

Emotional Intelligence and Marital Adjustment among Parents of Children with ADHD

[¹] Sahla Mumthaz PM, [²] Dr Manjula V

[¹] Master of Science in Psychology (Educational), CHRIST (Deemed to be University), Bengaluru, India.

[²] Assistant Professor, Psychology, CHRIST (Deemed to be University), Bengaluru, India.

Abstract— *This study aims to find out emotional intelligence and its relationship with marital adjustment among parents of children with attention deficit hyperactivity disorder (ADHD) and how the child's level of ADHD is affecting parent's emotional intelligence and marital adjustment. Parents completed a range of questionnaires in Kerala-wide study of 30 parents of children with ADHD. The relationship between emotional intelligence and marital adjustment and child level of ADHD were tested using correlational method. A positive correlation was found between emotional intelligence and marital adjustment among the parents and there was no effect of child's level of ADHD on parent's level of emotional intelligence and marital adjustment.*

Keywords— *Emotional intelligence, marital adjustment, and ADHD*

I. INTRODUCTION

Attention deficit/hyperactivity disorder (ADHD) is a common mental health disorder of children and adolescents, impacting an estimated 63 million children and adolescents worldwide (Polanczyk, Salum, Sugaya, Caye, & Rohde, 2015). With core symptoms of inattention and/or hyperactivity-impulsivity, ADHD is a chronic condition that interferes with an individual's functioning (American Psychiatric Association AP, 2013). Associated health and behavioural issues are also common, including poor overall health (Sciberras et al., 2016), conduct problems, anxiety and depression (Angold, Costello, & Erkanli, 1999; Biederman et al., 2006). When experienced in childhood, ADHD adversely impacts the family system (Johnston & Mash, 2001).

Children with ADHD exhibit persistent and developmentally inappropriate levels of inattention, impulsivity and hyperactivity that place them at risk for academic failure, social interaction difficulties and significant behavioural disturbances (Barkley, 2006). These children are usually less compliant, more negative, stubborn and bossy, have temper outbursts and low frustration tolerance, and are less able to follow parental instructions and adhere to family rules than other children their age (Segal, 2001; Whalen et al., 2006). In response, their parents may use over-reactive, inconsistent and punitive disciplinary methods. The parents display more disapproval, give their children fewer rewards, and show more overall negative behaviour than parents of children without ADHD (Anastopoulos, Shelton, DuPaul, & Guevremont, 1993; Johnston, 1996; Stormshak, Bierman, McMahon, & Lengua, 2000). Parents' beliefs about their self-efficacy or sense of competence were identified as a core construct within the constellation of parental cognitions related to difficult and challenging behaviours of children. Parents' beliefs about their own effectiveness at dealing with difficult behaviours have been related to positive vs. negative parental emotions and

behaviours. Negative parental emotions influence the cognitive appraisal process that creates self-competence perceptions, and both emotions and self-competence beliefs seem to affect parenting jointly (Coleman & Karraker, 1998; Maniadaki et al., 2005; Rogers, Wiener, Marton, & Tannock, 2009). Thus, we may hypothesize that parents of children with ADHD perceive parenting as more threatening and less challenging due to their daily parenting stress and negative emotions towards their child's behaviour. Since emotions are involved in parenting, emotional intelligence (EI) can be a factor that may influence parenting. Salovey and Mayer (1990), defined EI as the "the ability to monitor one's own and others' feelings and emotions, to discriminate among them and to use this information to guide one's thinking and actions". Emotional intelligence is the ability to carry out accurate reasoning about emotions and the ability to use emotion and emotional knowledge to enhance thought (Mayer, et al. 2008). It is the ability to monitor one's own and other's emotion, understand and manage them and the use of this information to enhance social skills and competence.

Goleman defined emotional intelligence as "Understanding one's own feelings, empathy for the feeling of other and the regulation of emotion in a way that enhance living." Emotional intelligence, thus, perhaps is one of the most popular and the most researched psychological constructs of the 21st century. According to Goleman there are five domains of emotional intelligence: knowing your emotion, managing your own emotion, motivating our self, recognizing understanding other people's emotion, managing relationships. Emotional intelligence enables one to learn to acknowledge and understand feeling in ourselves and in others and that we appropriately respond to them, effectively applying the information and energy of emotions in our daily lives and work.

Since parenting is an emotional and difficult process especially in case of ADHD children, there is a possibility that it can affect their marital relationship also and hence

marital adjustment can be an important factor important factor here. Dillusionment in regard to marital satisfaction need not become an issue if wives are able to view their husband's attributes in a way that accurately reflected their husband's self-view. When women or men are able to agree with their partners self-perceived traits and abilities, both reported are being satisfied. Other factors that influence marital satisfaction includes: level of intimacy, ability to self-disclosure with their spouses, husband's affectional expression and amount of time they spend with each other and communication styles.

Child ADHD elicits high levels of parental stress and maladaptive parenting (Lowe, Danfroth, & Brooks, 2008). The presence of parental psychopathology is common and influences the parent's response to the child's ADHD symptoms. Optimizing parent-child interaction and parental psychiatric status may improve outcomes for both parent and child (Lowe et al., 2008). It was found that ten years after birth, parents of children diagnosed with ADHD have a 75% higher probability of having dissolved their relationship and a 7-13% lower labor supply (Kvist, A.P., Nielson, H.S., & Simenson, S, 2011). Exploiting detailed information about documented risk factors behind ADHD, it was found that half of this gap is due to selection. However, a statistically and economically significant gap is left, which is related to the impact of high psychic costs of coping with a child with ADHD (Kvist et al., 2011). Parents of children with ADHD are, however, particularly disadvantaged in terms of socioeconomic background and mental health (Kvist, Nielson, & Simonsen, 2013). Prenatal socioeconomic status is reduced in terms of ADHD which lowers the labor supply and reduces the relationship stability. It was found that after statistical control of children's severity of inattentive and hyperactive/impulsive symptoms (as reported by parents and teachers), parents' self-reports of greater affiliate stigma were associated with more observed negative parenting. And also, the associations between high parental affiliate stigma and children's poorer adult informant-rated social skills and greater observed aggression were partially mediated by increased parental negativity (Mikami, Chong, Saporito, & Na, 2014). It was also found that parents of children with ADHD reported poorer social skills of their own, arranged fewer playdates for their children, and displayed more criticism during their child's peer interaction than did parents of comparison youth (Mikami, Jack, Emeh, & Stephens, 2010). Children and adolescents with ADHD present behaviors such as impulsiveness, inattention, and difficulties with personal organization that represent an overload for parents. Moreover, it also increases their level of stress and leads them to resort to inadequate educational strategies (Teixeria, Marino, & Carreiro, 2015). When assessing a child with ADHD, it is important to verify the predominant types of parenting practices that can influence both immediate interventions and the prognosis of the disorder.

There is no significant difference between marital

adjustment among parents of children with disabilities and marital adjustment among parents of children without disabilities (Karadeniz et al., 2015). When daily stressors/hassles were higher, husbands and wives viewed their marriages more negatively (Stoneman et al., 2006). After variance contributed by stressors/hassles was statistically controlled, fathers who employed more problem-focused coping strategies were more positive about their marriages. For wives (but not husbands), a cross-spousal partner effect was found; women reported higher marital adjustment when their husbands employed more problem-focused coping strategies. Marital satisfaction was significantly related to both parenting stress and child behavior problems, where parents with lower marital satisfaction reported higher parenting stress and child behavior problems (Robinson & Neece, 2014). Parents of children with disabilities have marriages that exhibit the full range of function and dysfunction seen in the general population, most parents of children with disabilities have normal marriages, and the same things that predict healthy and unhealthy marriages in the general population also predict healthy and unhealthy marriages among parents of children with disabilities (Sobsey, 2004). Although child functioning and behaviors in children with DD have been shown to be diagnostic specific, there is strong evidence that child functioning and behaviors are also influenced by parenting and the family environment (Hartley, Seltzer, Barker, & Greenberg, 2011).

The quality of life in mothers of children with ASD could be affected by emotional intelligence and the increased emotional intelligence is a factor to promote the quality of life (Alibakhshi, Mahdizadeh, & Siminghalam, 2018). In addition, there is a positive relationship between emotional intelligence, mental health, and physical performance. Psychological loneliness can be defined as a state lived and experienced by one individual as a result of deficits in individual social relationship with others, making him to have a feeling of pain and suffering due to their ignorance and the feeling of not being accepted by others (khweiten, 2010). There is no significant difference between psychological loneliness and emotional intelligence among parents of children with autism spectrum disorder (Ali & Alshurman, 2015). Emotional intelligence management training is effective in enhancing the social relationships of mothers of handicapped children (Eisvand, Gorji & Niknejadi, 2015).

II. METHODOLOGY

Objectives of the study

1. To examine the level of emotional intelligence among parents of children with ADHD.
2. To examine the level of marital adjustment among parents of children with ADHD.
3. To find out the relationship between emotional intelligence and marital adjustment among parents of children with ADHD.

Recruitment strategy

30 parents of children with ADHD were identified through ADHD centres and then they were approached. The relevance and objectives of the research and voluntary participation at any stage was communicated. Also, BRC (Block Resource Centre) trainers who trains IEDC (integrated education for the disabled children) children were contacted to get information about the potential participants.

Data collection procedure

After getting the required permission from various centres in Kerala that is concerned with ADHD, parents were contacted via these centres. Parents of children from the age group 8-18 with ADHD was considered as the participants. Purpose of the study was made clear to the participants. The inventories were distributed to the participants. The general instructions were given to the participants to complete the inventories. First, consent will be taken from the parents and then they will be given with emotional intelligence scale to measure their level of emotional intelligence. After completing this questionnaire, they were given with Locke-Wallace marital adjustment questionnaire to measure the level of marital adjustment among parents of children with ADHD. Once after these questionnaires were collected, they were given with another questionnaire that is SNAP IV questionnaire. The purpose of this questionnaire is to determine the level of ADHD among the children. This test is also done by the parents. The scoring of these questionnaires were done according to the instructions provided in the manual. Help were provided to the participants in case they found any of the items difficult to comprehend. The inventory was also translated into Malayalam language. Data were collected by face-to-face interview method. Filled questionnaires were collected from participants for statistical analysis of data.

Participants

The study tries to identify the emotional intelligence and marital adjustment among parents of children with ADHD. Hence, parents of children diagnosed with ADHD was identified as the potential participants. Parents of children of age group 8-18 were considered as the participants. Also, parents from urban area were considered more. The sample size for this study is 30 parents in which the sample size is equally distributed in case of gender. Participants are taken based on a selection criterion.

Tools

Trait Emotional Intelligence Questionnaire

The Trait Emotional Intelligence Questionnaire (TEIQue) is an integral part of the academic research program on trait emotional intelligence (trait EI). The TEIQue is a scientific measurement instrument based exclusively on trait EI theory and providing a comprehensive assessment of the emotional world of the individual. TEIQue materials are specifically

developed and updated to provide a gateway to trait EI theory, which is unique and substantively different from the plethora of models in the fields of intelligence, personality, and emotional intelligence. This 30-item form includes two items from each of the 15 facets of the TEIQue.

Items were selected primarily based on their correlations with the corresponding total facet scores, which ensured broad coverage of the sampling domain of the construct. The –SF can be used in research designs with limited experimental time or wherein trait EI is a peripheral variable. Although it is possible to derive from it scores on the four trait EI factors, in addition to the global score, these tend to have lower internal consistencies than in the full form of the inventory. The –SF does not yield scores on the 15 trait EI facets. It shows a construct validity of .86 to .88.

Marital Adjustment Test (MAT)

The Marital Adjustment Test (MAT), often referred to as the Locke-Wallace Marital Adjustment Scale or the Short Marital Adjustment Test (SMAT), is a 15-item measure designed to assess marital adjustment in married couples. The MAT is comprised of varying response scales, including both ordinal and Likert scales. Item 1 uses a 7-point Likert scale (from 'Very Unhappy' to 'Perfectly Happy'). Items 2–9 use a 6-point ordinal scale (from 'Always Agree' to 'Always Disagree'). Item 10 asks respondents to select one of three options. Item 11 uses a 4-point ordinal scale (from 'All of Them' to 'None of Them'). Item 12 asks respondents to select one of two options in relation to themselves and their partner. Item 13 uses a 4-point ordinal scale (from 'Frequently' to 'Never'). Item 14 and 15 asks respondents to select one of three options and one of four options, respectively. The MAT has simple scoring instructions involving basic calculations. It does not need to be scored by someone with specific training or qualifications. The total score is the sum of the responses' point values and can range from 0 to

158. Higher scores indicate higher levels of marital adjustment.

SNAP IV- 26

The SNAP-IV is a revision of the Swanson, Nolan and Pelham (SNAP) questionnaire (Swanson et al. 1983). The items from the DSM-IV criteria for attention deficit hyperactivity disorder (ADHD) are included for the two following subsets of symptoms: inattention (items 1 to 9) and hyperactivity/impulsivity (items 10 to 18). The scale also includes the DSM-IV criteria for Oppositional Defiant Disorder (items 19 to 26) since this is often present in children with

ADHD. The SNAP-IV is based on a 0 to 3 rating scale: Not at all = 0, Just a little = 1, Often = 2, and very often = 3. Sub scale scores on the SNAP-IV are calculated by summing the scores on the subset and dividing by the number of items in

the subset. The score for any subset is expressed as the Average Rating-Per-Item. SNAP-IV scores showed high sensitivity but low specificity to clinician diagnosis. The SNAP-IV is a valid outcome measure for use in randomized controlled trials and clinical settings, and is best used as a screening rather than a diagnostic tool for ADHD.

Data analysis

Once after the data was collected, tabulation was done to obtain a logical and concise picture of the collected data. Exploratory analysis of the data was performed using jamovi 2 software to investigate normality. And using jamovi 2 correlation were done in order to find the relationship of variables. Correlation is a statistical technique that shows whether and how strongly pairs of variables are related. Correlational methods are the most used statistical techniques in the testing field. Since the data is normally distributed as per the correlation test a parametric test, Pearson’s correlation test was used. Pearson’s correlation (PMCC) is a test of the strength of association between two variables in the model. PMCC shows strong positive correlation at values of 0.5 to 1.0, and strong negative correlation at values of -1.0 to -0.5.

Ethical considerations

For this study the ethical consideration which were followed was:

1. A written consent was taken from the participant at beginning of the study. It was to ensure that participant fully understand what they are being asked to do and that they are informed if there are any potential negative consequences of such participation.
2. The participants answers will be kept confidential. Their identity will not be revealed in anyway in resulting report.
3. Research participants was not subjected to harm in any ways.
4. Respect for the dignity of research participants was prioritized.
5. Any type of communication in relation to the research was done with honesty and transparency.
6. Voluntary participation of the participant in the research was considered important. They had the rights to withdraw from the study at any stage if they wish to do so.

III. RESULTS

Table 1 shows correlation between emotional intelligence and marital adjustment. Results indicate that there is a significant positive correlation between emotional intelligence and marital adjustment. Hence increase in emotional intelligence increases marital adjustment or decrease in emotional intelligence decreases marital adjustment.

Table 1. Correlation between emotional intelligence and marital adjustment.

		Emotional Intelligence	Marital adjustment
Emotional Intelligence	Pearson's r	—	
	p-value	—	
	N	—	
Marital adjustment	Pearson's r	0.936 ***	—
	p-value	<.001	—
	N	30	—

Note. * p < .05, ** p < .01, *** p < .001

Table 2. Correlation obtained between emotional intelligence and marital adjustment with respect to ADHD (attention deficit hyperactivity disorder) level of children

		Emotional Intelligence	Marital adjustment	ADHD level of children
Emotional Intelligence	Pearson's r	—		
	p-value	—		
	N	—		
Marital Adjustment	Pearson's r	0.936 ***	—	
	p-value	<.001	—	
	N	30	—	
ADHD level of children	Pearson's r	-0.200	-0.110	—
	p-value	0.290	0.564	—
	N	30	30	—

Note. * p < .05, ** p < .01, *** p < .001

Table 2 shows the correlation obtained between parents’ level of emotional intelligence and marital adjustment with respect to child’s level of ADHD. From the result it is evident that

there is no significant relationship of child’s level of ADHD with parent’s emotional intelligence and marital adjustment.

IV. DISCUSSION

The findings of the study become significant because there is no previous literature that explored the effect of child’s level of ADHD on parent’s emotional intelligence and marital adjustment. There is a positive correlation between emotional intelligence and marital adjustment among parents of children with ADHD. But the findings also depicted that there is no relationship of child’s level of ADHD with parent’s emotional intelligence and marital adjustment. That means even if the child’s level of ADHD is high or low it is not going to affect the marital relationship or their emotional intelligence.

If we consider the case of disabilities, there is no significant difference between marital adjustment among parents of children with disabilities and marital adjustment among parents of children without disabilities (Karadeniz et al., 2015). Other than emotional intelligence if we consider the stress related factors, Child ADHD elicits high levels of parental stress and maladaptive parenting (Lowe, Danfroth, & Brooks, 2008). Emotional intelligence is a factor that has the capacity to be aware of, control, and express one's emotions, and to handle interpersonal relationships judiciously and empathetically. Hence, while dealing with stress person's emotional intelligence might help to deal with it and to deal other relationships especially spouse relation.

This study also helps to identify the decline in emotional intelligence and marital relationship so that we can provide suggestions on management programs for its enhancement because evidences also showed that emotional intelligence management training is effective in enhancing the social relationships of mothers of handicapped children (Eisvand, Gorji & Niknejadi, 2015).

So, there can be a way in which working on emotional intelligence will have a positive effect on marital relationship as the present study proved.

V. LIMITATIONS

The population chosen for the study is 30 parents from Kerala. However, future study can be more diversified by collecting data from other parts of the country and including more population. Moreover, the sample demographics can be changed to get the perspective of different groups such as their occupation, marital status, and number of children. The study was conducted during the COVID-19 pandemic. Hence the response of the parents may have been biased due to the influence of other factors such as any kind of loss during the pandemic.

VI. CONCLUSION

This study was designed to investigate the relationship between emotional intelligence and marital adjustment among parents of children with ADHD and whether the child's level of ADHD is affecting these variables. Findings showed that there is a positive relationship between emotional intelligence and marital adjustment which means higher the emotional intelligence higher the marital adjustment. This finding is helpful because we can work on emotional intelligence of a parent if their marital adjustment is lower. The other important finding of the study was child's level of ADHD is not affecting the emotional intelligence and marital adjustment of the parent.

REFERENCES

- [1] Angelica, R., Craig, P., & Andrew, W. (2011). Prenatal Maternal Stress Associated with ADHD and Autistic Traits in early Childhood. *Frontiers in Psychology*, 1,223. <https://www.frontiersin.org/article/10.3389/fpsyg.2010.00223>
- [2] Finzi-Dottan, Ricky & Triwitz, Yael & Golubchik, Pavel. (2011). Predictors of stress-related growth in parents of children with ADHD. *Research in developmental disabilities*, 32, 510-9.
- [3] Jogsan, Y.A. (2013). Emotional Maturity and Adjustment in ADHD Children. *Journal of Psychology and Psychotherapy*. 3, 114.
- [4] Johnson, C.A. (2017). The relationship ADHD and emotion regulation and its effect on parenting stress. *College of Arts and Sciences Senior Honors Theses*. 144. <http://doi.org/10.18297/honors/144>.
- [5] Kashdan, T.B., Jacob, R.G., Pelham, W.E., Lang, A.R., Hoza, B., Blumenthal, J.D., Gnagy, E.M. (2010). Depression and Anxiety in Parents of Children with ADHD and Varying Levels of Oppositional Defiant Behaviors: Modeling Relationships with Family Functioning. *Journal of Clinical Child & Adolescent Psychology*. 33(1), 169-181. https://doi.org/10.1207/S15374424JCCP3301_16.
- [6] Kendall, J., Leo, M.C., Perrin, N., & Hatton, D. (2005). Modeling ADHD Child and Family Relationships. *Western Journal of Nursing Research*. 27(4), 500-518. <https://doi.org/10.1177/0193945905275513>.
- [7] Karadeniz, G., Balkan, I., Gazioglu, N., Elmas, E., Eyrenci, A., & Tug, S. (2015). Marital Adjustment among Parents of Children with Developmental Disabilities. *Research Gate*.
- [8] Kvist, A.P., Nielson, H.S., & Simonsen, M. (2011). The effects of children's ADHD on parents' relationship dissolution and labor supply. *IZA*. 6092.
- [9] Kvist, A.P., Nielson, H.S., & Simonsen, M. (2013). The importance of children's ADHD for parents' relationship stability and labor supply. 88, 30-38. <https://doi.org/10.1016/j.socscimed.2013.04.001>.
- [10] Leitch, S., Scriberras, E., Post, B., Gerner, B., Rinehart, N., Nicholson, J.M., & Evans, S. (2019). Experience of stress in parents of children with ADHD: A qualitative study. *International journal of qualitative studies on health and well-being*, (14), 1690091.
- [11] Lowe, V.M., Danforth, J.S., & Brooks, D. (2008). ADHD: Does parenting style matter. *Sage Journal Author Gateway*, 47(9), 865- 872. <https://doi.org/10.1177/0009922808319963>
- [12] Mikami, A.Y., Chong, G.K., Saporito, J.M., & Na, J.J. (2014). Implications of parental affiliate stigma in families of children with ADHD. *Journal of clinical child and adolescent psychology*, 44(4), 595-603. <https://doi.org/10.1080/15374416.2014.888665>
- [13] Mikami, A.Y., Jack, A., Emeh, C.C., & Stephens, H.F. (2010). Parental influence on children with attention deficit/hyperactivity disorder: 1. Relationships between parent behaviors and child peer status. *Journal of abnormal child psychology*, 38, 721-736.
- [14] Rodriguez, A. and Bohlin, G. (2005), Are maternal smoking and stress during pregnancy related to ADHD symptoms in children?. *Journal of Child Psychology and Psychiatry*, 46: 246- 254. <https://doi.org/10.1111/j.1469-7610.2004.00359.x>.
- [15] Robinson, M., Neece, C.L. (2015). Marital Satisfaction, Parental Stress, and Child Behavior Problems among Parents of Young Children with Developmental Delays. *Journal of Mental Health Research in Intellectual Disabilities*, 8(1), 23-46.

- [17] Silva, A.M., Urbano, R.L., Garcia, M.S., & Marquez, J.L. (2017). Child/ Adolescent's ADHD & parenting stress: The mediating role of family impact and conduct problems. *Frontiers in psychology*, 8, 2252.
- [18] Stoneman, Z., Payne, S.G., Floyd, F., & Retard, A.M. (2006). Marital Adjustment in Families of Young Children With Disabilities: Associations With Daily Hassles and Problem Focused Coping. *American Journal on Mental Retardation*, 111(1), 1-14.
- [19] Teixeira, M.C., Marino, R.L., & Carreiro, L.R. (2015). Association between inadequate parenting practices and behavioral problems in children and adolescents with attention deficit hyperactivity disorder. *The Scientific World Journal*. <https://doi.org/10.1155/2015/683062>.
- [20] Theule, J., Wiener, J., Tannock, R., & Jenkins, J.M. (2010). Parenting stress in families of children with ADHD: A meta analysis. *Journal of emotional and behavioral disorders*, 21(1), 3-17. <https://doi.org/10.1177/1063426610387433>.
- [21] Theule, J., Wiener, J., Rogers, M.A., & Marton, I. (2011). Predicting Parenting Stress in Families of Children with ADHD: Parent and Contextual Factors. *Journal of Child and Family Studies*, 20, 640-647.



IFERP[®]
connecting engineers... developing research