

Parenting Behaviors During Risky Driving by Teens With Attention-Deficit/Hyperactivity Disorder

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Parenting practices for teen drivers with ADHD were observed via a video monitor installed in vehicles. All teens had recently completed a driver education course and were in the driving permit stage of a graduated driver-licensing program. Parent behaviors were coded during drives when teens were driving safely and during drives when teens engaged in risky driving. The overall frequency of positive parenting strategies was low, regardless of whether teens drove safely or engaged in risky driving. Although the rate of negative feedback was also low, parents engaged in significantly more criticism and were rated by an observer to appear angrier when teens were driving in a risky manner. No other differences in parent behaviors associated with the quality of teen driving were observed. The inconsistencies between observed parenting behaviors and those parenting practices recommended as effective with teens with ADHD are discussed. The need for further research addressing effective

strategies for teaching teens with ADHD to drive is highlighted.

Keywords: ADHD; adolescents; parenting; driving

ACCIDENTAL INJURY IS THE LEADING CAUSE of death for teens in the United States, and 73% of accidental injuries resulting in a teen's death from 1999 to 2006 were attributable to automobile crashes (Minino, 2010). Compared to the general population, teen drivers are involved in a disproportionately high number of fatal motor vehicle crashes. Based on 2006 data, only 6.4% of all licensed drivers were teenagers, but they were involved in 12.9% of all fatal automobile crashes (Compton & Ellison-Potter, 2008). Furthermore, young drivers are involved in significantly more automobile crashes involving a fatality than are drivers from any other age group (Compton & Ellison-Potter). Not only are teen drivers more likely to be involved in serious automobile crashes, they also are more often the cause of such events. In an investigation of data from 795 serious motor vehicle crashes involving teen drivers, the cause of the crash was deemed to be driver error on the part of the teen in more than 75% of cases (Curry, Hafetz, Kallan, Winston, & Durbin, 2011).

Risk of negative driving outcomes is even greater among adolescents with attention-deficit/hyperactivity

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disorder (ADHD). Young drivers with ADHD are involved in more motor vehicle crashes than typically developing teen drivers, and are more likely to be found at fault for crashes (Barkley & Cox, 2007; Barkley, Guevremont, Anastopoulos, DuPual, & Shelton, 1993; Barkley, Murphy, & Kwasnik, 1996). Young drivers with ADHD receive more traffic citations than drivers without ADHD, are more likely to have their licenses suspended, drive illegally, and demonstrate poorer performance during simulated driving (Barkley et al., 1993; Barkley et al., 1996; Biederman et al., 2007; Fischer, Barkley, Smallish, & Fletcher, 2007; Thompson, Molina, Pelham, & Gnagy, 2007).

Although there is considerable evidence that teens with ADHD experience more negative driving outcomes relative to typically developing teens, little is known about specific steps families of novice teen drivers with ADHD may take to improve safety. There have been few studies addressing effective strategies for parents teaching teens with ADHD to drive. There is some evidence regarding strategies for reducing driving risk among typically developing teens in the general population. For example, teens who delay obtaining a driver's license have better outcomes, as do teens whose parents set stricter limits related to when, where, and with whom teens are allowed to drive (Hartos, Eitel, & Simons-Morton, 2001). Greater parent-teen agreement regarding driving restrictions also appears to contribute to fewer negative driving outcomes (Beck, Hartos, & Simons-Morton, 2006). Although these parenting strategies appear to be associated with improved driving outcomes for typically developing teens, teen drivers with ADHD have reliably worse outcomes relative to typically developing teen drivers, and a different or more intense approach may be necessary when teaching teens with ADHD to drive. Furthermore, the strategies described above are implemented following licensure; for families of teenagers with ADHD, who are known to have worse outcomes, interventions may need to occur during the permitted driving stage and continue until safe driving practices have been achieved.

Supervised driving practice may be a situation in which it is especially important for parents to engage in effective parenting practices. During supervised driving practice, parents are arguably the most active in monitoring and providing instruction related to driving, and this may be a period of time when parents have significant influence on teen driving outcomes. Unfortunately, very little is known about how parents approach driving practice with their teens with ADHD. Robin (2006) suggested that effective parenting of teens with ADHD involves more positive feedback than negative; however, parents of adolescents with ADHD engage in more negative parenting

practices than do parents of children without ADHD (Barkley, Anastopoulos, Guevremont, & Fletcher, 1992). To the extent that these negative parent-teen interactions also occur during supervised driving, there may be a negative effect on the quality of teen driving.

The primary aim of the current study was to provide an initial look at parents' use of effective parenting strategies during supervised driving practice with teens with ADHD. Through in vivo observations of parent-supervised teen driving practice, particular attention was focused on the extent to which parents engaged in positive parenting strategies (e.g., praise, effective commands, and coaching) as opposed to negative parenting strategies (e.g., criticism and negative comments). To investigate whether parents responded differently depending on the quality of teen driving, parent behaviors during drives in which teens engaged in risky driving were compared to parent behaviors during drives in which teens drove more safely. It was hypothesized that parents would engage in significantly more negative behaviors, and fewer positive behaviors, following a risky driving behavior than they would following nonrisky driving. Parent behaviors prior to risky driving were not expected to differ from parent behaviors prior to nonrisky driving.

Method

PARTICIPANTS

Participants in this study represented a subset of participants from a larger, ongoing, randomized control trial. Driving behaviors of participants in the larger study are tracked longitudinally following participation in a driver education program. Participants were recruited through radio advertisements and flyers distributed to high schools and community providers in western New York. Study procedures were approved by the Child and Youth Institutional Review Board. As incentive to participate, teens were enrolled in a 10-week driver education course free of charge. Participants were also provided with \$75 stipends for completing follow-up assessments.

To be eligible to participate, teens were required to have obtained a learner's driving permit. Additionally, the teen and at least one parent needed to be willing to participate in the project. All teens met current Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition, Text Revision (DSM-IV-TR; APA, 2000) diagnostic criteria for ADHD—Combined Type according to current evidence-based assessment guidelines (Pelham, Fabiano, & Massetti, 2005). ADHD diagnoses as well as diagnoses of comorbid conditions were determined according to DSM-IV-TR criteria.

This study included teens who had been randomly assigned to participate in the control group of the larger study and who had completed the 4-week

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