

# Person-Centered Language and ADHD Research: A cross-sectional examination of stigmatizing language within medical literature.



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## Introduction

Attention-deficit/hyperactivity disorder (ADHD), one of the most common neurodevelopmental disorders in children, has historically been associated with a negative stigma that often leads to mental health problems and a lower quality of life (Lebowitz, 2016).

The implementation of person-centered language (PCL) in medical literature is one way to decrease stigmas (Crocker & Smith, 2019) and provide better physician education for effective care of children with ADHD. Thus, we conducted a cross-sectional study to determine PCL compliance in current ADHD-related medical literature.

## Methods

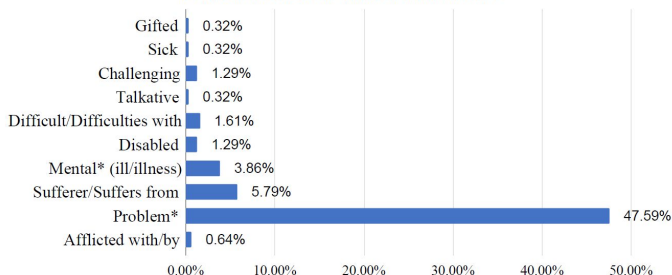
500 ADHD-related articles were screened for inclusion of pre-specified, non-PCL terminology. These articles were chosen using a systematic search of PubMed articles published from January 2014 to March 2021.

Each article was assessed for adherence to guidelines of PCL in the AMAMS (*AMA Manual of Style*, 2020). Screening was conducted in a masked, duplicate style and discrepancies were resolved by reaching 100% user agreement.

## Results

After exclusion 311 articles were retained, of which 131 (42.12%) adhered to PCL guidelines. Among articles with non-PCL, stigmatizing language such as “problem(s) with [the/a] child or problem child” and “suffers from,” most frequently— occurring in 47.90% (149/311) and 5.79% (18/311) of articles, respectively. We found a significant association between PCL adherence and first author employment ( $P = 0.04$ ). Other stigmatizing language included “mental/mentally ill/mental patient” found in 12 (3.9%) articles and “difficult child/child is difficult” found in 5 (1.6%) of articles.

Prevalence of non-person centered language terminology in published research focused on children with ADHD.



The following terms were also included in the systematic search of articles but were not found: *Odd, Eccentric, Abnormal, Retarded/Retardation, Unstable, Disturbed, Crazy, and Spastic.*

## Clinical Relevance

The use of stigmatizing language from physicians has been shown to have a damaging effect on the physician-patient relationship (Como et al., 2020). Using non-PCL language may reinforce the stigmas that surrounds children with ADHD and negatively impact the patient’s quality of care, mental health, and social life. Implementing PCL in clinical practice may have a positive impact on patient care and increase patient satisfaction.

## Summary

Over half of the articles examined did not adhere to PCL guidelines. Due to the negative stigmas and harmful outcomes on mental and physical health that children with ADHD experience, it is our recommendation that literature and clinical practice shift away from non-PCL use. This change will reduce negative outcomes and improve patient satisfaction of those with ADHD.

## Future Directions

Future research will focus on determining the importance of PCL language in journals, clinical practice, and medical education. PCL use within various medical conditions and research may also be explored.

## REFERENCES

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