



Initial Response to BPT among Preschoolers with ADHD and Subsequent Caregiver Engagement

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Introduction

- Engagement with behavioral parent training (BPT) is critical for treatment response among youth with ADHD¹. However, session attendance typically decreases over time².
- Despite caregivers' value of immediate treatment response³, the impact of child behavior change on subsequent engagement with BPT has not been studied.
- Research Question:** Does initial child response to treatment predict caregiver session completion in the latter half (sessions 5-10) of a BPT program for preschoolers with ADHD?

Participants

- Preschoolers ($N = 77$; 69% male; 75% White; ages 3-5) with or at-risk for ADHD
- Assigned to a 10-session, face-to-face or online BPT program

Measures

- Conners Early Childhood-Parent⁴
 - Inattentive-Hyperactive (IA/HA) subscale
 - Home life subscale
- Head-Toes-Knees-Shoulders (HTKS)⁵
- Adaptive Social Behavior Inventory (ASBI)⁶
 - Prosocial Subscale
- Child Compliance (CCO)*
- Child Physical Aggression/Disruption (CPAD)*
- Parent Positive Command (PPC)*

*Observed in home-based routine⁷

The research reported here was supported by the Institute of Education Sciences, U.S. Department of Education, through Grant R324A200010 to Lehigh University. The opinions expressed are those of the authors and do not represent views of the Institute or the U.S. Department of Education.

Analytic Plan

- Pre-to-mid treatment change scores were calculated for each child measure.
- Change scores were entered into a single multiple linear regression model as predictors of caregiver completion of sessions 5-10.

Results

	<i>b</i>	SE	β	<i>p</i>
Conners – IA/HA	-.05	.04	-.19	.252
Conners - Home	-.59	.51	-.19	.243
HTKS	-.05	.03	-.26	.127
ASBI	-.24	.10	-.42	.028
CCO	-1.09	1.00	-.22	.296
CPAD	-7.76	3.00	-.42	.016

Discussion

- After controlling for change in parent commands, change on a set of child behavioral measures from pre-to-mid treatment accounted for a marginally significant proportion of variance in subsequent session completion ($R^2 = .28, p = .08$)
- These results suggest initial decreases in disruptive behavior potentially encourage engagement with BPT, whereas continued challenges in peer and familial relationships may motivate caregivers to attend latter sessions and address their concerns.
- Future research examining mediators (e.g., parent stress) and moderators (e.g., treatment modality) in these analyses may clarify these relationships and enhance clinicians' ability to promote BPT engagement.

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