

Gender Bias in ADHD Diagnosis and Exploring Predictors for Accurate Diagnosis

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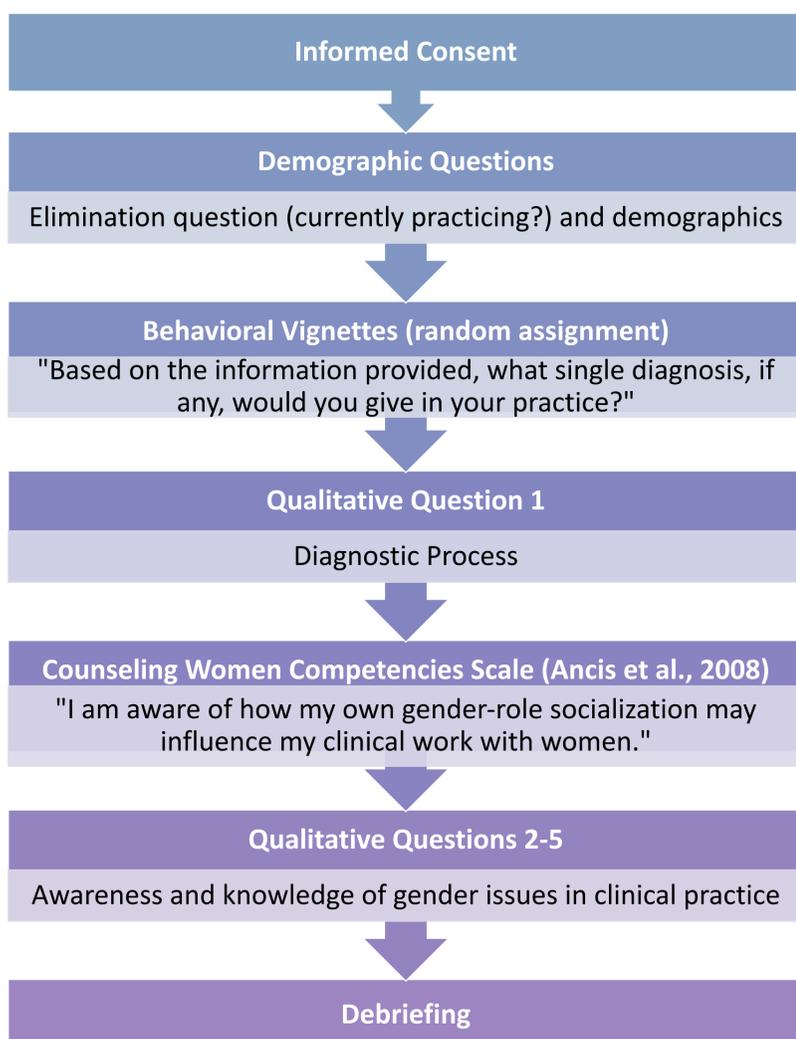
INTRODUCTION & AIM

- Childhood prevalence is often cited at a 3:1 male-to-female ratio. This gap significantly narrows in adulthood, suggesting that many girls are overlooked during childhood (Hinshaw et al., 2022).
- Research indicates that girls often present with "internalized" symptoms, which are less disruptive to classroom environments than the "externalized" hyperactive symptoms more frequently observed in boys (Hinshaw et al., 2022; Quinn & Madhoo, 2014).
- Girls are less likely to be referred for evaluation by teachers and parents (Mowlem et al., 2019).
- There are long-term risks for girls when they remain undiagnosed which include lower self-esteem, higher rates of self-harm, anxiety, and depression (Hinshaw et al., 2022; Mizock & Brubaker, 2021).

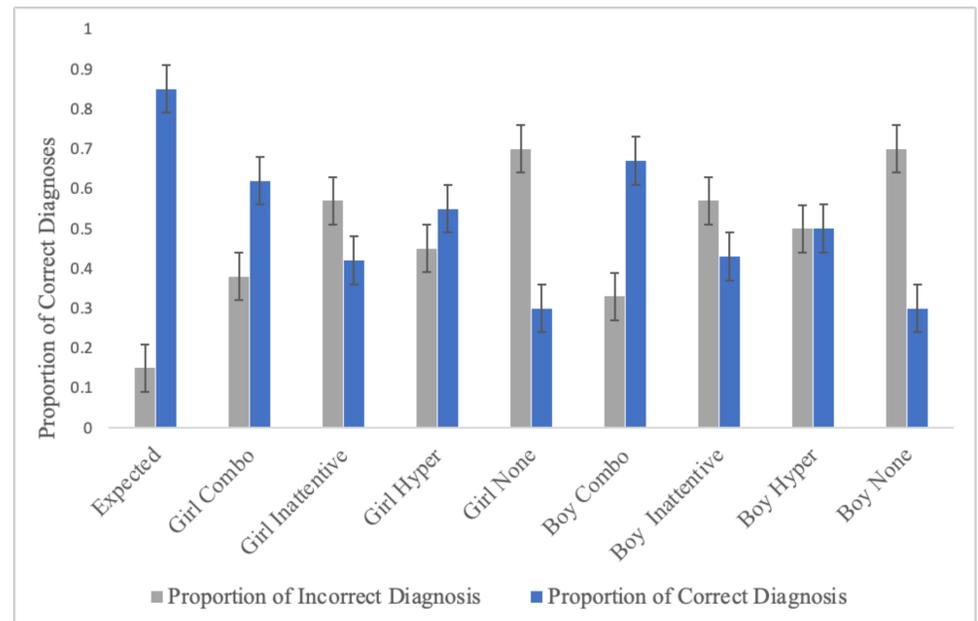
The purpose of the current study was to further explore clinician gender bias and the underdiagnosis of girls and women with ADHD.

METHOD

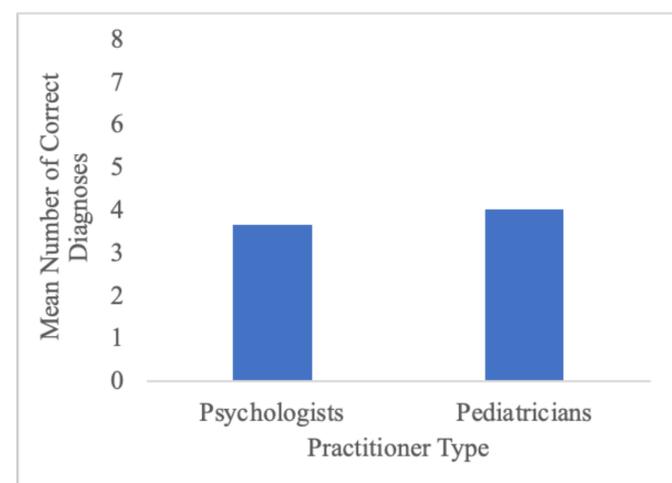
n = 82 (43 clinical psychologists, 38 pediatricians)
Participation was online through Qualtrics.



RESULTS & DISCUSSION



Rates of accurate diagnosis were statistically less than expected across all vignettes, regardless of gender and presentation type. The inattentive subtype had the most notable discrepancy of diagnosis from the expected rates among the ADHD presentations, with observed correct diagnoses at .43 and incorrect diagnoses at .57, $X^2(1, N = 82) = 110.87, p < .001$ for both the boy and girl vignettes.



CONCLUSION / FUTURE WORK

The results highlight the need for attention to inattentive ADHD and raise broader concerns about high rates of misdiagnosis across the board. Future research might investigate interventions designed to educate practitioners on masking behaviors and the inattentive presentation often observed in girls and women.

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