

The 9<sup>th</sup> International Conference on Cognitive Science

## Adult attachment and constructive communication in parents of children with Attention Deficit Hyperactivity Disorder (ADHD)

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### Abstract

The present study aimed to explore the influence of adult attachment on relationship quality in parents of children with ADHD. A quantitative method design was used to address the research objective. Two hundred and fifty four (254) participants were employed: 101 parents of children with ADHD, and 153 parents of children without ADHD. Three established questionnaires were used: Connors Parental rating Scale (CPRS), Communication Pattern Questionnaire (CPQ), and Experience in Close Relationship (ECR). The result shows that attachment style moderated the impact of having a child with ADHD on constructive communication in the couple.

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Selection and/or peer-review under responsibility of the Universiti Malaysia Sarawak.

**Keywords:** Adult attachment, relationship quality; constructive communication; Attention Deficit Hyperactivity Disorder (ADHD).

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### 1. Introduction

Attention-Deficit Hyperactivity Disorder (ADHD) was identified almost 100 years ago [1]. It is one of the most commonly diagnosed childhood psychiatric disorders [2] [3] [4], affecting approximately 3-5%, around 2 million children, in the United States [5], and approximately 2-5% of all children in the world [1]. According to the National Institute of Mental Health [5], inattention refers to: difficulty in paying attention, listening to instructions, and concentrating, becoming bored with a task after only a few minutes; poor handwriting, coordination and movement planning; finding it very difficult to learn, and sometimes daydreaming the time away. Impulsivity refers to: appearing immature; acting without thinking; lacking awareness and sensitivity to those around them; being argumentative or over-reacting to minor problems; rushing into a task and moving from one unfinished task to another. Hyperactivity means: having difficulty waiting in turn; over-activity or restlessness; aggression; engaging in dangerous activities without considering the consequences; talking excessively and maybe having difficulty playing quietly. All children are sometimes hyperactive, demonstrating the behaviours discussed above. However, ADHD may be suspected if the child demonstrates behaviour that is very difficult to manage, along with poor social relationships and poor concentration, which is affecting school performance. In this case, it is important that the child receives a thorough examination and appropriate diagnosis by a qualified professional [5].

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At the broadest level, attachment can be understood as an emotional bond to another person. An attachment relationship refers to a tie of affection that bonds someone with an attachment figure, principally the primary caregiver [6]. John Bowlby, who developed the theory, defined attachment as “any form of behavior [sic] that results in a person attaining or retaining proximity to some other differentiated and preferred individual, usually conceived as stronger and/or wiser” [7] (p. 292). Growing babies gradually develop an internal working model of the self and of others, particularly their caregivers. Cues help infants to learn which kinds of behaviour are acceptable and which not. They might, for example, be swiftly picked up by their caregivers whenever they cry. This kind of behaviour is biologically rooted and activated by environmental cues, such as the need for protection and care. It can be said that, for the new-born, attachment behaviour is part of a genetically programmed survival function [8]. It is further argued that Attachment Theory helps to explain the inner mechanisms of social bonding, the way in which past experiences influence the establishment of relationships with others, and the role that attachment plays as a buffer against stress [9].

The attachment system is activated particularly in response to stress, such as whilst the child is frightened or in pain. In such stressful circumstances, the child seeks proximity to the primary caregiver and is comforted [10] [11]. Consequently, a relationship forms whereby behaviour such as smiling and crying serve to bring about the sought proximity – an attachment system which ensures a sense of security [6]. Furthermore, the experience of love and care from the primary caregiver emboldens the child to be more playful and sociable during its early childhood. This represents a secure attachment prototype [12]. As a corollary, where a primary caregiver is absent, or otherwise deprives the child of love and adequate care, they may experience anxiety. This insecurity can take the form of anxious or avoidant attachment. In anxious attachment, the child is pre-occupied about the presence of the primary caregiver. This pre-occupation can be manifested by the child visually checking, calling, or moving to re-establish contact, as well as manifesting clinging-type behaviour. In contrast, avoidant attachment is characterised by the child using defensive strategies and, despite wanting and needing the caregiver’s attention, seeking to avoid them.

Studies have examined the activation of the attachment system in adulthood at times of stress/distress [13] [14]. These studies were designed to explore whether adults continue to seek out a significant other at times of overwhelming stress or pressure, in order to gain relief and support in facilitating possible problem-solving routes. It has been repeatedly found that, under stress, all adult participants ‘underwent preconscious activation of the attachment system’ [15] (p. 89). According to Kobak and Hazan [16], ‘secure attachment’ individuals are successful and proactive in constructive communication, demonstrating positive communication behavior [17]. This includes exhibiting constructive approaches and strategies [18] [19], such as open and direct communication [20], and the use of integrative problem solving techniques [21] [22]. It includes positive verbal engagement [20], in that they are less likely to exercise verbal aggression [23] [24]. They also engage in mutual self-disclosure [25] [26][22], enjoying a healthy reciprocal understanding [27]. They are also reported to have an ability to assess the conflict situation through their own self-worth and have trust in the relationship [28] [29].

Therefore, ‘secure-secure’ couples (in which both partners are securely attached) are successful in their communication and enjoy high levels of relationship satisfaction [30] [31], and relatively low divorce rates [24] [32]. Conversely, partners with an insecure attachment style are more prone to destructive communication, as argued below.

Although Attachment Theory seems to be interesting and relevant to family and couple communication relationships, very little research has related it to ADHD, particularly how parents react to their children with the disorder. There is also evidence that attachment styles are closely related to the quality of family life and the shared life of a couple[33] [20] [27], and are important to the parent-child relationship [34] [35]. However, there is no known research on parental couple attachment, particularly on how the couple’s attachment styles influence constructive communication in the family atmosphere. The framework provided by Attachment Theory is potentially useful for understanding both the parent-child relationship and the parental couple relationship, including the communication problem that can exist between parents. Thus, Attachment Theory can potentially provide a unique understanding of the way in which adults function in terms of their interpersonal relationships.

## 2. Method

### 2.1. Sample

Participants were divided into two groups: the clinical group, comprising 101 parents of children with ADHD, and 153 the community group, comprising parents of children without ADHD. Calculations using G-Power software [36] suggest that this number would be sufficient for the analyses to be conducted. To detect medium size effects (.05), G-Power indicated that a sample of 138 was required for 5 predictors, including variables that were controlled for, to address the hypothesis. The one hundred and one (101) clinical participants were sufficient numbers as the clinical participants were among those vulnerable groups that were difficult to approach. 'Parents' refers to the mother or the father only of the children with and without ADHD.

### 2.2. Instruments

The Conners Parental Rating Scale (CPRS) [37] was used to measure the ADHD symptoms of the children, the Communication Pattern Questionnaires (CPQ) [38] was used to measure the constructive communication in the relationship, and the Experience in Close Relationship (ECR) [39] was used to measure adult attachment dimensions. These three questionnaires have been found to have high reliability and validity.

### 2.3. Data Analysis

The regression method was used to explore the moderating effect of having a child with ADHD on constructive communication.

## 3. Result

Hierarchical multiple regression analyses were conducted to test the hypothesis, which proposed that attachment style will moderate the relationship between having a child with ADHD and the constructive communication in the couple. Attachment Avoidance (ECR-AVOIDANCE) appeared to moderate the impact of having a Child with ADHD on Constructive Communication (CPQ-CC) only in the condition of High Avoidance. In other words, Having a Child with ADHD was found to be affected by CPQ-CC in the condition of High Avoidance, but it was found to be unaffected by CPQ-CC in the condition of Low Avoidance. On the other hand, Not having a Child with ADHD was found to be unaffected by CPQ-CC in the condition of either Low or High Avoidance. Therefore, the hypothesis that Attachment Avoidance would moderate the relationship between Having a Child with ADHD and interpersonal problems in the relationship (CPQ-CC) is supported.

On the other hand, Attachment Anxiety (ECR-ANXIETY) appeared to moderate the impact of Having a Child with ADHD on CPQ-CC only in the condition of High Anxiety. In other words, Having a Child with ADHD was found to be affected by CPQ-CC in the condition of High Anxiety, but it was found to be unaffected by CPQ-CC in the condition of Low Anxiety. On the other hand, Not Having a Child with ADHD was found to be unaffected by CPQ-CC in the condition of either Low or High Anxiety. Therefore, the hypothesis that Attachment Anxiety would moderate the relationship between Having a Child with ADHD and interpersonal problems in the relationship (CPQ-CC) is supported.

## 4. Discussion

It was hypothesised that parental attachment style will moderate the impact of having a Child with ADHD on the constructive communication of the couple. The prediction held true as both attachment dimensions (anxiety and avoidance) moderated the relationship between having a Child with ADHD and interpersonal problems in the couple relationship. No previous research has been conducted specifically into the moderating effects of attachment avoidance on the relationship between having a child with ADHD and constructive communication in the couple relationship. However, several studies reported that individuals with greater attachment insecurity use less constructive strategies during conflict, due to the greater difficulty in understanding their partner's perspective,

which causes them to withdraw from the relationship [40] [41] [42]. The consistency is just because it refers to a distressed sample but not an ADHD sample. The present findings are aligned with these. Having a child with ADHD may have an impact on CPQ-CC only in the condition of high avoidance.

Attachment theory holds that an individual's attachment system is activated during stressful situations. According to Cassidy and Kobak [43], avoidant strategies may be motivated by the desire to suppress pain and distress due to the frustration of seeking proximity and support from the attachment figure. Accordingly, they may be referred to as deactivating strategies. According to Mikulincer, Shaver & Pereg [15], a deactivating attachment strategy is a characteristic of individuals with high attachment avoidance that leads them to distance themselves from their partner in terms of managing their stress alone, as well as inhibiting emotions. By employing this strategy, avoidant individuals learn to downplay threats and cease to expect the availability and responsiveness of attachment figures, since focusing on threats or worrying about attachment-figure support reactivates the attachment system [44]. The reason for deactivating strategies is therefore to suppress the attachment system during distressing situations. This helps the individual to avoid the frustration and pain associated with attachment-figure unavailability [15].

In order to keep the attachment system deactivated, avoidant individuals attempt to block or inhibit emotional reactions against potential or actual threats to attachment-figure availability, such as rejection, betrayal, and separation, because such threats are directed towards attachment system activation [15]. 'Avoidant' individuals often deny or suppress emotion-related thoughts and memories; divert attention from emotion-related material; suppress emotion-related tendencies; and inhibit or mask verbal and nonverbal expressions of emotion [44] [15]. These inhibitory efforts are directed mainly at distress, anxiety, fear, sadness, shame, and guilt, as these feelings are associated with personal weakness or vulnerability. In addition, these inhibitory efforts may include anger, because anger may indicate emotional involvement in the relationship, and such involvement is incongruent with the avoidant individual's strategy of independence and self-reliance [45]. Avoidant individuals usually avoid or block the interaction by not engaging in active conversation or positive discussion [46].

It is understood that constructive communication requires: a higher level of interaction involving understanding of the other; positive self-disclosure; and a willingness to consider different opinions. Constructive communication also requires comfortable feelings towards others while interacting. However, avoidant parents of children with ADHD may not be able to communicate constructively due to their defensive behaviour, including blocking the interaction, distancing themselves, and trying to resolve their stress alone. Avoidant individuals are also particularly bad at communicating negative feelings. According to Fraley and Shaver [47], avoidant attached individuals tend to minimise, suppress or dismiss their negative emotions. Attachment avoidance is also believed to disturb coping processes, which increases the risk of developing other emotional problems [48]. Moreover, an avoidant parent of a child with ADHD may be perceived as even more unavailable and unresponsive as he or she would often be in the stressful position of having to deal with the increased demands of the child. Avoidant parents may be engaged in the deactivation strategies described above by directing their attention to the suffering child, and distancing themselves from their intimate partner. According to Mikulincer, Orbach, & Iavnieli [49], avoidant individuals react to stressful situations by inflating their positive self-views and perceiving other people as negative and different from themselves. This avoidant behaviour in the parents of children with ADHD would have a negative impact on constructive communication, because positive constructive communication requires interaction and openness.

Attachment theory holds that repeated rejection from attachment figures during infancy can contribute to a belief in avoidant individuals that achieving psychological closeness with attachment figures is futile. Instead of seeking support from their attachment figures during reunion, these babies continue to direct their attention to toys. Turning away from the attachment figures during stressful situations is a way of managing the fear of losing the attachment figure. In an adult conflict resolution situation, the avoidant behaviour is transformed into a pattern of blocking, in which the avoidant individual avoids discussing any stressful issues. Due to their resignation, their belief that their partner will not be psychologically available to meet their needs – they tend to be cut off from their emotions during conflict [50]. According to Bartholomew and Horowitz [46], highly avoidant individuals have a greater tendency than non-avoidant individuals to elude intimacy, show discomfort with emotional closeness and seek a high level of self-sufficiency. Avoidant individuals tend to find ways, physically or emotionally, of disengaging themselves from the confines of a relationship [46].

ECR-ANXIETY also moderated the relationship between having a child with ADHD and CPQ-CC. Studies have found that those high in attachment anxiety demonstrate less constructive communication strategies during conflict

[41] [18] [50]. It is possible that the ‘anxious’ parents of children with ADHD symptoms engaged in less constructive communication because the condition of having children with ADHD symptoms makes them vulnerable, and less able to control their emotions during discussions. This is because hyper-activation is a characteristic of anxious individuals [43]. It also means that these individuals perceive stress as a threat and will be more likely to show emotional distress, even when confronted with minor stressors [44].

According to Corcoran and Mallinckrodt [31], anxiously attached individuals have a strong tendency to exert pressure on their partners, dominate the conflict resolution processes, and make irrational demands. They tend to devalue themselves, exaggerating the self-appraisal process [32]. This is done by blocking, segregating, or linking memories of negative experiences [51]. This strategy is sustained by negative beliefs about the self and the world [20], and cognitive biases that over-generalise past attachment injuries, and inappropriately apply memories of injuries to new situations [15]. These beliefs are initially developed in the context of emotionally negative interactions with unavailable or unreliable attachment figures. In the present study, it could be the exaggeration of personal weaknesses, the coercive behaviour, and the promotion to self-devaluation that caused the anxious parents to engage in non-constructive communication in the relationship when under the stress of having to care for an ADHD child.

## 5. Conclusion

As a conclusion, it is hope that the findings of this study may lead to the identification of helpful and unhelpful interpersonal strategies used by parents of children with ADHD. It is proposed that this research can make a contribution towards relevant intervention programs to facilitate support for parents of children with ADHD by emphasizing the importance of the attachment. In particular the findings of this research might inform interventions to enhance relationship satisfaction in parents of children with ADHD, and the behavior of the children with ADHD will be improved as an implication of their parents’ relationship satisfaction.

## Acknowledgements

We would like express our gratitude to those involved in this conference, especially the anonymous referees of this journal for their suggestions and helpful comments which have significantly improved the quality of this paper.

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