



Interpersonal Dominance Predicts Treatment Resistance in Adolescents without, but not with Attention Deficit/Hyperactivity Disorder

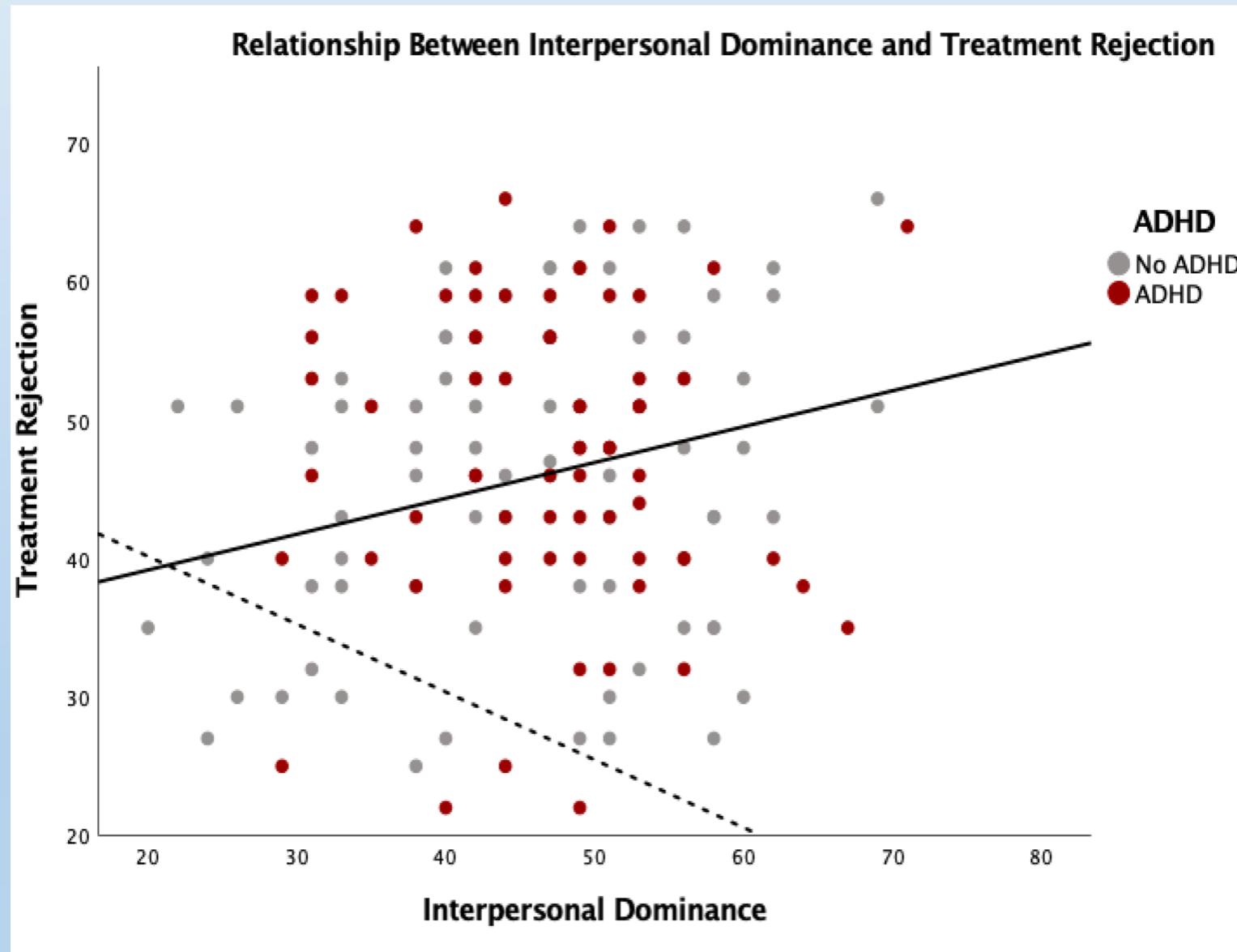
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Background

- Attention-deficit/hyperactivity disorder (ADHD) has been associated with interpersonal challenges in adolescents.
- Studies have shown that children with ADHD tend to demonstrate more dominance than their peers without ADHD (Normand et al., 2010).
- Greater interpersonal dominance has been found to predict poorer therapeutic alliance (Muran et al., 1994).
- Conversely, interpersonal warmth has been found to be positively related to therapeutic alliance (Charles et al., 2021).
- The goal of the present study was to examine the relationship between dominance and treatment resistance as measured by the Personality Assessment Inventory-Adolescent (PAI-A) in a mixed clinical sample.
- We hypothesized that ADHD diagnosis would moderate the relationship between interpersonal dominance and treatment rejection, due to previous findings on increased treatment resistance and higher levels of dominance in adolescents with ADHD.

Methods

- Data were collected from 144 adolescents referred for neuropsychological evaluation at an outpatient medical center.
- ADHD diagnosis was determined through neuropsychological clinical evaluation of behavior, mood, and cognitive functioning across settings.
- Interpersonal dominance and treatment rejection were assessed using the Personality Assessment Inventory - Adolescents (PAI-A) subscales PAI-DOM and PAI-RXR respectively.
- An exploratory moderation analysis was conducted to examine if interpersonal dominance predicts treatment rejection and to see if the relationship is moderated by ADHD status.



Demographics		
	Mean	SD
Age	15.27	1.26
Race/Ethnicity	N	%
Caucasian	87	60.4%
African American/ Black	10	6.9%
Hispanic	8	5.6%
Asian	6	4.2%
Other	41	28.5%
Sex	N	%
Male	85	59.0%
Female	59	41.0%
ADHD Status	N	%
Yes	69	47.9%
No	75	52.1%

Results

- Controlling for ADHD status, the main effect of dominance was significant, such that higher interpersonal dominance was associated with greater treatment rejection ($t=2.38$, $p=.019$).
- This model explained 4.69% of variance in treatment rejection.
- No main effect for the relationship between ADHD status and treatment rejection when controlling for dominance was observed ($t=1.82$, $p=.071$).
- In participants without ADHD, dominance significantly predicted treatment rejection ($t=2.38$, $p=.019$), but the effect was no longer significant in adolescents with ADHD.

Conclusion

- Based on self-report of personality, interpersonal dominance is related to treatment rejection in adolescents without ADHD, but not adolescents with ADHD.
- Symptoms of ADHD such as impulsivity and behavioral disinhibition may impact responses related to interpersonal functioning and thus ratings for adolescents with ADHD may not reflect the same constructs important for treatment considerations.

References

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