PCIT with a Visually-Impaired Caregiver

Grant W.O. Holland, Ph.D.
Post-Doctoral Resident - Dallas CBT
grant@dallascbt.com

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Overview

• Will talk a little bit about the research on visually-impaired parents
  – Spoiler alert! There’s not a lot
• Will give you a little background on my client
• Will give you an idea of what adjustments I did (and did not!) need to make to the standard PCIT protocol

Prevalence of Visual Impairment

• Approx. 19 million persons (8.8%) age 18 and over report having any trouble seeing, even when wearing glasses or contact lenses
• Data collected from the National Health Interview Survey on Disability (1994-95) indicate that approximately 1.3 million persons reported legal blindness (0.5%)

All adapted from Lighthouse International, 2014

Prevalence of Visually-Impaired Parents

• No good numbers.
• Conservative estimate:
  – About 37% of the 1.3 persons reporting legal blindness would be between 20 and 64 (age range of most parents with kids in the home) = ~481,000 (adapted from Pollard, Miner, & Cioffi,2000)
• Liberal estimate:
  – 2.8% of the U.S. population aged 16 – 64, or about 5.3 million people of child-rearing age, had some kind of sensory disability (U.S. Census Bureau, 2005)

Practical Concerns of Parents who are Visually Impaired

(Rosenblum, Hong, & Harris, 2009)
• Safety: strategies include maintaining close proximity, verbal contact, limiting access to rooms, choice of neighborhood
• Transportation: single biggest stressor, limits to ability to engage in activities, limits “spontaneity”
• Homework: use of computer assistive tech, reading aloud, etc…
• Communicating with teachers
• Picking children up: Meeting spots or designated help persons

Social/Emotional Concerns of Parents who are Visually Impaired

(Rosenblum, Hong, & Harris, 2009)
• Positives: increase in perceived compassion, acceptance of others, and empathy on the part of their children
• Toll of challenges: various practical challenges greatly increase stress
• Explaining impairment to their children
• Feeling left out of activities
Adaptations Made by Visually Impaired Parents
(Conley-Jung & Olkin, 2001)

- Visual impairment does not affect ability to provide basic aspects of parenting: love, guidance, nurturance, and decision making.
- Visually-impaired parents do feel that they require more:
  - Planning
  - Trial-and-error learning
- Parent-child interactions are not negatively affected by lack of visual communication; simply rely more on verbal or physical communication.

Stigma Faced by Visually-Impaired Parents (Conley-Jung & Olkin, 2001)

- These parents often face criticism or concerns from those around them regarding their parenting abilities.
- “A sighted mom’s child can enjoy an ice cream cone as it drips down his shirt without anyone giving a second thought about it, while the child of a sight-impaired parent is a ‘poor child whose parents don’t know he has ice cream on his shirt.’”

Client Info

Mom
- 35 y/o
- Asian-American
- Single
- Visually-Impaired since birth
- Parents (GPAs) are semi-local
- Court-ordered

Child
- 7 y/o
- Asian/Hispanic
- Removed 1 year prior due to Corporal Punishment resulting in marks/bruises
- Returned to mom’s care just prior to Pre-DPICS
- Father not involved

Pre DPICS
- VIDEO

Client Concerns

Mom’s Concerns
- Child compliance
  - No concerns RE defiance
- Child manners
- Perception of others
- Transportation difficulties

Therapist’s Concerns
- Lack of play skills
- Communication skills
- Potential need for modification

Goals

- Increasing give-and-take between parent and child
  - I.e., allow kid to lead the play
- Improving mom’s disciplinary strategies to decrease risk for use of corporal punishment
General Modifications So Far...

- Verbal administration of all assessment materials
  - Could use Computer Assistive Tech; emailing PDF or Word docs of the handouts
  - Completion of homework forms first thing each session
  - More limited use of WACB
- Need to orient to the room at the beginning of each session
  - Definitely if there is any change in the setup
  - Identifying toys set out for each day

CDI Coaching – Modifications?

- Praise – No need to modify
- Reflect – No need to modify
- Imitate – No need to modify
- Describe – Describe what you CAN sense
  - A little more non-specific than a standard case
- Enjoy – No need to modify
- Limiting Questions and Commands
  - E.g., “What is that?” or “Look at this.”
  - This took some special attention and flexibility

CDI Coaching Examples

- VIDEO

PDI Coaching – Time Out Sequence

<table>
<thead>
<tr>
<th>Standard</th>
<th>Back-up Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Command</td>
<td>• Loss of Privileges</td>
</tr>
<tr>
<td>2. Count</td>
<td>- Swoop and Go too difficult</td>
</tr>
<tr>
<td>3. Two Choices</td>
<td>- Back-up room not a realistic option in the home</td>
</tr>
<tr>
<td>4. Count</td>
<td></td>
</tr>
<tr>
<td>5. Explain on the way to the chair</td>
<td></td>
</tr>
<tr>
<td>6. 3 min + 5s Silence</td>
<td></td>
</tr>
<tr>
<td>7. Etc....</td>
<td></td>
</tr>
</tbody>
</table>

PDI Coaching – General Mods

- Emphasis on well-timed explanations to improve compliance
- Use of loss of privileges as back-up to the time-out chair
  - Swoop-and-go not really feasible
- Setting up a dedicated time-out chair from the start
  - Avoid having mom scramble
- Strategizing ways to confirm compliance
  - “Please eat 3 bites of your cream corn.”
Command Examples

• VIDEO

PDI Coaching – In-Home Sessions

• Started simply because I needed to get Mid measures done, then needed to get her graduated
• Helped with PDI strategies
  – Ruled out use of back-up room in home
  – Helped with placement of time-out chair
  – Helped ID that confirming compliance was a concern
  – Helped the skills generalize much more quickly
  – Helped me understand some of the difficulties this mom faces

Summary of Modifications to PCIT

• Assessment
  – Verbal administration of measures; less frequent
• General strategies
  – Orient to the room each time
  – Verbal check in on homework / filling out sheet
  – Providing PDF copies of handouts via email
• CDI
  – Description of broader behaviors
• PDI
  – Somewhat more vague direct commands
  – Loss of privileges as back-up to time out
  – Setting up the time-out chair before session
  – Coming up with ways to confirm immediate compliance
• Really, not much else!

Summary of General Strategies to improve engagement

• Being up front, authentic, and respectful
• Emphasizing collaboration while maintaining confidence in the treatment
• Checking in with mom regularly regarding need to modify or adapt anything

Challenges During Treatment

• Transportation
• Lack of play skills
  – Made it hard to get the ball rolling on CDI on many occasions
• Difficulty of getting child to NOT comply; only a few time outs in session

Post DPICS

• VIDEO
Speaking about assumptions others make:

• VIDEO

References


