

# 初中女生注意及多动行为自评与父母他评的差异

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## 摘要

目的: 女性ADHD患者常有漏诊、误诊及延迟诊断情况。本研究将学生自评纳入其中, 探讨初中生注意/多动量表自评与父母他评的一致性及差异性, 以为女性ADHD的诊断提供依据。方法: 872名初中生及父母分别完成注意/多动行为评定量表。结果: 注意力方面, 女生自评分数与父母他评分数均呈中等一致性( $ICC = 0.43, P < 0.001$ ), 但女生自评分数显著高于父母他评分数( $P < 0.001$ ); 男生自评分数与父母他评分数呈一般一致性( $ICC = 0.24, P < 0.001$ ), 且男生自评分数显著低于父母他评分数( $P < 0.001$ ); 同时, 女生自评分数显著高于男生自评分数( $P < 0.001$ )。多动行为方面, 女生自评分数与父母他评分数均呈中等一致性( $ICC = 0.43, P < 0.001$ ), 二者差异无显著统计学意义; 男生自评分数与父母他评分数呈一般一致性( $ICC = 0.34, P < 0.001$ ), 且男生自评分数显著低于父母他评分数( $P = 0.001$ ); 此外, 女生自评分数显著低于男生自评分数( $P = 0.04$ )。结论: 青少年注意力及多动行为自评与父母他评分数存在差异, 且在性别差异。父母可能低估了女生的注意力问题, 男生可能低估了自己的多动/冲动症状。

## 关键词

注意力, 多动, 自评, 父母他评, 一致性, 女性, ADHD

# Differences between Self-Reported and Parent-Rated Attention and Hyperactive Behaviors in Middle School Girls

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## Abstract

**Objective:** Female patients with ADHD are often underdiagnosed, misdiagnosed, and diagnosed late. This study included student self-assessment to explore the consistency and differences between the self- and parent-rated attention/hyperactivity scales among junior high school students, aiming to provide evidence for the diagnosis of female ADHD. **Methods:** A total of 872 junior high school students and their parents respectively completed the attention/hyperactivity behavior rating scale. **Results:** In terms of attention, girls' self- and parent-rated scores had moderate consistency (ICC = 0.43,  $P < 0.001$ ), but girls' self-rated scores were significantly higher than parent-rated ones ( $P < 0.001$ ). For boys, their self- and parent-rated scores showed general consistency (ICC = 0.24,  $P < 0.001$ ), with boys' self-rated scores significantly lower than parent-rated ones ( $P < 0.001$ ). Meanwhile, girls' self-rated scores were significantly higher than boys' self-rated scores ( $P < 0.001$ ). Regarding hyperactivity, girls' self- and parent-rated scores also had moderate consistency (ICC = 0.43,  $P < 0.001$ ), with no significant difference between them. For boys, their self- and parent-rated scores showed general consistency (ICC = 0.34,  $P < 0.001$ ), and boys' self-rated scores were significantly lower than parent-rated ones ( $P = 0.001$ ). Besides, girls' self-rated scores were significantly lower than boys' self-rated scores ( $P = 0.04$ ). **Conclusion:** There are differences between the self- and parent-rated scores of adolescents in terms of attention and hyperactivity, and there are gender differences. Parents may underestimate girls' attention problems, and boys may underestimate their own hyperactive/impulsive symptoms.

## Keywords

Attention, Hyperactivity, Self-Evaluation, Parental-Evaluation, Consistency, Female, ADHD

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## 1. 引言

注意缺陷多动障碍(Attention deficit hyperactivity disorder, ADHD)作为一种神经发育障碍,主要表现为与年龄不符的注意力难以集中、过度活跃以及冲动行为,无论性别如何,在整个生命过程中,甚至在成年期,都需要治疗和支持(Babinski et al., 2011; McGuire, 2015)。在全球范围内,儿童 ADHD 的发病率约为 5.3%,成年患病率约为 2.5% (Polanczyk et al., 2007; Simon et al., 2009)。儿童 ADHD 的男女比例为 2:1,而成人 ADHD 的男女比例却仅为 1.6:1 (Attoe & Climie, 2023), Barkley 认为性别差异甚至可能更小 (Barkley & Poillion, 1994)。成年期患病率差异的显著下降,表明女性和女孩在儿童期存在被诊断不足,漏诊或误诊的可能(Rennó et al., 2020)。

### 1.1. ADHD 的诊断

ADHD 的诊断主要依据取决于是否在多个环境中(如家庭和学校)均存在注意力不集中或多动问题;且这些行为必须在 7 岁之前出现,并持续至少 6 个月(McGuire, 2015)。因此,家长和老师的评估通常是儿童 ADHD 诊断的主要信息来源。然而研究人员认为 ADHD 的诊断可能同时存在诊断过度 and 诊断不足的情况(*ADHD: Overdiagnosed and Overtreated, or Misdiagnosed and Mistreated*, n.d.; Bruchmüller et al., 2012)。缺乏获得适当医疗保健的途径,家长和学校认识度不够等问题都可能导致诊断不足(Wood et al., 2021)。

### 1.2. 女性 ADHD 就诊困难

ADHD 甚至曾经被认为是男性独有的疾病(Nussbaum, 2012),女性 ADHD 在确诊前被更频繁地转诊(Klefsjö et al., 2020)。研究表明,ADHD 临床症状的性别差异是男生的多动、冲动程度更高(Elkins et al., 2011),女生的注意力缺陷程度更高(*A Review of Attention-Deficit/Hyperactivity Disorder in Women and Girls: Uncovering This Hidden Diagnosis*, n.d.; Kok et al., 2016)。在临床表现中,有时 ADHD 的症状会被情绪和情感状态所掩盖(Skogli et al., 2013)。许多寻求情绪和情绪问题治疗的女性可能患有未被认识到的多动症,女生 ADHD 可能会将 ADHD 症状描述为“情绪”症状,而将男生 ADHD 所描述的不安描述为焦虑(Klefsjö et al., 2020),但由于医生可能缺乏对 ADHD 的性别差异的了解,导致女性和女孩的诊断被忽视或漏诊(Quinn, 2008)。另外一种可能性是患有 ADHD 的女孩可能比男孩有更好的应对技能,当女孩表现出与 ADHD 症状(冲动、多动、杂乱无章)一致的行为时,她们因为违反女性社会规范而受到社会评判的风险更高(Holthe, 2013),为了避免受到惩罚,许多女孩付出了相当大的努力学习使用技能来掩盖多动症状(Waite, 2010)。而这些“隐藏”ADHD 症状的技能(*A Review of Attention-Deficit/Hyperactivity Disorder in Women and Girls: Uncovering This Hidden Diagnosis*, n.d.),可能会导致家长和老师很难识别女生的 ADHD 症状,直到症状造成的损害明显超过男生接受诊断或治疗时所需的程度,甚至经常是女孩自己报告 ADHD 症状(Dakwar et al., 2014)。

### 1.3. ADHD 对女性的影响

Biederman 将 5 年期间患有 ADHD 的女孩与没有 ADHD 的女孩进行了比较,结果发现,患有多动症的女孩平均年龄为 16 岁,ADHD 与重度抑郁症、多重焦虑症、双相情感障碍、对立违抗障碍、品行障碍、抽动秽语/抽动障碍、遗尿症、语言障碍、尼古丁依赖和药物依赖的终生风险显着增加有关(Biederman et al., 2006)。Robison 等人(2008 年)研究了 ADHD 症状、心理功能、身体症状和治疗反应的性别差异,结果显示,女性在 ADHD 症状的每项衡量标准上都被评为受损程度更高,且与男性相比,女性在焦虑和抑郁评定量表上的得分更高,并且经历了更大的情绪失调(Robison & Faraone, 2008)。与没有 ADHD 的女性相比,患有 ADHD 的女性从事危险性行为、意外怀孕的风险也更高,更容易受到性骚扰、剥削以及虐待或不适当的关系,而且社会对女性和母亲的期望增加可能会导致 ADHD 女性的损伤和焦虑增加(Young et al., 2020)。患有多动症的女性经常报告说,她们一生都感觉“与众不同”、“愚蠢”或“懒惰”,并为自己的成绩不佳而责备自己(Lynn, n.d.)。然而,ADHD 是一种可控的疾病,早期发现和治疗可以极大地改变 ADHD 儿童持续到成年期的结果(Quinn & Wigal, 2004),减少学业和专业成绩不佳、人际关系困难和精神合并症(Sassi, 2010)。ADHD 的诊断被许多女性视为灵光一闪的时刻,为她们的挣扎提供外部解释,并让她们更充分地接受自己(Stenner et al., 2019),进而帮助她们提升女性的自尊和身份认同(Waite, 2010)。Biederman 强调早期干预和预防策略对患有 ADHD 的女孩至关重要(Biederman et al., 2006)。

## 1.4. 问题提出

综上所述,更灵敏、有效地诊断对女性 ADHD 来说非常关键,鉴于女性自我报告诊断的成功经历(Dakwar et al., 2014),本研究将探讨女生自我评估注意力/多动症状与父母他评报告的一致性,并检验父母是否低估了女生 ADHD 的症状,以初中生为研究主体,探讨男生和女生注意力及多动行为自评与父母他评之间的一致性与差异,以期为国内女性 ADHD 的诊断提供更多的支撑和实证依据。

## 2. 对象与方法

### 2.1. 研究对象

河北省某中等水平城市某中学七八年级 12~17 岁学生共 1060 名。所有学生均由家长签署知情同意书。排除① 有躯体疾病、器质性精神障碍、精神分裂症、品行障碍;② 非正常持续上学状态的学生。

### 2.2. 研究工具

注意力及多动行为评定量表,该量表由注意缺陷和多动/冲动两部分组成,每部分各 9 项共 18 个条目组成,采用 0(无)到 3(总是)共 4 点计分,每部分有 6 个及以上条目大于等于 2 分,则提示有相应问题。此次问卷采取整体计分方式,每部分得分大于等于 12 分,则提示可能有六个以上大于等于 2 分的条目。

### 2.3. 资料收集

学生自评量表采用线上测评工具心灵照相机进行集体测试;家长他评量表采用纸质问卷形式,由熟悉学生情况的家长填写。

### 2.4. 统计学方法

应用 SPSS 统计软件,计量资料采用均数  $\pm$  标准差( $M \pm SD$ )描述;分类资料采用卡方检验;连续变量间的一致性采用组内相关系数(ICC), $ICC < 0.2$  表示一致性较差,0.21~0.40 表示一致性一般,0.41~0.60 表示一致性中等,0.61~0.80 表示一致性较强,0.81~1.00 表示一致性非常好;组内自评与他评差异采用配对样本  $t$  检验;组间差异采用独立样本  $t$  检验;均为双侧检验。

## 3. 结果

### 3.1. 一般人口学资料

共发放问卷 2120 份,其中学生自评有效问卷收回 1013 份,父母他评有效问卷 891 份,可纳入研究的同时具备自评与他评的问卷共计 872 份。年龄 12~16 岁,平均  $13.75 \pm 0.67$  岁,其中男生 445 名,女生 427 名, $\chi^2 = 0.37$ , $P = 0.54$ ,性别差异不显著。注意力部分,男生自评问卷共有 51 份  $\geq 12$  分,百分比为 11.5%,男生他评问卷共有 95 份  $\geq 12$  分,百分比为 21.3%;女生自评问卷共有 109 份  $\geq 12$  分,百分比为 25.5%,女生他评问卷共有 77 份  $\geq 12$  分,百分比为 18%。多动行为部分,男生自评问卷共有 24 份  $\geq 12$  分,百分比为 5.4%,男生他评问卷共有 29 份  $\geq 12$  分,百分比为 6.5%;女生自评问卷共有 19 份  $\geq 12$  分,百分比为 4.4%,女生他评问卷共有 20 份  $\geq 12$  分,百分比为 4.7%。

### 3.2. 自评与他评量表评估结果的一致性及差异性分析

对于男生,自评与父母他评的注意力分数、多动行为分数及量表总分均呈一般一致性,自评分数均小于他评分数,且差异均具有统计学意义。对于女生,自评与父母他评的注意力分数、多动行为分数及量表总分均呈中等一致性,自评分数均高于他评分数,自评力与他评的注意力分数及量表总分差异显著,

具统计学意义。具体分数详见表 1。

**Table 1.** Analysis of consistency and differences in the assessment results of attention and hyperactivity behavior scale for junior high school students

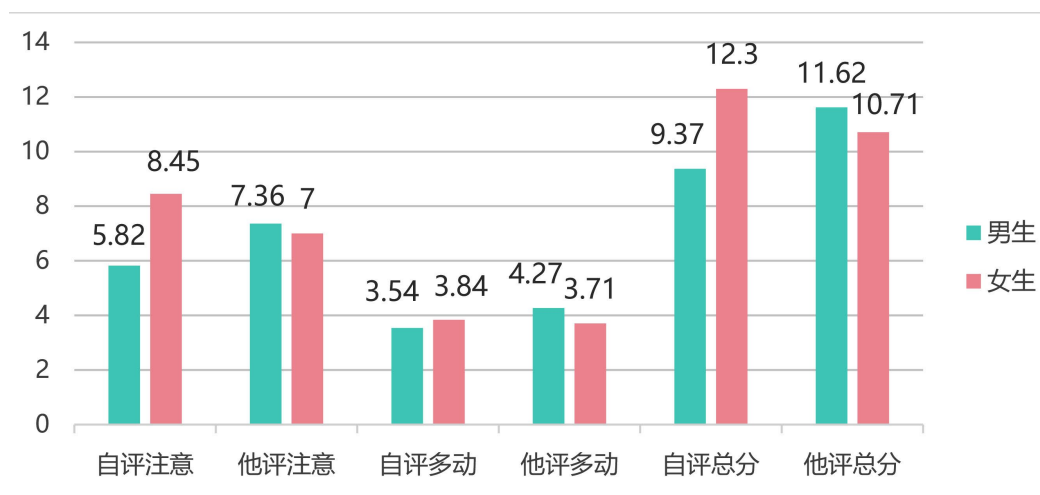
**表 1.** 初中生注意力及多动行为量表评估结果的一致性 & 差异性分析

	男生(n = 445)				女生(n = 427)			
	自评	他评	ICC 值	t 值	自评	他评	ICC 值	t 值
	(M ± D)	(M ± D)			(M ± D)	(M ± D)		
注意	5.82 ± 4.92	7.36 ± 5.09	0.24***	5.25***	8.45 ± 5.72	7 ± 5.016	0.43***	5.22***
冲动、多动	3.54 ± 3.94	4.27 ± 4.08	0.34***	3.30**	3.84 ± 4.21	3.71 ± 3.89	0.44***	0.63
总分	9.37 ± 8.01	11.62 ± 8.20	0.29***	4.93***	12.3 ± 9.05	10.71 ± 8.02	0.47***	3.72***

注: \*\*\* $P < 0.001$ , \*\* $P < 0.01$ 。

### 3.3. 自评与他评量表评估结果的性别差异分析

学生自评问卷分数显示, 男生和女生注意力分数差异显著,  $t = 7.29$ ,  $P < 0.001$ , 多动行为分数差异不显著,  $t = 1.09$ ,  $P = 0.28$ , 量表总分差异显著  $t = 5.06$ ,  $P < 0.001$ 。父母他评问卷分数显示, 男生和女生注意力分数差异不显著,  $t = 1.04$ ,  $P = 0.3$ ; 多动行为分数差异显著,  $t = 2.05$ ,  $P = 0.04$ ; 量表总分差异不显著  $t = 1.65$ ,  $P = 0.10$ 。见图 1。



**Figure 1.** Analysis of gender differences in self - and other - rated scale assessment results

**图 1.** 自评与他评量表评估结果的性别差异分析

## 4. 讨论

本研究显示, 女生自评注意力及多动行为分数与父母他评分数呈中等一致性, 男生自评注意力及多动行为分数与父母他评分数呈一般一致性。青少年自评分数与父母他评分数之间存在差异, 且存在性别差异, 父母他评注意力分数显著低于女生自评分数, 父母他评注意和多动分数均显著高于男生自评分数。在性别差异上, 女生注意力自评分数高于男生自评分数, 但父母他评注意力分数性别差异不显著; 父母对男生的多动行为评估分数高于女生, 但男生和女生的自评多动分数没有显著差异。这表明男孩可能低估了自己的多动/冲动症状, 父母可能低估了女孩的注意力问题。

成人 ADHD 的研究显示, 女性 ADHD 更多属于注意力不集中型(Vildalen et al., 2019), 而注意力不集中的外化症状并不明显。同时, 女性的多动和冲动的特征更多表现为外化的情绪或言语多动和冲动症状, 这些症状经常被误解为其他精神障碍如焦虑、边缘型人格障碍或双相情感障碍等(Klefsjö et al., 2020)。Charlotte 等人的研究表明女性 ADHD 患者的诊断和治疗时间比男性晚约 4 年(Skoglund et al., 2024)。Ohan 和 Visser (2009)用代表 ADHD 症状的插画检验家长和教师在对待 ADHD 儿童时是否存在性别差异, 除了一半参与者阅读了男性儿童名字的小插图, 另一半阅读了女性儿童名字的小插图, 并要求参与者评估为所描述的儿童推荐或寻求帮助的可能性。结果表明, 老师和家长都不太可能为女孩寻求或推荐帮助。女性 ADHD 症状内化、家长和老师对女性 ADHD 的症状和损害认识不足等都有可能导导致女性 ADHD 的诊断延迟或漏诊(Ohan & Visser, 2009)。

## 5. 结论

综上所述, 过往研究表明女性 ADHD 患者存在诊断不足的问题。本研究发现, 父母对女生注意力的评估分数显著低于女生自评分数, 而父母对女生的他评多动分数与女生自评多动分数没有显著差异。这表明父母可能低估了女生的注意力症状。

## 6. 研究建议

鉴于本研究结果及 ADHD 症状给患者所带来的终身损害, 提出以下建议: (1) 有必要将 ADHD 的评估纳入学校内历年学生心理健康普查中, 将学生注意力/多动评定量表的自评分数以及情绪相关量表分数作为预警依据, 对于有情绪问题的女生, 进一步复查注意力/多动评定量表及过往经历, 及时帮助潜在的女性 ADHD 患者及时得到诊断和治疗。(2) 在对女生 ADHD 的诊断过程中, 也应将女生的注意力及多动行为量表自评分数纳入评估参考依据, 以进行更全面的评估。(3) 深化对女性 ADHD 的研究, 扩大对小年龄段女生 ADHD 的研究, 探索女性 A 索对女性 ADHD 更有针对性的干预方法, 实现早诊断、早治疗, 减轻 ADHD 症状给女性带来的痛苦及社会负担。

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