

ADHD Preference and Goal Instrument (ADHD PGI) Instructions:
By using the ADHD PGI, you agree to the following:

1. Any copies made of the ADHD PGI for use with patients or in research must appear exactly as seen in pages 4-7 of this PDF. No modifications may be made.
2. The following publication must be cited if the ADHD PGI is used in research that is published:
Fiks AG, Mayne S, Hughes CC, DeBartolo E, Behrens C, Guevara JP, Power T. Development of an instrument to measure parents' preferences and goals for the treatment of Attention-Deficit-Hyperactivity Disorder. *Acad Ped*, 2012; 12(5):445-455.
3. The purpose of the ADHD PGI is to start a conversation about families' preferences and goals for ADHD treatment. There is not currently a formal scoring mechanism; however, the items in the scale group into the domains listed below.

Medication Preference Scale Domains and Interpretations:

Acceptability- a higher score indicates medication is *more acceptable* to the family.

1. Medication is a reasonable way to help my child.
2. I feel comfortable working with my doctor to find the right medicine for my child.
3. I would have trust in my doctor to treat my child's ADHD with medicine.
11. I can get medication for my child at a place where I feel comfortable.
14. Medication will help improve my child's behavior.
15. People who are important to me support me in treating my child with medication.

Feasibility- a higher score indicates a *greater concern* about feasibility.

4. I am concerned about the time it would take to meet with my doctor to discuss my child's response to medication.
5. I am concerned about the time it would take to make sure that my child takes medication according to the doctor's recommendations.
6. I am concerned about the time it would take to monitor my child's reaction to medication.
7. I am concerned about the resources (insurance, income, or savings) I would need to cover the cost of treating my child with medication.

Stigma- a higher score indicates a *greater concern* about stigma.

8. I am afraid that if my child takes medication, he or she will be considered a problem child.
9. Others will consider me a bad parent if I treat my child's ADHD with medicine.
10. I feel my child will be treated differently by others if he or she takes medication for ADHD.

Adverse Effects- a higher score indicates a *greater concern* about adverse effects.

12. I am worried about the reaction(s) my child might have to medication.
13. I feel medication might change some things I like about my child's personality.
16. I am worried that medication may be addictive for my child.

Behavior Therapy Preference Scale Domains:

Acceptability- a higher score indicates behavior therapy is *more acceptable* to the family.

1. Behavior therapy is a reasonable way to help my child.
2. I feel comfortable working with a counselor/psychologist to help my child.
3. I would trust in a counselor/psychologist to help my child.
9. I can receive behavior therapy for my child at a place where I feel comfortable.
12. Behavior therapy will help improve my child's behavior.
14. People who are important to me support me in treating my child with behavior therapy.

Feasibility- a higher score indicates a *greater concern* about feasibility.

4. I am concerned about the time it would take to meet with a counselor or psychologist to learn behavior therapy.
5. I am concerned about the time it would take to work with my child using what we learn in behavior therapy.
6. I am concerned about the resources (insurance, income, or savings) I would need to cover the cost of treating my child with behavior therapy.

Adverse Effects- a higher score indicates a *greater concern* about adverse effects.

7. I am afraid that my child will be considered a problem child if he or she receives behavior therapy.
8. I feel my child will be treated differently by others if he or she receives behavior therapy.
10. I am worried about the reaction(s) my child might have to behavior therapy.
11. I am afraid that my child might react negatively to the things we learn in behavior therapy.
13. I feel behavior therapy might change some things I like about my child's personality.

Goal Scale Domains: a higher score for any domain indicates *stronger goal*

Academic Achievement:

3. My child needs to be better at completing schoolwork on time.
8. My child needs to focus better on work at school.
10. My child needs to take less time to complete homework.
12. My child needs to get better grades.
15. My child needs to learn more at school.
16. My child needs to care more about doing well at school.

Behavioral Compliance:

1. My child needs to be better at staying out of trouble at school.
5. My child needs to be able to work better with teachers.
6. My child needs to be better at following rules at home.
13. My child needs to be better at following school rules.

Interpersonal Relationships:

2. My child needs to be more caring toward adults in our family.
4. My child needs to be picked on less by other children.
7. My child needs to have more fun with other children.
9. The adults in my family need to be able to have more fun with my child.
11. My child needs to make friends more easily.
14. My child needs to get along better with other children in the household.

Medication Treatment

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Your doctor may offer your child a medicine for ADHD. Studies show that medication often helps children. The medicine can help your child focus. Medicine can also help control problem behaviors. Your child would take the medicine daily. It is usually very safe. Medicine can cause side effects. Common side effects include less appetite or sleep problems. Some children with heart problems may not be able to safely take medication. If needed, your doctor may order tests to check safety. Your doctor may then change the medicine or dose to best help your child. Medication for ADHD is not addictive.

Based on what you already know, please tell us how much you **agree** with the following statements about medication treatment for ADHD.

	<u>I agree</u>	Not at all	A Little	Somewhat	Very Much	Completely
1. Medication is a reasonable way to help my child.	0		1	2	3	4
2. I feel comfortable working with my doctor to find the right medicine for my child.	0		1	2	3	4
3. I would have trust in my doctor to treat my child's ADHD with medicine.	0		1	2	3	4
4. I am concerned about the time it would take to meet with my doctor to discuss my child's response to medication.	0		1	2	3	4
5. I am concerned about the time it would take to make sure that my child takes medication according to the doctor's recommendations.	0		1	2	3	4
6. I am concerned about the time it would take to monitor my child's reaction to medication.	0		1	2	3	4
7. I am concerned about the resources (insurance, income, or savings) I would need to cover the cost of treating my child with medication.	0		1	2	3	4
8. I am afraid that if my child takes medication, he or she will be considered a problem child.	0		1	2	3	4
9. Others will consider me a bad parent if I treat my child's ADHD with medicine.	0		1	2	3	4
10. I feel my child will be treated differently by others if he or she takes medication for ADHD.	0		1	2	3	4
11. I can get medication for my child at a place where I feel comfortable.	0		1	2	3	4
12. I am worried about the reaction(s) my child might have to medication.	0		1	2	3	4
13. I feel medication might change some things I like about my child's personality.	0		1	2	3	4
14. Medication will help improve my child's behavior.	0		1	2	3	4
15. People who are important to me support me in treating my child with medication.	0		1	2	3	4
16. I am worried that medication may be addictive for my child.	0		1	2	3	4

Child and Family Behavior Therapy

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Behavior therapy involves helping you learn how to manage your child’s behavior. Studies show that many children with ADHD are helped by behavior therapy. You may meet regularly with a counselor, psychologist, or therapist. You and your child will learn how to build a system that rewards good behavior at home and school. You may use rewards. These may include praise, attention from you, and privileges. Children may get rewards for finishing homework or following directions. You may also learn how to manage problem behaviors. For example, you may take away privileges. If your child loses control, you may send him or her to a quiet room. You will learn how to do this so that it is likely that your child’s behavior will improve.

Based on what you already know, please tell us how much you **agree** with the following statements about child and family behavior therapy.

	<u>I agree</u>	Not at all	A Little	Somewhat	Very Much	Completely
1. Behavior therapy is a reasonable way to help my child.	0	1	2	3	4	4
2. I feel comfortable working with a counselor/psychologist to help my child.	0	1	2	3	4	4
3. I would trust in a counselor/psychologist to help my child.	0	1	2	3	4	4
4. I am concerned about the time it would take to meet with a counselor or psychologist to learn behavior therapy.	0	1	2	3	4	4
5. I am concerned about the time it would take to work with my child using what we learn in behavior therapy.	0	1	2	3	4	4
6. I am concerned about the resources (insurance, income, or savings) I would need to cover the cost of treating my child with behavior therapy.	0	1	2	3	4	4
7. I am afraid that my child will be considered a problem child if he or she receives behavior therapy.	0	1	2	3	4	4
8. I feel my child will be treated differently by others if he or she receives behavior therapy.	0	1	2	3	4	4
9. I can receive behavior therapy for my child at a place where I feel comfortable.	0	1	2	3	4	4
10. I am worried about the reaction(s) my child might have to behavior therapy.	0	1	2	3	4	4
11. I am afraid that my child might react negatively to the things we learn in behavior therapy.	0	1	2	3	4	4
12. Behavior therapy will help improve my child's behavior.	0	1	2	3	4	4
13. I feel behavior therapy might change some things I like about my child’s personality.	0	1	2	3	4	4
14. People who are important to me support me in treating my child with behavior therapy.	0	1	2	3	4	4

Reaching Your Goals

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The doctor, nurse practitioner, or psychologist you work with will want to help you reach your goals for your child. To help you, they will want to know what type of changes you want to see from treatment.

Think about the concerns and goals that you have had for your child in the past month.

The following is a list of concerns that you may or may not have for your child. Some concerns are likely to be more important to you than others. Some concerns may be more important than others for you to address now.

Please indicate how important the concern is for your child.

	Not at all	Slightly	Moderately	Very Much	Definitely
1. My child needs to be better at staying out of trouble at school.					
This is a concern for me now.	0	1	2	3	4
2. My child needs to be more caring toward adults in our family.					
This is a concern for me now.	0	1	2	3	4
3. My child needs to be better at completing schoolwork on time.					
This is a concern for me now.	0	1	2	3	4
4. My child needs to be picked on less by other children.					
This is a concern for me now.	0	1	2	3	4
5. My child needs to be able to work better with teachers.					
This is a concern for me now.	0	1	2	3	4
6. My child needs to be better at following rules at home.					
This is a concern for me now.	0	1	2	3	4
7. My child needs to have more fun with other children.					
This is a concern for me now.	0	1	2	3	4
8. My child needs to focus better on work at school.					
This is a concern for me now.	0	1	2	3	4

	Not at all	Slightly	Moderately	Very Much	Definitely
9. The adults in my family need to be able to have more fun with my child.					
This is a concern for me now.	0	1	2	3	4
10. My child needs to take less time to complete homework.					
This is a concern for me now.	0	1	2	3	4
11. My child needs to make friends more easily.					
This is a concern for me now.	0	1	2	3	4
12. My child needs to get better grades.					
This is a concern for me now.	0	1	2	3	4
13. My child needs to be better at following school rules.					
This is a concern for me now.	0	1	2	3	4
14. My child needs to get along better with other children in the household.					
This is a concern for me now.	0	1	2	3	4
15. My child needs to learn more at school.					
This is a concern for me now.	0	1	2	3	4
16. My child needs to care more about doing well at school.					
This is a concern for me now.	0	1	2	3	4