

Home-Based Parent-Child Interaction Therapy (PCIT): An Empirical and Clinical Perspective

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Bridging the Gap

- Efficacy → Effectiveness
- Transportability of EBT in “real world” settings is needed
- Many PCIT studies are laboratory/clinic based
- Home-Based mental health programs more prevalent
- Home-Based PCIT is happening—need to strengthen the research base

Advantages

- Ecological Validity: Observing behaviors in their “natural” environment versus a more “artificial” setting
- Implementation: Applying skills in the home-setting versus discussing them in the clinic (e.g., timeout implementation)
 - Coaching opportunities to generalize skills
- Rapport building
- Lower attrition rates?

Challenges

- Environmental Control
 - Anticipation: “House Tour”
 - Choosing play areas/times carefully
- In-Room Coding/Coaching
 - Bug-in-the-ear?
 - Ignoring child advances
 - Written communication
- Distractions
 - Visitor policy
 - Problem solve around siblings
- Resources
 - PCIT Traveling Kit

Empirical Perspective

Home-Based Research Studies

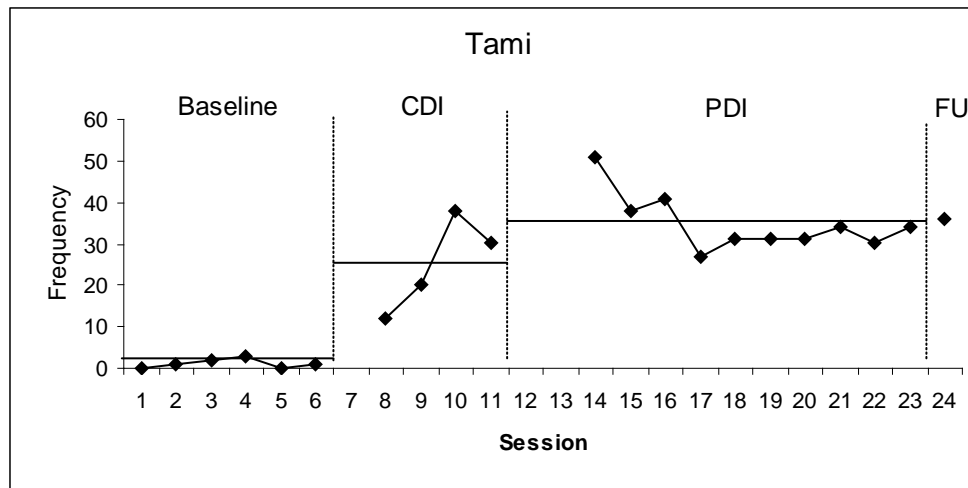
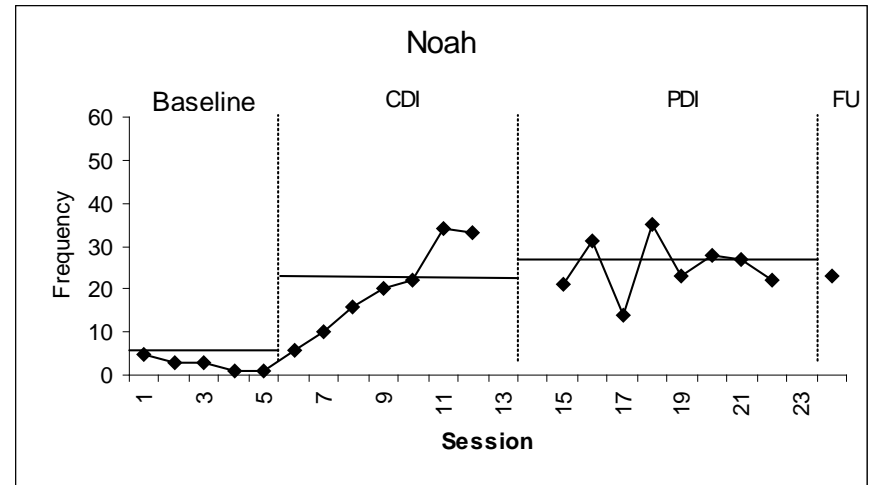
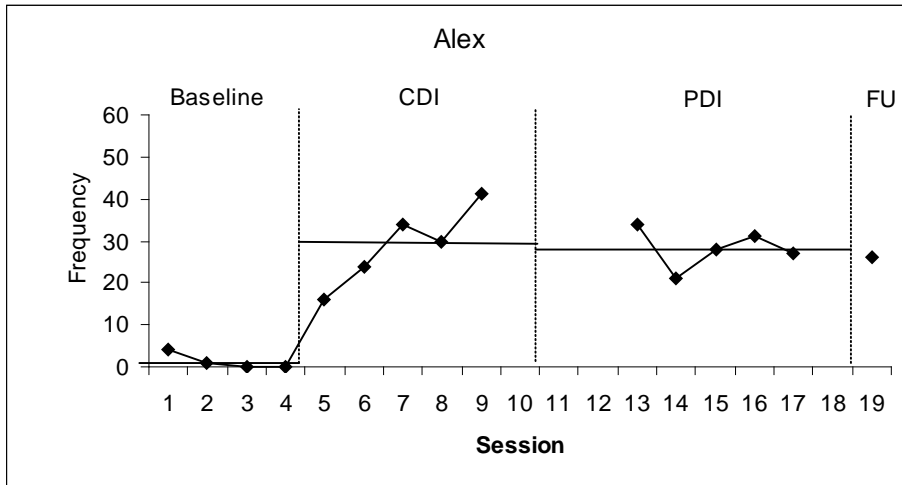
Study #1 (Ware et al):

Single-subject design across 3 children with ODD

Study #2 (Masse et al):

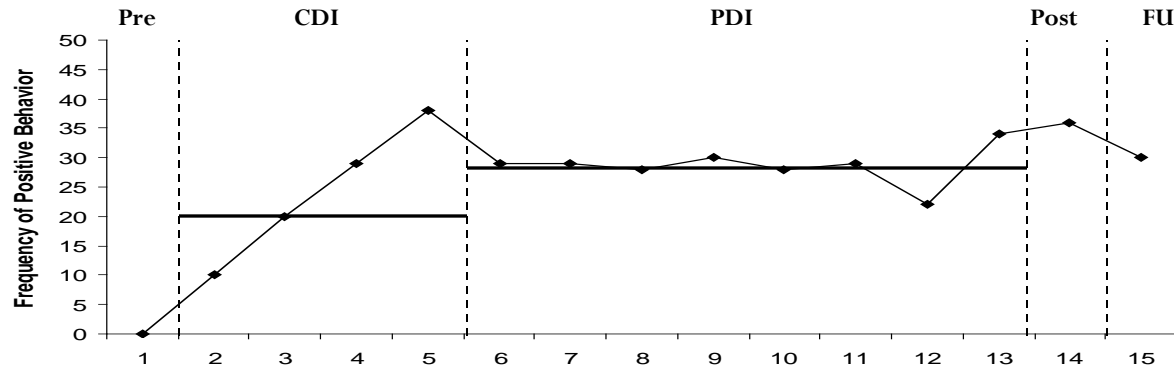
Single-subject design across 3 children with PDD and
Significant behavioral challenges

Caregiver Positive Behavior: Study #1

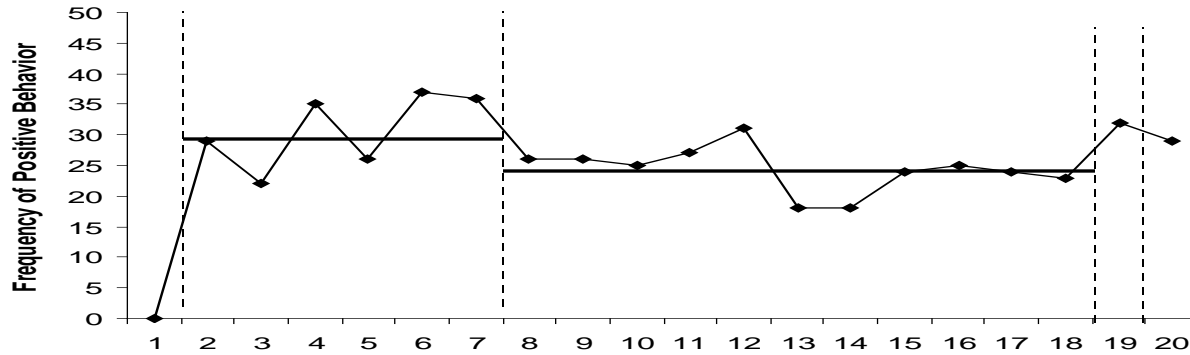


Caregiver Positive Behavior: Study #2

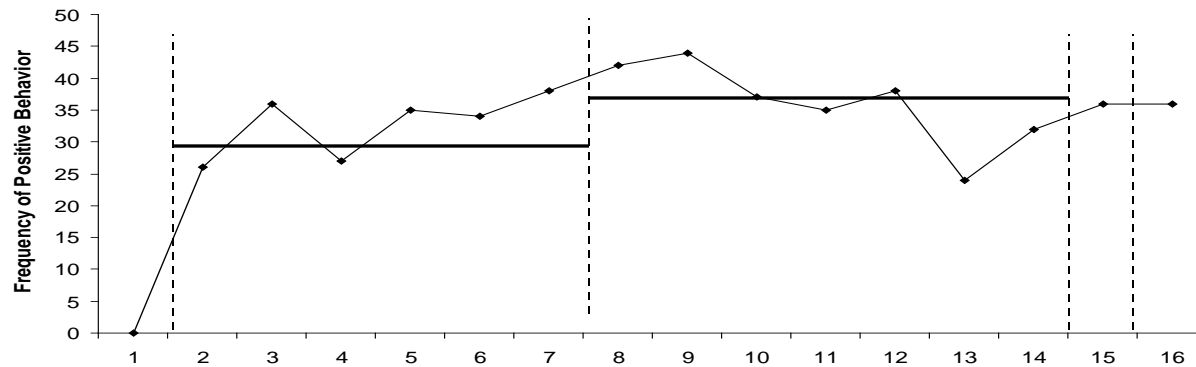
Kenneth



Adam

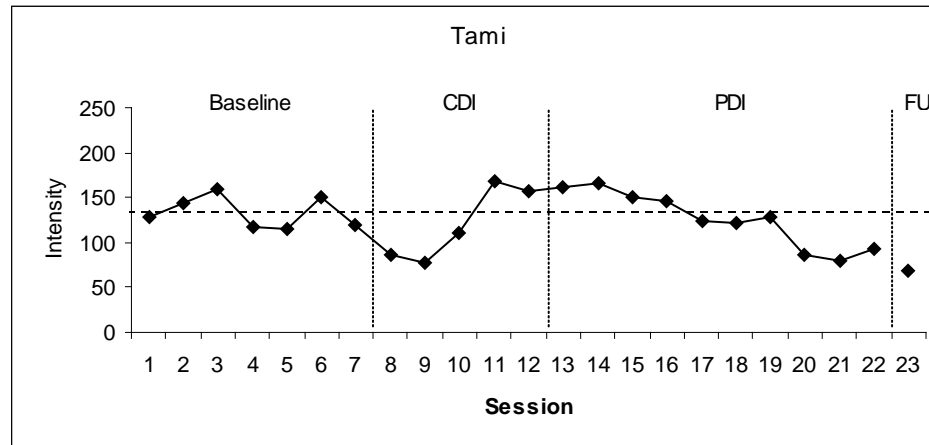
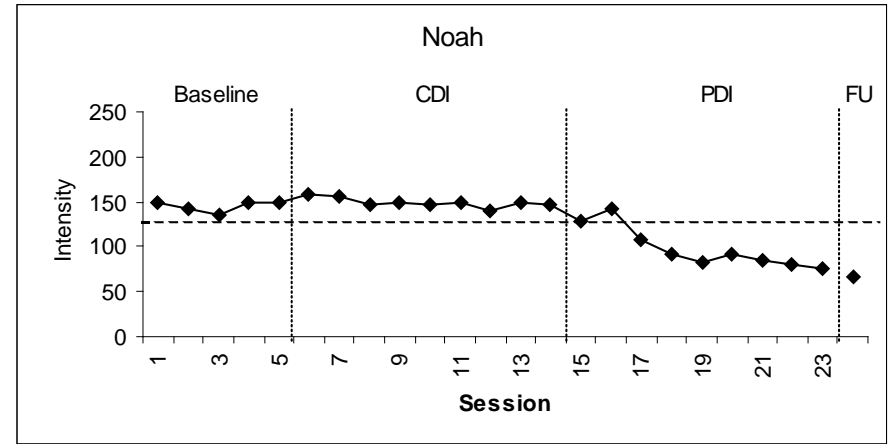
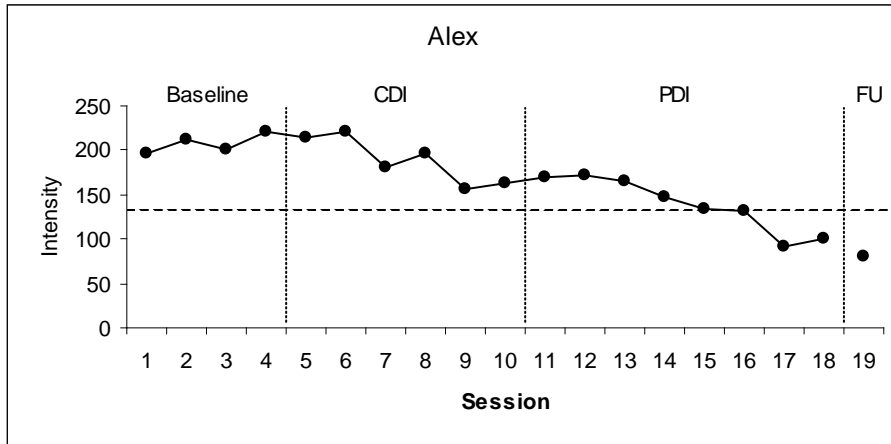


Christopher

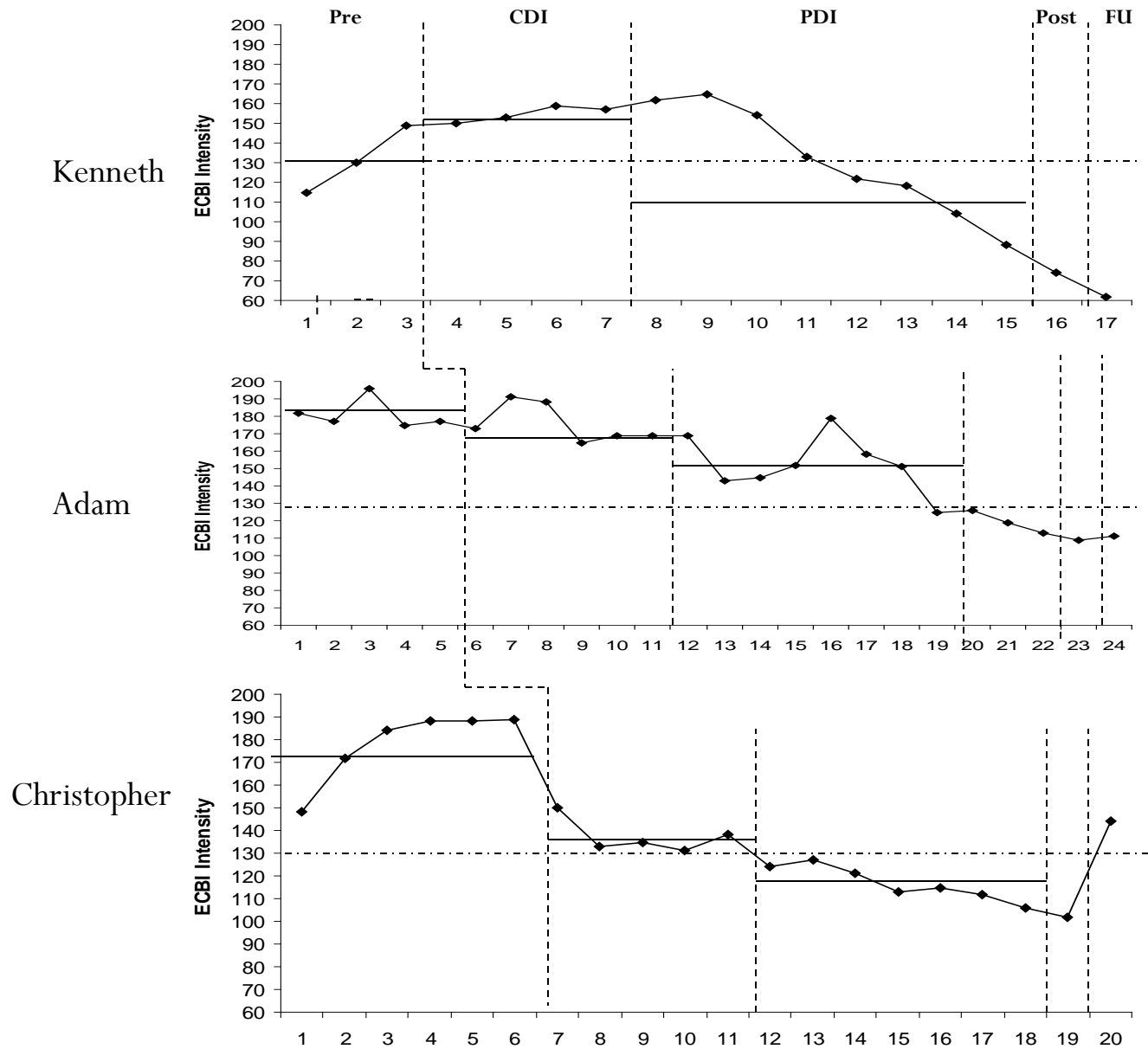


Session

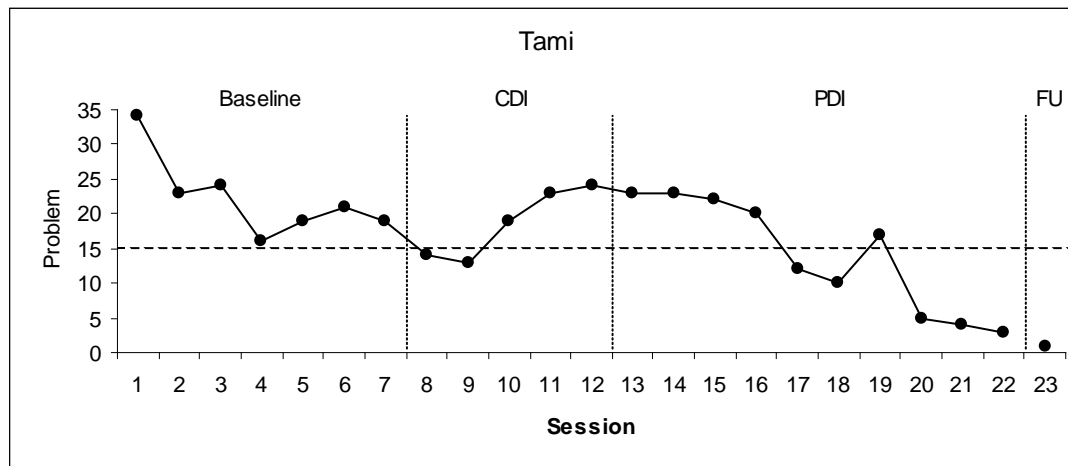
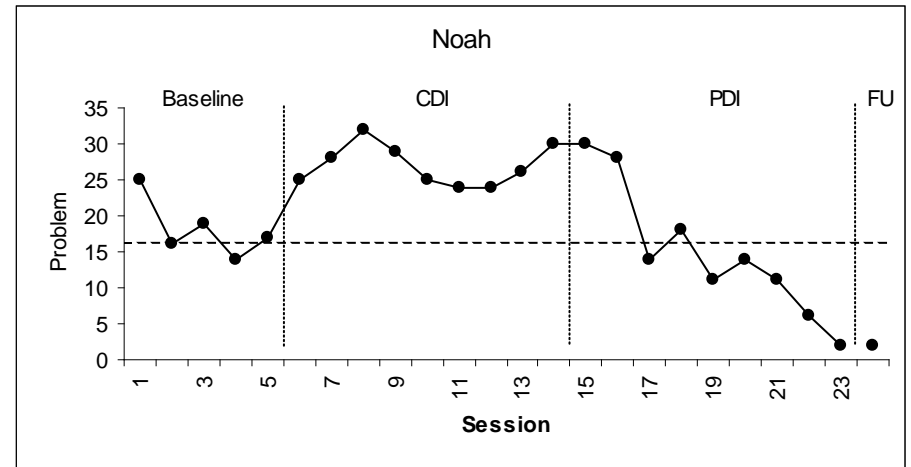
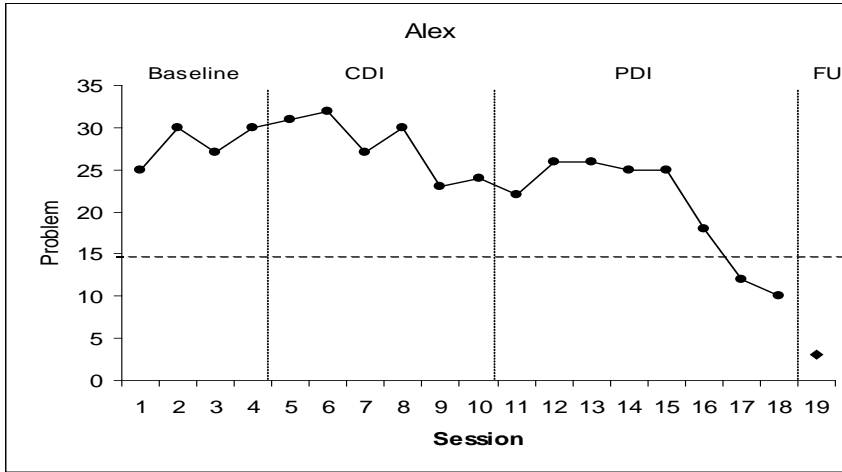
ECBI Intensity Score: Study #1



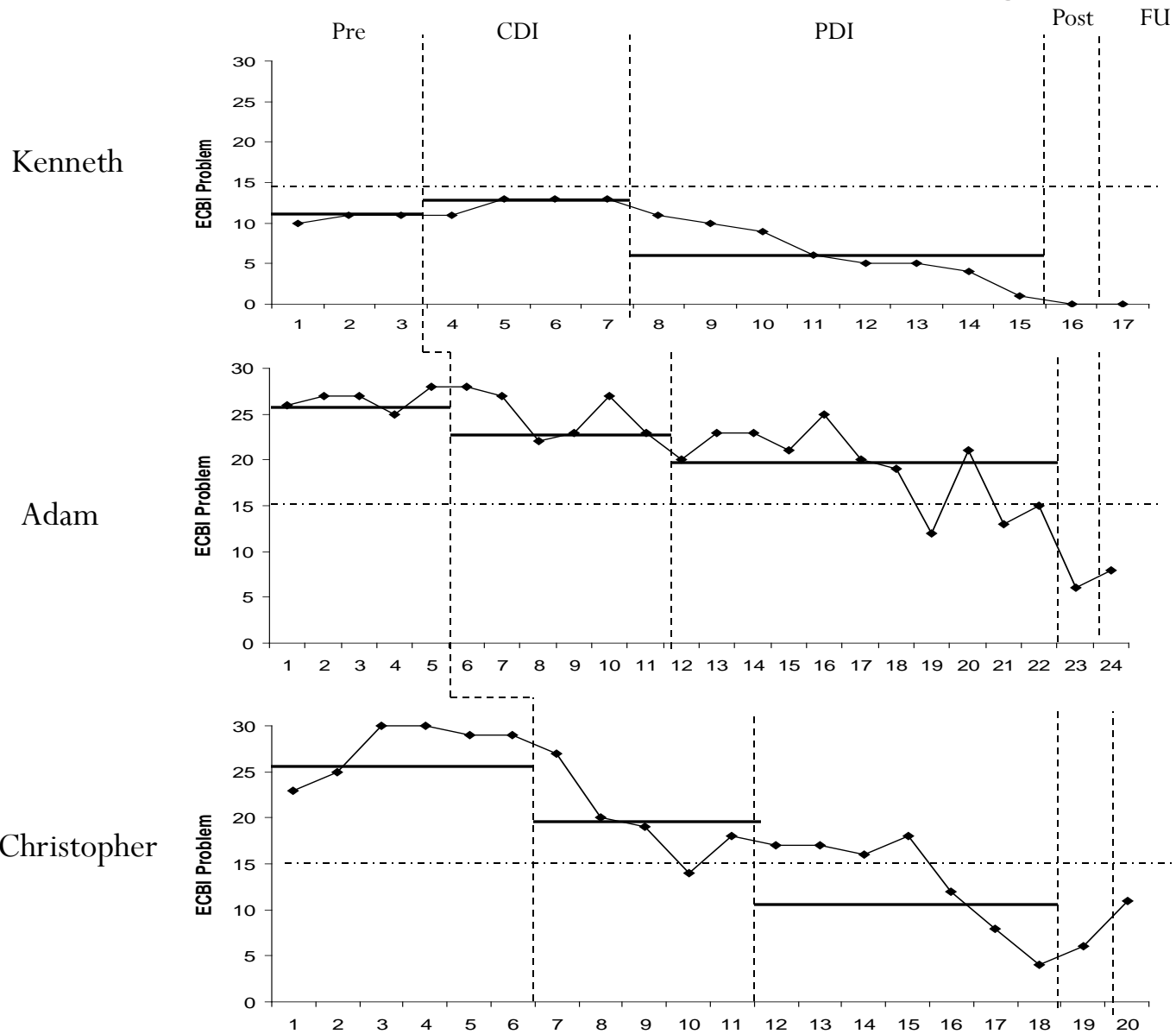
ECBI Intensity Score: Study #2



ECBI Problem Score: Study #1



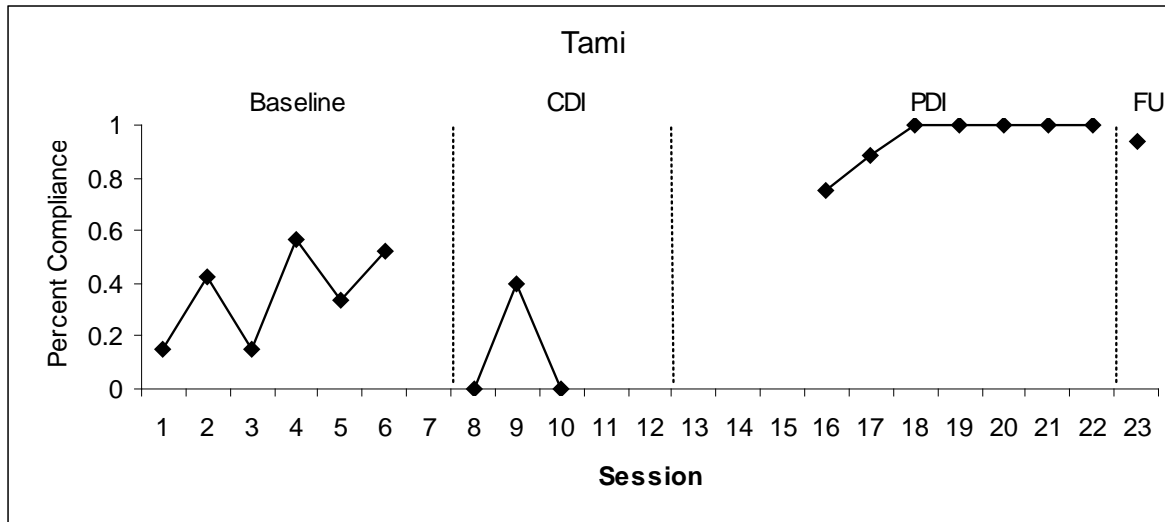
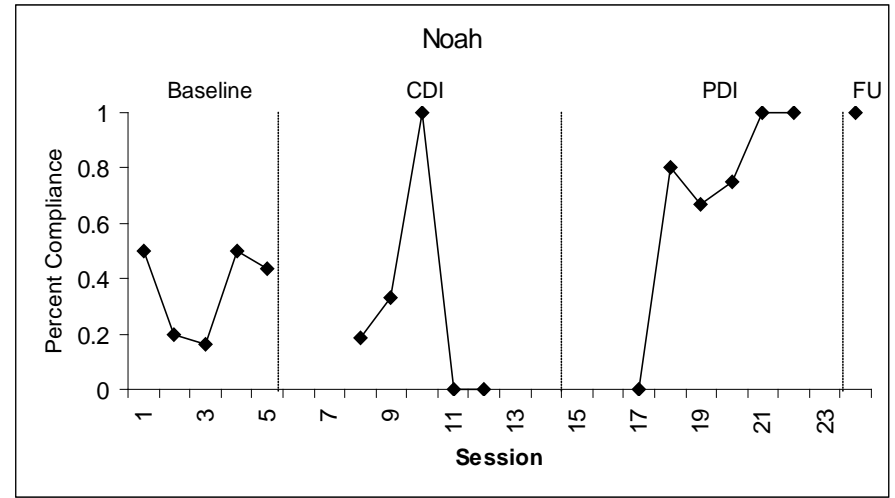
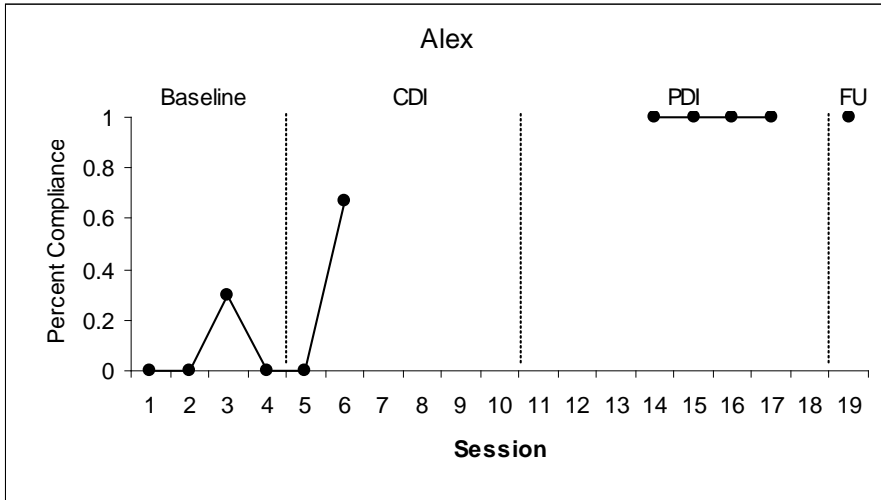
ECBI Problem Score: Study #2



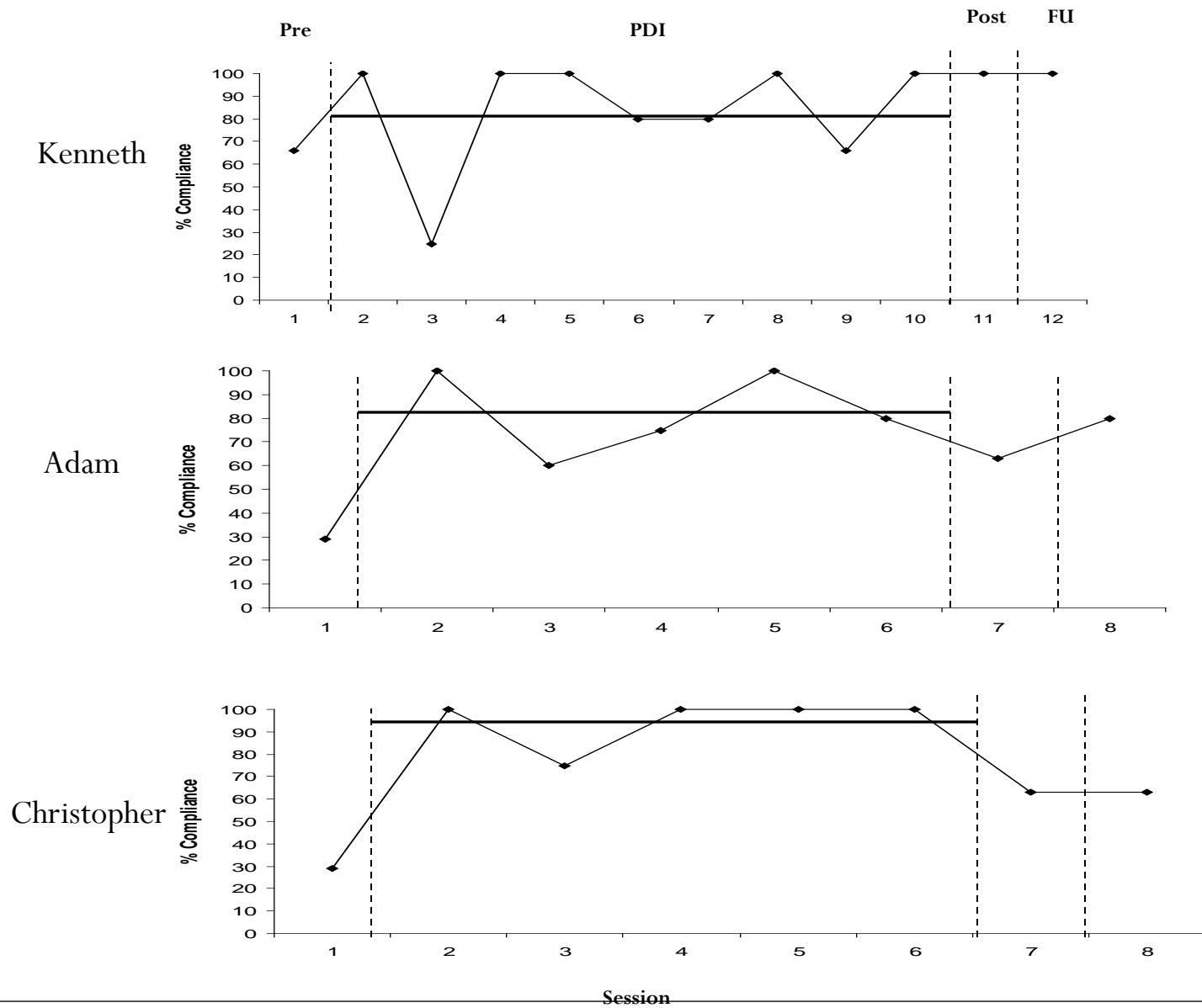
Comparison to previous studies: ECBI Intensity

Study	ECBI Pre M (SD)	ECBI Post M (SD)	ECBI FU M (SD)
Study #1 Ware et al., 2006	157.67 (34.82)	89.33 (12.90)	71.67 (8.14) 1 month
Study #2 Masse et al. (In Press)	163.5 (25.2)	97 (14.5)	105.3 (31.5) 2 month
Bagner et al., 2007	156.40 (34.30)	100.63 (26.22)	N/A
Nixon et al., 2003	166.59 (18.93)	125.24 (21.67)	117.47 (31.69) 6 months
Eisenstadt, et al., 1993	169.3 (25.90)	112.0 (20.10)	

Child Compliance: Study #1



Child Compliance: Study #2



Consumer Satisfaction Ratings: Treatment Attitude Inventory

Study #1 Ware et al, 2006	Study #2 Masse et al, (In Press)
Mean Score: 50 (out of 50)	Mean Score: 44.6 (out of 50)

Delaware's B.E.S.T

(Bringing Evidence-based Systems of Care and Treatment) **for Young Children**

Purpose:

To create, maintain and sustain evidence-based mental health interventions using the system of care service delivery approach to give Delaware's young children and their families the very **BEST** chance of success in home, school, community and life.

Home-Based PCIT Clinical Structure

Delaware's
B.E.S.T.
For Young
Children
and Their
Families



Division of
Prevention
and
Behavioral
Health

NCC

2 Clinicians
2 Behavioral
Specialists

46 Families

Sussex

2 Clinicians
2 Behavioral
Specialists

59 Families

Data Collection

Local Evaluation

- **DE-IDENTIFIED**
- Qualtrics web-based system
- Clinicians enter data
- Evaluation team support when needed

National Outcome Study

- 2-3 Hour interviews
 - Behavior Observations
- Interviewers enter data
- BL, 6, 12, 18, 24 months
- Mostly in-home interviews

Data Collection Measures

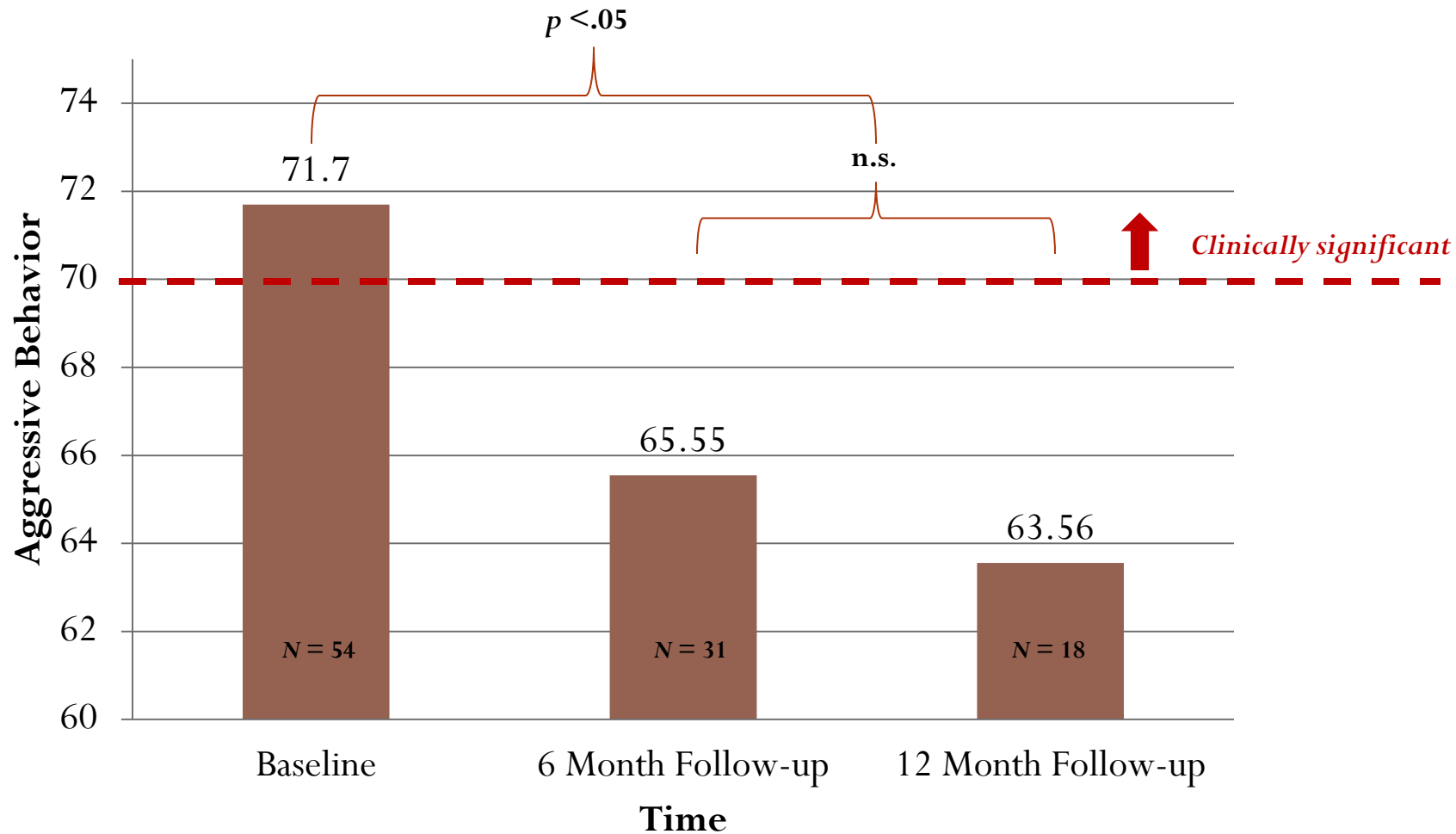
Local Evaluation

- ECBI
 - Intensity
 - Problem
- DPICS
 - Positive Parenting Skills
 - Avoid Skills
 - Child Compliance Rates

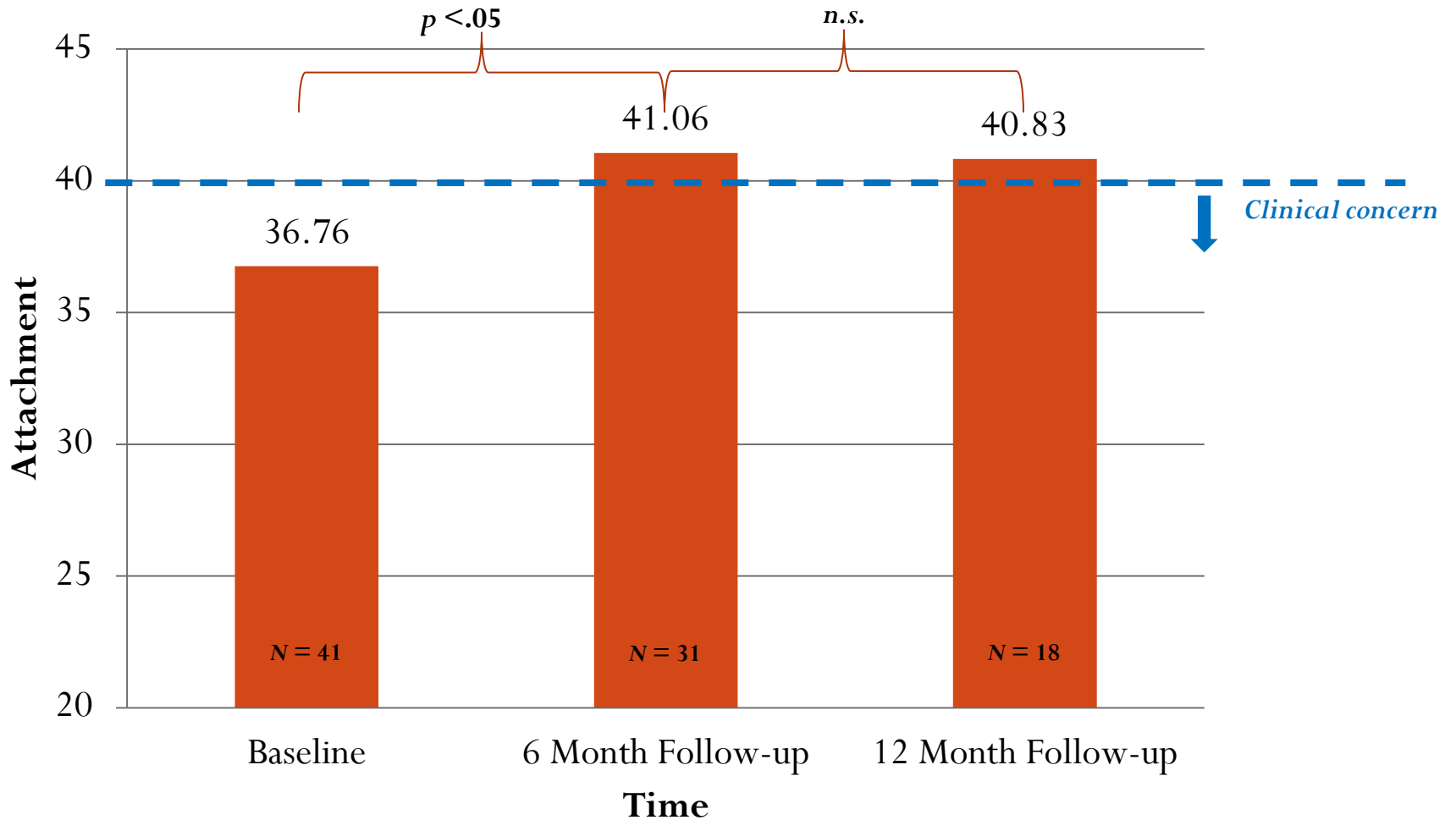
National Outcome

- Caregiver Strain Questionnaire
- Child Behavior Checklist
- Columbia Impairment Scale
- Devereux Early Childhood Assessment
- Parenting Stress Index
- Pre-School Behavior Rating Scale

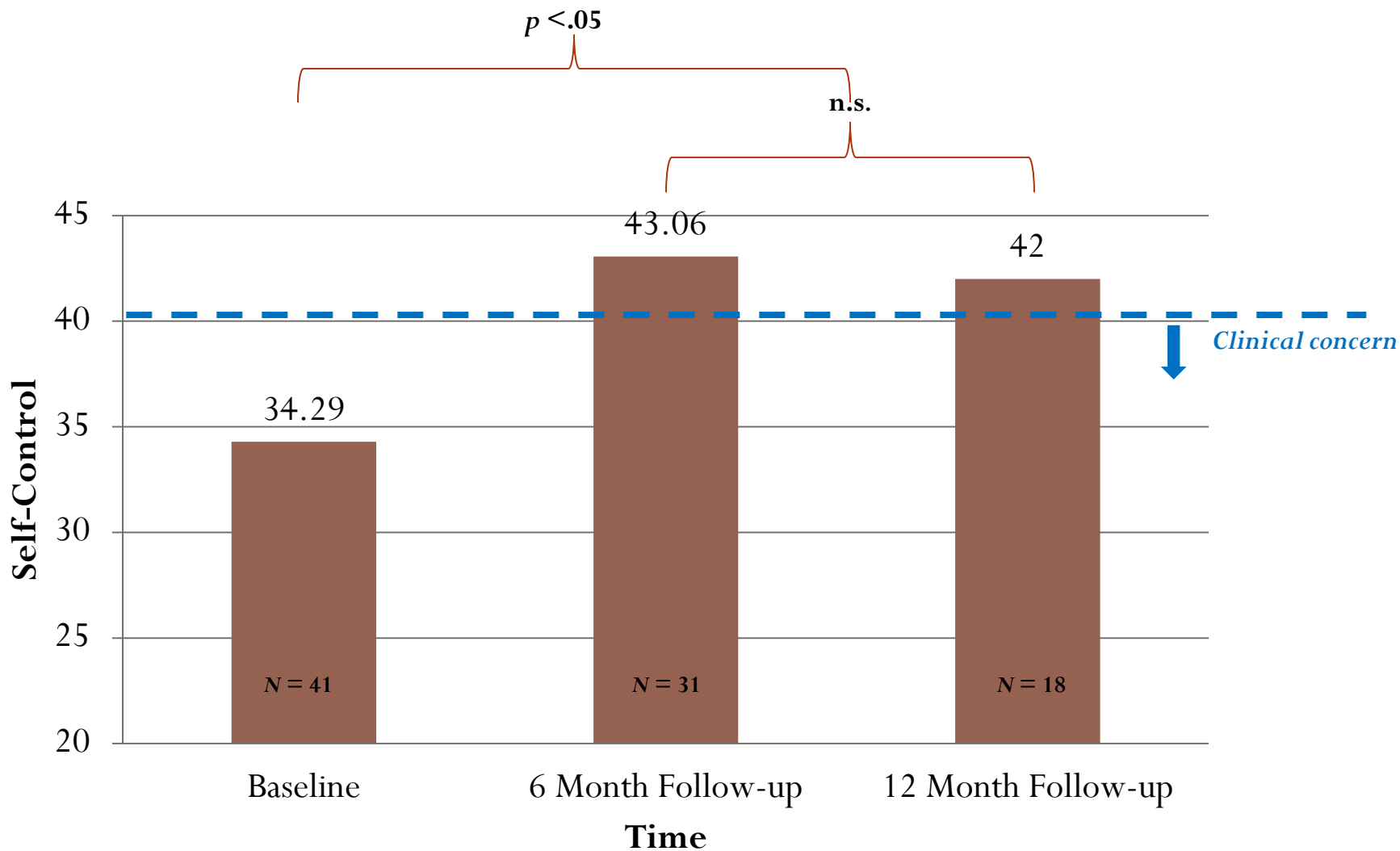
Child Behavior Checklist 1.5-5 (CBCL 1.5-5): Aggressive Behavior subscale (t-scores)



Devereux Early Childhood Assessment (DECA): Attachment/Relationships subscale (t-scores)



Devereux Early Childhood Assessment (DECA): Self-control subscale (t-scores)



Conclusions

- Preliminary Evidence shows home-based is comparable to clinic-based on particular outcome variables
- Promising delivery approach for EBT's: Increasing demand in current treatment marketplace
- Further research needed: RCT's, clinical trials
 - Potential Research Areas:
 - Cost effectiveness
 - Attrition rates
 - Coaching styles (qualitative/quantitative)
 - Hybrid model?
 - Rate of Response
 - Parental Stress