Distinct dimensions defining the Adult ADHD Self-Report Scale: Implications for assessing inattentive and hyperactive/impulsive symptoms

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Abstract

There has been growing interest in studying attention-deficit/hyperactivity disorder (ADHD) in adulthood as a result of research indicating that ADHD often persists into adulthood and frequently is comorbid with other psychiatric disorders. Adult ADHD symptoms are most commonly assessed via self-report, but prior research examining the structure of self-reported adult ADHD symptoms has yielded discrepant results. Explicating the factor structure of ADHD symptom measures is essential to determine if such self-report measures assess symptom dimensions showing distinctive relations with other psychopathology and psychosocial functioning. Consequently, we examined the structure of adult ADHD symptoms in a large sample of adult outpatients (N = 1,094). Symptoms were assessed via the Adult ADHD Self-Report Scale (ASRS; Kessler et al., 2005), which has become the most widely used self-report ADHD measure. Additionally, we extended prior research by examining the relations for emergent ADHD dimensions with other psychopathology and psychosocial impairment. Results indicated that the ASRS’s items define a bifactor structure with specific dimensions of inattentiveness, motor hyperactivity/impulsivity, and verbal hyperactivity/impulsivity. Our results indicate that specific ADHD factors show distinctive relations in some ways. For example, verbal hyperactivity/impulsivity showed negative relations with major depressive disorder, whereas inattentiveness showed positive relations with major depression. These results highlight the need for future research determining the extent to which making distinctions among various ADHD symptom types (i.e., distinguishing motor and verbal hyperactivity/impulsivity) is empirically warranted and clinically useful.