Childhood ADHD and Negative Self-Statements: Important Differences Associated with Subtype and Anxiety Symptoms

Peter J. Castagna, Matthew Calamia, Thompson E. Davis III

Behavior Therapy, May 2017
DOI: https://doi.org/10.1016/j.beth.2017.05.002.

Abstract

The current study examined the role negative self-statements have on the comorbidity between anxious symptomatology and ADHD-combined presentation (ADHD-C) and ADHD-predominantly inattentive (ADHD-I). A total of 114 children and adolescents with ADHD (M age = 10.15; SD = 2.30; range = 7-16) from a clinic-referred sample were grouped based on a semistructured diagnostic interview and consensus approach (ADHD-C, n = 62; ADHD-I, n = 52). Negative self-statements were measured using the Children’s Automatic Thoughts Scale and the total score from the Multidimensional Anxiety Scale for Children was used to measure anxious symptomatology. Findings indicated youth diagnosed with ADHD-C, compared to those diagnosed with ADHD-I, had more frequent personal failure (Cohen’s d = .40) and hostile intent negative self-statements (Cohen's d = .47). The association of ADHD subtype and negative self-statements was moderated by anxiety; negative self-statements of personal failure were highest in anxious ADHD-C children (β = .31). A second sample of 137 children and adolescents (M age = 10.61; SD = 2.26; range = 7-16) from a larger clinic-referred sample was utilized to replicate our results dimensionally. Results indicated that both hyperactivity/impulsivity (β = .23, p < .01) and the interaction of hyperactivity/impulsivity and anxiety (β = .17, p < .05) were significant predictors of negative self-statements regarding personal failure, while holding child age, child gender, oppositional symptoms, and inattention constant. In all, negative self-statements should be considered in the treatment and assessment of ADHD with particular attention paid to ADHD subtype and internalizing comorbidity.