

What is PCIT?

Parent Child Interaction Therapy

Parent Child Interaction Therapy - also known as PCIT - is an evidence-based treatment program designed for caregivers and their young children (2 to 7 years old) who are experiencing social, behavioral, and/or emotional difficulties.

PCIT is regarded by national expert panels as a gold standard treatment for children who have any of the following challenges:

- Frequent temper tantrums
- Defiance - refusing to follow directions
- Verbal and/or physical aggression
- Destruction of toys and/or family belongings
- Backtalk or sassing adults
- Whining or crying for no apparent reason
- Constantly seeking attention
- Hyperactivity
- Interrupting others
- Short attention span
- Difficulty with behaviors at school, preschool, and/or daycare



Theoretical Basis & Influences

In the 1970's, Sheila Eyberg, Ph.D. developed Parent Child Interaction Therapy as a behavioral family approach for the treatment of young children exhibiting disruptive behavior problems. Today, PCIT is one of the most researched, and scientifically successful parent training programs for children around the world.

The goal of PCIT is to improve the quality of the parent-child relationship by helping caregivers adopt an authoritative parenting style (Baumrind, 1967), which incorporates a child's needs of warmth, psychological autonomy, and limit setting to achieve optimal outcomes.

Attachment theory principles used in PCIT focus on helping the parent facilitate a warm, supportive relationship as a basis for the development of social skills and emotional regulation. From a social learning perspective, PCIT uses differential attention to address behavioral problems, in addition to having the parent model calm, desired behaviors during parent-child interactions. Additionally, PCIT incorporates authoritative parenting practices by outlining consistent child-rearing practices – with an appropriate balance between nurturance and appropriate limit-setting.

PCIT Therapy Structure

PCIT therapy is implemented in two phases: (1) the Child-Directed Interaction Phase (CDI) where parents develop child-centered interaction skills to enhance the parent-child relationship; and (2) the Parent-Directed Interaction Phase (PDI) where caregivers learn additional behavior management skills. PCIT gives equal attention to the enhancement of the parent-child relationship, and the development of caregivers' behavior management skills.

During the first phase of PCIT therapy (the Child-Directed Interaction Phase), the golden rule is for the caregivers to "follow the child's lead." Children are encouraged to lead the play activity while their caregivers follow along using the [PRIDE skills](#). The CDI Phase of PCIT aims to enhance the parent-child relationship by maximizing positive communication, attention, and imitation during child-led play. [Click here](#) for more detailed information on the CDI Phase of PCIT.

In the second phase of PCIT therapy (the Parent-Directed Interaction Phase), caregivers learn to use effective commands and implement additional behavior management strategies for any remaining challenging behaviors (e.g., aggression, destruction). The overall goal for PDI is to create a supportive home environment by helping caregivers become consistent, predictable, and follow through with behavior management skills. [Click here](#) for more detailed information on the PDI Phase of PCIT.



PCIT Therapy Format

Parent Child Interaction Therapy services should only be delivered by mental health professionals who have been formally trained in PCIT. The average length of PCIT treatment is 14-16 weeks, with PCIT services most frequently delivered once per week (60-minute weekly sessions).

Traditionally, Parent Child Interaction Therapy has been conducted in a mental health clinic using both a clinic room and observation room (and the PCIT therapist conducts services behind a one-way mirror). However, PCIT services have evolved and now trained therapists can deliver PCIT therapy using a wide range of formats, including but not limited to: (a) in-room coaching in a clinic or hospital; (b) home-based services; and (c) telehealth (commonly referred to as iPCIT).

PCIT Coaching

A hallmark of Parent Child Interaction Therapy is the use of constructive, positive, live coaching of caregivers. Therapists typically coach from an observation room with a one-way mirror into the playroom, using a "bug-in-the-ear" system for communicating to the caregivers as they play with their child.

However, live coaching of PCIT skills can be conducted within the same room. In fact, live coaching can also be done within the client's home or via telehealth (often referred to as iPCIT).

Live coaching of caregiver skills has five advantages over the more traditional methods of caregiver training (e.g., parenting groups, modeling, rehearsal):

1. Immediate, positive feedback by the coach can prompt, shape, and reinforce the caregiver's appropriate skill usage.
2. Live coaching allows the therapist to adapt the skills being taught to manage specific behavior problems as they arise.
3. Direct coaching provides a unique opportunity for therapists to quickly correct errors so caregivers do not repeatedly practice incorrect techniques.
4. Direct observation and coaching decreases the need to rely on caregiver self-reports of skill utilization at home.
5. As caregivers become more adept at using the newly trained skills, the therapist can fade out prompts.

Effectiveness of PCIT

Over the past 5 decades, Parent Child Interaction Therapy has been scientifically tested in **over 300 research studies** and the results of those studies have been published in the top journals within the field of psychology. [Click here](#) to access our PCIT Research Library.