and how to ameliorate it.



Bisset M, Winter L, Middeldorp CM, Coghill D, Zendarski N, Bellgrove MA, & Sciberras E. (2022). Recent attitudes toward ADHD in the broader community: A systematic review. *Journal of Attention Disorders*, 26, 537–548. <https://doi.org/10.1177/10870547211003671>

Internalized stigma

Stigma can have an impact on quality of life, functioning, and initiating or continuing with treatment for individuals with ADHD. Research to better understand stigma is essential. This study examined internalized stigma in 107 youth with ADHD between the ages of 12 and 18 along with their parents living in Turkey.

The internalized stigma of youth was compared to that of their parents to determine if parental levels of internalized stigma are associated with youth levels. The stigma domains of alienation (feeling out of place in the world), perceived discrimination (believing that others think one can't achieve much in life), stereotype endorsement (believing that stereotypes apply to oneself), social withdrawal (staying away from social situations to protect one's family or friends from embarrassment), and stigma resistance (being able to live one's life the way one wants to) were examined.

Findings showed that parental levels of internalized stigma for having an adolescent with ADHD were not significantly different from youth levels of stigma, with the exception of the domain of stereotype endorsement. That is, compared to youth self-reports, parents reported higher levels of stereotype endorsement. Parents may agree more than their youth about stereotypes of their offspring, or they may be more aware of such stereotypes in general.

Although this study is unable to determine whether internalized stigma is directly transmitted from parents to youth, it is able to show as a first step that parent and youth levels of internalized stigma are relatively similar among this sample. In addition, the result that parents have higher levels of stereotype endorsement compared to their offspring suggests the possibility that parents may be more susceptible to public stigma.

All in all, future studies are needed to understand how to best support parents and their youth in protecting against public stigma and reducing the likelihood of such stigma becoming internalized.

Dikeç G, Bilaç Ö, Kardelen C, & Sapmaz ŞY. (2022). Do we learn to internalize stigma from our parents? Comparison of internalized stigmatization in adolescents diagnosed with ADHD and their parents. *Adolescents*, 2, 439–447. <https://doi.org/10.3390/adolescents2040034>



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