## Correlates of Change in Quality of Parent-Child Relationships in PCIT

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Parent Child Interaction Therapy (PCIT) is founded on the principle that by increasing parental warmth and responsiveness to the child, the parent's attention and approval becomes a significant social reinforcement for the child. Once the quality of the relationship is improved, therapists can teach parents how to manage their children's difficult behaviors fairly easily. The goal of the therapist is to increase parents' positive verbalizations (praise, reflections, and behavioral descriptions) and decrease parents' negative verbalizations (commands, questions, criticisms). While the efficacy of PCIT has been well-established (e.g., Hood & Eyberg, 2003), it has not been established that coaching parents to make these changes in their interactions with their children actually improves the quality of the parent-child relationship. The purpose of this study is to examine the relationship between changes in parent verbalizations and change in parent and child Emotional Availability from pre- to post-treatment.

The study sample consisted of 81 ethnically diverse mother-child dyads who completed PCIT. Children, aged 2 to 8 years, had been referred to PCIT for treatment of disruptive behavior problems. Before and at the end of treatment, therapists conducted a 15-minute videotaped behavioral observation. The mothers' verbalizations were coded using the Dyadic Parent-Child Interaction Coding System (DPICS); mother-child Emotional Availability (EA) was coded using the Brief EA Screener-Trianalog (BEAS-T), which is a quick assessment of emotional availability that has been found to correlate significantly with Biringen's (2000) EA Scales (West et al., 2008). Initial regression analyses established that increases in positive, encouraged verbalizations (praise, reflections, behavioral descriptions) and decreases in negative, discouraged verbalizations (commands, questions, criticism) predicted greater maternal EA at pre-treatment; increased positive verbalizations predicted increased children's emotional availability pre-treatment. Analyses testing the influence of change in parent positive and negative verbalizations on post-treatment maternal EA (controlling initial verbalization levels) showed that higher initial levels and increases in positive verbalizations from pre- to post-treatment predicted greater maternal EA. Changes in mothers' verbalizations from pre- to post-PCIT did not significantly predict levels of children's EA post-treatment. Findings support the strategy of changing parent verbalization patterns to change the quality of the parent-child relationship.

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