Impact of Child, Family and Treatment Factors on Treatment Preference/Acceptability among Parents of Children with ADHD attending a Summer Treatment Program

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INTRODUCTION

Attention-Deficit/Hyperactivity Disorder (ADHD) is a chronic disorder that impacts children into adolescence and adulthood. As such, taking an inter-personal psychological approach and a chronic conceptualization of treatment is important for clinicians (American Academy of Pediatrics, 2001). These children are considered for behavioral, pharmacological, and combined treatment conditions (as compared to medication-only parents: were more satisfied, and less likely to say they would use that treatment in the future). Other research shows that family factors are unrelated to parents willingness to pursue medication or to combine thereof (Pelham & MTA Group, in preparation).

One recent investigation of client satisfaction and preference was conducted on the MTA project, which exposes them to multiple intensities of behavioral treatment and medication. Do preexisting family or child characteristics predict treatment preferences, or whether parents say they would use that treatment in the future? Across numerous studies, including one recent large study (Pelham & MTA Group, in preparation), no significant interactions were revealed. The present study looks at parent treatment preferences after going through a summer treatment program which exposes them to multiple intensities of behavioral treatment and medication.

RESEARCH QUESTIONS

1. Do preexisting family or child characteristics predict treatment preferences, or whether parents say they would use that treatment in the future?

METHODS

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Participants

- Children diagnosed with ADHD: 80% ADD+CD, 17% ADD, 3% ADD-HI
- 67% Consensual ODD vs. CD
- 12% Female
- 50% Caucasian, 30% African American, 15% Asian

Family Characteristics

- Family Income: Mean = $56,671, SD = 153,188
- 75% Two Parent Family

Measures

- Child Characteristics
- Baseline Client Information Form
- DIS IV (Geller et al., 1999)
- Impression Rating Scale (Pelham et al., 2002)

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- Treatment Rating Form
- Made up of 15-item “choice, short-type and ranking ratings of parent’s perception of the difficulty, effectiveness and stress associated with each level of behavioral treatment”

- Procedure
- Six-week ADHD program designed to be equivalent to the MTA project
- Six-week program included 6 treatment conditions

RESULTS

- RESULTS
- Table 1 shows the results of the study
- Results are as follows (see Figure 1): 1. How difficult was the treatment procedure to use in this condition? 2. How effective was the treatment procedure to use in this condition? 3. How stressed was the treatment procedure to use in this condition?

DISCUSSION

Do aspects of parent or child characteristics predict treatment preferences, or whether parents say they would use that treatment in the future? The use of social validity measures may help understand the balance between effectiveness, and feasibility for families of children with ADHD. Clinical implications include that treatment providers and pediatricians should not screen families from receiving behavioral treatment options based on child or family characteristics.

REFERENCES


Table 1. Home Components of 3-Week Behavioral Conditions

Table 2. Within-Treatment Predictors of Likelihood to continue child management procedures

Figure 1. Parents' Likert Ratings by Behavioral Condition

http://wings.buffalo.edu/ada/