BACKGROUND
Treatment for attention-deficit / hyperactivity disorder (ADHD) often centers around pharmacological approaches neglecting psychosocial interventions and resulting in elevated parenting stress. The aim of this study was to decrease parenting stress by half by reducing ADHD symptoms utilizing behavior parent training (BPT) as a type of psychosocial intervention. The study was set in an outpatient psychiatric clinic.

LOCAL PROBLEM
ADHD is being treated by pharmacological means only, negating psychosocial treatment recommended by clinical guidelines. ADHD treatment is not being fully optimized causing elevated parenting stress levels. Continued elevated stress levels of parents contribute to interpersonal, familial, and social negative outcomes.

METHODS
A literature review was conducted to identify the relationship between parenting stress and ADHD as well as to determine the efficacy of BPT related to ADHD. Families were provided with instruments to measure parenting stress and their child’s ADHD symptoms prior to the intervention and upon completion. BPT sessions were designed to occur individually with each family in-person, but the rise of the Covid-19 pandemic delayed and altered sessions to move to a virtual platform.

INTERVENTION
The Triple P Positive Parenting Program, Level 3 for primary care, was implemented as the BPT intervention. Four families participated in four sessions of the BPT. The Parenting Stress Index (PSI) ADHD-5 Rating Scale were chosen to measure parenting stress and ADHD symptoms, respectively, pre- and post-intervention.

RESULTS
The PSI post-intervention revealed a decrease across all domains, but only the Child Domain met clinical significance with the reduction. The aggregate average of the PSI scores decreased by approximately 10 percent, falling short of the study’s aim to reduce parenting stress in half. ADHD symptomology improved but failed to be clinically significant.

CONCLUSION
The study showed modest improvement of parenting stress in parents and a reduction of ADHD symptoms in children with implementation of BPT sessions. Further modifications of the study should be considered for replication once the Covid-19 pandemic ceases to enhance the veracity and validity of the intervention within this context.