

### **Vignettes for Applying Parent Management Training Techniques**

1. Olivia is an 8 year-old who is generally well-behaved, but recently has been fighting going to bed using a variety of stalling tactics. You assess the situation and determine that there are no likely medical or medication causes for her difficulty falling asleep. You decide that this is a likely purely behavioral. You provide the family with education about sleep hygiene and recommend several changes to their evening routine. What other 'tool' could you teach and prescribe in order to help Olivia learn to go to bed without a fight?
2. Jackson is a 3 year-old patient whose parents are frustrated with his aggressive behavior. He hits, kicks, and pinches his older and younger siblings nearly every day (sometimes several times a day). His parents tell you that they would prefer not to spank him, but feel as though they have "tried everything" and "nothing has worked." When you inquire further, they explain that their response to his behavior generally includes yelling at him or lecturing him about how he needs to be a "good boy". What tool would you teach and 'prescribe' between now and their next visit?
3. Sophia is 4 year-old patient whose parents bring her in for a possible ear infection. During your agenda setting, they mention that they are also concerned with some boundary-pushing behavior they have noticed recently. In particular, they are frustrated with how long it takes her to complete tasks like cleaning up her toys in the evening. She 'dilly-dallies' and her father says that he has to nag her repeatedly in order for the task to be completed. During the exam and in previous interactions with the family, you have observed Sophia's parents barking instructions with little positive interaction. Sophia seems to adore her father and you believe that she is seeking his attention, despite it being negative. What tool would you 'prescribe' between now and their next visit?
4. Aiden is a 5 year-old patient whose foster parents brought him in for his kindergarten well-child checkup. They report that Aiden has made significant progress in terms of his disruptive behavior since being placed with them two years ago. He responds well to the structure and boundaries provided by his soon-to-be adoptive parents. His foster mother reported that the one concern that remains with his behavior is his use of baby talk. He has previously received early intervention services, including speech therapy, but has recently graduated. His mom says "I know that he can talk appropriately, he just doesn't want to." Upon further inquiry, you determine that Aiden (the youngest of 6 children in the home) receives a great deal of attention when he talks like a baby. What tool would you teach and 'prescribe' between now and the next visit?

5. Nora is a 10 year-old who was diagnosed with ADHD, Combined Presentation by a psychologist at age 7. She sees you regularly for medication management and her current medication seems to be effective until the evening. Her father reported that although Nora is doing well overall, he is concerned that she is unable to complete tasks that his 8 year-old son is able to do independently. Specifically, he says that Nora seems to ignore him and frequently leaves a task half-finished. Upon further inquiry, you discover that the most distressing chore for Nora and her father is cleaning her bedroom. She has spent “hours” in her room with little success in completing the task on several occasions. This frequently triggers a “meltdown” from Nora when she becomes frustrated. You ask how Nora’s chores are assigned to her. Her father indicates that on Saturday mornings, he tells Nora to “go clean your room” after breakfast. What tool would you teach and ‘prescribe?’
6. Henry is a 6 year-old patient whose mother has brought him in for ADHD medication evaluation. His Vanderbilt scores indicate a high probability of ADHD symptoms per mom’s report, however, his teacher report indicates some mild, but not nearly as intense, symptoms of ADHD. Henry’s mother reports that she is highly frustrated with Henry’s behavior as he “never listens” and frequently does many things she finds annoying like being overly silly and repeating what she says. Henry’s mother reports that she is extremely busy working two jobs and often just wants to lie down on the couch when she gets home from work. After your assessment, you decide that a follow-up visit is necessary in the next 2-3 weeks, at which time you may consider medication or a referral for a behavior therapy. What tool would you ‘prescribe’ between now and their next visit?

Answer key (may be more than one good answer)

1. Rewards
2. Time Out
3. Praise
4. Active Ignoring
5. Giving Effective Instructions
6. Special Time