

REFERENCES

- Barkley, R.A. (1998). *Attention-Deficit Hyperactivity Disorder: A handbook for diagnosis and treatment (2nd ed.)*. New York: Guilford Press.
- Copeland, L., Wolraich, M., Lindgren, S., Milich, R., & Woolson, R. (1987). Pediatricians' reported practices in the assessment and treatment of attention deficit disorders. *Journal of Developmental and Behavioral Pediatrics, 8*, 191-197.
- Hennigan, L. M. (1997). Clinical assessment practices for the diagnosis of attention deficit disorders in children. *Dissertations Abstracts International, 58* (10), 5645B (University Microfilms No. AAM98-11700).
- National Institutes of Health. (1998). Diagnosis and treatment of Attention Deficit Hyperactivity Disorder. *NIH Consensus Statement Online 1998 Nov 16-18; 16*(2), 1-37. Available <http://odp.od.nih.gov/consensus/cons/110>.
- Rosenberg, R. P., & Beck, S. (1986). Preferred assessment methods and treatment modalities for hyperactive children among clinical child and school psychologists. *Journal of Clinical Child Psychology, 15*, 142-147.
- Ullman, D. G., & Doherty, M. E. (1984). Two
- tivity: The child and the clinician. *Advances in Developmental and Behavioral Pediatrics, 5*, 167-219.
- Ullman, D. G., Egan, D., Fiedler, N., Jurenc, G., Pliske, R., Thompson, P., & Doherty, M.E. (1981). The many faces of hyperactivity: Similarities and differences in diagnostic policies. *Journal of Consulting and Clinical Psychology, 49*, 694-704.
- Wolraich, M. L., Lindgren, S., Stromquist, A., Milich, R., Davis, C., & Watson, D. (1990). Stimulant medication use by primary care physicians in the treatment of attention deficit hyperactivity disorder. *Pediatrics, 86*, 95-101.

The Impact of ADHD on Marriage

Arthur L. Robin, Ph.D. and Eleanor Payson, A.C.S.W

The deficits in executive functioning, inhibitory control, and attentional processes that are the core characteristics of ADHD can have profound effects on intimate relationships such as marriage. Spouses with ADHD may be forgetful, disorganized, and distracted—failing to meet their responsibilities or obligations to their partners. They may not attend to or communicate effectively with their partners, and may overreact emotionally, losing their tempers and impulsively saying or doing things very damaging to their relationships. Over time, the non-ADHD partner may interpret the ADHD partner's failure to carry out commitments, poor communication, and emotional outbursts as evidence that the ADHD partner does not care or love the partner. Attempts to resolve the issues may fail because the ADHD partner "keeps making the same mistakes." Eventually, the partners may burn out and the marriage may fail.

Although a number of publications have addressed the clinical aspects of ADHD and marriage (Fowler &

Fowler, 1995; Haverstadt, 1998), very little empirical research has been published on this topic. One impediment to such research has been the lack of measures that assess the unique impact of ADHD symptoms and behaviors on marital relationships. We decided to develop a Marital Impact Checklist, which assesses the impact of common behaviors emitted by ADHD spouses on their marriage, and to use this checklist to study the problems which ADHD couples encounter.

The Marital Impact Checklist consists of 34 brief statements of potentially problematic behaviors that ADHD spouses might exhibit. These items were derived from a review of adult ADHD rating scales, marital measures, clinical literature on ADHD and marriage—and the authors' clinical experience with ADHD couples. The items tap communication ("Doesn't respond when spoken to"), poor task completion ("Pays bills late"), poor time management ("Can't get things done unless there is an ab-

solute deadline"), disorganization ("Leaves a mess"), forgetfulness ("Doesn't remember being told things"), and emotional reactions ("Takes out frustrations on spouse"). The ADHD spouse rates his/her own behavior, and the non-ADHD spouse independently rates the ADHD spouse's behavior, using separate checklists. Three ratings are done for each item: (1) Does this behavior occur? (YES/NO); (2) If it occurs, how unloved, unimportant, or ignored does this behavior make the non-ADHD spouse feel? (5-point Likert scale); and (3) If it occurs, how negatively does this behavior impact the marriage (5-point Likert scale)?

In addition to examining responses to each item, three summary scores are computed from each spouse's Marital Impact Checklist: (1) the total number of items endorsed as occurring; (2) the Mean Unloved Rating, an average of all the items for which this rating was done; and (3) the Mean Negative Impact rating, an average of all of the items for which this rating was done.

TABLE 1. Top Ten Ranked Items and Summation Scores that make the non-ADHD Spouse feel Unloved, Unimportant, Ignored

	ADHD Partner Ratings	Non-ADHD Partner Ratings
Items in Top Ten as rated by both the ADHD and Non-ADHD Partners		
Doesn't remember being told things (T)*	213	176
Says things without thinking (C)	200	151
Zones out in conversations (C)	193	152
Has trouble dealing with frustration (A)	192	143
Has trouble getting started on a task (T)	177	147
Under-estimates time needed to complete a task (T)	176	148
Leaves a mess (T)	163	165
Doesn't finish household projects (T)	162	156
Items in the Top Ten as rated only by the ADHD Partner		
Tolerates too much and blows up inconsistently (A)	176	—
Tries to do too much in a short time (T)	179	—
Items in the Top Ten as rated only by the non-ADHD Partner		
Doesn't respond when spoken to (C)	—	148
Doesn't plan ahead (T)	—	143

Note. C = communication. T = Task completion/ time management. A = Self-regulation of affect.

The purposes of our initial pilot study were to: (1) determine which ADHD-related behaviors couples with an ADHD spouse perceive as having the greatest negative impact on their relationships; (2) determine the degree of correspondence between ADHD and non-ADHD spouses perceptions of the occurrence and impact of particular ADHD-related behaviors; (3) collect preliminary data concerning the internal consistency and concurrent validity of the Marital Impact Checklist; and (4) compare the reports of couples with male versus female ADHD spouses concerning the negative impact of ADHD behaviors on the marriage.

METHODS

Eighty couples with one ADHD spouse participated. Twenty-four couples were recruited from adults undergoing diagnostic evaluations for ADHD with the first author. Thirty-four couples saw the checklist in ADDvance magazine, completed it, and returned it to the first author. Twenty saw the checklist in FOCUS newsletter, completed it, and returned it to the first author. Two received the checklist with their regis-

tration materials at the ADDA Conference in Seattle in May, 2001, completed it, and returned it. In 35 (44%) couples, the husband was the ADHD spouse; in 45 (56%) the wife was the ADHD spouse. The ADHD spouses averaged 42 years of age (range: 23–59); the non-ADHD spouses averaged 43 years of age (range: 28–68). Thirty ADHD spouses had the Inattentive Subtype; 5 had the hyperactive-impulsive subtype; 32 had the combined subtype; and in 13 cases the subtype was not reported.

Twenty-three of the 24 couples undergoing clinical evaluation also completed the Global Distress Scale of the Marital Satisfaction Inventory-Revised (Snyder, 1998).

RESULTS

Negative Impact of Specific ADHD Behaviors

For each of the 34 items on the Marital Impact Checklist, the Unloved and Negative Impact ratings were summed across all of the participants endorsing the presence of that item. These summation scores were rank ordered from

highest to lowest separately for the ADHD and non-ADHD spouse's ratings. Table 1 presents the 10 highest ranked Unloved items. Eight of the 10 highest-ranked items were identical on each spouse's list. Three of the items tap problems in communication (e.g. "says things without thinking"), 6 tap deficits in completing tasks, working memory, and managing time (e.g. "doesn't remember being told things," "has trouble getting started on a task"), and 2 tap deficits in self-regulation of affect (e.g. "Has trouble dealing with frustration"). Four additional items appeared on either the ADHD or non-ADHD partner's list.

The list of the 10 items with the highest summation scores for Negative Impact was nearly identical to the list in Table 1, and will therefore not be presented here. The mean Unloved and mean Negative Impact scores correlated .82 for the ADHD spouses' ratings and .87 for the non-ADHD spouses' ratings.

Comparison of the Spouse's Perceptions

Correlations were computed between the ADHD and non-ADHD spouses'

TABLE 2. Mean Scores and Standard Deviations for ADHD and non-ADHD Spouses

	ADHD Spouse		Non-ADHD Spouse		T	Significance
Number of Issues	21.88	(6.67)	20.04	(5.84)	2.12	.04
Mean Unloved Rating	2.89	(0.81)	2.51	(0.85)	3.98	.001
Mean Negative Impact Rating	2.98	(0.86)	2.75	(0.85)	2.65	.01

scores for number of items endorsed, the Mean Unloved Rating, and the Mean Negative Impact Rating. The correlations were moderate: (1) number of items endorsed, $r = .40$, $d.f. = 68$, $p < .001$; (2) Mean Unloved Rating, $r = .39$, $d.f. = 68$, $p < .001$; and (3) Mean Negative Impact Rating, $r = .58$, $d.f. = 68$, $p < .001$.

Table 2 presents the mean scores for the ADHD and non-ADHD spouses on these measures. Paired t -tests were used to compare the mean scores of the ADHD and non-ADHD spouses. The ADHD spouses endorsed a significantly higher number of issues and reported significantly higher unloved and negative impact ratings than the non-ADHD spouses.

Internal Consistency and Concurrent Validity

In order to assess the internal consistency of the Marital Impact Checklist, Cronbach’s α was computed for each of the summary scores. It was only possible to compute Cronbach’s α for the number of issues scores because the number of subjects who completed Unloved and Negative Impact ratings on all of the items was very low. The α coefficient for the number of issues was .85 for the ADHD spouse as the respondent and .79 for the non-ADHD spouse as the respondent.

In order to assess concurrent validity, the Marital Impact Checklist scores were correlated with the MSI Global Distress scores for the 23 clinic-referred couples who completed the MSI. There were no significant correlations between the ADHD spouse’s Global Distress scores and any of the Marital Impact Checklist scores. There were significant and moderate to

strong correlations between the non-ADHD spouse’s Global Distress scores and all of the Marital Impact Checklist scores, as follows: (1) non-ADHD spouse, number of issues: $r = .54$, $p < .05$; (2) non-ADHD spouse, Mean Unloved Rating: $r = .54$, $p < .02$; (3) non-ADHD spouse, Mean Negative Impact Rating: $r = .61$, $p < .002$; (4) ADHD spouse, number of issues: $r = .54$, $p < .008$; (5) ADHD spouse, Mean Unloved Rating: $r = .72$, $p < .001$; and (6) ADHD spouse, Mean Negative Impact Rating: $r = .79$, $p < .001$.

SEX OF THE ADHD PARTNER

We compared the Marital Impact Checklist scores of couples with male versus female ADHD spouses. In interpreting these results, it needs to be remembered that 97% of the females with ADHD were recruited through ADDvance magazine or FOCUS, while 57% of the males with ADHD were recruited through clinical referrals. Participants seeking clinical evaluation and treatment for ADHD may differ systematically from participants reading magazines for adults with ADHD.

Table 3 summarizes the mean scores and t -tests comparing couples with male versus female ADHD partners. Although there were no differences between the ratings of male versus female ADHD spouses, we found striking differences between the ratings of their non-ADHD spouses. Male non-ADHD spouses rated their female ADHD partners to be displaying many more ADHD-related behaviors, which are exerting a greater negative impact on their marriages than female non-ADHD spouses reported about their male ADHD partners. An analysis of the sex differences for each of the 34

items revealed that this effect was robust. There was a similar pattern of significant differences on 22 of the individual items of the Marital Impact Checklist.

DISCUSSION

The results of this investigation provide some intriguing pilot findings, which if replicated in more extensive studies would further our understanding the impact of ADHD on marriage. In this sample of 80 couples, there was a clear rank-ordering as to which ADHD spouse behaviors elicited the most negative reactions from the non-ADHD spouse. ADHD and non-ADHD spouses concurred in ranking three communication behaviors, five task completion/time management behaviors, and one self-regulation of affect behavior in the top ten items which lead the non-ADHD spouse feel unloved, unimportant, or ignored. It is encouraging to note the consistency across spouses concerning the behaviors that are most detrimental to their relationships. Interventions aimed at changing the marriages of such ADHD spouses might focus on these specific behaviors.

Despite consistency in rankings for the top ten negative ADHD behaviors, the overall correlations between the summary scores on the Marital Impact Checklist for the ADHD and non-ADHD spouses were moderate (.39 to .58). The spouses report somewhat different overall numbers of items endorsed, Mean Unloved Ratings, and Mean Negative Impact Ratings. In fact, the ADHD spouses reported more items to be applicable, with more intense and diverse impacts on their mar-

(continued on p. 14)

TABLE 3. Mean Scores and Standard Deviations for Male versus Female ADHD Spouses

	Male ADHD Spouse		Female ADHD Spouse		T	Significance
ADHD Spouse Reporting						
Number of Issues	21.50	(6.53)	22.17	(6.83)	-0.42	n.s.
Mean Unloved Rating	3.01	(0.76)	2.79	(0.83)	1.21	n.s.
Mean Negative Impact Rating	3.04	(0.79)		2.92	(0.89)	0.64
Non-ADHD Spouse Reporting						
Number of Issues	21.78	(5.88)	18.49	(5.40)	2.50	.02
Mean Unloved Rating	2.95	(0.75)	2.11	(0.74)	4.80	.001
Mean Negative Impact Rating	3.18	(0.70)	2.36	(0.78)	4.76	.001

riages than did the non-ADHD spouses.

The sex differences present for non-ADHD spouses but not for ADHD spouses on the Marital Impact Checklist were dramatic. If replicated, these effects suggest that sex role issues contribute far more to the level of dissatisfaction in a marriage when the female partner has ADHD than when the male partner has ADHD. It has been suggested (Solden, 1995) that ADHD behaviors impede females more than males from fulfilling gender-role expectations placed on them by modern Western society. The fact that males rated their female ADHD partners more negatively than females rated their male ADHD partners is consistent with Solden's suggestion. Alternatively, perhaps males express

their dissatisfaction with their ADHD wives more directly than females express their dissatisfaction with their ADHD husbands. Therapists may need to pay special attention to helping male non-ADHD partners understand and accept ADHD characteristics in their wives.

Finally, the internal consistency data and correlations with the Marital Satisfaction Inventory Global Distress Scale provide preliminary evidence of the concurrent validity of the Marital Impact Checklist. Although further validation of the Marital Impact Checklist is needed, this pilot study does suggest that the checklist has utility in research and clinical work with ADHD couples.

Dr. Arthur L. Robin is a member of the editorial board and is Professor of Psychiatry

and Behavioral Neurosciences at Wayne State University in Detroit, Michigan. Eleanor Payson is a marital therapist in private practice in St. Clair Shores, Michigan. A copy of the Marital Impact Checklist can be obtained by e-mailing Dr. Robin at srobin109404MI@comcast.net

REFERENCES

Fowler, R., & Fowler, J. (1995). *Honey, are you listening?* Nashville, Tennessee, Thomas Nelson, Inc.

Haverstadt, J. S. (1998). *A.D.D. & Romance: Finding fulfillment in love, sex, & relationships.* Dallas, Texas: Taylor Publishing Company

Snyder, D. (1998). *Marital Satisfaction Inventory, Revised (MSI-R) manual.* Los Angeles, CA: Western Psychological Services.

Solden, S. (1995). *Women with Attention Deficit Disorder.* Grass Valley, California: Underwood Press.

MISSING AN ISSUE?

Go to www.guilford.com and click on **Periodicals**, then click on **The ADHD Report** for a full listing of back issues.