AN EVALUATION OF THE EFFECTS OF AN ABRIDGED PARENT TRAINING PROGRAM ON PARENT-CHILD INTERACTIONS IN THE HOME

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Thesis Prepared for the Degree of

MASTER OF SCIENCE

UNIVERSITY OF NORTH TEXAS

December 2008

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This study examined the effects of a condensed parent training program on parent-child interactions in the home. Two parents participated in a positive parenting workshop that included explicit training of four skills and indirect training of two additional skills. To determine skill acquisition, both parents performed role plays and completed written exams pre- and post-training. Role play assessment results showed improvements in all skill areas for both participants. Written assessment results showed improvements for all skills directly taught except one. Multiple measures were examined in the home prior to and following the workshop to assess generalization. Results showed an increase in positive interactions and decrease in coercive interactions and undesirable child behavior for both participants.
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ACKNOWLEDGEMENTS

I would first like to thank my thesis advisor Dr. Richard Smith as well as my committee members: Dr. Shahla Ala’i Rosales and Dr. Manish Vaidya for their support and guidance in this endeavor. I cannot express how grateful I am for the BMAPS staff and my data collectors, specifically Barbara Carlson, Michelle Lamancusa, Martha Staff, Amanda Besner and Kimberly Kelly. This project would not have been possible without their hard work and dedication. Additionally, I would like to thank Kerri Berard for always being a source of encouragement and intellect. Finally, I would like to thank my husband and my parents. They have supported me in every way possible and it was their love and faith that helped me succeed in my graduate career.
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INTRODUCTION

Behavioral Parent Training

Training in behavior management has been used to teach parents how to appropriately intervene on their children’s behavior. Several studies show that behavioral parent training has been effective to teach parents to appropriately manage child behavior such as noncompliance, eating, hyperactivity, and other behavior problems (e.g. Graziano & Diament, 1992). Behavioral training that involves modeling and descriptive feedback on performance has been shown to be effective in establishing parenting skills such as directing attention to desirable behavior, resulting in decreased amounts of undesirable behavior in their children (Sanders, 1982). Similarly, Hudson (1982) found that a lecture on behavioral principles was not enough to establish certain parenting skills, and that modeling and role play were necessary components in a behavioral parent training curriculum.

Brightman, Baker, Clark & Ambrose (1982) investigated the effects of parent training using both individual and group formats. The authors evaluated multiple measures to determine parent knowledge of the curriculum, parent teaching abilities and child behaviors prior to and following training. Results showed that group and individual parent training formats resulted in similar outcomes. Generally, less time and resources are used with group instruction, suggesting that this method may be more cost efficient than individualized parent training.

While parent training encompasses a multitude of techniques, one of the most important aspects of behavioral parent training is identification of behavior change. Repeated measures of skill acquisition and parent behavior that leads to child behavior
change will support or negate training methods, ultimately determining the most
effective practices (Baer, Wolf & Risley, 1987). The current direction of parent training
literature is toward refining measures of parent and child behavior changes. Studies
have evaluated parent skill acquisition in the classroom through role play assessment,
multiple choice exams and other tests (Berard & Smith, 2008; Brightman, Baker, Clark
& Ambrose, 1982; Greenspan, 2008; Van Camp, Montgomery, et al., 2008; Van Camp,
Vollmer, et al., 2008), while other studies focus on generalization of skills to the home.
Measurements collected in the family’s home have focused on occurrence,
nonoccurrence, frequency and duration of parent and child target behavior, and data
were collected with the use of checklists, task analyses or home inventories (Brightman,
Baker, Clark & Ambrose, 1982; Gershater-Molko, Lutzker, & Wesch, 2003; Greenspan,
2008; Lutzker & Bigelow, 2002)

Brief Program Review

Several programs have reported successful outcomes of behavioral parent
training including Project 12-Ways (Lutzker, Bigelow, Doctor, Gershater & Greene,
1998), Project SafeCare (Lutzker & Bigelow, 2002), the Triple P program (Sanders,
Markie-Dadds, & Turner, 2003), and the Behavior Analysis Services Project (BASP).
Project 12-Ways was developed to supply training on twelve skills to families served by
the Illinois Department of Children and Family Services. All services were provided in
the home environment and targeted skill development in areas including parenting,
stress reduction, money management, and health and safety. Project 12-Ways
reported outcomes showing that families with higher than average rates of maltreatment
at the onset of services had lower recidivism rates and out-of-home child placements
following the program compared to those who received services as usual (Lutzker, Bigelow, Doctor, Gershater & Greene, 1998).

Project SafeCare adapted three of the twelve services provided in Project 12-Ways, using one-on-one instruction, modeling, practice, and feedback to teach parent-child interaction, health, and safety skills (Lutzker & Bigelow, 2002). SafeCare training has been found to produce increases in appropriate interactions between parents and their children and these results maintained for several months following training (Bigelow & Lutzker, 1998; Cordon, Lutzker, Bigelow & Doctor, 1998) Results of the case study by Cordon et al. (1998) indicated that written instruction materials were insufficient to produce substantial increases in parent health identification skills, suggesting that direct contact with instructors was a critical component of training. Lutzker and Bigelow (2002) lent support to that notion, asserting that “hands on training is virtually always superior to relying on written materials to teach skills (p.23).”

The Triple P program utilizes a combination of methods such as video modeling, classroom instruction, and in-home observation to efficiently and effectively teach positive parenting strategies to a variety of populations. Program methods include broad dissemination of general parenting skills to intensive and individualized one-on-one intervention in the home (Sanders, Markie-Dadds, & Turner, 2003). An assessment of the Group Triple P program, which involves eight hours of group instruction with modeling, role play and feedback, showed the program to be successful at reducing disruptive child behavior and aversive parenting strategies and increasing parenting efficacy and satisfaction (Hoath & Sanders, 2002; Leung, Sanders, Leung, Mak, & Lau, 2003; Martin & Sanders, 2003 [as cited in Sanders et al., 2003]).
The State of Florida’s Behavior Analysis Services Program (BASP) was created in 1996 to provide behavior management training for foster parents in the Tampa area and, by 2000, had expanded to provide training and other services to foster and biological parents throughout Florida. Until a recent cut in funding, BASP employed 60 certified behavior analysts who served as classroom instructors, caregiver consultants and staff trainers; served over 2,900 caregivers and children; and produced several publications evaluating the efficacy of their services (Stoutimore, Williams, Neff & Foster, 2008).

An evaluation of BASP’s behavioral parent training curriculum on parent skill acquisition in a classroom setting was conducted by Van Camp and colleagues (Van Camp, Vollmer, et al., 2008). Pre and post-course role play scores of 163 participants were compared to evaluate the effectiveness of lecture, modeling, and role play with feedback to establish nine parenting skills over a 10 week period. Pre and post-course role plays were scored for percent of behaviors correctly executed per parenting skill. Results showed improvements in participants’ parenting skills following the course, with an overall average improvement of 32% from pre- to post-assessment. These outcomes were replicated with four foster parents who attended a two-session workshop with similar training modalities and curricula, with each participant demonstrating at least a 37% increase for each skill. Although these investigations produced promising results they are limited by low interobserver agreement (IOA) percentages (75% prior to the course and 84% following the course), which brings the validity of the data into question. Additionally, the persons conducting the classes were
also responsible for data collection, possibly resulting in an observer bias. Finally, the
effect of the training on child behaviors was not evaluated in any setting.

Van Camp, Montgomery, et al. (2008) evaluated the maintenance of skills
learned and the effects of a booster workshop to enhance performance. Eight parents
who had completed the 10-week behavioral parent training program participated in a
follow-up study eight to 35.5 months after completing the course. During the booster
session all of the techniques taught in the 10-week program, were re-taught in a
condensed, 6-hr workshop. Role play skill assessments were conducted before and
after both the 10-week course and 6-hr booster session. Results showed acquisition of
skills following the 10-week course, with skill levels averaging 39% before the course
and 76% subsequently. Average scores dropped to 55% prior to the booster workshop
and increased to 78% following the 6-hr booster session. These results indicate the
booster workshop was sufficient to raise scores to match those following the initial
training course. However, the results were idiosyncratic for each participant and for
each of the skills. These mixed outcomes suggest that booster sessions should be
individualized, based on assessment of particular skills. Overall, these studies
produced supportive results of the BASP training efforts and effects of behavioral parent
training.

Within the region in which the current study was conducted (North Texas, Dallas-
Fort Worth metroplex area), three organizations were identified that offered parent
training programs for biological and foster parents. Of those programs, Behavior
Management And Parenting Services (BMAPS) is the only program, to the best of our
knowledge, that has a set criteria of mastery and offers curricula based on empirically
validated practices. Established in 2005, and initially known as The Texas Child Welfare Project, BMAPS was developed by faculty and students from the University of North Texas’ Department of Behavior Analysis and was modeled after the BASP program. BMAPS employs a behavioral curriculum based on Florida’s “Parenting Tools for Positive Behavior Change” course and Latham’s *The Power of Positive Parenting* (Latham, 1990). The BMAPS course consists of a 15-hour curriculum focused on teaching positive parenting skills through classroom instruction, modeling and role plays. Two recent studies have evaluated the effects of the BMAPS curriculum on measures including parent skill acquisition and parent-child interactions in the home (Berard & Smith, 2008; Greenspan, 2008). Berard and Smith (2008) assessed the acquisition of five parenting skills using role play measures and repeated multiple choice quizzes. Ten parents referred for intervention by Texas CPS or the Counseling Center of Denton participated in the study. Similar to Van Camp et al. (2007), pre and post-course role plays were scored for percent of behaviors correctly performed per parenting skill. In addition, written assessments were administered prior to the start of each of the five classes and then again following completion of the course. Results showed that the average number of correct responses on the written assessment prior to the course was 13.9 of 36 possible correct responses. Following the course, participant’s average number of correct responses on the written portion totaled 24.6. Role play scores averaged 38.55% prior to the course and 71.87% following completion of the course. Despite this marked improvement, the authors suggested that future research should focus on other measures of skill acquisition and generalization and determine the effects of parent training on parent-child interactions in the home.
Greenspan (2008) evaluated parent-child interactions in the home following the completion of the Stay Close portion of the BMAPS curriculum. Results showed the changes in performance corresponding to this portion of the curriculum, while positive, were not large. Perhaps most notably, coercive interactions decreased from 15% of intervals prior to the course to 10% following the course, while affirmations increased from 20% of intervals to 27%. Prohibitions and open ended questions showed slight increases followed by decreasing trends after completion of the class. Little change was observed in the amount of empathy statements and appropriate touch emitted by parents following the course. Greenspan suggested that future research should attempt to develop and implement more sensitive measurement systems, extend lengths of observations, and compare the performances of at risk families to those of families who are not at risk.

These and other studies within the parent training literature illustrate the need for specification and measurement of parent behavior changes that lead to child behavior changes (Haws & Dadds, 2006) and for evaluations of the extent to which skills taught in parent training curricula generalize to home settings (Rogers Wiese, 1992). The goal of the current study is to extend the positive parenting literature through evaluation of immediate and generalized effects of an abridged parent-training curriculum on parenting skills and parent-child interactions. Skill acquisition in the classroom was measured through role-play assessment and multiple-choice quizzes and numerous measures of parent and child behaviors were collected in home environments. Measurement systems were created to assess the use of the behavior management tools taught in the class in home settings. The emphasis on home assessment is an
important aspect to treatment viability. An evaluation of parents’ ability to demonstrate
the techniques in the classroom and apply them in the home following a brief training
program may have implications about the amount of time and types of procedures
necessary to teach effective parenting skills.
METHOD

Participants

Two families were recruited from the Counseling Center of Denton and a local parenting group to participate in the study. The parenting group was an informal organization of parents of children with autism who gathered regularly to discuss challenges they faced and opportunities for support. The counseling center is a formal organization offering mental health support for families. One mother and one father participated in baseline and intervention phases of the study. The first participant was a 52-year-old Caucasian male. His son was 2 years old and had a diagnosis of autism, but no other known conditions. The child was not taking medication at the time of the study. The second participant was a 27-year-old, Caucasian woman. Her daughter was a typically developing 5-year-old child, also of Caucasian descent. Both families were intact with father and mother residing in the home.

Participants for the study and workshop were recruited through flyers sent to the parenting group and counseling center as well as referrals from counselors at the center. Both parents were seeking help for behavior problems they were experiencing at home.

Setting and Materials

Both workshop sessions were conducted in a classroom located at the University of North Texas Gateway Center containing desks, a podium, a computer and a projector. Workshop participants met twice during one week on Saturday and Sunday mornings from 9:00 A.M. to 1:00 P.M. The participants were given a Participant’s Guide each day comprised of information covered in that session, written exercises,
instructions for group activities, and a session evaluation form consisting of multiple choice and open-ended questions about the participant’s satisfaction with the workshop. The workshop was conducted by senior level BMAPS staff who were also graduate students from the University of North Texas Department of Behavior Analysis. The lead trainer and co-trainer had formerly completed an intensive 18-week training program to learn to present the BMAPS 15-hour curriculum. The lead trainer served on the BMAPS staff as a lead trainer for two years and staff trainer for one year. The co-trainer served on the BMAPS staff as a lead trainer for one year and was serving as project manager at the time of the study.

The intake interview and pre- and post-training role-play assessments were conducted in an office located on the University of North Texas campus in Chilton Hall. The office was approximately 3.05 m by 3.35 m and contained two work desks, one small table, one desktop computer, a small couch, and a bookshelf. The room also contained a Flip Video™ handheld camcorder (Pure Digital Technologies, Inc., San Francisco, www.puredigitalinc.com) with tripod and was arranged to resemble a living room setting. Materials available during role-plays included toy cars, stuffed bears, and a basket to simulate a bassinet.

The pre- and post-training home assessments were conducted in and around the homes of the participants at the same time each day. Both homes were located less than 30 miles from the training site. Participant 1 resided in a brick home located in a busy suburb of the Metroplex. Participant 2 resided in a manufactured home located in a rural area. Observations for Participant 1 took place just before dinner while observations for Participant 2 took place as soon as the child returned from school and
prior to her father coming home. Materials brought to the participant’s homes included a Flip Video with tripod and clipboard.

**Procedure**

*Intake Interview*

Prior to beginning any assessment or observation, the primary investigator reviewed the consent forms with the parent (copies of the participant consent and child assent form are located respectively in Appendix A and Appendix B). After the consent form had been signed, the participants were asked to complete an intake form. The first section of the form asked for specific information regarding the age of the participants and their children, number of children, nationality, marriage status and education level. These questions were aimed at identifying characteristics of the population participating in the study. The second section of the intake form asked the participant to respond to a list of particular, potentially problematic behaviors by checking behaviors that their children displayed and identifying these behaviors as either annoying behaviors or dangerous behaviors. The participants were then asked by the interviewer to specify when these behaviors were most likely to occur. The parents were also provided a space on the form to enter junk and dangerous behaviors that their children displayed but were not listed on the form. This information was used to schedule a time for home observations when the behaviors described were most likely to occur. The intake interview form is located in Appendix C.

*Role-Play Assessments*

A role-play assessment was completed prior to and following the workshop. Five scenarios were conducted with graduate training staff from the BMAPS project.
performing the roles of children and participants acting as the parents. The scenarios corresponded to the Stay Close, Use Reinforcement, Pivot, Redirect/Reinforce, and Set Expectations tools. Each scenario was scripted to include particular child behaviors that set the occasion for participants to demonstrate the skills taught during the workshop. All role-plays were videotaped using the Pure Digital Flip™ camera. The role-play format was adapted for the Use a Contract tool in which the participant was asked to create a contract given a written scenario about a child. Role play scripts are presented in Appendix D. Corresponding scoring sheets are located in Appendix E.

Role-plays were scored in-vivo following the methods employed by services as usual. For each script, data was collected via an adapted system developed by Berard and Smith (2008). Each role-play scenario was scripted to provide participants opportunities to engage in particular skills taught in the workshop. If the participant performed the skill correctly given an opportunity, the research assistant marked YES; if not then the research assistant marked NO; and if the opportunity was not presented to the participant as scripted, the research assistant marked N/A. Percent of correct responding was calculated for each tool by dividing the number of YES’s scored by the total number of opportunities presented during the role-play and multiplying the result by 100.

**BMAPS Workshop**

Four general behavior management techniques, or “tools,” were taught to the parents over two 4-hr sessions. Each session included a lecture, which was accompanied by a PowerPoint ® presentation, structured group activities, role-play practices, and a multiple-choice quiz.
During the first session the “Stay Close”, and “Set Expectations” tools were presented. The “Stay Close” tool teaches parents to use positive reinforcement to establish themselves as sources of trust, comfort, and positive interactions. “Set Expectations” teaches parents to provide children with clear behavioral guidelines, including specification of consequences for meeting and not meeting those guidelines. The second session covered “Pivot” and “Redirect /Reinforce.” These tools focus on the behavioral procedures of differential reinforcement and extinction. Each tool was presented in a succinct, non-technical way to permit easier implementation of the procedures by caregivers. Although only four skills were explicitly taught, two additional skills that are part of the 15-hour class (“Use Reinforcement” and “Use a Contract”) were touched upon within the lecture presentation. A more complete description of each of the tools can be found in Berard and Smith (2008).

Multiple Choice Quiz

A multiple choice quiz adapted from Berard and Smith (2008) was given to participants at the pre and post assessment and following each workshop session. The quiz consisted of 36 multiple choice questions. There were six questions pertaining to each skill presented in the 15-hr class; scenario based questions comprised half of the quiz and conceptually based questions comprised the other half. Six blocks of four questions (one question per tool) were randomly reordered for each presentation of the quiz, as were the questions within those blocks. The participants were instructed to answer all of questions, and mark only one answer per question. “I don’t know” was an option for each question. The Lead Trainer or Co-Trainer collected the quizzes as the participants completed them.
Written quiz answers were scored as correct if the participant circled the letter corresponding to or the entire correct answer. Answers were scored as incorrect if the participant circled the letter corresponding to an incorrect answer, more than one answer was circled or the grader was unable to identify which letter was circled. The graders ignored additional notes or marks on the quizzes. An example of a written assessment can be found in Appendix F.

In-Home Assessments

Home observations were conducted in a multiple baseline format at times predetermined in the intake interview. Prior to the workshop, a semi-random number of observations were determined by a dice roll. When an observation number was rolled for one participant, it was no longer available for the next so both participants were involved in a different number of observations between two and six times. Only one observation took place per day until the planned number of observations was conducted. Each observation lasted for 30 min. No instructions were given beyond telling the parents to act as they typically would during that time of day. Observations took place in various rooms of the participants’ homes and their back or front yards. The camera operator was positioned as unobtrusively as possible in order to obtain the footage. If the participants changed locations, the camera operator followed the child, while keeping the parent in the frame if feasible. For each participant, at least four more observations were conducted immediately following the workshop. Conditions were identical to those during baseline.

Three research assistants scored video records from the home observations using partial-interval and event recording methods. Observations were divided into 30-s
intervals for measures collected using partial-interval recording. If the participant engaged in the behavior of interest at any point during the interval, it was scored as an interval containing the behavior. Data analysis was not conducted on intervals in which the parent and child were not visible within the frame of the video for the entire duration of the interval. The sum of intervals in which the target behavior occurred was divided by the total number of observation intervals to determine the percent of intervals the participant engaged in the target behavior for each observation. Responses measured by partial-interval recording included parent attention, parent delivery of a positive consequence, parental appropriate touch, child junk behavior, and child appropriate behavior. Observations measured by event recording included parental delivery of coercives, open ended questions, and empathy statements. The behaviors of interest were tallied as they occurred during the 30min observation. Response definitions are provided in Table 1.

Interobserver Agreement

Interobserver agreement (IOA) was conducted independently by a second research assistant for at least 30% of data records from each condition for written assessments, role play assessments, and home observations. For written assessments, point-by-point agreement was calculated by dividing the number of agreements on the letter/answer circled by result plus the number of disagreements and multiplying the result by 100. For role play assessments, point-by-point agreement was calculated by dividing the number of agreements per opportunity to respond by the total number of opportunities and multiplying the result by 100. For home observations, three types of IOA were calculated. For interval measures, occurrence and
nonoccurrence IOA were calculated. Occurrence IOA was calculated by dividing the number of intervals for which both observers scored occurrence of the target behavior by the result plus the number of intervals for which only the primary observer scored occurrence of the target behavior and multiplying the result by 100. Nonoccurrence IOA was calculated by dividing the number of intervals for which neither observer scored occurrence of the target behavior by the result plus the number of intervals for which only the primary observer did not score occurrence of the target behavior and multiplying the result by 100. For event measures, agreement was scored by summing the number of occurrences scored by each observer, dividing the smaller number of occurrences by the larger number of occurrences, and multiplying the result by 100. For all measures, no IOA score averaged below 94% and no score for any individual record was below 83%. 
RESULTS

The results of the pre- and post-training role play assessments for Participant one (P1) and Participant two (P2) are shown in Figure 1. Data in this figure show the percent of correct responses per opportunity during the role plays prior to and following the workshop. Role play assessment scores prior to the workshop are represented by the gray columns; assessment scores subsequent to the workshop are represented by the black columns. Following the workshop, both participants showed increases in the percent of skills performed correctly for every tool. Participant 1 correctly performed an average of 47.25% (range = 33.33-60%) of skills correctly prior to the workshop and 68.78% (range = 55.56-100%) following the workshop. Participant 2 showed a more dramatic increase in skills correctly performed, from 41.2% (range = 0-66.67%) prior to and 86.92% (range = 60-100%) after the workshop. Table 3 shows the number of correct and incorrect responses per opportunity for each role play prior to and following the workshop.

Written assessments were conducted to examine skill acquisition in the classroom. The outcome of this assessment is depicted through the average pre- and post-training test scores for both participants in Figure 2. The average score for Participant 1 prior to the workshop was 4.5 of 6 possible correct answers per tool. There was a slight increase to 5.08 following the workshop. The greatest changes were seen for the Stay Close and Pivot tools, depicting an average increase of 1.67 and 1.5. Smaller increases were observed for all other tools except Use Reinforcement, for which Participant 1 answered every question correctly in each assessment. Use a Contract showed a decrease in the average score from 5 to 4. The average total score
for Participant 2 prior to the workshop was 3.58 with an increase to 4.67 following the workshop. The largest changes were seen for the Stay Close and Redirect-Reinforce tools, depicting an average increase of 4.67 and 2.5. There were more subtle increases for the rest of the tools, except Set Expectations which showed an average decrease from 3 to 2.33. Use a Contract also showed a decrease in the average score from 6 to 3.

Session-by-session scores for each participant are presented in Figure 3, which shows the number of questions answered correctly for each tool. Assessment 1 corresponds to the assessment conducted at the pretest. Assessment 2 was given following the first session of the workshop, and Assessment 3 following the second session. Assessment 4 was conducted at the post-test. The solid phase change line crosses the horizontal axis between the final baseline data point and the data point from the workshop session in which each tool was introduced. The dashed phase change line denotes the post-test, following completion of the entire workshop. No solid phase change lines are included for Use Reinforcement or Use a Contract because these tools were not explicitly taught. The arrows show the session in which information about these tools was mentioned. Participant 1 showed high pre-instruction scores for Use Reinforcement and Use a Contract, the two tools not directly taught. Participant 2 displayed a high pre-instruction score for Use a Contract. Participant 1 demonstrated increases in all of the tools directly taught in the workshop, with slight decreases at the post-test for Stay Close and Set Expectations. Use a Contract was the only tool in which Participant 1 showed a decrement following the workshop. Participant 2 displayed a more dramatic increase in scores, entering the workshop with very low
assessment scores for all of the tools that were directly taught. Participant 2 made much higher scores on all of the tools taught except Set Expectations. Participant 2 showed a decrease in scores for Use a Contract.

Overall, with the exception of Set Expectations for Participant 2, both participants scored higher on the written assessment pertaining to the tools directly taught in the workshop. Stay Close and Set Expectations were taught in the first workshop session. Both participants showed substantial increases in scores for Stay Close following instruction, which persisted throughout the workshop and at the post-test. Participant 1 showed only a slight increase in the score for Set Expectations; however, this increase was inconsistent, with two of three assessments showing no change. Participant 2 showed a slight decrease in Set Expectations scores in two of the three assessments following training. Both participants showed sharp increases in scores for Pivot after the first workshop session but before specific training on this tool (which was taught in the second workshop session). These scores maintained following specific training and at the post-test. Both participants also showed increases in scores for Redirect-Reinforce after the first workshop session but before specific training on this tool; however, even higher scores were obtained following explicit training. There were mixed results for Use Reinforcement and Use a Contract, the tools not directly taught in the workshop. Participant 1 scored 6 of 6 possible correct answers on all assessments for Use Reinforcement, and the brief description of Use Reinforcement presented during the first workshop session seemed sufficient to produce higher scores on the written assessment for Participant 2. For Use a Contract, both participants showed lower scores after its reference in the first workshop session.
A central goal of this study was to determine the effects, if any, of the workshop training on parent-child interactions in the home. Data from the home observations are represented in Figures 4-8. Figure 4 shows the number of coercive interactions used by the participants during each home observation. Avoiding Coercion and Punishment is a component of the Stay Close tool. The top panel of Figure 4 shows the number of coercives used per observation for Participant 1 and the middle panel shows outcomes for Participant 2. The lower panel shows the number of coercives averaged across observations prior to and following the workshop for each participant. Participant 1 engaged in a relatively low but consistent rate of coercive interactions across conditions, with a slight decrease observed following the workshop. Participant 1 displayed an average of 5.33 coercive interactions before instruction and 4.25 coercive interactions following instruction. Participant 2 showed a more dramatic change with an average of 16 coercives prior to instruction and 2.35 following instruction.

Other measures related to skill taught in the Stay Close tool are appropriate touch, open-ended questions and empathy statements. Figure 5 shows the number of open-ended questions and empathy statements emitted by participants, as well as the percent of intervals in which parents displayed appropriate touch. The top and middle panels show the data for each of these measures across observations for Participant 1 and 2, respectively. The bottom panel shows the pre- and post-training averages in these measures for both participants. Participant 1 showed high levels of all of the Stay Close components prior to and following the workshop, with pre- and post-training averages of 52.78% to 66.67% for appropriate touch. Participant 1 displayed an average of 4 open ended questions before training and 10 open ended questions
following training. This participant showed an increase in empathy statements from 3.33 statements per observation prior to training to 5.75 following training. Participant 2 showed a decrease in open ended questions, from an average of 10.75 per observation before training to 5.5 following training. A slight increase in appropriate touch was observed following training, from pre-training average of 4.17% to 5%. Participant 2 was not observed to emit empathy statements during any observation.

Use Reinforcement was not directly taught in the workshop, however, a measure of positive consequences was collected to reflect use of that tool in the home. The top panel of Figure 6 shows the percentage of intervals containing positive consequences per observation for Participant 1, the panel shows these results for Participant 2, and the bottom panel shows the average percent of intervals with positive consequences prior to and following the workshop for each participant. Participant 1 delivered positive consequences in 78.33% of intervals before training and 95% of intervals following training. Participant 2 also showed increases in the percentage of intervals containing positive consequences, with a pre-training measure of 2.11% and a post-training measure of 21.25%.

Figures 7 and 8 show target behaviors exhibited by the children during each observation, as well the percentage of intervals containing positive or negative attention that followed those behaviors. Figure 9 summarizes these findings through pre and post averages across observations for both participants. Figure 7 displays the percent of intervals containing appropriate behavior by each child, represented by the closed circles. For each observation, the grey and black bars depict the percent of intervals containing positive or negative attention that followed children’s appropriate behavior.
Both children exhibited high rates of appropriate behavior during all observations. Participant 1 was consistent in delivering large amounts of attention following appropriate behavior; however, a small amount of negative attention, in the form of coercive interaction, was also delivered after the child engaged in appropriate behavior. There was very little change in the percent of intervals with appropriate behavior following the workshop for Child 1. Participant 1 showed an increase in the percentages of intervals with positive attention following appropriate behavior from an average of 84.44% to 98.75%, shown in Figure 9. The quality of attention changed very little with high measures of positive attention and low measures of negative attention observed in each observation. Participant 2 showed more variable outcomes, with the amount of attention delivered following appropriate behavior decreasing from a condition average of 72.26% prior to training to 43.45% following the workshop. However, as seen in Figure 7, positive attention following appropriate behavior was scored during 98.33% of intervals in one session. This score was 36.66 percentage points greater than the second highest measure in baseline, thus inflating the baseline average well above 3 of the 4 data points from that condition. In addition, although a mean decrease in positive attention following appropriate behavior was observed between baseline and post-training, negative attention showed an even more dramatic and sustained decrease, dropping to near zero levels in the last two observations.

The first two panels of Figure 8 depict junk behavior exhibited by the child (filled circles) and positive and negative attention delivery for junk behavior (shaded and filled bars) for Participant Families 1 and 2, respectively. The lower two panels of Figure 8 show the percentage of occasions of child junk behavior followed by attention (either
positive or negative). Prior to the workshop, Participant 1’s child engaged in junk behavior during an average of 36.11% of intervals (Figure 9). Participant 1 provided attention for these behaviors on average 57.78% of intervals. Following the workshop, there was a slight decrease in the average percentage of intervals containing junk behavior to 27.71% and attention for junk behavior on 37.67% of intervals. Prior to the workshop Participant 2’s child engaged in junk behavior during 6.25% of intervals, and Participant 2 provided attention for junk behavior on 41.67% of intervals. Most attention that was delivered following junk behavior was scored as negative. Following the workshop Participant 2 discontinued all attention for junk behavior, as displayed in the last panel of Figure 8, although the child was still engaging in junk behavior during 4.33% of intervals.
DISCUSSION

Children who are exposed to families that deliver extremely harsh or inconsistent consequences are more likely to exhibit behavior problems thus leading to a cycle of coercion, poor parenting practices and conduct problems (Zubrick et al., 2005). Attempts to prevent coercive parental practices have resulted in a myriad of parenting classes and programs. Many of these classes, support groups, and programs have little empirical support indicating that they are efficacious methods of change (Turner & Sanders, 2006). Programs that incorporate evidence-based parent training techniques such as modeling, role play, and feedback within their curriculum state the need for generalization of the skills learned in the classroom to the home environment (Berard & Smith, 2008; Greenspan, 2008; Lutzker & Bigelow, 2002; Van Camp, Vollmer et al., 2008). It has been suggested that researchers should strive to create more comprehensive measurement systems that accurately represent interactions in the typical family environment (Greenspan, 2008; Sapon-Shevin, 1982; Stoutimore, Williams, Neff & Foster, 2008).

The goal of the current study was to evaluate the effects of a condensed parent training curriculum on skill acquisition in the classroom as well as interactions between parents and children in home settings. Both participants showed improvements on role play and written assessments following the workshop. In addition to the skill acquisition demonstrated in the classroom, the participants showed improvements in the home on most measures of parent-child interactions corresponding to the tools taught in the workshop, including a reduction in coercive interactions and attention for junk behavior as well as an increase in delivery of positive consequences.
The BMAPS program reports role play scores to referring agencies as a measure of participant success. A criterion of 70% of opportunities with correct responses overall, with no domain score less than 60%, has been set as “passing” (remedial training is recommended for participants who do not demonstrate passing scores). Post-training role play scores for Participant 1, averaged across skill areas, fell just under BMAPS set passing criteria. The lowest scores were attained for the Use Reinforcement and Use a Contract tools, skills that were not directly addressed in the workshop curriculum. Although Participant 1 did not record passing scores on these tools in role plays, post-training scores did show modest increases over pre-training scores. Participant 2 demonstrated more marked improvements overall and achieved a mean role play score that exceeded the BMAPS passing standard. Both participants showed the least improvement for Set Expectations, a skill that was directly addressed in the training program. The workshop instructor made the unplanned decision to omit the in-class role play demonstration corresponding to this skill due to time constraints during the workshop. The failure to present this role play may be, at least in part, responsible for the lack of more substantial skill acquisition in this area, an account that is consistent with prior research indicating that modeling and role plays are critical components for achievement (Hudson, 1982).

The results of written assessments largely corresponded with those of the role plays. Both participants showed improvements for all directly taught tools except for Set Expectations for Participant 2; again, this outcome may have been due to omission of the role play corresponding to this skill. Both participants showed decrements in post-training scores for Use a Contract, a skill that was not directly taught in the workshop.
Evidence of skill acquisition prior to introduction of the tool was apparent for Pivot and Redirect-Reinforce, perhaps due to presentation of elements of these tools during Stay Close and Set Expectations. The improvements in assessment questions corresponding to the Redirect-Reinforce tool maintained following introduction of the material to the workshop. These outcomes appear to be somewhat reliable, as they correspond with similar effects observed by Berard and Smith (2008).

Inconsistencies between the results of the written assessment and the role plays could be due to several factors. Improvements on role plays that were not reflected in written assessment could be due to the option of selecting “I don’t know” on written assessments. This selection was made often by Participant 2 for questions about skills that had not been thoroughly discussed (e.g., Use a Contract). During the role plays, however, the participants were simply asked to create a contract. Thus, the elimination of an avoidance response may have resulted in increased scores on role plays relative to written quizzes. Conversely, Participant 1 showed incongruously high scores for Use Reinforcement on both pre- and post-training administrations of written exams but scored 33.33% and 50%, on pre- and post-training role plays, respectively. High scores on written assessment that are not reflected in role plays could be due to elements of the general context and specific role play procedures that were unfamiliar and inconsistent with participants’ histories as parents. For example, behaving as a parent towards adults performing the roles of young children may prove difficult for parents of young children. In addition, performing role plays before an audience may be a source of anxiety and discomfort for some participants, resulting in poor role play performances and disparity between role plays and written and home assessments for some tools.
Finally, it is possible that differences between written assessments and role plays simply reflect differences between verbal and skill application repertoires, such that participants were able to recognize correct answers but not apply procedures corresponding to certain skills and vice versa.

Outcomes of the home assessments show that both participants showed improvements in measures associated with several of the skills taught in the workshop. Participant 1 entered the study with high baseline rates of skills promoted within the workshop and low baseline rates of behaviors proscribed within the workshop. Nevertheless, Participant 1 showed slight improvements in all skills assessed in the home. For example, although Participant 1 displayed only a small number of coercives during baseline observations, there was a slight decrease following the workshop, mainly in the areas of sarcasm and criticism. Similarly, all components of Stay Close skills, while high in number during baseline, increased further following the workshop. The same is true for delivery of positive consequences and attention following appropriate behavior. Participant 1’s attention for junk behavior, on the other hand, showed more modest decreases following the workshop. A variable that may have affected Participant 1’s tendency to deliver attention as a consequence is that this participant’s child was diagnosed with autism. Some autism intervention practices emphasize the frequent delivery of consequences for social responding in order to reinforce approximations toward appropriate social behavior (Anderson & Romanczyk, 1999). Because “junk behavior” is by definition age typical, annoying, but not dangerous to person or property, Participant 1 may have been inclined to accept some “junk” behavior as approximations to other behaviors or accept them as a physical
manifestation of the disorder. Participant 1’s general tendency to interact at high levels and present frequent consequences to his/her child may be reflected in high baseline levels of attention for both appropriate and junk behaviors.

Participant 2 showed significant changes in several measured skills during home observations. The number of coercives used during the observations decreased dramatically from a high score of 26 instances prior to the workshop to near zero levels following the workshop. Significantly positive outcomes were not observed for Stay Close behaviors, with decreases in open ended questions, little overall change in appropriate touch, and no use of empathy statements during either baseline or following the workshop. The decrease in open-ended questions following the workshop may have been related to the reduction in coercives emitted by Participant 2. Often, coercive behaviors during baseline appeared in the form of questioning; therefore, reductions in coercive questioning following the workshop may have led to reductions in measures of open-ended questions. Participant 2 displayed increases in delivery of positive consequences. Anecdotal observation indicated that the variety of positive consequences delivered by this participant also increased following the workshop. Results also show that while there was an overall decrease in parent attention for child appropriate behavior (recall that delivery of a positive consequence was scored if positive attention [any duration], breaks from tasks, or delivery of tangibles occurred as a consequence for appropriate behavior, whereas positive attention was scored only if the duration of attention following positive behavior exceeded 5 s; therefore, it was possible for measures of positive consequences to exceed those of attention) following the workshop, the amount of negative attention also drastically decreased. Participant 2
discontinued delivering attention for the child’s junk behavior following the workshop, and a corresponding decrease in the child’s junk behavior was observed. This was a favorable outcome considering that the junk behavior displayed by the child prior to the workshop, while relatively infrequent, often produced attention from the parent. It should be noted that the data from Participant 2’s third baseline observation are quite disparate from other baseline measures, across dependent variables. This can be seen in the low measures of coercives and attention to junk behavior and high measures of open ended questions, delivery of appropriate touch, positive consequences, and positive attention for appropriate behavior. This observation occurred when the parent and child were engaged in a Valentine’s Day activity together, consistent with results of Planned Activities Training (PAT), which emphasizes skill building activities that encourage closeness and interaction and lead to reduced behavior problems and poor parenting practices (Lutzker & Bigelow, 2002).

The current study complements the growing body of evidence about effective parent training practices in a number of ways. First, it was shown that participants acquired a number of skills over the course of a relatively brief workshop. Thus, workshops may represent a time-efficient and economical approach to parent training (Lundeen, 1977). The workshop in this study was adapted from a 15-hr course while maintaining, for most tools, the integrity of the material and presentation. Secondly, a number of researchers have stressed the importance of evaluating the extent to which skill acquisition in the classroom generalizes to interactions between children and their parents in natural settings (Berard & Smith, 2008; Greenspan, 2008; Lutzker & Bigelow, 2002; Van Camp, Vollmer, et al., 2008). In the current study, observations were
conducted in the home prior to and following the workshop. Outcomes showed increases in many behaviors that represented the skills taught in the workshop. Interestingly, in some cases application in the home setting was observed in the absence of strong evidence of skill acquisition in the classroom whereas in others role play and written exam scores showed acquisition of skills that were not observed in the home setting. These outcomes further illustrate the need to measure generalization as well as to determine the conditions under which skills taught in classroom settings will or will not be demonstrated in natural settings. A third strength of the study was to show differentiation in data collected during 30-min observations in the homes of the participants. Many previous studies have utilized briefer home-observation samples, such as 10 min (Greenspan, 2008; Hawes & Dadds, 2006; Lutzker & Bigelow, 2002). Greenspan (2008) expressed concerns that the brief duration of home visits did not permit a sufficient sample of target behaviors. While it was not a goal of this study to compare home assessment lengths, the longer observation period used herein may have led to a more accurate depiction of parent-child interactions.

This study also sought to improve on previous attempts to measure junk behavior. Greenspan (2008) noted the subjective nature of collecting data on junk behavior, identified as behavior that annoys the parent, but is age typical and not harmful to person or property. In order to identify behaviors the parent found annoying, the current study not only obtained information from parents about problem behaviors displayed by their children prior to beginning the home observation but also, as recommended by Greenspan (2008), examined behaviors emitted by the children that produced prohibitions from the parent. The junk behaviors thus identified during
baseline were subsequently scored throughout all of the observations. This method resulted in identification of a list of idiosyncratic behaviors that were scored as junk behavior for each participant. Integrity of this dependent measure, as estimated by IOA averages for junk behavior, were substantially higher than previous attempts to measure junk behavior; in fact, IOA measures were generally high for all measures collected in the home. Response definitions adapted from Powell and Snow (2007), Lutzker and Bigelow (2002), Berard and Smith (2008), Vollmer, Borrero, Wright, Van Camp and Lalli (2001) and Sanders and Glynn (1981) appear to have resulted in relative ease of collection and an overall IOA average of 98.86%.

A limitation of the current study is the inclusion of only two parent-child dyads. Despite aggressive efforts to recruit participants, the small number of participants poses a limitation to the generality of conclusions about the effects of the workshop. Providing childcare during the workshop, offering an additional incentive for participating, and highlighting the small time commitment and lack of disturbance to the family’s typical routine during recruitment are a few potential solutions to this problem. In addition to the small number of participants, the participants in this study were different from each other in that one dyad contained a child with autism whereas the other dyad included a typically developing child. Nevertheless, the generally positive outcomes of the study may be taken to suggest that the curriculum is suitable for families with and without children with autism.

The increasing focus on brief instruction procedures (such as workshops) to train parents and other caregivers in positive and effective behavioral change methods has raised some ethical concerns (Sapon-Shevin, 1982; Stein, 1975). The simplest way to
attenuate this issue is to observe the participant’s direct care interactions to determine if additional training is necessary. For example, the BMAPS program offers a lengthened course as well as brief workshops; therefore, a reasonable and practical approach may be to set a criterion of competency on pre-test measures that would allow a participant to enroll in a workshop rather than an extended course. Similarly, if “passing” scores were not obtained following workshop training, participants could be required to complete more extended training.

Another concern about the study is the potential reactivity of measurement, that the participants would behave differently during home observations simply because their interactions were being observed and video recorded. A study conducted by Penner et al. (2007) analyzed 45 videos of doctor-patient interactions for camera-related changes in behavior. They found that, of the patients who demonstrated changes, the behaviors occurred only a small percent of the total interaction time, typically at the beginning. Penner et al. concluded that video recordings of office visits were a reliable way to study doctor-patient interactions. Other studies have shown similar evidence that, to the extent that reactivity occurs in natural settings, it dissipates over time (Haynes & Horn, 1982). Anecdotally, with the exception of two occasions when one child attempted to talk to the camera operator, the participants' behaviors did not appear to show evidence of reactivity. Intuitively, the measurement likely to be most affected by reactivity would be use of coercives. That is, one might reasonably expect that parents would be reluctant to use aversive procedures to manage their children’s behavior in the presence of observers. Because participants are taught that reacting coercively is something to avoid during the workshop, this effect may be most likely
seen following the workshop. That is, observers may find parents on their “best behavior” immediately following the workshop. Extended observation or follow-up observations after an extended period of time has passed may show the effects, if any, of reactivity as well as the extent of maintenance of skills used following the workshop.

Barth et al. (2005) stated that effective parent training involves assessing the problem, teaching new skills, observing application of the skills at home with the children, and providing feedback to participating parents. While this study attempted to evaluate three of the four components, Barth et al. (2005) implores that future research should extend the current focus on interactions between parents and children in the home and include analyses of the effectiveness of feedback on those interactions. An extension of his recommendation could also relate to instructor feedback involving the effectiveness of particular teaching methods when evaluated in the home. As Hudson (1982) pointed out, group instruction can be just as effective as individual training while cutting the need for resources in half. It is only practical that future research focus on data collection in the home as a useful tool for refining teaching methods in the classroom. Concentration should also be placed on maintenance of skills as shown by Van Camp, Montgomery, et al. (2008). Skill assessment at varying times following training can provide insight to the need for booster training and what methods will be most successful for maintaining those skills. Additionally, as recommended by Greenspan (2008), the types of interactions families regularly engage in should be assessed and quantified. Comparison of the results to families who have completed a parent training program would show if the advances made were within typical (and, presumably, satisfactory) range. Future research efforts that focus refining the
measurement of interactions between parents and their children, exploring further enhancements in parent training methods and ways to maintain the skills trained represent a promising approach to the development of efficient and effective interventions and provision of responsive services to families in need.
Figure 1: Pre and post workshop role play scores. Corresponds to data presented in Table 3.
Figure 2: Pre and post workshop written assessment averages.
Figure 3: Written quiz scores across assessment.
Figure 4: Number of coercive interactions across observations and summarized number of coercives pre and post workshop.
Figure 5: Number of stay close behaviors across observations and summarized number of stay close behaviors pre and post workshop.
Figure 6: Delivery of a positive consequence across observations and summarized delivery of a positive consequence pre and post workshop.
Figure 7: Positive and negative attention delivered for child appropriate behavior across observations.
Figure 8: Positive and negative attention delivered for child junk behavior across observations and percent of attention delivered per occurrence of junk behavior.
Figure 9: Summarized delivery of attention for and occurrence of appropriate and junk behavior pre and post workshop.
Table 1

*Behavior Definitions*

<table>
<thead>
<tr>
<th>Behavior</th>
<th>Definition</th>
</tr>
</thead>
</table>
| **Coercive Interactions and**         | **Negative Attention**  
(parents)  
  Occurrence of any of the following:  
  *Questioning* - asking questions when the parent does not really expect an honest answer and won’t accept the likely answer. These are typically stated one right after the other and the child is not given a chance to answer. Must ask at least two questions in a row. May be the same question. Consider one instance of questioning following 5sec of silence or other conversation.  
  *Arguing* – attempting to force the child to agree and responding to any objection by the child.  
  *Sarcasm/Teasing* – making fun of the child or the child’s behavior.  
  *Force (physical or verbal)* – causing the child pain or creating fear, this includes but is not limited to yelling, slamming doors, spanking or grabbing child  
  *Threats* – a warning by the parent that they will punish. (This is not a restatement of a previous expectation but usually an extreme, new consequence). Include implied threats, for example “You better not…”  
  *Criticism* - putting the child down. Making a negative statement about what the child did or is doing.  
  *Despair/ Pleading/ Hopelessness* – saying or doing things to make the child change because they feel sorry for you or guilty for what they have done to you. A common statement is “what am I going to do with you?”  
  *Logic* – explaining with more than one or two brief statements why a behavior is good or bad for the child.  
  *Taking Away Things & Privileges* – taking away items that the child likes or suspending privileges as a result of their behavior.  
  *Telling on Them to Others* – telling others, usually in the child’s presence, about their undesirable behavior. Exclude discussing medical issues with professionals.  
  *One-upmanship* – responding to a child’s behavior by telling them how bad it was when you were a kid or how difficult your day was now  
  *Silent Treatment* – ignoring the child for extended periods of time. Child must appropriately initiate towards the parent and the initiation must be ignored. Not to be confused with the child engaging in junk behavior to get parents attention and parent waiting for appropriate behavior. |
| **Open Ended Questions**              | (parents)  
  Questions that encourage an elaborate response as well as being fairly broad in their focus. Includes questions beginning with the words “How,” “Who,” “What,” “When,” “Where.” Excludes yes or no questions, rhetorical questions or questions that the parent already clearly knows the answer to, and “Why” questions, usually used in a coercive context |
| **Empathy Statement**                 | (parents)  
  A statement that explicitly or implicitly includes the word ‘you’ (referring to the child) and a descriptor of an emotion (e.g. happy, sad, excited) of the child or the quality (e.g. difficult, exciting, fun, serious) of the child’s past or present situation. Includes statements using both components. Excludes statements of empathy that do not reflect the child’s emotion or situation, instructions or empathy statements stated as a question |
| **Appropriate Touch**                 | (parents)  
  Any direct physical contact between persons (or their clothing) in an affectionate, gentle, pleasant or helping manner. Includes hugging, cuddling, kissing, patting, stroking, tickling, etc. Excludes any direct physical contact made by the adult to the child that is rough, painful, constraining or restricting |
| **Delivering a Positive Consequence** | (parents)  
  Providing a tangible, praise statement, break from task or attention following the occurrence of an appropriate behavior. Attention is limited to the parent joining in the activity the child was already engaged with or initiating conversation about the child’s activity or a topic the child would enjoy. Excludes observing the child engaging in appropriate behavior without delivering a tangible, praise or attention or the use of any coercives during a conversation. |

*(table continues)*
Table 1 *continued*.

<table>
<thead>
<tr>
<th>Behavior</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Positive Attention for Appropriate</strong></td>
<td>Physical or verbal interaction between the parent and child following an instance of acceptable verbal or nonverbal behavior or activity lasting full 5s displayed by the child. Exclude instances where parent and child are close in proximity but no verbal or physical interaction is occurring, parent leaves during interaction or a coercive interaction takes place.</td>
</tr>
<tr>
<td><strong>Behavior</strong></td>
<td></td>
</tr>
<tr>
<td><strong>(parents)</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Positive Attention for Junk</strong></td>
<td>Physical or verbal interaction between the parent and child following an instance of junk behavior displayed by the child. Exclude any instance where junk behavior is not followed by a physical or verbal interaction that refers to the junk, a coercive interaction takes place or if parent must give minimal attention to a dangerous behavior to redirect it</td>
</tr>
<tr>
<td><strong>Behavior</strong></td>
<td></td>
</tr>
<tr>
<td><strong>(parents)</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Appropriate Behavior</strong></td>
<td>Any behaviors engaged in by the child that do not constitute junk behavior (age typical, not harmful to person or property) or that which place the child in danger</td>
</tr>
<tr>
<td><strong>(children)</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Junk Behavior</strong></td>
<td>Occurrence of any of the following:</td>
</tr>
<tr>
<td><strong>(Child 1)</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Mouthing</strong></td>
<td>anytime the child places an inanimate object into his mouth either to lick or hold it there. Items excluded from this measure are the pacifier, yellow T shaped chewy and red swirly ring chewy.</td>
</tr>
<tr>
<td><strong>Standing on head</strong></td>
<td>anytime the child places head down on the floor and attempts to place or places buttocks and or feet in the air. Include only the times the child does this of his own ability and not when placed in this position. Exclude positions in which the child is laying down and knees are bent or feet are in the air.</td>
</tr>
<tr>
<td><strong>Rocking</strong></td>
<td>any instance of the child moving his upper body in a back and forth motion, usually in the high chair while eating, include instance if it occurs in other settings</td>
</tr>
<tr>
<td><strong>Whining</strong></td>
<td>making whimpering sounds of displeasure or crying anytime other than when the child has been physically hurt</td>
</tr>
<tr>
<td><strong>Throwing puzzles</strong></td>
<td>picking up puzzle piece and throwing away from self onto the floor</td>
</tr>
<tr>
<td><strong>Junk Behavior</strong></td>
<td>Occurrence of any of the following:</td>
</tr>
<tr>
<td><strong>(Child 2)</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Scream</strong></td>
<td>to utter a loud, sharp, piercing cry.</td>
</tr>
<tr>
<td><strong>Non-compliance/ purposefully not listening</strong></td>
<td>child does not begin the appropriately requested behavior when the parent specifies or, if immediate implication, within 30s of the instruction or child is looking away from adult when adult is speaking to them.</td>
</tr>
<tr>
<td><strong>Talking Snotty</strong></td>
<td>the child uses a higher pitched tone and defensive tone when speaking.</td>
</tr>
<tr>
<td><strong>Smiling</strong></td>
<td>the child assumes a facial expression indicating pleasure, favor or amusement characterized by an upturning of the corners of the mouth. Include only those instances of smiling as junk behavior when mom and child are discussing an undesirable behavior and possible punishment.</td>
</tr>
<tr>
<td><strong>Jumping</strong></td>
<td>to spring off the ground or other base by a muscular effort of the legs and feet. Include only those instances of jumping as junk behavior when mom is on the phone.</td>
</tr>
<tr>
<td><strong>Licking lips</strong></td>
<td>the child runs their tongue across the outside of their lips.</td>
</tr>
</tbody>
</table>
Table 2

**Interobserver Agreement**

**Summary of Interval Recording IOA (In home observations)**

<table>
<thead>
<tr>
<th>Behaviors</th>
<th>Occurrence Averages</th>
<th>Non-Occurrence Averages</th>
</tr>
</thead>
<tbody>
<tr>
<td>delivery of a positive consequence</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>appropriate touch</td>
<td>98.92%</td>
<td>98.27%</td>
</tr>
<tr>
<td>appropriate child behavior</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>junk child behavior</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>positive attention for appropriate behavior</td>
<td>97.82%</td>
<td>97.97%</td>
</tr>
<tr>
<td>negative attention for appropriate behavior</td>
<td>100%</td>
<td>99.62%</td>
</tr>
<tr>
<td>positive attention for junk behavior</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>negative attention for junk behavior</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>

**Summary of Event Recording IOA (In home observations)**

<table>
<thead>
<tr>
<th>Behaviors</th>
<th>Occurrence Averages</th>
</tr>
</thead>
<tbody>
<tr>
<td>coercive interactions</td>
<td>94.60%</td>
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<tr>
<td>open ended questions</td>
<td>95.58%</td>
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<tr>
<td>empathy statements</td>
<td>98%</td>
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**Assessment**

<table>
<thead>
<tr>
<th>Assessment</th>
<th>Average IOA</th>
</tr>
</thead>
<tbody>
<tr>
<td>in vivo role plays</td>
<td>94%</td>
</tr>
<tr>
<td>written exam</td>
<td>98.61%</td>
</tr>
</tbody>
</table>
Table 3

*Role Play Assessment Results*

<table>
<thead>
<tr>
<th>Participant</th>
<th>Stay Close</th>
<th></th>
<th>Set Expectations</th>
<th></th>
<th>Pivot</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Yes No</td>
<td>N/A</td>
<td>% Correct</td>
<td>Yes No</td>
<td>N/A</td>
<td>% Correct</td>
<td>Yes No</td>
</tr>
<tr>
<td>1 pre</td>
<td>5 5 0 50</td>
<td>8 7 1 46.15</td>
<td>3 2 0 60</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>post</td>
<td>7 3 0 70</td>
<td>8 6 0 57.14</td>
<td>4 1 0 80</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 pre</td>
<td>5 4 1 55.56</td>
<td>5 7 2 41.67</td>
<td>0 5 0 0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>post</td>
<td>10 0 0 100</td>
<td>8 5 1 61.54</td>
<td>3 2 0 60</td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Redirect-Reinforce</th>
<th>Use Reinforcement</th>
<th>Use a Contract</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Participant</td>
<td>Yes No</td>
<td>N/A</td>
<td>% Correct</td>
</tr>
<tr>
<td>1 pre</td>
<td>3 3 1 50</td>
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<td>4 5 0 44.44</td>
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<td>post</td>
<td>7 0 0 100</td>
<td>6 0 0 100</td>
<td>9 0 0 100</td>
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</tbody>
</table>
APPENDIX A

PARTICIPANT INFORMED CONSENT FORM
Title of Study: An evaluation of the effects of an abridged parent-training curriculum on parent-child interactions in the home

Principal Investigator: Allison M. Jones, a graduate student in the University of North Texas (UNT) Department of Behavior Analysis.

Purpose of the Study:

You and your child/children are being asked to participate in a research study to evaluate the effectiveness of a condensed curriculum designed to teach parents to manage their child’s behavior.

Study Procedures:

You will attend a meeting before participating. At this meeting you and a graduate student will be videotaped acting out or role-playing a few parent-child interactions. You will also take a brief multiple choice quiz and will fill out a questionnaire about demographic information and interactions you currently have with your child/children. This meeting should last ½ hour to one hour. Then, you and your child/children will be observed in your home during a time of typical interactions. For example, observations may occur when your child comes home from school, during play times, or when the children are doing chores. Three-to-six observations will occur. The investigator will prearrange times with you that fit your schedule. You will then be invited to attend a parenting workshop. The workshop involves a lecture, active responding by participants (for example, asking and answering questions), and acting out interactions that you may have with your children with the instructors. The workshop will last for 8 hours, divided over the course of two days. Within 1-3 weeks after you finish the workshop you will attend another meeting identical to the one you attended before training, and will be observed again (three-to-six sessions) in your home interacting with your children. Pre and post workshop observations will be scheduled around your availability. Each home observation length will vary by situation, however you can anticipate approximately one hour during which you will be videotaped interacting with your child. Only the research team will have access to these videos and they will be destroyed once data collection is complete.

Foreseeable Risks:

The potential risks involved in this study are that you or your child may experience anxiety based on having observers in your home. The investigator will attempt to minimize any disruptive influence of the observation procedures on the family. If you or your child/children continue to experience anxiety you may withdraw from the study without penalty or loss of benefits (this
means that you will still be able to attend the parent training workshop). It may be inconvenient to have an observer in your home for an extended time. If so, the investigator will attempt to schedule observations at your convenience or you may withdraw from the study without penalty or loss of benefits. In addition, if the investigator observes evidence of child mistreatment or abuse, that will be reported to the appropriate law enforcement agency.

**Benefits to the Subjects or Others:**

Parents who participate in this study may benefit by improving their ability to use effective behavior management strategies and build rapport with their children.

**Compensation for Participants:**

Study participants will receive free admission to the entire parent training workshop as compensation for their participation as well as feedback on their performance in the workshop.

**Procedures for Maintaining Confidentiality of Research Records:**

All signed consent forms, paper work and video will be kept in a locked file cabinet in the Behavior Management and Parenting Services (BMAPS) office at the University of North Texas. Only individuals who are a part of the research team will have access to the locked file cabinet. Participants will be assigned a unique participant number at the beginning of the study and at no time during the study will any information appear on any research record that would allow anyone without access to the code to link the documents to the participant. The code will be kept in a password protected computer file, available only to Allison Jones and Richard Smith and will be destroyed when all data collection is complete. All data sheets, checklists, and video will be labeled using the participant code.

Video images of role plays will stored on a password protected external hard drive and will be destroyed after the role plays have been scored. No names or other personally identifiable information will be used in any publications or presentations resulting from this study.

**Questions about the Study**

If you have any questions about the study, you may contact Allison M. Jones at telephone number 940-369-8668 or Dr. Richard G. Smith, UNT Department of Behavior Analysis, at telephone number 940-565-4970.

**Review for the Protection of Participants:**

This research study has been reviewed and approved by the UNT Institutional Review Board (IRB). The UNT IRB can be contacted at (940) 565-3940 with any questions regarding the rights of research subjects.

**Research Participants’ Rights:**

Your signature below indicates that you have read or have had read to you all of the above and that you confirm all of the following:
• Allison Jones or a research assistant has explained the study to you and answered all of your questions. You have been told the possible benefits and the potential risks and/or discomforts of the study.
• You understand that you and your child/children do not have to take part in this study, and your refusal to participate or your decision to withdraw will involve no penalty or loss of rights or benefits. The study personnel may choose to stop your participation at any time.
• You understand why the study is being conducted and how it will be performed.
• You understand your rights as a research participant and you voluntarily consent to your participation in this study.
• For children under seven years of age, you understand their rights as a research participant and you voluntarily consent to the child’s/children’s participation in this study.
• You have been told you will receive a copy of this form.

Printed Name of Parent or Guardian                                      Printed name of Child/Children

______________________________________________________  ________________________
Signature of Parent or Guardian                                         Date

For the Principal Investigator or Designee:

I certify that I have reviewed the contents of this form with the participant signing above. I have explained the possible benefits and the potential risks and/or discomforts of the study. It is my opinion that the parent or guardian understood the explanation.

__________________________________________________________  ___________
Signature of Principal Investigator or Designee                     Date
APPENDIX B

CHILD ASSENT FORM
University of North Texas Institutional Review Board
Child Assent Form

You are being asked to be part of a research project being done by the University of North Texas Department of Behavior Analysis.

This study involves workshops that your parents will attend. Before and after the workshops, you and your parents will be videotaped to see how you act around each other. This information will tell if the workshops were helpful or not.

You will be asked to act as you normally would in everyday situations, such as playing, doing homework or chores, while being videotaped at home with your mom or dad. That will take about a half hour of your time three to six times a week for two weeks.

If you decide to be part of this study, please remember you can stop participating any time you want to.

If you would like to be part of this study, please sign your name below.

__________________________                                _______________
Printed Name of Child      Date

__________________________                                _______________
Signature of Child      Date

__________________________                                _______________
Signature of Principal Investigator                             Date

Waiver of Assent

For children 7-17 years of age, assent of the child may be waived if the capability of the child to give assent is judged limited by age, maturity, or psychological state in which case, you understand your child/children’s rights as a research participant and you voluntarily consent to your child’s/children’s participation in this study.

The assent of ____________________________ (name or child) was waived due to:

________ Age

________ Maturity

________ Psychological State

_______________________________                         ______________
Signature of Parent or Guardian                        Date
APPENDIX C

PARTICIPANT INTAKE FORM
1. Caregiver’s Spouse or Partner’s Name:

Last ____________________________________ First ____________________________________

2. Gender:

- Male
- Female

3. DOB:

MM / DD / YYYY

4. Age:

5. Mailing Address:

Street ________________________________ City ____________________________ State ______ Zip Code __________

6. Caregiver’s Telephone Number:

( ) _______ - ________
(Area Code)

7. E-mail Address:

8. Caregiver’s Relationship to Child(ren)

Relative

- Parents or Step Parents
- Grandparents or Step Grandparents
- Other Relative: Great Grandparents, Aunt, Uncle, etc.

Non-relative

- Family Friend
- Temporary foster placement
- Foster to adopt

9. Caregiver’s Education:

Highest education level:

- Less than High School Diploma
- High School Diploma
- Some college, including Associate Degree
- Bachelor’s Degree
- Post-graduate work or advanced degree

10. Household:

Are you a single parent

- Yes
- No

Total # in Household:

____

# of children

- 0-5
- 6-10
- 11+

11. Caregiver’s Race:

- White (alone) – Non Hispanic
- White (alone) – Hispanic
- Amer. Indian / Alaska Native (alone)
- Asian (alone)
- Nat. Hawaiian /Pacific Islander (alone)
- Black / African American (alone)
- Other: ______________________________
- Multiple races: ______________________________
- Unknown

Spouse or Partner’s Race:

- White (alone) – Non Hispanic
- White (alone) – Hispanic
- Amer. Indian / Alaska Native (alone)
- Asian (alone)
- Nat. Hawaiian /Pacific Islander (alone)
- Black / African American (alone)
- Other: ______________________________
- Multiple races: ______________________________
- Unknown
### Section B: Child Information:
1. Complete information for all children 18 years of age or younger in household.

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<thead>
<tr>
<th></th>
<th>Child’s Full Name:</th>
<th>Gender:</th>
<th>DOB:</th>
<th>Age:</th>
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<td></td>
<td></td>
<td>□ Male</td>
<td>/ /</td>
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<td>Last, First MI</td>
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</table>

2. What home situations do you find challenging with your child?
   - □ Chores
   - □ Play time
   - □ Bed time
   - □ Homework ___ Alone
   - □ Meal time ___ With family/friends
   - □ Other: _______________________

3. What challenging behaviors does your child exhibit? (Please include behaviors that you simply find annoying)
   - □ Hair playing
   - □ Biting
   - □ Kicking
   - □ Scratching
   - □ Pushing
   - □ Inappropriate Touching
   - □ Hitting
   - □ Spitting
   - □ Hair pulling
   - □ Non-compliance
   - □ Complaining
   - □ Swearing
   - □ Other: _______________________

   What do you expect to learn from the workshop?

   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________

By signing this form, the Caregiver verifies that all information provided on this form is true and accurate to the best of her/his knowledge.

_________________                    ________________________  _______________
BMAPS Staff  Caregiver Signature               Date
APPENDIX D

ROLE PLAY ASSESSMENT SCRIPTS
Set Expectations

Describe the Setting
“I am eleven. I rarely make my bed. The last time I made it was a week ago last Thursday. You want me to make my bed every day. You have come up with a plan to help me do this. The plan is that on the days that I make my bed before breakfast I will earn the privilege of riding my bike to school. I love riding my bike to school. If I do not make my bed before breakfast I will fail to earn the privilege of riding my bike and must ride the bus. This scenario is where you are sitting down with me to tell me the plan for the first time. So, set the scene. Where are we when this conversation begins?”

Components of the Role Play

☐ Follow the parent's prompts regarding the setting. Wait for parent to initiate conversation.
☐ The first time the parent mentions the expectation, Say "Ah, man. I hate making the stupid bed." (OPP to Give Empathy)
☐ Ask "Why do I even have to make my bed? (OPP to Explain Benefits)
☐ After parents answers "Why...," say "Whatever" with a negative tone of voice. (OPP to Ignore Junk)
☐ Ask "What if [parent's consequence won't be available/possible]?" (OPP to Negotiate)
☐ Accept the parent's negotiation or refusal to negotiate.
☐ Prior to concluding, restate the plan in a negative tone of voice. Say "[The expectation] sucks". (OPP to Praise Restatement)

Conclusion: ☐ Say "Ok. It's a deal."

If - Then Scenarios

If parent begins by praising behavior. ☐ Say “Thanks. I do it all the time.” (OPP to Ignore Junk)
If parent begins by referring to the child's failure to make the bed ☐ Say “Yes, I do. I make my bed all the time.” (OPP to Ignore Junk)
If the parent asks you to restate the plan ☐ Restate expectations and consequences as the parent has described them
If parent mentions the bus ☐ Say "Not the bus. The bus smells like pee." (OPP to Ignore Junk)
If parent mentions positive consequence ☐ Increase eye contact. Say "That's cool."
Use Reinforcement

Describe the Setting

"[Co-trainer] and I are your 5 and 6 year old children. We are playing in our room. Often when we play together, we fight. You are about to walk into the room that we are in. Show us what you would do."

Components of the Role Play

☐ Roll a car back and forth to each other. Talk to each other. Take turns.
☐ Crash the car; Bump it into a chair or table leg; make crashing sounds *(OPP to Ignore Junk 1)*
☐ "Let's get Barbie and run over her and her guts will splatter all over the road" *(OPP to Ignore Junk 2)*
☐ If parent does nothing, continue above for one minute

Conclusion: End the role play after one minute passes.

If - Then Scenarios

If the parent asks what you are doing  ☐ Say "Playing"
If the parent asks what you are playing  ☐ Say "Cars"
Pivot:

Describe the Setting

"[Co-trainer] and I are your 5 and 6 year old children. We are playing in our room like before, only now it is bedtime. You come in to tell us to go brush our teeth. Show us how you would do that."

Components of the Role Play

Co- Trainer

- Roll a car back and forth to each other. Talk to each other. Take turns.
- When parent says to go brush your teeth, say "Okay," and go to the 'sink' and brush your teeth for one minute. Say, "I'm done."
- Follow any prompts that the parent gives

Trainer

- Roll a car back and forth to each other. Talk to each other. Take turns.
- When parent says to go brush your teeth, say, "I don't wanna brush my stupid teeth." (OPP to Ignore Junk 1)
- Stay where you are on the floor and whine for 15 seconds (OPP to Ignore Junk 2)
- Throw the car down on the floor (OPP to Ignore Junk 3)
- Walk to the sink and begin brushing while you do the following
- Say, "This toothpaste tastes bad" (OPP to Ignore Junk 4)
- Say, "I am not freaking tired" (OPP to Ignore Junk 5)
- Say, "Quit hogging the sink," and push the co-trainer (OPP to Ignore Junk 6)
- Brush your teeth for 15 seconds with no Junk

Conclusion:

- Follow any prompts that the parent gives
Redirect - Use Reinforcement

Describe the Setting
"You are watching your two year old play next to the bassinet where there is an 3 month old baby sleeping. You see the two year old throw a hard toy into the bassinet. You are not close enough to stop it from happening. Show us what you would do after you see it happen."

Components of the Role Play
- Sitting on the floor, toss the hard toy into the bassinet, while saying "Catch Baby," with a smile.
- Repeat above until parent approaches you
- After parent approaches to stop you, protest "I was playing catch with the baby," "why can't Baby play?" (OPP to Ignore Junk 1)
- Continue to try to play catch or protest until parent either directs you to something else or completely removes the toy
  - If parent does not redirect or remove the toy continue to throw the toy into the bassinet for 1 minute, then say "I am going to play with my cars now" and move toward the car to play
- Engage in directed activity (or playing with the car) with no protest

Conclusion: End role play after parent praises participation in new activity or 30 seconds has passed.

If - Then Scenarios
- If parent removes the toy
  - whine and cry until redirected to another activity
- If redirected to another activity
  - show hesitation, but go willingly and begin suggested activity
Stay Close:

Describe the Setting

“I am eleven. I am about to get home from school. You are in the kitchen getting a drink when I come in. When you see me you notice that I look sad. Show me what you would do.”

Components of the Role Play

☐ Walk in the door and flop down on a chair beyond arm’s reach from the parent.
☐ Kick a table or chair 2-3 times as you come in the room (OPP to Ignore Junk 1)
☐ "I never want to go back to school again. It's not fun anymore." (OPP for App Facial Exp 1)
☐ "My friend is moving away"
☐ "Jimmy's dad is stupid." (OPP to Ignore Junk 2)
☐ Look for opportunity to describe at length Jimmy's new home. (OPP to Listen/Interrupt)
  e.g. Parent asks where Jimmy is moving to.
  Parent pauses for several seconds without saying anything.
☐ Ask: "Can Jimmy come over for dinner?" (OPP for App Facial Exp 2)
  ☐ If parent says yes, change facial expression to happy and go to the conclusion.
  ☐ If parent says no, go to the conclusion.

Conclusion: ☐ Ask: "Can I go call him?"

If - Then Scenarios

If the parent makes empathy statements ☐ Look at the parent more.
If the parent asks open-ended questions ☐ Answer their questions.
If the parent tries to solve your problem ☐ Give responses that indicate why the solution isn’t good enough.

Parents offers to email or call "But we can’t ride bikes anymore."
Parent offers to go visit Jimmy "We were gonna build a treehouse this summer."
Parents offers to help build treehouse "We were gonna have a sign that says No Parents Allowed."
Parent offers to have a sleepover "They’re too busy packing."
Parent says you can make new friends "None of the other kids like me."
**SET EXPECTATIONS**

<table>
<thead>
<tr>
<th></th>
<th>Time away from the behv., any <strong>time</strong> other than</th>
<th>Participant Code:</th>
<th>Pre / Post Date</th>
<th>Examples: (when scoring Yes)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>In the morning before school</td>
<td>Yes</td>
<td>No</td>
<td>N/A</td>
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<td></td>
<td>After the parent notices unmade bed</td>
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<td>2</td>
<td>Uninterrupted place, any <strong>place</strong> other than</td>
<td>Yes</td>
<td>No</td>
<td>N/A</td>
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<td></td>
<td>In the child’s room near the bed</td>
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<td>In a place containing distractions</td>
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<td>3</td>
<td>Positive statement, either</td>
<td>Yes</td>
<td>No</td>
<td>N/A</td>
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<td></td>
<td>A description of an event to earn</td>
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<td>A descriptive praise statement</td>
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<td>4</td>
<td>The participant states <strong>when</strong> the ‘child’ must have the bed made by each day</td>
<td>Yes</td>
<td>No</td>
<td>Examples</td>
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<td>5</td>
<td>The participant makes an empathy statement</td>
<td>Yes</td>
<td>No</td>
<td>Examples</td>
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<td>an explicit or implicit use of the word ‘you’ and a descriptor of an emotion</td>
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<td>6</td>
<td>If the ‘child’ asks “why do I have to make the bed, anyways?”</td>
<td>Yes</td>
<td>No</td>
<td>Examples: (when scoring Yes)</td>
</tr>
<tr>
<td></td>
<td>The participant describes something that the <strong>child</strong> will gain from making their bed</td>
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<td>If the ‘child’ does not ask, mark as N/A</td>
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<td>Examples</td>
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<tr>
<td>7</td>
<td>When the ‘child’ asks “what happens when it is raining outside?”</td>
<td>Yes</td>
<td>No</td>
<td>Examples</td>
</tr>
<tr>
<td></td>
<td>The participant either</td>
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<td></td>
<td>gives an alternative way for the child to get to school that is not riding the bus</td>
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<td>gives the option of an alternative positive consequence for making the bed</td>
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<td>8</td>
<td>The participant asks the child to restate or repeat the behavior (making the bed) and the consequences</td>
<td>Yes</td>
<td>No</td>
<td>Examples</td>
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</tbody>
</table>
| 10 | The participant does **NOT** verbally or physically attend to the behavior of the child when the child  
   - Says “the bus smells like pee”  
   - Says “Little kids **pee on the bus**” | Yes | No | N/A | **Mark N/A if child does not make this or a similar statement**  
   Example  
   - The parent continues with the conversation  
     - “so, when you make your bed, you can ride your bike” |
| 11 | The participant does **NOT** verbally or physically attend to the behavior of the child when the child  
   - Says, “I hate making my **stupid bed**” | Yes | No | N/A | **Mark N/A if child does not make this or a similar statement**  
   Example  
   - The parent continues with the conversation  
     - “so, when you make your bed, you can ride your bike” |
| 12 | The participant does **NOT** verbally or physically attend to the behavior of the child when the child  
   - Makes any **other negative** comments about the bus or making their bed | Yes | No | N/A | **Mark N/A if child does not make this or a similar statement**  
   Example  
   - The parent continues with the conversation  
     - “so, when you make your bed, you can ride your bike” |
| 13 | The participant does **NOT** verbally or physically attend to the behavior of the child when the child  
   - Engages in **physical junk behavior** that indicates that they are **not paying attention** such as: putting feet on the table, looking at other papers or magazine, looking away | Yes | No | N/A | **Mark N/A if child does not make these or similar responses**  
   Example  
   - The parent continues with the conversation  
     - “so, what is the deal we are talking about” |
| 14 | The participant does **NOT** verbally or physically attend to the behavior of the child when the child  
   - Engages in **physical junk behavior** that indicates that they are **not paying attention** such as: putting feet on the table, looking at other papers or magazine, looking away | Yes | No | N/A | **Mark N/A if child does not make these or similar responses**  
   Example  
   - The parent continues with the conversation  
     - “so, what is the deal we are talking about” |
## USE REINFORCEMENT

### Observer: ___________________  Participant Code: ____________  Pre / Post Date ____________

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>Yes</th>
<th>No</th>
<th>Examples</th>
<th></th>
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</thead>
</table>
| 1 | The participant states an appropriate behavior that the children/child is engaging in |     |    | - “I love how you guys are playing nicely”  
- “It is great that you guys are sharing”  
- “You two are playing so well”                                                |   |
| 2 | The participant provides a positive consequence for engaging in an appropriate behavior  
- Mark yes if this occurs at any point |     |    | - The participant states “I love how you guys are playing nicely!” at any point during the role play  
- The participant states, “I like how you shared,” at any point during the role play |   |
| 3 | The participant provides a positive consequence for engaging in an appropriate behavior either  
- Within 3 seconds of stating the appropriate behavior if it is a descriptive praise statement  
- Within 3 seconds of when the 1st child asks the 2nd child to switch toys appropriately (appropriate behavior/sharing) |     |    | - The participant states “I love how you guys are playing nicely!” while the children are playing  
- The participant states “You are sharing.” And within 3 sec. states “Great Job”  
- The children ‘share’ the toy and within 3 sec the parent states “that was nice” |   |
| 4 | Appropriate Tone of Voice and Body Language  
- Mark yes if there is an obvious appropriate facial expression, tone of voice, and posture stance so that the parent looks approachable |     |    | - Participant’s tone of voice remains calm and quiet  
- Participant’s body in a relaxed sitting or standing position |   |
| 5 | The participant does NOT verbally or physically attend to the behavior of the child when the children say, “Let’s run over the kitty” |     |    | - Mark N/A if child does not make this or a similar statement  
Example:  
The parent continues with the conversation  
- “You guys are having a great time playing!”  
- “What are you playing?” |   |
| 6 | The participant does NOT verbally or physically attend to the behavior of the child when the children  
- Make loud noises with the car  
- Pretend to crash the car |     |    | - Mark N/A if child does not make this or a similar statement  
Example:  
The participant continues with the conversation  
- “This is fun”  
The participant just plays along |   |
### PIVOT

**Observer:** _______________  **Participant Code:** ___________  **Pre / Post Date** ____________

<table>
<thead>
<tr>
<th>Child 1 - complains about, and hesitates to brush their teeth</th>
<th>Child 2 - complies with the request to brush their teeth</th>
</tr>
</thead>
</table>
| 1   | The participant does NOT verbally or physically attend to the behavior of ‘child 1’ or make statements about the behavior of the ‘child 1’ to ‘child 2’ when ‘child 1’
- Says “I don’t want to brush my teeth” or “it is not time to go to bed” or “I am not done playing

<table>
<thead>
<tr>
<th>Mark N/A if child does not make this or a similar statement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Examples:</td>
</tr>
<tr>
<td>- Participant says nothing at all</td>
</tr>
<tr>
<td>- Participant makes praise statements to child 2</td>
</tr>
</tbody>
</table>
| 2   | The participant does NOT verbally or physically attend to the behavior of ‘child 1’ or make statements about the behavior of the ‘child 1’ to ‘child 2’ when ‘child 1’shoves ‘child 2’
| Yes  | No  | N/A |
| Mark N/A if child does not shove other child |
| Examples:                                                 |
| - Participant says nothing at all                          |
| - Participant makes praise statements to child 2           |
| 3   | The participant attends to child 2 for a portion of, or the entire duration of, the time that child 1 is making negative statements about brushing their teeth. Either
- The participant praises child 2 for brushing teeth
- The participant is engaging in polite conversation with child 2

| Yes  | No  | X   |
| Examples:                                                 |
| - Participant says to child 2 “thanks for listening to mommy and brushing your teeth when I ask” |
| - Participant say to child 2 “what book would you like to read tonight?” |
| - Participant say to child 2 “How was school today?” |
| 4   | The participant provides a positive consequence for child 1 for engaging in an appropriate behavior
- Mark yes if this occurs at any point during the role play

| Yes  | No  | X   |
| Examples:                                                 |
| - The participant states “thanks for going to brush your teeth” at any point during the role play |
| - The participant states “Awesome getting ready for bed.” At any point in the role play |
| 5   | The participant provides a positive consequence for child 1 for engaging in an appropriate behavior either
- Within 10 seconds of the point when the child walks to the sink to brush their teeth or of the point when the child stops making negative statements

| Yes  | No  | X   |
| Examples:                                                 |
| - The participant states “thanks for going to brush your teeth” when child stands to go brush his/her teeth |
| - The participant states “Awesome getting ready for bed.” While child 1 is getting ready for bed |
| - Within 10 sec of child 1 beginning to brush the participant states, “which book would you like to read tonight?” |

---

67
# REDIRECT, USE REINFORCEMENT

Observer: ___________________  Participant Code: ___________  Pre / Post Date ____________

<table>
<thead>
<tr>
<th></th>
<th>The participant moves within arm’s reach of the child before saying anything to the child</th>
<th>Yes</th>
<th>No</th>
<th>Examples:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
<td></td>
<td></td>
<td>- The participant moves toward the child and takes the hard toy without saying anything</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td></td>
<td></td>
<td>- The participant moves toward the child and takes the toy while saying calmly, “look at this neat toy.”</td>
</tr>
<tr>
<td></td>
<td>Examples:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- The participant moves toward the child and takes the hard toy without saying anything</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- The participant moves toward the child and takes the toy while saying calmly,</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>“look at this neat toy.”</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>The participant stops the child from throwing the toy into the bassinet.</td>
<td>Yes</td>
<td>No</td>
<td>Examples:</td>
</tr>
<tr>
<td></td>
<td>- If the child throws the toy into the bassinet a 2nd time, score this as no</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Yes</td>
<td></td>
<td></td>
<td>- The participant moves toward the child and grabs the toy before the second throw</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td></td>
<td></td>
<td>- The participant says, “no stop!” but catches the toy before the toy enters the bassinet a second time</td>
</tr>
<tr>
<td></td>
<td>Examples:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- The participant moves toward the child and grabs the toy before the second throw</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- The participant says, “no stop!” but catches the toy before the toy enters the bassinet a second time</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>The participant states an appropriate alternative behavior for the child to engage in</td>
<td>Yes</td>
<td>No</td>
<td>Examples</td>
</tr>
<tr>
<td></td>
<td>- Must be positive, and specific</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- This does not include asking the child what activity they would like to do</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Yes</td>
<td></td>
<td></td>
<td>- Participant says “hey kiddo, I want you to play catch with mommy” and participant throws toy to child</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td></td>
<td></td>
<td>- Participant gives child a soft toy to play with the baby</td>
</tr>
<tr>
<td></td>
<td>Examples:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Participant says “hey kiddo, I want you to play catch with mommy” and participant throws toy to child</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Participant gives child a soft toy to play with the baby</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>4</td>
<td>The participant provides a positive consequence for engaging in an appropriate behavior at any point during the role play</td>
<td>Yes</td>
<td>No</td>
<td>Examples</td>
</tr>
<tr>
<td></td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>No</td>
<td></td>
<td></td>
<td>- Participant states “playing catch with you is fun,” at any time</td>
</tr>
<tr>
<td></td>
<td>N/A</td>
<td></td>
<td></td>
<td>- Participant says, “I love how you are playing quietly” at any time</td>
</tr>
<tr>
<td>5</td>
<td>The participant models for or guides the child to engage in the appropriate behavior</td>
<td>Yes</td>
<td>No</td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td>Yes</td>
<td></td>
<td></td>
<td>Mark N/A if child immediately does the app. behavior</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td></td>
<td></td>
<td>Examples</td>
</tr>
<tr>
<td></td>
<td>N/A</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Examples:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Parent throws the object to the child and says “like this”</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Parent helps the child hold the baby the right way</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>The participant provides a positive consequence for engaging in an appropriate behavior within 3 seconds of the child engaging in either appropriate behavior specified by participant (#3) or other appropriate behavior (if none specified by participant) that is anything other than hitting the baby</td>
<td>Yes</td>
<td>No</td>
<td>Examples</td>
</tr>
<tr>
<td></td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>No</td>
<td></td>
<td></td>
<td>- Participant states “this is great, playing catch with mommy is fun” while child is throwing</td>
</tr>
<tr>
<td></td>
<td>Examples:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Participant states “this is great, playing catch with mommy is fun” while child is throwing</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>- Participant says, “I love how you are playing by yourself with the cars” within</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>3 sec of child beginning to play</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>- Participant plays with the child, smiles and says, “this is fun” while playing</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>7</td>
<td>The participant does NOT verbally or physically attend to the behavior of the child when the child</td>
<td>Yes</td>
<td>No</td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td>- Says “the baby is stupid”</td>
<td></td>
<td></td>
<td>Mark N/A if child does not make this or a similar statement</td>
</tr>
<tr>
<td></td>
<td>Whines and tries to continue throwing</td>
<td></td>
<td></td>
<td>Examples</td>
</tr>
<tr>
<td></td>
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</tr>
</tbody>
</table>

68
|   | The participant moves close to the child within 15 seconds of child ‘entering the room’  
|   |   • This includes the child and parent moving toward each other  
|   |   • This does not include the child moving toward the participant and the participant remaining stationary  | Yes | No | N/A | Score N/A if parent is seated on couch and child walks in the room and sits next to parent  
|   |   Examples:  
|   |   • Participant moves from the bookshelf to where the child is seated on the couch within 15 sec of the child walking in the room  
|   |   • Participant and child meet on the couch next to each other within 15 sec of child entering the room  |
| 2 | The participant makes physical contact with the child in some way at least once during the role play | Yes | No | Yes | Examples:  
|   |   • The participant puts an arm around the child for the duration of the role play  
|   |   • The participant pats the child on the shoulder once at the beginning of the role play  |
| 3 | Appropriate Tone of Voice and Body Language  
|   |   Mark yes  
|   |   • if there is an obvious appropriate facial expression, tone of voice, and posture stance so that the parent looks approachable  | Yes | No | Yes | Examples  
|   |   • Participant’s tone of voice remains calm and quiet  
|   |   • Participant’s body in a relaxed sitting or standing position  |
| 4 | Participant asks one open-ended question  
|   |   • This does not include questions that begin with the word “why”  | Yes | No | Yes | Examples  
|   |   • “where is your friend moving to?”  
|   |   • “how did you find out about her moving?”  |
| 5 | Participant asks more than one open-ended question  
|   |   • This does not include questions that begin with the word “why”  | Yes | No | Yes | Examples  
|   |   • “where is your friend moving to?”  
|   |   • “what kind of job did her father get?”  |
| 6 | Participant listens to while the child speaks  
|   |   • The parent talks less than the child  
|   |   • Mark no if the participant attempts to problem solve unless the child asks for a particular solution  | Yes | No | Yes | Examples  
|   |   • Participant does not provide solution to any problem stated by the child  
|   |   Child asks, “mom, how will I be able to keep in touch?” and participant replies with, “you can either write emails or letters.”  |
| 7 | The participant makes an empathy statement. This is a statement that includes an explicit or implicit use of the word ‘you’ and a descriptor of an emotion  | Yes | No | Yes | Examples  
|   |   • “This must be difficult” (the ‘you’ is implied in this statement)  
<p>|   |   • “You seem upset about that”  |</p>
<table>
<thead>
<tr>
<th></th>
<th>The participant does <strong>NOT</strong> verbally or physically attend to the behavior of the child when the child</th>
</tr>
</thead>
</table>
|   | • Says “why does her **stupid** dad have to get a job anyways”  
   | • Mark as yes if the participant problem solves, but does not acknowledge the word ‘stupid’  
   | Yes | No | N/A | *Mark N/A if child does not make this or a similar statement*  
   |    |    |    | Example  
   |    |    |    | • The participant says, “I know this must be tough for you”  
   |    |    |    | • The participant asks “what kind of job is he getting”  
   |    |    |    | • The participant says “he has to get a job to support his family”  
<table>
<thead>
<tr>
<th></th>
<th>The participant does <strong>NOT</strong> verbally or physically attend to the behavior of the child when the child</th>
</tr>
</thead>
</table>
|   | • Makes any other **negative comments** about other children at school  
   | Yes | No | N/A | *Mark N/A if child does not make this or a similar statement*  
   |    |    |    | Example  
   |    |    |    | • The participant says, “I know this must be tough for you”  
   |    |    |    | • The participant asks “what kind of job is he getting”  
   |    |    |    | • The participant says “he has to get a job to support his family”  
<table>
<thead>
<tr>
<th></th>
<th>The participant does <strong>NOT</strong> verbally or physically attend to the behavior of the child when the child</th>
</tr>
</thead>
</table>
|   | • Engages in **physical junk behavior** that indicates that they are **not paying attention**  
   | | | | such as:  
   | | | | • putting feet on the table, looking at other papers or magazine, looking away  
   | Yes | No | N/A | *Mark N/A if child does not make these or similar responses*  
   |    |    |    | Example  
   |    |    |    | • The participant says, “you seem really sad” |
Wanda Contract Scenario

Directions: Please read the following scenario. When you have finished reading, create a simple contract on the back of this sheet using the information given in the scenario. You may refer back to this information as you create the contract.

Often when your six-year-old child, Wanda, is told that it is bath time, she immediately begins to kick, attempts to bite, and screams. There are times when she will take a bath willingly, but lately her aggressive reactions to bathing have been getting bad. Sometimes it takes two people to get her into the tub.

Wanda loves to color in her coloring books. She often asks if she can stay up past her bedtime to color. Sometimes you allow her to do this and sometimes you do not. It does not really depend on anything. She is also very social and likes to go skating on Sunday afternoon with her friends from the neighborhood. Sometimes she has a friend sleep over. She would really like a pair of skates of her own so she can skate whenever she wants to.

You want to try using a contract with her to change her behavior. You want her to take a bath every night before bedtime. Use the information provided above to create a contract that will help her take baths willingly more often. Use the back of this sheet to make your contract.
## USE A CONTRACT

Observer: _________________  Participant Code: ___________  Pre / Post Date ____________

<table>
<thead>
<tr>
<th></th>
<th>Clearly state the daily behavior expected of the child</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>What and when</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Willingly or quietly</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Examples:</strong> (when scoring Yes)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Wanda will take a quiet bath at night before bed</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Non Examples</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>States only one of the criteria</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Positively state the daily behavior expected of the child. The statement does not mention past poor performance</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>3</td>
<td>Expectation is reasonable to current performance. 1 to 3 nights of taking a quiet bath</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>4</td>
<td>State the consequence that your child can earn each day. Must be specific</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>5</td>
<td>Consequence matches the value of the daily behavior. Smaller for short term than long term goal</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>6</td>
<td>Review time stated for daily review</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>State the consequence that your child can earn each week. Must be specific</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>8</td>
<td>Consequence matches the value of the daily behavior. Larger for long term than short term goal</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>9</td>
<td>Review time stated for weekly review</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

**Examples**:
- Wanda will take a quiet bath at night before bed
- Wanda will take a quiet bath (missing when)
- Wanda will take quiet bath before bed 2 nights this week
- Wanda will take a quiet bath 1 night this week (missing when)
- When you take a quiet bath at night you can stay up 20 min later
- 20 minutes staying up late
- New coloring book page
- Each night we’ll see how your bath went
- When you take a quiet bath for 2 nights you can go skating on Sunday
- Sleepover
- Skating
- On Friday we will see how you did this week
APPENDIX F

EXAMPLE OF WRITTEN EXAM
Pre-assessment

1. Your two year old tells you “thank you” when you give him a cookie. What Positive Parenting Tool should you use?
   A. Use Reinforcement
   B. Pivot
   C. Redirect / Reinforce
   D. Set Expectations
   E. I don’t know

2. Your 15 year old just came in from two a day football practice, he is dripping in sweat and the mud and grass from his cleats gets all over the floor; you scream at him from the kitchen “If you don’t clean it up, you won’t get dinner tonight.” What coercive did the parent use and what could the parent have done instead?
   A. Threats/ Open the door and tell him to clean up the porch
   B. Sarcasm/ Don’t say anything to him and clean up the mess yourself
   C. Threats/ Walk over to him and ask how his day was
   D. Questioning/ Walk over to him quickly and ask him how his day was
   E. I don’t know

3. Your 2 year old son is deliberately splashing water in your face when you’re washing his hair in the bathtub, you
   A. Calmly grab his arms and tell him nicely to stop splashing Mommy and that it is not nice to splash
   B. Firmly say ‘no splashing’ while making eye contact
   C. Look away while he is splashing and when he stops smile big and tell him how good he is doing in the bath
   D. I don’t know

4. Which one of the following is a behavior that you should use the Redirect-Reinforce Tool with?
   A. Saying “I hate you, you are an ass!”
   B. Hiding open food in the bedroom
   C. Screaming and complaining
   D. All of the above
   E. I don’t know

5. Your 4 year old daughter screams and cries when you wake her up in the morning, no matter how gentle and subtle you are. You want to tell her about a plan that you have made to help her wake up quietly each morning. Your plan is that she gets to pick her breakfast if she wakes up quietly and if she does not, then she cannot pick her breakfast and must have shredded wheat. When is an appropriate time to tell her about this plan?
   A. When she wakes up in the morning after she is done crying.
   B. While she is on the couch after school watching her favorite TV show.
   C. While you are both at the table for an afternoon snack.
   D. I don’t know
6. When should you use the positive parenting tool, Use a Contract?
   A. When you need to add structure to Setting Expectations
   B. When you have a lot of behavior to keep track of
   C. When you are inconsistent with delivering consequences.
   D. All of the above
   E. I don’t know

7. Your 5 year old son refuses to eat any vegetables during dinner time. He has only eaten 4 bites of vegetables 3 nights a week. You have created a plan that if he eats his vegetables, then he will get to pick his dessert each night and his favorite homemade pie at the end of the week. What is an appropriate goal for the first week you implement this plan?
   A. He eats 8 bites of his vegetables at least 4 days a week.
   B. He eats all of the vegetables on his plate every night.
   C. He eats 2 bites of vegetables at least 3 days a week.
   D. I don’t know

8. You and your 6 year old child are walking into the grocery store from the parking lot. Your child sees a dog near the entrance and starts run over to the entrance of the store into the street. What should be the first thing you do?
   A. Yell loud enough to get your child to stop
   B. Move quickly and quietly to stop them
   C. Tell your child that they are in BIG trouble
   D. All of the above
   E. I don’t know

9. Which positive parenting tool should you use when your child has engaged in a serious behavior and your are planning for next time, you have given your child a new responsibility or you want to teach a new behavior for a specific situation?
   A. Set Expectations
   B. Use Reinforcement
   C. Redirect-Reinforce
   D. All of the above
   E. I don’t know

10. What positive parenting tool would you in the moment that your child is using curse words while telling you about her field trip at school?
    A. Reactive
    B. Use a Contract
    C. Pivot
    D. Set Expectations
    E. I don’t know
11. When should you stay close with your child?
   A. When your child is upset
   B. While doing an activity with them
   C. On a special outing
   D. All of the above
   E. I don’t know

12. Your eight year old always leaves her bike lying behind the car, today you notice that she picked it up and chained it to the fence without being told. When you go to look at the bike you notice a big scratch along the side of the bike. You run in the house and tell her she can’t ride her bike to school for the week because she doesn’t take care of the things you buy for her. What coercive did the parent use and what could the parent have done instead?
   A. Silent Treatment/ Tell her “thanks for putting your bike up, your mom/dad and I really appreciate it”
   B. Taking away things and privileges/ bring her outside to look at the damage she caused
   C. Force/ Praise her attempt and buy her a new bike that night
   D. Taking away things and privileges/ Tell her “thanks for putting your bike up, your mom/dad and I really appreciate it”
   E. I don’t know

13. You are watching the nightly news and your eight year old daughter starts complaining how much she hates the news and that she wants to watch her favorite show. You ignore her and when asks you a question about one of the news stories you don’t answer. Then she asks a question about your day, you still don’t answer. What coercive is the parent using and what could they do instead?
   A. Logic/ Turn it off and say, “we just won’t watch anything”
   B. Silent Treatment/ turn your attention to the news, when she asks a question focus your attention on her, a little later ask if she would like to watch her show with you
   C. Arguing/ Turn on her show and walk away without attending to her
   D. One upmanship/ turn your attention to the news, when she asks a question focus your attention on her, a little later ask if she would like to watch her show with you
   E. I don’t know

14. We define behavior as
   A. Anything a person does
   B. Something that can be measured
   C. Something that can be observed
   D. All of the Above
   E. I don’t know

15. It is Sunday morning and your 15 year old daughter is watching TV in the living room. You,
   A. Remind her of the chores that she needs to get done before the end of the weekend
   B. Sit down by her and ask her what she likes about the show that she is watching
   C. Tell her that is a beautiful day outside and that she should be out there playing with her friends
   D. I don’t know
16. You should use the Redirect-Reinforce tool for
   A. behaviors that could damage property
   B. behaviors that could hurt someone else
   C. to teach a new appropriate behavior
   D. All of the above
   E. I don’t know

17. You want your 12 year old son to have more responsibilities so you want to make a plan to get him to walk the dog right after school. If he walks the dog right when he gets home then he will be able to have 15 more minutes playing video games before bed. If he does not walk the dog, then he cannot play the video game for 15 extra minutes. The first thing you say to him when you are about to tell him your plan is...
   A. “I cannot walk the dog everyday because I have many other jobs to do around the house, so I want you to do it to learn responsibility”
   B. “Remember last week when you walked the dog? That was awesome”
   C. “You know that the dog has to stay in the house all day while you are at school, and you know how you get really excited about going outside when you have been inside all day? Wouldn’t it be nice to let the dog out as soon as you get home?”
   D. I don’t know

18. How often should you review a contract you made with your child?
   A. Daily
   B. Daily and Weekly
   C. Weekly
   D. Bi-weekly (every other week)
   E. I don’t know

19. Your 4 year old son looks down at his feet and says “thank you” when your friend tells him that he likes his Power Ranger shoes
   A. You tell your son that was nice of him but next time he should look at someone when he is talking to them.
   B. You wink and pat him on the back quietly.
   C. You lean down and whisper in his ear that you are happy that he said “thank you.”
   D. I don’t know

20. Which is not a coercive if your child is sitting on the floor among a big mess of books?
   A. Hey, get over here!!
   B. I need you to sit next to me.
   C. Next time you clean, put them in the right place.
   D. Where do your books belong? Do they go here? Well, where should they be?
   E. I don’t know

21. During the use of the Pivot Tool you cannot ignore the junk behavior of a child while at the same time paying attention to their good behavior.
   A. True
B. False
C. I don’t know

22. You should state the consequences for meeting and not meeting the expectations in terms of what the child will
   A. earn/ have taken away
   B. do/ not do
   C. earn/ fail to earn
   D. All of the above
   E. I don’t know

23. Your three year old daughter starts to reach for your steaming hot cup of coffee. You slap her hand away and yell "NO." What coercive is the parent using and what could the parent do instead?
   A. Force/ Gently move the child's hand away, direct her to her cup of warm milk and praise her for drinking that instead
   B. Force/ Let her touch the hot cup so she'll learn not to do it again
   C. Arguing/ Gently move the child's hand away, and explain that the cup is very hot, that if she touches it it would burn her hand and that would hurt very much. Explain further, that the cup is Mommy/Daddy's and she shouldn't touch it your things
   D. Logic/ Gently move the child's hand away, direct her to her cup of warm milk and praise her for drinking that instead
   E. I don’t know

24. It is time to review how well your daughter has done with the written agreement that you have come up with. The written agreement states that if she brushes her teeth in the morning as well as at night after bedtime snack, then she will be able to watch her favorite show before bed. It is the first day and she did not brush her teeth in the morning, but she did at night. It is best to say to her
   A. “Wow, I saw that you brushed your teeth tonight! Maybe, tomorrow you can do it in the morning and at night and then you will be able to watch your show.”
   B. “Well, I see that you tried, and even though you didn’t do it this morning I will let you watch your show because it is the first day we tried this plan”
   C. “I would like for you to start brushing your teeth, and if you are going to pick a time to do it, do it in the morning so that you don’t have stinky breath all day”
   D. I don’t know

25. Your 17 year old son is helping you unload groceries form the trunk of your car. He takes out the last bag and is about to slam the trunk shut when you see your 3 year old daughter’s hands are in the way. You,
   A. Quickly stop your son from closing the trunk and say, “Before you close the trunk ask your sister to show you her hands so she doesn’t accidentally leave them in the way.” He asks her to show him her hands and you say, “Awesome!”
B. Shout, “Wait!” and pull your daughter’s hands out of the way while explaining that your son needs to be careful around his little sister.
C. Pull your daughter away from the trunk and explain to her that she needs to be careful around the trunk. Her brother can’t see her because she is so small.
D. I don’t know

26. Why do children engage in junk behavior?
   A. to get you to comfort them
   B. to get you to give in
   C. to get attention
   D. All of the above
   E. I don’t know

27. Your 11 year old daughter is reading a book after school instead of talking on the phone like she normally does
   A. You walk over to her, give her a kiss on the forehead and say, “I love to see you reading.”
   B. You walk over, sit down next to her and take this opportunity to tell her how important reading is for her future and that she will be able to get into a good college and get a good job.
   C. You tell her that it is so much better to read than to waste time on the phone.
   I don’t know

28. The Proactive approach to parenting focuses on
   A. dealing with inappropriate behavior immediately and stop it in the moment
   B. good behavior and using reinforcement to encourage more of it
   C. bad behavior and using punishment and coercion to “control” it
   D. using reinforcement to get more good behavior and using punishment to “control” bad behavior
   E. I don’t know

29. When you finish creating a contract for your child you should
   A. Give it to the child to keep track of progress
   B. Put it in a place that both of you can see the progress
   C. Keep it to yourself in order to keep accurate track of progress
   D. All of the above
   E. I don’t know

30. Your 16 year old son never fills the car up with gas after he borrows it. One evening he comes home and you check the gauge and see it is almost empty, when you see him, you begin to describe how hard you work during the day and how early you have to get up in the morning and how it’s very tough for you to get gas before work. You go on to say that you just don’t know what to do to get him to help you out with the car more. What coercive is the parent using and what could they do instead?
   A. One upmanship/ Pick a down time and tell him how much you it helped you out when he remembered to put gas in the car Tuesday night. And that if he can keep it above 1/4 a tank he during the week, he can have the car all day on Saturday; and if
he doesn't, then he will have to find another mode of transportation. Ask him to
restate the expectation and seal the deal.
B. Arguing/ Don’t worry about it, he will never remember, its better if you just do it
yourself
C. Despair/ Pick a down time and tell him how much you it helped you out when he
remembered to put gas in the car Tuesday night. And that if he can keep it above 1/4
a tank he during the week, he can have the car all day on Saturday; and if he doesn't,
then he will have to find another mode of transportation. Ask him to restate the
expectation and seal the deal.
D. Silent Treatment/ Tell him he is not allowed to use the car until he can learn some
responsibility
E. I don’t know

31. When you pick up your 5 year old son from Kindergarten, he looks very sad. He says that he
never wants to go back to school because Billy Jones is the meanest kid in the school. You,
    A. explain to your son that it is okay to go back to school and that he should tell the teacher
        when Billy does something mean.
    B. tell your son that he has many other friends to play with and that he can just stay away
        from Billy at school
    C. ask him about Billy, what he thinks about the mean things Billy does, and other things
        about school.
    D. I don’t know

32. Some consequences can have no effect on behavior
    A. True
    B. False
    C. I don’t know

33. Your 6 and 8 year old daughters are coloring pictures with crayons on Saturday evening
    when you tell them it’s time to go rent a movie to watch tonight. Your 6 year old begins to put
    the crayons away, but your 8 year old just goes and stands by the door, waiting to leave. You,
    A. Get on the floor next to the 6 year old and say, “Thank you so much for helping! Aren’t
        you excited about the movie tonight?” with a big smile
    B. Ask the 8 year old to help clean up the crayons and tell them why it is important to help
        her sister
    C. Tell the 8 year old that if she does not help her sister clean up the crayons, then she will
        not earn the movie for the night
    D. I don’t know

34. Which of the following is a good way to get the child to engage in an appropriate behavior
during the Redirect-Reinforce Tool?
    A. Calmly repeat what you want the child to do instead.
    B. Begin to do the redirect behavior yourself.
    C. Provide gentle physical guidance to help the child get started.
    D. All of the above
    E. I don’t know
35. During the positive parenting tool, Set Expectations, if the child asks why they have to engage in the expected behavior you should
   A. Ignore the question and attend to something else
   B. Explain how it benefits the child
   C. Explain that everyone has expectations
   D. All of the above
   E. I don’t know

36. You can never get your four year old son to eat his vegetables. The last time you butted heads about this, it ended up you just yelling to eat them and him screaming no back. What coercive did the parent use and what could they do instead?
   A. Taking away things and privileges/ Deny access to any other food until he eats his broccoli
   B. Arguing/ Create a contract that states if he eats his veggies for dinner, he can pick out dessert and put a sticker on his chart and if he does this two days out of the week, he can pick out the family video for Friday night.
   C. Threats/ Tell him fine and make some macaroni for him to eat
   D. Arguing/ Create a contract that states if he eats his veggies for dinner, he can pick out dessert and put a sticker on his chart and if he does this seven days out of the week, he can pick out the family video for Friday night.
   E. I don’t know
REFERENCES


