

Study finds racial and ethnic disparities in ADHD diagnosis

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(Medical Xpress)—Black children and children in homes where a language other than English is spoken are less likely to receive an attention-deficit/hyperactivity disorder (ADHD) diagnosis by school entry, despite being otherwise similar to white children on many measured background characteristics, according to a study by a team of researchers. Their findings indicate that disparities in ADHD diagnosis begin to occur early in children's school careers.

"We were interested in evaluating whether the disparities observed across elementary and middle school in our earlier study were evident as early as the fall of kindergarten, accounting for many factors measured prior to the <u>children</u> entering school," said Paul Morgan, associate professor of special education, Penn State. "Whether these disparities extend to Hispanic children has also been unclear. We find that their initially observed disparities are related to non-English language use in the home."

Analyses of kindergarten teacher-reported classroom behavior indicated that neither black nor Hispanic children displayed less frequent ADHD-related behaviors than white children, suggesting that a lower incidence of ADHD symptomology did not explain minority children's comparatively lower rates of diagnosis.

"One explanation for our findings is that black parents may be relatively more reluctant to obtain a mental health diagnosis for their children, while language barriers may explain Hispanic children's lower likelihood



of diagnosis," Morgan said. "It may also be the case that pediatricians and other professionals are not soliciting developmental concerns as often from minority families."

A lack of treatment for ADHD may result in some minority children experiencing more learning and behavioral problems as they start school, so that they quickly begin falling behind their peers.

"One practical application is that these groups of children may have unmet treatment needs," Morgan said. "Pediatricians, psychiatrists and school-based practitioners should be sensitive to the possibility that cultural and linguistic barriers are resulting in systematic under-diagnosis for some groups of children. Ensuring minority children are appropriately diagnosed and treated for ADHD may require overcoming these barriers."

Providing minority parents with information on recognizing potential ADHD symptoms in their children, as well as encouraging help-seeking behaviors when meeting with professionals, may also help prevent or reduce racial/ethnic diagnosis disparities.

"I hope that our findings inform efforts to help all children with ADHD," Morgan said. "If untreated, ADHD can very quickly begin to interfere with children's opportunities for <u>school</u> success."

More information: "Racial/ethnic disparities in ADHD diagnosis by kindergarten entry." Morgan PL, Hillemeier MM, Farkas G, Maczuga S. *J Child Psychol Psychiatry*. 2014 Jan 24. <u>DOI: 10.1111/jcpp.12204</u>. [Epub ahead of print]

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