

Key Components in the Treatment of Disruptive Behavior Disorders in Childhood and Adolescence

Disruptive Behavior Disorders

Specific Types

Oppositional Defiant
Disorder
Conduct Disorder
Disruptive Behavior
Disorder NOS
ADHD

Characteristics

Non-compliance
Anti-social Behavior
Aggression
Externalizing Problems

Externalizing Problems

least 30-50% of child clinic referrals in the U.S. are for conduct problems

Disobedience, breaking rules,
argumentativeness

Fighting, bullying, cruelty to other, aggression

Lying, stealing

Associated Outcomes

School failure and drop out

Substance use and abuse

Criminal activity

Early and inadequate parenting

Unemployment

Evidence-Based Practice

**Integration of best research evidence,
clinical expertise, and patient values** (Institute
of Medicine, 2001)

Evidence-Supported Treatments

Treatments studied scientifically

- Shown to be more beneficial than (no treatment, placebo, or an alternative treatment) across multiple studies

Evidence Supported Interventions for Disruptive Behaviors

Behavioral Parent Training

Youth CBT/Skills Training

Multi-component therapies

Evidence Supported Interventions for Disruptive

Behavioral Parent Training

OSLC's Parent Management Training

Webster-Stratton's Incredible Years

Eyberg's Parent-Child Interaction
Therapy

Forehand's Helping the Noncompliant
Child

Sanders' Positive Parenting Program
(Triple P)

Evidence Supported Interventions for Disruptive

Training

Lochman's Anger Coping / Coping
Power

Feindler's Anger Control with Stress
Inoculation

Evidence Supported Interventions for Disruptive Behaviors

Multi-component therapies

BPT + CBT

Alexander and Parson's Behavioral Family Therapy (aka FFT)

Multisystemic Therapy (MST)

Multidimensional Treatment Foster Care (MDTF)

Evidence Base for Youth Treatment

Cognitive Behavioral or Behaviorally Based Interventions

–Most consistently found to be efficacious
with children with Disruptive Behavior (Hawley &
Jensen-Doss, 2007; Weisz et al., 2005)

Barriers to Implementation of Manualized Treatments

Identifying Key Components of Disruptive Behavior Problem Interventions

Coded all evidence-based treatment manuals,
for components that developers presented as
central/critical/core to that treatment

Retained those components that showed up
repeatedly across treatment manuals

Obtained expert validation from treatment
developers and researchers via a survey

Hawley, KM (2011-2015), Increasing the Capacity of Providers to
Monitor Fidelity to Child and Family CBT, National Institute of
Mental Health (R21 MH090460; PI: Kristin Hawley, Ph.D.).

Results

Tasks for *All Phases* of Treatment

Key Tasks for the *Early, or Beginning, Phase* of Treatment

Key Tasks for the *Middle, or Working, Phase* of Treatment

Key Task for the *Ending, or Termination, Phase* of Treatment

Key Tasks for *All Phases* of Treatment

Clear Session Agenda: Discussing a session agenda at the beginning of every session

Ongoing Assessment: Assessing the child's symptoms and functioning level throughout treatment (often by using some sort of checklist)

Key Tasks for *All Phases* of Treatment – Continued-

Therapy Homework: Assigning and reviewing out-of-session practice of new skills

In-Session Practice: Using role-plays, or otherwise practicing new skills together, during the appointment

Reinforcement: Praising or rewarding the child for working hard or trying

Key Tasks for *Early Phase* of Treatment

Alliance: Build a strong rapport or working alliance with the child and the parent(s)

Treatment Description and Rationale: Provide child and parent(s) with treatment description (e.g., session format, what is expected of them, rationale for how therapy works)

Treatment Goals: Discuss treatment goals and reach an agreement with child and parent(s) on the goals (may need to revisit or change goals during treatment)

Key Tasks for *Middle Phase* of Treatment

Parent-Child Relationship: Work with the parent and child to improve their communication and relationship (e.g., child directed play, special time, assertive communication training)

Behavioral Parent Training: Teach the parent to effectively manage noncompliance and behavior problems with improved monitoring of their child's behavior and with the use of behavior management skills

Key Tasks for *Middle Phase* of Treatment - Continued-

Feelings Identification: Help the child recognize when they are feeling angry or upset (e.g., thoughts, feelings, physical signs) and rate their level of anger (e.g., SUDS or feelings thermometer)

Cognitive Coping: Work with child to identify and challenge their anger provoking thoughts (e.g., cognitive restructuring, positive self-talk, thought stopping, distraction)

Problem Solving Skills: Teach the child problem solving skills (e.g., coming up with possible solutions, considering likely consequences of each solution, and

Key Tasks for *Termination Phase* of
Treatment

Future Planning: Planning and preparing for future stressors and possible setbacks

Key Component of EST's for Disruptive
Behavior Disorders

PARENT TRAINING

***Seems critical for the ultimate success
of Treatment for Disruptive Behavior or
Conduct Problems***

Summary of Key Components

Clear Session Agenda

Ongoing Assessment

Therapy Homework

In-Session Practice

Reinforcement

Alliance

Treatment Description and

Rationale

Treatment Goals

Improve Parent-Child

Relationship

Behavioral Parent Training

A set of procedures taught to parents by a therapist aimed at:

Increasing a child's prosocial behaviors

Reducing deviant and antisocial

Behavioral Parent Training Techniques

Providing effective commands

Ignoring misbehavior

Natural or logical consequences

Time out

Positive reinforcement

Summary and Conclusions

Behavioral Parent Training is emphasized across evidence based interventions for disruptive behavior problems

Treatment researchers and treatment developers have identified it as the key ingredient to effective treatment for disruptive behaviors

Its importance relative to other treatment components, however, remains an empirical question.

For the time being, it is thought to be the most important component.