The vulnerability of self-reported disability measures to malingering: a simulated ADHD study.

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Abstract

OBJECTIVE:
Making diagnostic and accommodation decisions for potential Attention-Deficit/Hyperactivity Disorder (ADHD) in adults is difficult, as the assessor often relies more on self-reported symptoms and functional disability than in childhood evaluations. Malingering of ADHD occurs frequently in the educational setting and for a variety of reasons, including the potential benefits of access to stimulant medications and academic accommodations.

METHOD:
The present study utilized a simulation design to examine the potential for malingering of self-reported functional disability on the World Health Organization Disability Schedule 2.0 (WHODAS). Participants were 167 students from two Midwestern universities. Thirty-six self-reported a previous diagnosis of ADHD and the remaining 131 students were randomly assigned to one of three conditions: best effort, malingering for the purpose of receiving stimulant medication or malingering for the purpose of receiving extra time accommodations.

RESULTS:
Individuals in both malingering groups reported higher levels of disability on all domains of the WHODAS compared to healthy controls and individuals with ADHD. There were no significant differences between malingering groups.

CONCLUSIONS:
Results suggest the WHODAS is susceptible to non-credible responses and should not be relied upon solely as a measure of disability in the context of ADHD evaluations.