

Validating the BEAS-T: Linking Parent-Child Interactions with Standardized Measures

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Recent research supports the effectiveness of relationship-based interventions when treating mental health problems of young children (e.g., Lieberman et al., 2005). Reliable and accessible measures of the quality of the parent-child relationship facilitate assessment of the nature of the dysfunction and the effectiveness of treatment. The construct of emotional availability reflects the quality of parent's and child's connection to one and other in play, comprised of elements of parental warmth and sensitivity and children's responsiveness. Scores on the Emotional Availability Scales (e.g., EAS, 3rd Ed., Biringen, 2008) correlate with Adult Attachment Interview Scales (Biringen, 2000) and attachment categories measured by the Strange Situation (Easterbrooks et al., 2000). Timmer and colleagues developed the Brief Emotional Ability Screener-Trianalogue (BEAS-T; Timmer et al., 2009) for use in a clinical observational assessment using a three-part parent-child interaction analog. An earlier study examined the face validity of the BEAS-T found strong, significant correlations between related scales of the EAS and the BEAS-T (West et al., 2009). The purpose of this study is to extend previous research and investigate the relationship between scales on the BEAS-T and the Parenting Stress Index (PSI), Eyberg Child Behavior Inventory (ECBI), and Child Behavior Checklist (CBCL).

The participants consisted of 134 mother child dyads who were referred to UC Davis CAARE Center to participate in Parent-Child Interaction Therapy (PCIT) because of the child's externalizing behavior problems. The BEAS-T consists of three child scales and four parent scales: child positive response, engagement, and controlling behavior; parent sensitivity, hostility, control, and passivity. Results of analyses showed significant correlations between parent scales on the BEAS-T and standardized measures of child behavior problems. Most notably, parents who showed more hostility in the observational assessment rated their children's behavior problems as more severe on the CBCL, ECBI, and PSI. On the whole, children's EA was not significantly correlated with standardized measures of child behavior problems. Results will be discussed with respect to the meaning of links between observed EA and parents' reports of behavior problems for clinical assessment and practice.

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