



## PARENT-CHILD INTERACTION THERAPY (PCIT)

**P**arent-Child Interaction Therapy (PCIT) is an empirically-supported dyadic behavioral intervention program designed to improve the quality of attachment relationships between parents and children (aged 2- to 7-year-old). This is essentially implemented by decreasing child emotional and behavioral problems, such as prolonged tantrums, disruptive behavior and non-compliance, and encouraging child prosocial skills, such as cooperation and sharing. In PCIT, clinicians teach and guide parents to master a specific set of skills on the ‘language of self-regulation’ that act as both social reinforcers of positive (desired) child behavior and behavioral management techniques for negative (undesired) child behavior; promoting a more nurturing and understanding parent-child relationship.

**P**CIT can be distinguished from other child-centered therapies in that clinicians provide live feedback (using a one-way mirror and a wireless earpiece) to parents during coaching sessions in the play room. This allows the clinician to simultaneously observe, guide and evaluate the use of recently learned parenting skills and the efficacy of the training, further enabling parents to apply their skills appropriately and master them rapidly.

**“Parent-child interaction therapy is one of the most effective evidence-based practices in the field today”**. – Anthony Urquiza, PH.D,

*Director of Mental Health Services and Clinical Research at the University of California at Davis CAARE Center –*



**P**CIT is coached in two distinct phases: One phase adopts similar principles to that of traditional play therapy in that parents follow the child’s lead in play while applying positive communication and attention strategies. Parents learn to attend to their child’s desired behavior and ignore those undesired. This part of PCIT fosters children’s sharing and cooperation, self-esteem, feeling of security between parent and child, and reinforces constructive ways for dealing with children’s negative behaviors and tantrums. It also provides frustration tolerance, enhances communication skills and increases flexibility.

**T**he second phase instead focuses on specific discipline techniques to nurture children to listen to instructions and follow. During this phase, parents develop skills that are complemented by previously mastered skills upon cooperation. Parents are taught how to manage their child's behavior in a consistent and predictable way. PCIT eases child problem behaviors previously maintained in the parent-child relationship by "establishing consistent contingencies for child behavior" (PCIT International, 2011).

**“... fosters children’s sharing and cooperation, self-esteem, feeling of security between parent and child, and reinforces constructive ways for dealing with children’s frustration and anger.”**

**WHAT DO SCHOOLS AND RESEARCH SAY ABOUT PCIT ?**



**“Using an in vivo training technique, parents acquire more effective parenting skills, children’s behavioral problems improve, & together they develop a more positive & affectionate relationship. The positive affiliative nature developed as a result of participation in PCIT strengthens attachment and builds resilience in at-risk families.”** - Anthony Urquiza-

**P**arents completing PCIT typically display more positive parenting attitudes and demonstrate significant improvements in their interactional style in play situations with their children (McNeil & Hembree-Kigin, 2010), showing more frequent reflective listening, physical proximity, and pro-social verbalizations, and in turn less criticism and negative talk (PCIT International). Additionally, parent ratings significantly change before and after PCIT, with reports of less stress (Timmer et al., 2005) and less use of punishment to establish control (Chaffin et al., 2011). The majority of studies show there is a high level of parent satisfaction with the overall procedure and outcome of PCIT (Chaffin et al., 2004).

**E**xperimental research on the effectiveness of PCIT demonstrates statistically and clinically significant improvements in the relationship between parents and children with a wide variety of emotional and behavioral difficulties. These improvements are well maintained after the completion of the program (Hood & Eyberg, 2003). Children who have undergone PCIT with their parents develop healthier relationships and interactions, and the reduced presence of problem behaviors extends to both home and school (e.g. Brinkmeyer & Eyberg, 2003; McNeil & Hembree-Kigin, 2010).

**P**CIT has been successfully adapted for use within a variety of populations, such as:

- Children with ADHD & disruptive behavioral difficulties
- Children with various types of anxiety including separation anxiety disorder (SAD), social phobia (SP), selective mutism (SM) and obsessive compulsive disorder (OCD)
- Children with developmental disorders (Autism spectrum disorder)
- Adoptive children
- Children with suspected trauma

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