



Griffith University

Family Interaction Program

Research findings & clinical implications

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Overview

- History of the Family Interaction Program (FIP)
- Current programs
 - Parent-Child Interaction Therapy
 - Circle of Security – Parent DVD
- PCT
 - Research findings
 - Clinical implications
- Circle of Security
 - Preliminary research findings
 - Clinical implications
- Overarching findings: maternal sensitivity and parent-child attachment
- The Future of the Family Interaction Program

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History of FIP

www.sdrs.info/intervention.php

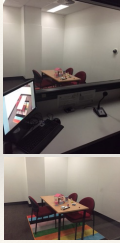
- 2003 Queensland Government: Future Directions Trial
- Established in the Psychology Clinic at Griffith University to provide Parent-Child Interaction Therapy (PCIT)
- 2004 Selected to continue as a service and a research program
- Continuously funded to provide services to Child Safety families ever since
- 2006 Extended service to younger children
- Now provide services to a wider age range than previously
- In the near future, will extend services to older children and teens
- Funding currently in place until 2016

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Current Programs

Parent Child Interaction Therapy

- In vivo coaching of parents in their interactions with their children
- Relationship Enhancement phase:*
 - Building parents' positive attention & animated engagement for desired child behaviour
 - Actively ignoring undesirable child behaviour to eliminate unintentional reinforcement
- Additional Skills Phase:*
 - Providing clear, assertive, and developmentally appropriate instructions
 - Practice a compliance procedure (i.e., "2 choices"), that involves providing appropriate consequences to non-compliance
- Approx. 17 sessions, conducted weekly, for around 45 mins




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Current Programs

Circle of Security - Parent DVD program

- Psychoeducation program that presents (via a DVD) attachment principals to parents in an easy to understand 8-session program
- Build-in activities that provide parents with an opportunity to reflect on their caregiving behaviours
- 11 sessions, conducted weekly, for around 60 minutes



www.circleofsecurity.org

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Parent-Child Interaction Therapy



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Parent-Child Interaction Therapy

- Some research findings

- ◊ PCIT has been found to improve:
 - ◊ Parents' observed emotional sensitivity to their child***
 - ◊ Parents' observed praise, positive attention and engagement (and reduced criticism)
 - ◊ Parents' reported child behaviour problems and emotional symptoms
 - ◊ Parents' reported depression and stress
 - ◊ Reduces notifications to child welfare agencies
 - ◊ *Regardless of presenting problem / child diagnosis*

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Parent-Child Interaction Therapy

- Some research findings

- ◊ **Treatment attrition**
 - ◊ Remains a central problem to parenting programs
 - ◊ Premature dropout from parenting programs typically between 30-50%
 - ◊ More psycho-social barriers faced by families, and the more intensive the treatment = greater attrition
- ◊ **Motivational Interviewing (MI)**
 - ◊ Delivered with the goal of increasing caregivers' motivation to make changes to parenting behaviours, prior to PCIT
 - ◊ *MI was effective at improving caregiver's reported motivation to make changes...but it did not reduce attrition*

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Parent-Child Interaction Therapy

- Some research findings

- ◊ PCIT limited to 12 sessions is more effective than unlimited sessions of PCIT (Thomas & Zimmer-Gembeck, 2012)
- ◊ Caution around adding additional components to an already-effective treatment - does not consistently improve its effectiveness
- ◊ For interventions designed to enhance parent-child relationship during early childhood, meta-analysis revealed:
 - ◊ Shorter, more focused interventions are more effective
 - ◊ Behavioural treatments the most effective (Bakermans-Kranenburg et al., 2003)

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Parent-Child Interaction Therapy

- Clinical applications

- ◊ Targeted focus - parenting
- ◊ Diagnosis not important
 - ◊ Clear picture of child's behavioural difficulties and parenting struggles
 - ◊ Conceptualisation of how the family's current functioning came to pass
 - ◊ Clear goals for both the parent and child
- ◊ Weekly feedback on progress
 - ◊ First 5 minutes of session parent practices their skills independently - results fed back to the parent immediately
 - ◊ Indication of whether practice has occurred between sessions
 - ◊ Provides extra incentive for parents to practice

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Parent-Child Interaction Therapy

- Clinical applications

- ◊ Relationship enhancement + positive attention (some research shows that this is all that is needed for ODD)
- ◊ Reduce attention to misbehaviour allows it to extinguish
 - ◊ Stay calm, stop talking, neutral expression
- ◊ Provide clear and brief instructions
- ◊ Provide consistent and appropriate consequences immediately, and for today only
 - ◊ Stay calm, and avoid lecturing, threatening, or reasoning

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Parent-Child Interaction Therapy

- Trauma and the Therapeutic Context

- ◊ Effective across different family circumstances, backgrounds and cultures
- ◊ Decreases child abuse potential & likelihood of notification
- ◊ Families come to treatment with:
 - ◊ Complex needs
 - ◊ Different experiences of care services
 - ◊ Different pathways into treatment
- ◊ Multiple service providers
 - ◊ Overwhelming and/or conflicting

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Parent-Child Interaction Therapy - Trauma and the Therapeutic Context

- ◊ PCIT may compliment trauma-focused interventions via shared components
 - ◊ Emotion Regulation (describing, reflecting, organising)
 - ◊ Children
 - ◊ Parents/Caregivers
 - ◊ Psycho-education
 - ◊ Interactions
 - ◊ Consistent, predictable, repetitive, structured
 - ◊ Child's Perspective
 - ◊ Therapeutic Caretaking

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Circle of Security - parent DVD - Some findings

- ◊ *Anecdotally*
 - ◊ High engagement
 - ◊ Often completely new concepts for parents
 - ◊ **Applicable to relationships across the life span**
- ◊ *Empirically (preliminary findings, N = 29)*
 - ◊ **Low treatment drop out so far (n = 2)**
 - ◊ Reductions in parenting stress, and in perceptions of the child as "difficult" in the COS treatment group, but not in the waitlist group

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Circle of Security - parent DVD - Clinical applications

- ◊ Understanding that all of a child's emotional needs can be found on the circle
 - ◊ What is my child's behaviour saying about his/her unmet needs?
- ◊ Parents: Always be bigger, stronger, wiser and kind
 - ◊ "Being with" children in their difficult emotions rather than pushing children to feel better
 - ◊ Empathising and listening versus reasoning with and problem solving
- ◊ "Shark Music": a concept to help parents understand their own discomfort with particular child needs
- ◊ Parent-child relationship as foundation for children's coping
 - ◊ Quality time is key

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Parent-Child Attachment Security

- ◊ Emotional tie between child and caregiver that provides security in times of threat or challenge ("stress" and "distress")
- ◊ Serves as physical and psychological protection
- 1. Confidence in the caregiver's availability is thought to enhance the child's ability to explore in novel or challenging situations
 - ◊ SECURE BASE FUNCTION
- 1. Serves a major protective and coping function when faced with danger
 - ◊ SAFE HAVEN FUNCTION



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Parent-Child Attachment - Stress, Coping and Psychopathology

- Attachment is a "biologically evolved coping strategy for managing fear and distress" (Kobak et al.)
- Early parent-child relationship experiences are a foundation for development of:
- ◊ The biological stress and coping system
 - ◊ The emerging sense of self
 - ◊ Understanding of emotions and relationships
 - ◊ Develop efficacy in managing distress or challenging situations
 - ◊ Develop beliefs about the self as worthy of support from others, and others as trustworthy and reliable
 - ◊ These beliefs are what can set in motion developmental pathways of adaptation or maladaptation - risk or resilience

Secure parent-child attachment => better ability to regulate intense emotions and cope with stressors (Zimmer-Gembeck et al.)

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Parents' Emotional Sensitivity

- ◊ *Emotional sensitivity*
 - ◊ A caregiver's ability to detect, interpret and effectively respond to their child's cues
 - ◊ Key predictor of parent-child attachment security and many psychosocial outcomes in children
 - ◊ Parents' psychopathology is associated with more behavioural and emotional symptoms in their children => some of this association is due to parents' reduced emotional sensitivity
 - ◊ Often a target in parenting interventions
 - ◊ Interventions that enhance parents' sensitivity tend to produce better improvements in parent-child attachment (Bakermans-Kranenburg et al., 2003 - meta analysis) (Zimmer-Gembeck et al., 2013)

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Parenting Interventions - Where to next?

- ◊ Treatment drop-out remains a key problem for parenting interventions
- ◊ Parents' emotion regulation:
 - ◊ Do parenting interventions assist parents in being sensitive and responsive to their child's needs, and support their children to tolerate distress by helping parents to better regulate their own discomfort and frustration?
- ◊ Regulating Overload and Rage (ROAR) 8 – 12 years
 - ◊ Psycho-education, emotion-regulation, and collaborative problem solving (Greene, 2014)
- ◊ Available from August/September 2015

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Future

- ◊ Treatment drop-out remains a key problem for parenting interventions
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Publications

- ◊ Webb, H. J., Thomas, R., McGregor, L., Avdagic, E., & Zimmer-Gembeck, M. J. (under review). A randomized controlled trial of Parent-Child Interaction Therapy with and without transgenerational enhancement.
- ◊ Zimmer-Gembeck, M. J., Webb, H. J., & Thomas, R. (in press). A new measure of toddler parenting practices and associations with attachment and mothers' sensitivity, competence, and enjoyment of parenting. *Child Care, Health and Development*
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- ◊ Zimmer-Gembeck, M. J., Thomas, R., Hardrickson, K., Avdagic, E., Webb, H., & McGregor, L. (2013). Maternal emotional distress and children's internalizing and externalizing in families at high risk of child abuse: Child gender moderates parenting sensitivity as a resilience factor. *Infant and Child Development*, *27*, 488-500.
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- ◊ Thomas, R., & Zimmer-Gembeck, M. J. (2011). Accumulating evidence for best practice: The case of Parent-Child Interaction Therapy and child maltreatment. *Child Development*, *82*, 177-192.
- ◊ Schilling, M., Zimmer-Gembeck, M. J., & Therrell, B. (2011). *Do parents' depression keep a good parenting program down? The case of Parent-Child Interaction Therapy*. In J. Friedman & A. Brown (Eds.), *Interventions of childhood psychology* (volume 9). New York: Nova Science Publishers, Inc.
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