



Parent-Child RESEARCH CLINIC

Tip Sheet:
Time-out
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Parent-Child Interaction Therapy (PCIT) is recognised as an evidence-based treatment for children between 2 and 7 years old with conduct problems. 'Conduct problems' is a term used to describe child and adolescent behaviours including chronic defiance, non-compliance, temper tantrums, rule breaking, aggression, and property destruction. With over 40 years of research, PCIT has been demonstrated to decrease child conduct problems and improve the parent-child relationship in an effective, safe, and positive manner.

What is "Time-out"?

"Time-out" in PCIT

The time-out procedure in PCIT is one of many techniques used in treatment. The term "time-out" may mean different things depending on the context in which it is used. Time-out in PCIT differs from other uses of the term.

- PCIT uses a specialised time-out procedure. Similar time-out procedures are used in other evidence-based parent management programs.
- In PCIT, time-out is used in conjunction with other techniques, such as relationship building skills, using attention and reinforcement to change behaviour, and managing behaviour through positive and consistent strategies.
- In PCIT, time-out is the removal of a child from all types of reinforcement (e.g., parent attention, screen time, toys) for a short, specified period of time, and is a consequence for non-compliant behaviour. Time-out is always conducted in a safe environment.
- Time-out in PCIT involves use of a backup space for when children leave the time-out chair. The backup space procedure is often not required after initial use. This procedure teaches the child to remain seated on the time-out chair.
- Time-out in PCIT is intended to be boring (free from reinforcement), but safe for the child, and is a developmentally appropriate parenting technique that is supported by many years of research.

- Time-out is introduced to parents after they have mastered parenting skills focused on improving the parent-child relationship.
- In PCIT, time-out is delivered by the parents (not the therapist) to ensure the safety and effectiveness of the technique. However, the therapist provides live coaching to parents using a bug-in-ear device to ensure the correct and safe delivery of time-out.
- Time-out is *not* intended to be a surprise for the child. The time-out procedure is explained to the child at an age-appropriate level before it is first implemented.
- Time-out is intended to be predictable, consistent, and fair so that children understand what behaviours warrant a time-out and how the procedure works. In PCIT, children are provided with clear instructions and warnings during the time-out procedure to ensure they understand the reason they are being placed in time-out.
- During a time-out procedure in PCIT, parents are situated in a position to observe the child during time-out. This is to ensure that the time-out procedure is effectively implemented and is safe for the child.
- In PCIT, every time-out procedure is followed by warm, relationship building interactions with the parent, where the child experiences positive attention for pro-social behaviours.



Truths and Myths about Time-out

Decades of research have shown that time-out in PCIT is a safe, positive, and effective technique for managing conduct problems, when used correctly. However, there are still many misconceptions about the use and delivery of time-out.

MYTH 1: *Time out is harmful to children and undermines loving parenting.*

Truth: When used correctly, time-out helps children to learn pro-social behaviour through setting age-appropriate limits and important self-regulation skills. Time-out is a safe and effective behaviour management strategy, which allows the parent and child to remove themselves from a potentially stressful interaction and helps teach the parent and child to regulate their emotion and behaviour.

MYTH 2: *Time-out can trigger trauma reactions for children who have experienced abuse/maltreatment.*

Truth: Time-out in PCIT involves establishing clear, predictable limits for children. This develops a sense of control and safety during disciplinary interactions and helps with the child's development of self-control. Time-out procedures teach children that they will be treated consistently and with respect even if they are non-compliant. Following the time-out procedure, the parent and child engage in warm, loving, relationship building interactions, typically in the form of play. These positive parent-child interactions indicate that the parent loves the child but does not condone oppositional, defiant, aggressive, and destructive behaviour.

MYTH 3: *Time-out is just a way for a child to get out of doing what their parents want them to do.*

Truth: Time-out is *not* an escape from following parents' directions. After a child finishes time-out, the child is required to comply with the command or instruction issued by the parent. If the child is unwilling to complete the original task, then the child will return to time-out. When used correctly, time-out teaches children to quickly obey parents' directions.

MYTH 4: *The backup space involves isolating/secluding children when they misbehave.*

Truth: The time-out procedure in PCIT involves a backup space for when children leave the time-out chair. If children could leave time-out when they wanted, then time-out would not be effective. The backup space is intended to teach the child to stay on the chair. The therapist coaches the parent during the backup space procedure to ensure the parent is calm, consistent, and predictable. The backup space allows for a brief physical separation between child and parent to support safety in situations where the child leaves time-out.