Specific Impairments and Challenges in Women with ADHD

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Abstract. Gender differences in behavior, preferences, and roles contribute to distinct gender-related stigma and expectations. Women who deviate from these expectations often face stigmatization and feelings of inadequacy. Gender-specific symptoms and challenges are prevalent among individuals with Attention-Deficit/Hyperactivity Disorder (ADHD). This paper explores the unique experiences and difficulties of ADHD in women. Understanding these gender-specific challenges is essential for effective ADHD treatment in women. This review takes a closer look at the specific ways ADHD affects women. During pregnancy, women with ADHD encounter particular challenges, like impulsivity and inattention, which makes it essential to have tailored approaches to support them. This study also dives into the personal journey of women dealing with ADHD, emphasizing the difficulties they face in areas like self-esteem, sensitivity to rejection, managing their emotions, and academic performance. Moreover, in the workplace, women with ADHD confront their own set of obstacles, making it necessary to develop strategies and accommodations that cater to their unique needs. Besides, young women with ADHD have more significant depressive symptoms, compared to their male counterparts. They exhibit gender-specific vulnerabilities, including higher rates of depression, suicidal ideation, and self-harm behaviors, which are influenced by childhood impulsivity and mediated by peer relationships. Emotion regulation (ER) difficulties are significantly more pronounced in women with ADHD as well. ER challenges contribute to depression, with a more substantial impact in women. This review underscores the importance of considering gender-specific symptoms and challenges, emphasizing the need for tailored interventions and further research into women-specific ADHD experiences.

Keywords: gender differences, ADHD, women.

1. Introduction

Gender differences, the variations in behavior, preferences, and roles between individuals of different sexes, contribute to gender-specific symptoms and impairments among various mental disorders. Gender differences are evident in all aspects of Attention-Deficit/Hyperactivity Disorder (ADHD), a long-term neurodevelopmental disorder. ADHD is marked by a widespread and consistent tendency of inattention and/or hyperactivity-impulsivity that impairs performance or growth [1]. A major factor that accountable for the stigma that women face throughout their lives are the gender differences. Different distinct responsibilities for men and women are frequently established by societal norms and gender expectations. Particularly, when women depart from the conventional gender roles the society expected, they would face and experience huge stigmatization. These societal expectations could be in the form of biases, predetermined presumptions or ideas about how women should act, think, and live their lives. Women may experience feelings of inadequacy, self-doubt, and even shame after encountering gender related stigma. Stemming from gender differences, gender stigmas could affect a number of aspects of women’s lives, including their careers choices and family dynamics significantly.

Since women’s experiences are shaped by gender norms and societal expectations, it’s of vital importance for people to comprehend their particular difficulties and impairments they encountered. Historically, women were supposed to fulfill the conventional duties of nurturers, homemakers, and caregivers. However, with constant changes in society, women have taken on a wider range of roles nowadays, including careers and leaderships. This situation made women to juggle multiple responsibilities and demands, rendering them to do a difficult balancing act as a result. When women do not conform to the traditional norms, these shifting gender dynamics can result in women facing
judgment and criticism. If women with ADHD have potential specific challenges other than men with ADHD, then concentrate on this issue could be helpful for them to receive more effective treatments and relieve symptoms.

By combining insights from evolutionary psychology, cultural factors, and sociosexual behaviors, Nan and Lei provide an extensive overview, explaining different theoretical explanations for gender differences and the perpetual women's stigma [1]. Within the context of mate preferences specifically, evolutionary psychology sheds light on gender disparities. Nan and Lei suggest that mate preferences in humans are thought to reflect adaptations to the ancestral environment. This approach highlights that gender differences, such as women's preference for resource-acquisition traits and men's attraction to cues of fertility and health, have evolved due to sexual selection pressures. Besides, cultural factors play a crucial role in shaping gender dynamics and reflecting in mate selection preferences and body image ideals. By emphasizing the prevalence of traditional gender roles and the impact of benevolent and hostile sexism, cultural values and norms influence gender roles and mate preferences. It also notes that these behaviors are influenced by environmental factors, such as pathogen prevalence and resource scarcity. In addition, the concept of “women's stigma” is introduced, highlighting how mate preferences and social judgments can lead to the stigmatization of women based on various criteria. It is emphasized that women may face social bias due to certain attributes, behaviors, or physical characteristics.

Although ADHD is a complex neurodevelopmental disorder with various theoretical explanations, Lavigne-Cerván et al. suggest several models aiming to elucidate its multifaceted nature [2]. One approach underscores the role of impaired executive functions, like working memory (i.e., a cognitive system that temporarily stores and processes information needed for tasks like problem-solving and comprehension) and inhibitory control (i.e., a cognitive function that allows individuals to override automatic responses and behaviors, helping with self-control and decision-making), as the root cause of ADHD. These deficits lead to difficulties in regulating attention, behavior, and emotions. Additionally, the emotional dysregulation theory suggests that emotional processing abnormalities contribute to ADHD symptomatology. This model posits that individuals with ADHD have difficulties recognizing and managing emotions, impacting their social interactions. An alternative perspective highlights the role of neurological factors. Brain imaging studies have identified structural and functional differences in the prefrontal cortex and anterior cingulate cortex, regions responsible for executive functions and emotional regulation. These neurological differences may underlie the observed cognitive and emotional difficulties in individuals with ADHD.

Moreover, the somatic marker hypothesis suggests that emotions play a pivotal role in decision-making, with dysfunctions in this system leading to impulsive behavior. Other models emphasize genetic factors, neurotransmitter imbalances, or environmental influences as potential contributors to ADHD. There is an extensive exploration of the interplay between evolutionary psychology, cultural factors, and sociosexual behaviors in understanding gender differences and the perpetuation of women's stigma. Also, various theoretical models, including executive dysfunction, emotional dysregulation, neurological factors, and emotional markers, provide different perspectives on ADHD’s underlying mechanisms. In the realm of gender roles and gender inequality, as well as the etiology of ADHD, a considerable body of research has already been conducted. However, a conspicuous research gap pertains to the distinctive impairments and challenges faced by females with ADHD, which has yet to receive the commensurate attention it deserves. This paper aims to address this deficiency in the literature, shedding light on female-specific ADHD, and providing insights for more effective treatments. This endeavor will be accomplished by delving into several key facets: specific patterns, impacts, the subjective experience, and depressive symptoms of ADHD in women.
2. Gender and ADHD Symptoms

2.1. Specific Patterns and Impacts of ADHD in Women

Women with ADHD exhibit distinct symptom patterns and face unique challenges compared to their male counterparts. Vildalene et al. conducted a study that utilized self-report scales to assess ADHD symptoms in separate groups of males and females, distinguishing between those with ADHD and those without [3]. The results revealed that women's total symptom scores were noticeably greater compared to men, highlighting the gender-specific nature of ADHD symptomatology. Moreover, within the inattention subscale, females scored notably higher, indicating that inattention is a prominent feature of ADHD in women. Unexpectedly, there was a significant gender difference in the Hyperactivity/Impulsivity subscale as well, with females reporting more severe symptoms, particularly in items pertaining to over-talking in social circumstances and finishing other people's sentences. Surprisingly, the Hyperactivity/Impulsivity subscale also showed a significant gender difference, with females reporting more severe symptoms, particularly in items pertaining to over-talking in social circumstances and finishing other people's sentences. This gender disparity is interesting because men have been found to have higher levels of symptoms related to ADHD historically, especially in youth. The way ADHD symptoms are measured may be one factor contributing to this gender ratio shift as people become older. In adulthood, female self-reports typically show a more positive reaction pattern. This study underscores the importance of recognizing gender differences and acknowledging the specific experiences of women with ADHD, challenging conventional gender stereotypes associated with this condition.

ADHD symptoms during pregnancy have a significant gender-specific impact, with impulsivity and inattention affecting pregnant women more profoundly than men. Employing a cross-sectional design and a range of clinical and self-report measures, Eddy et al. evaluated the presence of ADHD symptoms and their consequences for pregnant women's daily functioning [4]. The findings also highlighted symptoms of impulsivity and inattention affecting women more profoundly than men, resulting in greater life impairments across various domains. In pregnancy, inattention disrupts essential tasks such as appointment scheduling and home organization, leading to difficulties in the workplace due to forgetfulness and disorganization. Impulsivity further impairs daily life, affecting financial management and interpersonal relationships. It can result in increased argumentativeness and a propensity for risk-taking behaviors, including those in sexual relationships. This gender-specific vulnerability underscores the necessity for tailored interventions and support for pregnant women exhibiting ADHD symptoms. This research also raises intriguing questions about the advantages and potential risks associated with pharmacological treatments for pregnant women with ADHD, necessitating further investigation, particularly concerning the distinctive impact of ADHD symptoms during pregnancy [4]. Meanwhile, Vildalen's research contributes significantly to people's understanding of ADHD and underscores the necessity of considering gender when diagnosing and treating the disorder [3].

2.2. Subjective Experience of Women with ADHD

ADHD profoundly influences social, academic, and psychological functioning in women. In the study conducted by Morley and Tyrrell, the researchers explored the impact of ADHD particularly in adult women through interviews and thematic analysis [5]. While many symptoms align with prior research, such as difficulties focusing and staying motivated, most participants excelled academically during their school years, driven by perfectionism. They found that participants described struggles with self-esteem (i.e., a person's self-assessment, reflecting their perception of their worth and self-worth), rejection sensitivity (i.e., an exaggerated fear of being rejected or criticized by others, often leading to anxiety and a strong desire for approval), and emotional dysregulation (i.e., the difficulty in managing, controlling, or appropriately expressing one's emotions), which often led to self-harm and eating disorders (i.e., unusual eating habits that are detrimental to one's physical or emotional well-being). Moreover, ADHD affected their academic performance, with difficulties in staying
focused, time management, and organizing their thoughts for writing. Late diagnoses exacerbate these issues, highlighting how crucial it is to identify and comprehend ADHD in women early. Misunderstandings, discrimination, and self-stigma (i.e., the phenomenon where individuals with stigmatized conditions or identities, such as mental health disorders, internalize the negative stereotypes and beliefs associated with their own condition or identity) are caused by the stigmatization of ADHD, which is particularly prevalent among women. Despite the diversity of symptom presentations, a lack of understanding and widespread stigmatization prevails in ADHD management and diagnosis, particularly in female individuals.

Women in the workplaces have unique experiences as well. In order to better understand the importance of employment for women with ADHD and the tactics they use to keep it, Schreuer and Dorot conducted a study in which they interviewed employed women with ADHD [6]. The research findings revealed three major themes. First, women with ADHD encounter substantial challenges in coping with job demands and workplace dynamics, including functional, emotional, and self-esteem challenges. These challenges affected their interpersonal relationships with colleagues and supervisors, often leading to cycles of failure and frustration. Second, the study highlighted the personal strategies and environmental accommodations that women with ADHD develop to manage their condition. Participants discussed a wide range of strategies, such as organization and time management techniques. Others stressed the importance of external support, sensory processing adaptations (i.e., strategies and adjustments individuals make to effectively process and respond to sensory information from their environment), and online forums for assistance. The third theme focused on the importance of work for women with ADHD, going beyond just making a living. The participants described the workplace as a place for personal growth, social interactions, and the development of self-identity (a person's understanding and perception of themselves as a unique individual). Many expressed a sense of achievement in their roles, emphasizing their unique qualities and capabilities. The research sheds significant lights on the difficulties and opportunities of women experiencing ADHD in the workplace, offering a foundation for the development of more informed policies and accommodations for this population.

Apart from the gender-specific social, academic, working, and psychological impairments in women ADHD, stigma, lack of knowledge, and internalization of problems (a psychological or emotional process where an individual takes external issues, conflicts, or negative experiences and internalizes them) could lead to additional impairment in women with ADHD, with particular challenges in motherhood. Through qualitative interviews, Holthe and Langvik discovered that women with ADHD often face difficulties related to impulsivity, emotional dysregulation, and the conflict between societal gender norms and symptoms of ADHD [7]. Women with ADHD often struggle with indecisiveness and disorganization, making it challenging to build and maintain structure and routines in their lives, resulting in daily unpredictability and increased anxiety. In the context of motherhood particularly, many of the participants reported feelings of guilt and inadequacy as mothers, as well as concerns about the impact of their ADHD on their children. Stigma surrounding ADHD was also a common issue, with individuals perceiving it as an excuse for laziness or a moral problem. This stigma was especially problematic for women already struggling with negative self-perceptions aligned with stereotypes about ADHD. Despite these challenges, the study found that positive adjustment (i.e., mindfulness meditation) is possible for women with ADHD, with many of them achieving higher education and employment without struggling with substance abuse. The presence of anxiety and depression symptoms may have acted as protective factors in this regard. These findings emphasize the importance of early diagnosis and interventions to better manage ADHD symptoms and mitigate the impact of stigma. Also, it underscores the crucial role of media and professional understanding in shaping perceptions of ADHD and its impact on individuals with the condition.
3. ADHD and Depressive Symptoms in Women

Young women with ADHD have a gender-specific vulnerability to mental health challenges like suicidal behaviors and depression (i.e., a prevalent serious mental illness marked by deep, enduring emotions of sadness and pessimism as well as a lack of interest in or enjoyment from once-enjoyed activities). Babinski and colleagues discovered that young adults with ADHD had higher rates of depression, suicidal thoughts, and suicide attempts than those without ADHD [8]. Surprisingly, among the different groups, young adult women with ADHD were more likely to experience depression and act suicidally. This suggests a gender-specific vulnerability for women with ADHD in experiencing these mental health difficulties and challenges the previous notion that ADHD in women is less severe than in men, in which may be associated with unique trajectories of impairment. The results underscore the need for gender-specific assessment and treatment strategies, particularly for young women with ADHD, and indicate the importance of clinicians and mental health professionals being aware of these gender-specific vulnerabilities and tailoring their approaches to address the unique needs of women with ADHD. Moreover, the findings emphasize the significance of further research to gain a better comprehend the connection between ADHD, gender-specific vulnerability, and mental health challenges, with the potential for longitudinal studies to provide deeper insights into their underlying causes and possible interventions.

In addition to more significant suicidal behaviors and depressive symptoms, self-harm behaviors exist in young women with ADHD, which could be predicted by the childhood impulsivity and mediated by peer relationships. Meza and colleagues examined the relationship between attachment style (i.e., a psychological and emotional framework that describes an individual's characteristic way of forming and maintaining relationships with others), peer victimization (i.e., the repeated aggressive mistreatment of an individual by peers, causing harm and distress), and various mental health outcomes in adolescent girls, including thoughts of suicide, acts of suicide, and non-suicidal self-injury (NSSI) [9]. Notably, they discovered that young women with ADHD exhibited higher levels of suicidal ideation, suicide attempts, and NSSI when compared to their non-ADHD counterparts. Furthermore, the research delved into the complex mediating factors at play within this context. Specifically, social preference served as a go-between for suicidal thoughts and symptoms of ADHD, as well as suicide attempts. On the other hand, peer victimization partially mediated the connection between ADHD symptoms and NSSI. By emphasizing gender differences, especially within the context of adolescent girls, and considering the distinct impact of ADHD symptoms on this group, this research underscores the significance of peer relationships and victimization in comprehending the mental health challenges faced by young women with ADHD. It also highlights the crucial role of these factors in the broader understanding of mental health outcomes in this specific population. It calls for more research and holistic approaches to understanding and preventing self-harm among young women with ADHD, recognizing their distinct challenges.

Emotion regulation (ER) is the skill of managing and controlling emotional responses and behaviors to adapt to different situations effectively. However, Welkie and colleagues found women with ADHD have specific emotional regulation difficulties more significantly [10]. The researchers demonstrate a modest association between ADHD and various aspects of ER dysfunction, with women reporting greater difficulties in goal-directed conduct, emotional awareness, non-acceptance of emotion, and restricted access to ER techniques compared to men. These findings align with previous research indicating that women tend to experience more emotional distress. Sex was found to help mitigate the association between ER challenges and ADHD, further underscoring the significance of these difficulties, particularly for women. ER challenges contributed unique variance to depression, with a more pronounced effect in women. A lack of emotional intelligence, trouble directing behavior, and restricted access to ER techniques have all been found to act as mediators in the relationship between depression and ADHD, with women exhibiting a stronger association. These findings underscore the paramount importance of considering ER and gender distinctions when addressing the correlation between ADHD and depression, with potential implications for tailoring clinical interventions to the specific needs of women with ADHD.
4. Conclusion

In conclusion, this paper has explored the intricate relationship between gender, ADHD, and the associated stigma, symptoms, and challenges faced by women. Gender differences play a pivotal role in shaping the societal stigma that women with ADHD endure. These differences are rooted in historical gender roles and societal expectations, which have seen significant shifts in recent years. It also explores various theoretical models aiming to elucidate the multifaceted nature of ADHD, emphasizing executive dysfunction, emotional dysregulation, neurological factors, emotional markers, and other potential contributors. This paper highlights a research gap concerning the distinctive impairments and challenges faced by females with ADHD. The findings emphasize the importance of gender-specific assessment and interventions, especially in the context of depressive symptoms, suicidal behaviors, and self-harm, where adolescent ADHD females show particular susceptibility. The significance of peer relationships, victimization, and emotion regulation in understanding the mental health challenges faced by young women with ADHD is underscored. However, it's essential to acknowledge the limitations of this paper. Cultural differences, which may influence the experience of ADHD and stigma, are not extensively discussed. It is important to notice differences in cultural norms and traditions could further render different experiences and difficulties of women with ADHD in different societal context. Additionally, more investigation is required to offer a more thorough comprehension of the vulnerabilities unique to gender and mental health challenges faced by women with ADHD. This paper aims to provide insights into bridging the gaps to better understand the cultural context and its impact on women with ADHD and develop tailored interventions to address the unique needs of this population.

References


