Collaborating With Parents to Implement Behavioral Interventions for Children With Challenging Behaviors

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Over the past several decades, behavioral interventions have produced positive and significant outcomes for children with a wide range of challenging behaviors. However, the majority of these interventions have been primarily implemented by practitioners, often leaving parents as bystanders. Because parents probably have the most information regarding the extent and history of their child's difficulties and the most knowledge of their child's home environment, it is essential for parents to be actively involved in planning and implementing behavioral interventions in order to maximize their effectiveness (Ingersoll & Dvortcsak, 2006; Lucyshyn, Horner, Dunlap, Albin, & Ben,

In addition, when parents implement interventions consistently, positive outcomes are more likely to be maintained over time and generalized to new settings, situations, and behaviors (Kuhn, Lerman, & Vorndran, 2003). Therefore, it is critical for practitioners to encourage parents to take an active role in interventions that will improve their child's challenging behaviors. As a practitioner, under-

standing the family's strengths and needs is the first step in building rapport with parents. This step is followed by helping parents understand the behavioral approach, working with parents when planning and conducting an intervention, and motivating parents to continue using the intervention consistently. This article provides practitioners with a sequential process and suggestions for teaching parents to help plan and deliver effective interventions to their child.

Understanding Parents and the Family

To collaborate with parents, it is necessary to understand the family. Parents who have a child with disabilities may need to share their struggles with an understanding listener. When practitioners listen to parents and show genuine concern, parents and practitioners can begin to build a trusting relationship. Parents may then be more inclined to be actively involved in their child's learning. In addition, when practitioners listen carefully to parents, they can obtain a great deal of important information that will help with

improving the child's challenging behaviors (Fox, Benito, & Dunlap, 2002). In particular, while listening to parents, practitioners can identify possible ways that parents can contribute to their child's success. In other words, parents' strengths and capabilities can be used to effectively address challenging behaviors (Lucyshyn et al., 2002). For example, a parent who can be patient will be more likely to implement interventions that take a substantial amount of time (e.g., using extinction to decrease a challenging behavior). Similarly, identifying a parent's challenges will help practitioners design interventions that will not exacerbate the problem. If a parent has too many demands on his or her time, the practitioner can plan alternative arrangements, such as having a sibling or grandparents help work with the child with disabilities.

Such efforts during the planning of an intervention will likely increase parent support of subsequent interventions. Moes and Frea (2000) found that when family activities, expectations, values, and interaction patterns were considered in the development of sup-



port plans for children with behavior disorders, challenging behaviors decreased and compliance increased. That is, focusing on family routines can help create an intervention that is more feasible and meaningful for the child and family (Lucyshyn, Blumberg, & Kayser, 2000).

Moreover, because the child's challenging behavior operates in the context of the family, it is important for practitioners to develop and sequence goals based on family input. In addition to identifying their needs and priorities, parents can provide important insight about how the child's challenging behaviors affect and are affected by the family. The following example illustrates how practitioners can begin to build rapport with the family.

Understanding Parents and Family

"Nathan Davis" is a 6-year-old boy who attends an inclusive first-grade classroom for most of the school day and also receives special education services in a resource room. He often engages in property destruction and aggression toward others. Nathan's mom works

part time in the mornings, his dad works 10-hour days, and his grandmother lives with the family and assists with child care. Nathan also has two siblings, a 4-year-old brother and 7-year-old sister.

Ms. Foster, a behavior support specialist, has been contacted by the family for assistance because Nathan's behavior at home has become increasingly more destructive and aggressive. During an initial telephone conversation, Ms. Foster introduced herself to Nathan's mother and provided background information about the agency and her experience working with children with challenging behaviors. They set a meeting time when the whole family would be at home. To encourage productive dialogue, Ms. Foster asked the mother to gather some general information prior to the first meeting (e.g., Nathan's challenges, interests, strengths, and needs; family routines, activities, and concerns).

After a few minutes of rapportbuilding, Ms. Foster began the first meeting by talking to the Davis family about her background working with

families such as theirs. Using openended questions, Ms. Foster engaged the family in a dialogue to obtain information about family routines, schedules, and activities (e.g., "It sounds like you have a pretty busy schedule. How do you coordinate your transportation?" "How is that working out for everyone?"). Ms. Foster continues this conversation with Nathan's mom and dad in order to get an idea of daily routines (e.g., "What activities does your family enjoy doing together?" "What is the typical bedtime routine for the children?"). By gathering such information, Ms. Foster can better identify aspects of their family life that are important to the Davis family.

The grandmother then takes the children to a different room and provides a play activity to allow Ms. Foster to discuss in further detail the challenges they are facing with Nathan. "You mentioned earlier that the children often play in the family room while you are making dinner. It sounds like Nathan enjoys this time with his brother and sister, but often becomes upset,

like the other night when he had to wait his turn for the race car."

Mrs. Davis responds, "Cars are Nathan's favorite. We ask him to please share with his brother because he really likes them too. Even though we explain this, he still can't seem to wait, and ends up grabbing their toys instead, or pushing his brother away. I know he doesn't mean to hurt his brother." Ms. Foster nods as Mrs. Davis talks about the challenges of balancing the duties of being a working parent. Ms. Foster listens closely and asks Mr. Davis how this affects dinnertime. He adds that he usually arrives home minutes before dinner starts and sometimes feels apprehensive about what he will find when walking in the door.

"Sometimes I walk in and the kids are running to greet me. Those nights are the best. But many nights as I approach the front door, I hear bickering between the kids, and I don't have the energy to handle the situation. It would be so nice to come home and see my wife smiling, and the kids playing together."

Ms. Foster sympathizes, "After a long day at work, this is probably not how you want to spend your evenings, is it?"

They share a smile and Mrs. Davis confirms, "No. I would really like some help with making this a positive and relaxing time for my family. I want to sit down to dinner and enjoy the company of my family, not tell Nathan that his brother is crying because his car is now broken."

Helping Parents Understand the Behavioral Approach

The next step to facilitating parental involvement in behavioral interventions is providing parents with information. In particular, practitioners should discuss the advantages and importance of behavioral interventions. Behavioral approaches (e.g., functional behavior assessment, positive behavior support) have been empirically validated for decreasing problem behavior in children (Heward, 2009). However, most parents have little knowledge about behavioral interventions. Thus, in an effort to establish a collaborative

relationship, practitioners should discuss with parents the reasons the behavioral approach is appropriate for their child. This effort may motivate parents to serve as active partners in the implementation of interventions. Furthermore, it is necessary for practitioners to explain challenging behaviors from the behavioral perspective. This helps parents understand what specific environmental factors might be causing and maintaining their child's challenging behaviors. This is critical because, despite their good intentions, parents may be inadvertently reinforcing their child's challenging behaviors (e.g., paying attention to the child when he or she behaves inappropriately). By learning to examine the child's challenging behaviors from a behavioral perspective, parents gain important insights about how to change those behaviors (e.g., attending to appropriate behavior, ignoring inappropriate behavior).

Practitioners must also teach parents key behavioral concepts (e.g., the three-term contingency: antecedent, behavior, consequence) to help them understand the procedures they will be using (e.g., positive reinforcement). Practitioners should use clear and simple explanations for how these principles work. For example, a child sees

ior), and the child stops whining (consequence). As a consequence for providing candy, the parent is able to escape the child's whining. If the parent continues to give in to the child's whining in the future, negative reinforcement has occurred for the parent.

Furthermore, if the parent gives into the child's whining only sometimes, the child's whining behavior will probably be even stronger. Behavior that is reinforced on an intermittent schedule (i.e., not reinforced every time) occurs at higher rates and higher intensity than behaviors reinforced every time they occur. Helping parents understand how these principles work will provide them with valuable insights that will enable them to apply effective behavior change procedures for their children.

Helping Parents Understand the Behavioral Approach

Ms. Foster brought with her some general literature that she has compiled on behavioral interventions that she thinks will be useful and easily understood by the Davis family. These articles were selected based on the current needs of this family, such as increasing positive social interactions and communication with peers and decreasing problem behavior maintained by social attention. She has highlighted informa-

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candy in the grocery store (antecedent), asks for the candy (behavior), and the parent says "no" (consequence). After the parent says "no" (antecedent), the child begins to whine (behavior) until the parent finally gives him the candy (consequence). If the child's future whining behavior increases, then positive reinforcement has occurred.

In order to effectively change their child's behavior, parents must also understand how behavioral principles operate on their own behavior. The child begins to whine (antecedent), the parent gives the child candy (behav-

tion the family would find most helpful (e.g., the purpose, procedures, and outcomes) and summarized each on a separate sheet of paper. She provided the summaries of the articles so that the Davis family can review the purpose and outcomes of each and then decide if they would like to read further about any specific intervention. Ms. Foster brought the full text of each article in the event that the family would like to read more. In discussing these types of interventions, she explains how research has made great advances in providing practitioners tools that have been shown to be effective with children displaying challenges such as Nathan's. Ms. Foster also discusses that the occurrence of certain events often precedes challenging behavior.

Mom interjects, "I notice that when his sister is very involved and busy playing with her dolls, Nathan grabs her dolls and pushes her. Sometimes he throws them at her too."

Dad adds "And oh, how that makes her mad!" Ms. Foster asks about Nathan's sister and how she responds to Nathan's behavior.

Both parents chime in, "She screams at him, 'Leave me alone! Those are mine! You are mean!' Then she tries to get her dolls back, sometimes chasing him around the house."

Mr. Davis comments that he was not raised to tolerate such behavior and that he steps in between the children when this occurs and verbally scolds Nathan, requiring that he apologize to his sister.

"I don't believe Nathan understands that what he is doing is hurting his sister's feelings. So I do my best to explain this to Nathan and tell him why it is not the right thing to do. But this doesn't seem to make a difference because he still does this every time they play. She tries not to get upset, but this is hard for her too."

The conversation continues and Ms. Foster gathers information about the antecedents and consequences that the parents report. As the conversation unfolds, Ms. Foster decides that it would help to introduce to Mom and Dad the concept of attention maintained behavior. In their efforts to decrease Nathan's destructive behavior, they are actually reinforcing and maintaining it with a powerful reinforcer attention.

"This can be very hard because we want to explain to our children what is and isn't acceptable. Especially in that moment that the problem occurs. From what you are saying, these reprimands are meant to stop the behavior from happening again and are not supposed to be an enjoyable event. But what can be difficult to keep in mind is that Nathan wants attention. He might want and need that guidance of how to verbally interact with his sister, such as

'Tell her you are sorry, Nathan.' Providing this verbal reprimand and mediation itself is a type of attention. And although this attention is not meant to be enjoyable for Nathan, it is attention of some type. This might help to understand a comment you made earlier, Mr. Davis, when you said you try to explain, but it doesn't seem to make a difference because he still acts out again later. Your reactions to Nathan's behavior are natural because you are providing guidance for your son that you believe will help him. I am sure you are doing what you feel is best, so what I would like to do is help show you how you can provide that guidance for him in a way that should help lead to the changes you want for Nathan."

Collaborating With Parents to Design Behavioral Interventions

Once parents learn basic concepts of the behavioral approach, practitioners need to have parents involved in planning behavioral interventions. This may begin with having parents observe the child's behaviors. Even though parents may spend time interacting with their child at home, they may not be aware of events that trigger their child's challenging behaviors. Through careful observation, parents come to find out when and under what circumstances the child engages in problematic behaviors at home and in community settings. If a child destroys property, the parent should observe their child's behavior to identify what happened before (i.e., antecedent) and after (i.e., consequence) the behavior. Such observation may provide direction for how to change the undesirable behavior.

Practitioners should then ask parents for additional information about the child's history, including preferences, strengths, learning or intervention programs, and communication skills. This allows practitioners to obtain useful information as well as to collaboratively design an effective intervention. Most parents have acquired extensive knowledge about their child over a relatively long period

of time (Lucyshyn et al., 2002; O'Shea, O'Shea, Algozzine, & Hammitte, 2001). This information is essential in that it can be utilized to maximize the effectiveness of an intervention and to avoid unnecessary trials and errors in the process of designing a plan. For example, parents can help identify reinforcers (e.g., video games, stickers, praise, etc.) and punishers (e.g., loss of privileges) so that interventions can be designed more effectively.

After obtaining information from parents, practitioners should also discuss the goals and procedures of the intervention, which must be acceptable for parents. An example of an appropriate goal would be teaching the child to use communication skills (e.g., asking politely) when he wants something in order to replace inappropriate behavior (e.g., engaging in aggressive behavior). It is critical to involve parents in developing individual goals (Ingersoll & Dvortcsak, 2006) and in deciding the form and content of behavioral support (Mirenda, Mac-Gregor, & Kelly-Keough, 2002).

Collaborating With Parents to Design Behavioral Interventions

In an effort to work with the parents in planning an intervention for Nathan, Ms. Foster used a training video that demonstrated brief clips of children engaging in problem behavior. The video clip showed a play interaction between two children. Prior to the start of the play time, an adult showed the children the toys they had available to play with, and reminded them of how to play nicely with each other (e.g., taking turns choosing an activity, keeping hands and feet to themselves, and sharing with each other). The children began playing, and as one child waited his turn, the mother in the video comments, "Wow! That was super-waiting your turn!" and pats him on the back. When the child attempts to grab the toy, the mother guides his hands back to his toy with a brief reminder, "You can change toys in a minute." After viewing the video, Ms. Foster and Nathan's parents discussed the observable events occurring before and after the problem behavior. Providing this

example and discussion helped Nathan's parents look more objectively at their own child's problem behavior and its antecedents and consequences.

Ms. Foster also asked about Nathan's favorite toys and activities, as well as any involvement in school activities or previous services received. Mom reports that he has not had too many problems at school and that he has an aide who assists him. Ms. Foster uses the information she collects from these questions to compile a brief profile of the services received thus far and Nathan's strengths and needs.

After compiling family input, Ms. Foster conducts a functional behavior analysis (FBA) in the home environment in order to design a draft of the intervention. Ms. Foster suggests potential goals (increasing appropriate requests for items) and asks the parents what behaviors they would like to see Nathan increase. They agree that making appropriate requests should be a goal. They also would like Nathan to accept being told "no" without responding inappropriately.

Training Parents to Be Intervention Agents

The most active form of parent involvement in behavioral interventions may be serving as an intervention agent. Practitioners can successfully teach parents to implement specific procedures of a planned intervention. To train parents effectively, several components should be included in the parent training procedures including (a) teaching parents to identify and record their child's behavior, (b) teaching parents how to respond to problem behaviors, (c) modeling intervention procedures, (d) providing guided practice as well as frequent and specific feedback, and (e) encouraging parents to teach behavior strategies to other family members.

How to Define and Record Children's Behavior

To be effective behavior change agents, parents need to be taught to identify and record their child's behaviors. Parents and practitioners can generate a list of their child's challenging behav-

iors and then prioritize them in order of importance. After selecting a problem behavior, the practitioner should ask the parents to describe what usually happens before (antecedent) the behavior occurs and what happens after (consequence). If the child breaks his toys by throwing them or banging them on the floor, the parent might observe this usually happens after the child experiences frustration while playing with the toy (e.g., unable to manipulate or operate the toy properly). The consequence for this behavior is usually attention in the form of a reprimand from the parent. When parents are able to examine how the antecedents and consequences function to maintain the problem behavior, they will have a greater understanding of how to address the problem.

In order to accurately record the frequency of the target behavior, the parents need to have a clear definition of the behavior stated in observable terms. The definition should be based on observations of the child. For example, the parents and practitioners may decide their objective is to decrease destructive behavior. They define destructive behavior as hitting, banging, throwing any object that is not intended for that purpose. For example, throwing a ball or hitting a drum with a drumstick is not destructive behavior, but throwing a telephone or hitting the coffee table with a drumstick is destructive behavior. After the parents have a clear definition of the target behavior, they can observe and record it.

Teaching Parents to Be Intervention Agents: Part 1

After observing and discussing Nathan's specific challenging behavior, the parents agree that his destruction of toys and household items is really making things difficult for the entire family. Ms. Foster shows Nathan's parents a few examples of data sheets they can use to record instances of problem behavior (see Figure 1). Mom and Dad agree on one of the data collection sheets because it seems easiest to use. Then Ms. Foster provides them with a binder containing many blank copies.

Ms. Foster uses modeling and guided practice to teach the Davises how to observe and record behavior. She shows them a video of a child engaging in destructive behavior and models how to tally each incidence explaining as she models. "He's stacking his blocks and right now he's playing appropriately. Look, he accidently knocked over his structure. He just threw one of the blocks at the wall. That's one, so I'm going to put a tally mark right here." After the parents observe for a few minutes, they practice observing and recording the child's videotaped behavior. When the parents are comfortable and accurate with the recording sheets, Ms. Foster asks them to use the recording sheets for Nathan's destructive behaviors. She explains that this information will be used in conjunction with her own observations and that it will provide her with a more accurate overview of Nathan's behavior when she is unable to observe him directly.

How to Respond to Problem Behavior

Provide parents several alternatives to change the antecedents and consequences that maintain the behavior problem. For instance, providing the child with less frustrating activities or additional assistance may decrease the child's frustration and subsequent destructive behavior. In addition, the parent can change the consequences by withdrawing attention when the child breaks his toys. Furthermore, parents should praise the child whenever he plays with the toys in an appropriate manner. As an intervention agent, parents have to learn how to change the antecedents and consequences of the problem behavior and observe how the child responds.

Modeling. Even though parents may understand basic behavioral concepts and strategies, they still need to know how to apply these strategies to their own unique situations. Observation prepares parents to adjust a given strategy for use at home (Shea & Bauer, 1985). Parents can observe in settings where practitioners conduct behavior interventions. They can also watch

Figure 1. Example of a Data Collection Sheet

Date	Time	Destructive Behavior	Total
2/9/09	4:00-6:00	////////	
	6:00-8:00	///////	19
2/10/09	4:00-6:00	///////	
	6:00-8:00	//////	16
2/11/09	4:00-6:00	////////	
	6:00-8:00	////////	20
2/12/09	4:00-6:00	/////	
	6:00-8:00	/////////////	19
2/13/09	4:00-6:00	/////////	
	6:00-8:00	//////////	21
2/16/09	4:00-6:00	/////////	
	6:00-8:00	///////////	22
2/17/09	4:00-6:00	////////	
	6:00-8:00	/////////	19
2/18/09	4:00-6:00	/////	
	6:00-8:00	/////////	16
2/19/09	4:00-6:00	////	
	6:00-8:00	/////////	14
2/20/09	4:00-6:00	////	
	6:00-8:00	/////////	15
2/23/09	4:00-6:00	////	
	6:00-8:00	/////	10
2/24/09	4:00-6:00	////	
	6:00-8:00	////	9
2/25/09	4:00-6:00	////	
	6:00-8:00	////	10
2/26/09	4:00-6:00	///	
	6:00-8:00	////	8
2/27/09	4:00-6:00	///	7
	6:00-8:00	////	

videotaped materials in which other parents perform behavioral interventions with their children. Observing models may help parents better understand the procedures for implementing a strategy.

Guided Practice. After observation, the parents should have an adequate amount of time to practice what they learned in order to become more proficient with implementing the intervention. Parents should practice the skills verbally as well as physically under the guidance of practitioners (Shea & Bauer, 1985). Practitioners can also engage parents in role playing. Ongoing guidance should continue as practitioners observe parents working directly with their child.

Frequent and Specific Feedback. To promote successful implementation of behavioral interventions with their children, parents must be provided with frequent opportunities for immediate, specific feedback (Koegel, Koegel, & Schreibman, 1991). The more specific and immediate the feedback is, the more effective it will be. If it is impossible to provide immediate feedback, practitioners can arrange for parents to videotape sessions, and then provide feedback at a later time.

Encourage Parents to Teach Other Family Members

To maximize the effects of the intervention on the child's behavior, it would be helpful for as many significant others as possible to consistently provide the same intervention. Teaching family members (e.g., siblings, grandparents) how to prompt and reinforce appropriate behaviors will help the child generalize newly learned skills across settings and situations. Research has shown that parents who have received training from practitioners can successfully teach significant others how to implement behavioral strategies (Kuhn et al., 2003; Neef, 1995; Symon, 2005).

Teaching Parents to Be Intervention Agents: Part 2

Ms. Foster discusses with Nathan's parents a behavioral procedure that may be effective for changing Nathan's

behavior. "Differential reinforcement is when you reinforce Nathan's appropriate behavior while ignoring his inappropriate behavior. So, when you see Nathan playing with his toys or using materials appropriately, you should give him a lot of attention and praise. You might say something like, 'What a great picture you're drawing, I like how you're sitting there working so nicely!' But when you see Nathan throwing or deliberately breaking his crayons, you should ignore that behavior. Pretend you don't even see it. Now when you start to ignore his inappropriate behavior, it might increase at first. But if you're consistent with the intervention, his inappropriate behavior should begin decreasing."

Ms. Foster practices the differential reinforcement procedure with Mom, Dad, and Grandma through modeling and role playing. Ms. Foster role-plays the child's behavior after having modeled differential reinforcement, and Mom, Dad, and Grandma all practice ignoring inappropriate behavior and reinforcing appropriate behavior.

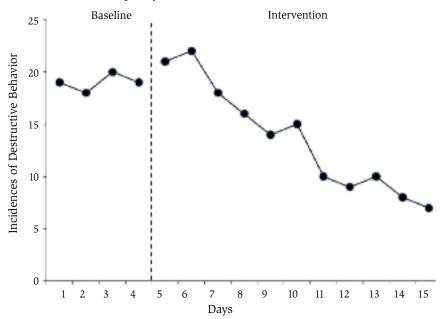
Ms. Foster schedules the first training session with Mom and Dad for an evening. She models the procedure one time with Nathan and then Mom steps in. After this, Dad practices. Nathan is given a break in which he receives the video game that he was working for during the session. Ms. Foster then sits with Mom and Dad to give them feedback (e.g., "I like how you didn't react when Nathan got upset and smacked the table. You remembered to praise him when he followed your directions, and then gave him a big hug when he finished his work!").

After a few weeks have passed, Ms. Foster follows up with Mom and Dad. They report that they are feeling more comfortable implementing the intervention, and they are seeing decreases in Nathan's destructive behavior. "But he can still be pretty destructive sometimes," says Dad. During this meeting, Ms. Foster provides the Davises with graphic display of the data they had been recording (see Figure 2).

Ms. Foster explains, "If you look at this graph you can get a more accurate picture of the frequency of Nathan's

Figure 2. Example of Graphic Display of Data

Frequency of Nathan's Destructive Behavior



behavior. The first four data points are Nathan's destructive behavior before we began the intervention. So, he engaged in destructive behavior about 20 times each night before the intervention. The dotted line shows when you started the intervention. Look what happened during the first few sessions of intervention."

"His behavior got a little worse at first," Mom said.

"But after that," Dad said, "Nathan's destructive behavior steadily went down. Last night it was only 7 times. I guess that's a lot of progress in just a couple of weeks." Ms. Foster and the Davises continue their discussion about how well the intervention is working, the importance of continuing

behavioral intervention will vary across families depending on the severity of the problem behavior and the consistency with which parents implement interventions. Parents will differ in their knowledge about behavioral strategies, their literacy levels, and their enthusiasm for participating in behavior change interventions. Practitioners should consider the diversity of the parents they work with when providing training. For example, if parents have difficulties with reading or if English is not their first language, it may be effective to provide in vivo modeling and video clips rather than only written guidelines when teaching them how to implement a certain behavior strategy. Practitioners work-

Practitioners should consider parents as equal partners throughout the development and implementation of behavioral interventions.

the intervention consistently, and whether or not they think the intervention should be modified.

It should be noted that collaborating with parents may not always result in expected, desirable outcomes. The amount of time and effort it takes to collaboratively plan and implement a

ing with parents should be aware of any accommodations the parents may need to effectively implement a behavior change program. If an intervention is not working, the practitioner should maintain open communication with the parents to determine the reasons and to modify the plan to ensure success.

Figure 3. Web Sites for Parents of Children With Challenging **Behaviors**

• Children and Adults with AD/HD (CHADD)

http://www.chadd.org/AM/Template.cfm?Section = Especially_For_Parents CHADD is a nonprofit, membership organization that supports individuals with AD/HD, their families, and professionals working with them. CHADD provides various materials such as newsletters, magazines, and other publications dealing with AD/HD-related issues.

• National Association of School Psychologists

http://www.nasponline.org/families/index.aspx Parents can obtain helpful information about effective practices to promote children's positive behaviors.

National Resource Center on AD/HD

http://www.help4adhd.org/en/treatment/behavioral Introduces information necessary for improving the quality of life of children and adolescents with AD/HD, such as behavior modification programs, parenting, and education.

• OSEP Technical Assistance Center on Positive Behavioral **Interventions and Supports (PBIS)**

http://www.pbis.org/family/default.aspx Information and materials for parental involvement with individualized positive behavior support plans for children, including tools, videos, and presentations.

• Technical Assistance Center on Social Emotional Intervention for Young Children (TACSEI)

http://www.challengingbehavior.org/do/resources.htm Provides professionals and parents with a variety of web resources (e.g., training materials, workshop information, consultant location, research outcomes) to address social and emotional difficulties and challenging behaviors of children with disabilities.

Helping Parents Maintain and Extend Their Involvement in Behavioral Interventions

When parents are regarded as valuable members of the collaborative team, they are more likely to work effectively with practitioners. Practitioners should encourage parents to be collaborative decision makers. In addition, they should share information and ownership with parents, demonstrate mutual respect, and communicate clearly in order to increase effectiveness of parent-delivered interventions (Dunlap, Newton, Fox, Benito, & Vaughn, 2001). Practitioners should consider parents as equal partners throughout the development and implementation of behavioral interventions.

To maintain parents' involvement over time, practitioners should always be sensitive to the family's needs and remain flexible (Brookman-Frazee,

2004). For example, parents may feel more comfortable when training is provided at their home rather than in a public training center (Ingersoll & Dvortcsak, 2006). Parents may also need to arrange meetings at night or on weekends because of their work schedules. Behavioral interventions that are incorporated effectively into the existing family ecology will increase successful parent involvement and result in generalized outcomes (Lucyshyn et al., 2002).

To help parents continue to be involved in the behavior intervention for their child, it may also be helpful to offer parents the opportunity to join a supportive group. Support groups may motivate parents and help them overcome obstacles. One obstacle might be feelings of isolation (Stahmer & Gist, 2001). In support groups, parents may share similar difficulties related to

their children's behavioral problems, exchange useful information, and provide emotional support to one another.

In addition, providing information and resources (e.g., see Figure 3) related to addressing challenging behaviors or family needs can help parents continue to expand their application of effective behavioral interventions. Such information about diagnostic issues, evaluation of alternative treatments, community resources, and parents' rights may serve to enhance parents' knowledge and enable them to be more competent as intervention providers (Stahmer & Gist, 2001).

Helping Parents Maintain and Extend Their Involvement in Behavioral Intervention

During follow-up visits, Ms. Foster finds that things are generally going well. She shares that recently a parent support group was organized that meets on Saturday mornings. The Davises say this may be of interest to them so she provides a brochure about the program. "A friend of mine attends this group every Saturday and they have become quite a tight knit group. This has been helpful for her, because she felt that she was sometimes burdening friends and family with conversations about her child. Now, she and the other parents meet in a relaxed and nonjudgmental environment to discuss whatever is on their minds."

Conclusion

Parents have the potential to be effective agents of behavior change when they have opportunities to work with practitioners in planning and providing interventions. Practitioners should regard the parent-practitioner partnership as critical and indispensable in working with children. To create an effective partnership, practitioners should be aware of the strengths and needs of each family and assist parents to take an active role in behavioral interventions by helping them understand the behavioral approach, including them in the process of planning and implementing an intervention, and encouraging them to continuously use the intervention.

As parents collaborate with practitioners, they recognize the effectiveness of the behavioral approach, the nature and the extent of their child's challenging behaviors, and how to effectively change their child's behavior. In addition, parents can serve as trainers who teach significant others to implement effective interventions. Parents' participation throughout the intervention process is likely to result in improved outcomes for their children and continuing participation.

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