This paper reports on an interpretive review of observational research articles published in the journal "Child Development Abstracts and Bibliography" (CDAL) from 1987 to 1991 on the topic of family interaction. A total of 37 adult-child and adult-adolescent interaction studies were located and examined. A comparison of the articles found that the majority advocated finding a common conceptual and methodological base by concentrating on reporting studies on the interactional language function of regulating or controlling others. None of the 31 empirical studies made reference in their statements of purpose to developing knowledge of individual and social differences. Only two studies included a racially diverse sample of subjects. The bulk of the paper consists of tables outlining the stated purposes of the articles examined, the definitions of interaction in the articles, and a compilation of the interpretive review components of the articles. An appendix lists the categories included in CDAB for selected issues. Contains 65 references.
CONDUCTING AN INTERPRETATIVE REVIEW ON FAMILY INTERACTION: 
AN ILLUSTRATION OF THE USE OF CHILD DEVELOPMENT ABSTRACTS

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Abstract: 
Sources and types of information used to assess the concept of adult/child, adult/adolescent interaction are identified in a survey of the meanings of interaction reported in 17 child development journals. The rationale used to develop the review includes reference to the continuing calls for consideration of what information should be collected to explicate the concept of "interaction."
CONDUCTING AN INTERPRETIVE REVIEW ON FAMILY INTERACTION:
AN ILLUSTRATION OF THE USE OF CHILD ABSTRACTS
AND BIBLIOGRAPHY

Introduction

This presentation of a systematically collected sample of recent observational research literature on childhood, adolescence, and family interaction was developed in order to addresses three questions. First, what directions are being taken in observation of family members' behavior? Second, are there any indications that child and adolescent researchers are attempting to address ecological validity and social context issues through expanding the number of observation coding categories used to identify and explicate interaction between family members? Third, have adult/child interaction researchers expanded their sample population to address unanswered questions about variability and diversity in parenting styles?

The origin of these concerns comes from a combination of sources. Succinctly these concerns can be grouped into two areas. First, many questions have been raised about the "professional culture" of professional schools. The literature students are required to read may not be helpful in preparing professional to work with the diverse populations requiring educational and social services. The term "professional culture" is used in the sense of frames of reference, explanatory frameworks, and sets of standards for evaluating the acts of others, all of which comprise professional inference about clients.

The dilemmas of discrepancy in observations, constructing a
sample of relevant data, and communicating explanations, have been considered a threat to making advances in understanding family interaction for several decades (Abraham, 1986). The rub here is for new reviewers of research literature to be able to discern which sense of understanding is getting the most time, effort, and funding. Also, which sense of understanding should get the most attention given unanswered questions about adult/child interaction? Another question a reviewer of directions in current work has to address is: Does the preference of child development editorial boards -- as reflected in a review of a number of years of all articles published on a certain topic -- fit one or more criteria for determining the occurrence of a sense of understanding? For example many child development researchers intend that "a sense of understanding is provided only when the causal mechanisms that link changes in one or more concepts (the independent variables) with changes in other concepts (the dependent variables) have been fully described" (Reynolds, 1971, p.7). Others appear to be acting within the position that understanding depends upon developing description which meet "ecological validity" and/or "transcontextual validity" criteria (e.g., Brunswick, 1943; Lewin, 1943; Lewis & Freedle, 1977 Weisz, 1979).

Another view is to consider that a sense of understanding exists when the explanation can be translated into an analogous and familiar process. If the new explanation is similar to some existing idea but only applied to a different phenomenon, then a sense of understanding is considered to exist...[Still another]
criterion is related to a model or the simulation of social or individual processes. A model builder may feel that [s]he has acquired a sense of understanding when there is a close fit between the empirical results and predictions from a model, no matter what the basis for those predictions. (Reynolds. 1971, p.7)

As early as the 1970's research literature included suggestions for new images, or models which were intended to help move understandings of adult/child interaction beyond mere imitation, reinforcement, and punishment propositions. Calls for new studies of intergenerational transmission of social behavior included constructs such as "socially transmitted models of social relationships." The ideas being worked out through the use of such constructs included finding ways of articulating how adults across varying cultures transmit schemas and scripts that influence how children interpret interpersonal behaviors and social interactions (Eisenberg, 1992). Attempts to bring in attention to "culture" and "diversity" in new studies were reflected in new propositions such as: "parental warmth may function somewhat differently in the socialization process in different groups", and "diversity can include a host of [adult interpretations of ] differences among people, including differences in sex and gender, ethnicity, culture, subcultural experiences, socioeconomic status and associated living conditions, and in the composition and structure of families" (Eisenberg, 1992, p.10). In other words, professionals working with children, adolescents, parents and other caregivers were
being asked to remain cautious of the possibility that they could be making inferences on the assumption that there was one set of standards for the way social interaction relationships should be ordered.

As demonstrated in the following compilation of information from 37 interaction studies across 17 of the journals covered in one child development abstracting service, this caution needs to remain in effect. The culture of the helping professions still includes the frame of reference that parenting should look like the social interaction relationship structure of school teaching (i.e. adult initiates, child/adolescent responds, adult praises/evaluates). The continued use of this conceptualization of parenting stands in sharp contrast to announcements of the "the coming of age of child and adolescent psychiatry" in the 1980's. Those announcements were accompanied by the promise that many conceptions of childhood, adolescence, and family life will be reconceptualized as findings materialize from new studies. Discussion of reconceptualizations such as "individual variability within and between groups is significant and widespread," were accompanied by advice such as "attention must be paid to the specificities of person-situation interaction" (Chess, 1988, p.5).

As to the "machinery" of adult/child interaction work, the legacy of the 1970's and 1980's is that professional training continues to be confronted with dealing with the demand for practitioners to be better prepared to work with diverse populations: "a curriculum that enhances [practitioners']
abilities, sensitivity, and effectiveness in communities that are changing ethnically and culturally" (Nakanishi and Rittner, 1992), p. 27).

Given the dual challenges of accommodating an expansion of information on adult/child interaction in the literature, and addressing the continuing need for incorporating recognition of cultural diversity in new understandings of children, adolescents, and families, the question is: Can we continue to assume that the daily "machinery" of research and practice -- the procedures and behavior coding categories -- have consistent meaning within and between different cultures embedded within our society?

Let us look to the "machinery" of research - the procedures...

- Mothers are often asked to "play with your child as you would at home." It is assumed that this is a universal situation...
- Parents and children are asked to "plan a family vacation" or discuss the family budget," ... How universal are these family situations?
- Judgments about the home are made. Is it quiet? Is it clean? Are there books available? Is it in a "good" or "bad" neighborhood? Do these qualities have the same meaning across different ethnic groups? Should they? (Brown, Martinez, Radke-Yarrow, 1992, p. 11)

As illustrated in this technical report, the strategy of developing compilations of current research practices by
following an available set of guidelines for conducting comprehensive reviews of the literature, allows professional students and faculty a cooperative learning method for exploring the "machinery" of research. Once accomplished, this activity can become the focus of considering whether there is a growing awareness of diversity across multiple theoretical explanations available for considering "interaction." (Wallat & Piazza, 1988; Wallat, 1984; 1991). Once these problem-solving steps are undertaken regarding consideration of the "professional culture" new researchers are being socialized to join, students and faculty will be able to move on to the analytical process of determining how they might be able to work in a culturally sensitive manner with the machinery available (e.g., Wallat, 1987; 1991).

Conducting and Interpretative Review

According to Cooper (1982) there are multiple kinds of reviews that have proven useful in dealing with the information explosion in the behavioral and social sciences. In addition to sizing up methodological developments, reviewers have proposed new theories, and synthesized finding from different fields of inquiry (Jackson, 1980). Illustration of one kind of review, which we call interpretative, is this technical report's focus. The goal of an interpretative review, conceptualized as a research project, is to summarize the accumulated state of knowledge through a process of several stages which can be replicated: problem formulation; data collection; data evaluation, analysis and interpretation; and public presentation.
During stage one, the reviewer decides what evidence should be included in the review by identifying the variables to be examined as concepts. Since the authors of most studies provide an introduction to how they choose to operationalize their meaning for "interaction" before the study began, a review of their work will provide the basis of an analysis of similarities and differences in the concept of "interaction" as it is presented in a set of studies.

As Reynolds (1971) has pointed out, multiple realizations of concepts are expected -- and even desirable -- in human development research:

The final test of any concept or statement is whether or not it is adopted by other scientists as useful for the goals of science.... The important factor is that the potential for [checking among empirical data] be available. (p. 18)

During the data collection stage of conducting the review, the reviewer chooses a technique to retrieve information that can be checked out by others. The publishers of Child Development Abstracts and Bibliography regularly search over two hundred and fifty journals that focus on six major categories: Biology, Health, and Medicine; Cognition, Learning, and Perception; Social Psychology and Personality; Education; Psychiatry and Clinical Psychology; and History, Theory and Methodology. Three issues of Child Development Abstracts and Bibliography are published each year. Table 1 includes the count of the total number of articles articles the child development abstract service published under
the category "Psychiatry and Clinical Psychology," and the number of abstracts of articles devoted to the concept of "interaction." For comparison purposes, Appendix A lists those concepts which appeared in addition to "interaction" in a sample of the five year review (i.e. concepts appearing in the first issue of 1987; 1989; 1991). Table 1 also provides the information that the concept of "adult/child, adult/adolescent interaction" was the focus of 37 research reports and 9 review articles during the five year period 1987-1991. Table 2 includes the names of all 17 journals in which articles devoted to "interaction" appeared between 1987-1991. Table 3 provides an introduction to the authors included in the review by summarizing their stated research or clinical intervention purpose. Table 4, the last introductory table to the integrative review, includes an overview of the multiple definitions of "interaction" included in the sample articles. Table 5 illustrates a strategy for looking across all of the studies.

INSERT TABLE 1, TABLE 2, TABLE 3, TABLE 4, AND TABLE 5 ABOUT HERE
Looking Across The Studies

A preview of the data evaluation and analysis concerns which motivated this review was included in the introduction section of this technical report. Following that rational, the first criteria for considering all 37 adult/child, adult/adolescent interaction studies is to suggest the clinical inferences embedded in the empirical "interaction" data reported. As demonstrated in Tables 1-4, an area of considerable interest and controversy within clinical research is how to operationalize the concept of "interaction." At this point most child and adolescent journals appear to be moving towards an emphasis on finding a common conceptual and methodological base by concentrating on reporting studies on the interactional language function of regulating or controlling others. Only eight authors argued for support of new work which can demonstrate to new researchers and practitioners the detailed "machinery" involved in identifying and explicating the complexity of parenting tasks and the multiple diverse meanings and interpretations individuals and social groups may have on how parenting works. Beckwith, Fraser, Konstantareas, and Shapiro suggest that detailing attempts should be targeted towards describing the complexity of parenting tasks including observation, language and dialogue teaching. Chatoor and Gardner advocate considering adult/child interaction across situations and activities while Cramer and Haynes-Semen argue for research and practice focus on the interpretations parents have for their child's behaviors.

The second criteria for considering the studies listed by
author in Table 5 is to point out diversity omissions in observation study reports. Thirty one studies reported the tasks which parents, or parents and children were asked to undertake in 15 clinic or lab playrooms, 7 learning or therapy sessions, 1 hospital, 1 restaurant, and 7 sets of subjects' homes. Cumulatively, these studies strike out. None of the 31 empirical observation studies made reference to developing knowledge of individual *and* social differences in their statements of purpose. One study by Strayhorn did call for maximizing use of parent education trainers with the same cultural background as parent participants. Only two studies included a diverse sample. Chatoor et al studied the interactions among 42 mothers and their infants. The total sample included 28 white dyads and 14 black dyads. Pianta et al studied maternal relationship history among 267 mothers and their first born. The group participation percentages were 80% white, 13% black, and 7% hispanic. In other words, although 303 infants/toddlers (0-2yrs.), 500 preschoolers (3-5yrs.), 372 school age (6-12yrs.), 198 adolescents (13-18 yrs.), 1372 mothers, and 242 fathers participated in these studies, diversity was not a factor included in the sample design of 94% of these observations of interaction studies.

**INSERT TABLE 5 ABOUT HERE**
The Positive and Negative Side of Tables 1-5

The state of knowledge diffusion reflected in Table 1-5 has both a positive and negative side. On the negative side, future practitioners can judge from reading the compilation of categories being abstracted and the range of journals publishing articles in an interest area within their field how far their "professional culture" is from having a knowledge base on diversity. As demonstrated in Tables 4 and 5, 31 observation studies published in one five year period simplified the complexity of studying "interaction" by using an average of five categories to gloss what parents and children were accomplishing together. Those who take seriously the dilemma and cautions surrounding professional inference and diversity will see from this list of categories, as well as the observed behavior and tasks presented in Table 5, that it is not clear why child development researchers who have used such interaction categories, observed behavior, and tasks think these units of analysis fit into every family's expectation about their own or their child's behavior. However, on the positive side, by creating such compilations, professional schools have a head start in developing an information management system on diversity. Using such compilations as a beginning knowledge base for students, student/faculty projects can be organized for locating and identifying families willing to help the field interpret these behavioral categories, tasks, and definitions of interaction from their own experiences and cultural knowledge base.

Also on the positive side, the availability of guidelines
for accomplishing an interpretative review provide future practitioners with a set of procedures which have already been tested out as an effective method for identifying published sets of interaction. Additionally, by developing a comparison guide such as the example demonstrated in Table 5, professionals have the opportunity to develop a compilation of observation standards and procedures that have already been subject to a peer review process. In addition to preparing themselves for what they are expected to know about the current knowledge base in human services work, this comparison guide also provides a practical mechanism for: (a) considering their own pre-existing cognitions and expectations, (b) keeping track of four sets of "machinery" changes that may occur as new work is published (i.e. behavior categories, time spent in observations, the tasks participants are asked to perform, and the size of subject samples), and (c) reusing tasks already reported in the literature in their new efforts to develop knowledge about differences within and between social groups. In other words, by having a source of information on what tasks family members have been asked to work on, new professional have the opportunity to ask new clients if these tasks resemble any activities they might undertake with their child, and, if not, why teaching tasks such as the following might be inappropriate: copy design; complete counting or math problems; play independently; play with any of nine toys; reach consensus on how to solve a moral dilemma; delay opening a present.

Tables 4 and 5 also provides new researchers with further
details of cultural biases that may be embedded in the purposes of child, adolescent, and family research and intervention. The 186 observed behavior categories used across 31 studies implicitly and explicitly carry on the frame of reference that what counts in child development research is parents' manifestations of control and how they manage or deal with lack of compliance. The use of these categories also continues a frame of reference which places a heavy emphasis on locating behaviors within individuals rather than locating the details of organization of control and compliance around situations. Twenty-four, or 65% of adult/child, adult/adolescent articles published in one five year period began with the assumption that adults should be used as the point of orientation to observation and assessment of control (i.e. Avery, Barkley(3), Boylin, Brone, Cambell, Cole, David, DeSalvatore, DiLalla, Dumas(2), Eyberg, Gardener, Hoffman, Hughes, Johnston, Karasi, Olson, Pianta, Strayhorn, Wahle:, and Webster). An additional 8% of the articles reported results of surveys of adults thereby reinforcing the professional culture frame of reference of the effect of the adult on the infant (i.e. Rastram, Stivers, Trommsdoff). While it is true that eleven of these articles included criticisms of the behavior categories that were used to observe adult/child, adult/adolescent interaction, none of the authors discussed the theoretical implication of their presenting parent behavior categories first. All assumed that the professional culture notion of the adult as the originator of dominance and control, despite inclusion of statements such as: (a) conflicts are greatest during task situations rather than free play, (b)
conflict in mother/child interaction may stem from the severity of the child's condition or disorder systems rather than from poor management skills of the mother, and (c) more use of commands by mothers when their child was six years old was positively associated with teen talking and facilitative behaviors at outcome (cf. Barkley(3), Beckwith, Campbell, DiLalla, Drotar, Dumas(2), Johnson, Karasi).

Moving Beyond Current Definitions of Interaction

In contrast to the 31 empirical observation studies outlined in Table 5, the authors of nine of the total 37 articles on interaction listed in Table 3 and Table 4 refer to the theoretical notion of bidirectional effects, and attempt to influence future clinicians to consider why the role of the adult as a recipient of a directed social behavior continues to emerge as a minor concern (cf. Ochs, 1979). Beckwith, Chatoor, Cramer, Drator, and Haymes-Semin make separate cases for focusing parent and clinician's observations on the child's behavior. Parents are encouraged and, in some cases, trained to increase their observation of children's behaviors and temperament cues. Hauser argues for less reliance on frequency counts and more attention to processes. By processes Hauser means observation of sequences of turn taking, overall constraining features of interaction, and overall enabling features of interaction. Similar to Fraser, Howlin, and Konta, he further argues for expanding understanding of the concept of interaction by considering how questions being asked in clinical work match up with understandings of
parent/child interaction and language development. The reason for such inclusions is not always clear across the studies. It is to this point that a new researcher can direct their attention in developing a proposal for a new project or project. For example, if your next project is based upon ensuring that the categories of interaction being used are actually backed up by observational studies on the acquisition of interaction styles, there is a specific direction you can take for developing a literature review on that area. Specifically, your next step is to identify the work by researchers who are concentrating on identifying individual and social differences in socialization processes (e.g. Cook-Gumperz, 1973; Ballenger, 1992). As Fraser (1986) points out:

Parent/child interaction implies several things: it is concerned with the nature and quality of bonding and attachment and as such it is essentially concerned with interpersonal communication. Such communication must be multi-elemental. The components of this communication will include the partners in the interaction and also the situational context, which will be interacting with the existing knowledge and understanding of the partners. Contexts themselves are in turn dependent for their production upon the language of the participants which means that conversation, or interaction, is the context for the child's developing mastery of meaning. Any reduction in the ability to interact will result in limited ability to integrate into the social and
physical world and, as a consequence, will be a factor imposed upon the child's environment. (p.141)

Summary

The creation of interpretative summary charts, as exemplified in Tables 1 through 5, provides a common language base for students to use in considering a salient concept in their field. Such charts can then be used to accomplish several activities: (a) group discussion of the "machinery" of research in light of inference (e.g. recognizing the ambiguity that is part of all behavior concepts when observed across task situations and varying contexts), (b) individuals' identification of how they would accomplish the task/activity, (c) concurrent group identification of behaviors that individuals are reporting against the coding categories, (d) group identification of new categories to describe behaviors that reached beyond the codes used by researchers, and (e) faculty and student identification of new samples of children and adolescents who are willing to help identify individual and social differences by contributing their reflections on examples created by class members.
Appendix A

Compilation of Categories included in Child Development Abstracts and Bibliography from Issue 1 for 3 Selected Years

1987 Vol 61 No 1

parent/caregivers interactions with children/adolescents = 3 references out of 69 [Note 66 listed below]

adolescents
Beck Depression Inventory 576
life events and social support 588
dieting concerns 590
specificity of mental pathology 602
suicidal ideation 606
conversion disorders 607
substance use 622, 636

anorexia nervosa
review of etiology and treatment 619

attention deficit disorders
DSM III criteria 584

autism
international perspective 594
parent training program 599
bebehavioral features 600
expression of emotion 601
Rimland Scale 610
playing with classmates 611
attention and language 612
nutritional ecology 628
multiple etiologies in autism 632
subclassification of the autistic syndrome 635
effects of fenfluramine 638
comparative study 641
ontogeny of communicative functions 642

behavior problems
3 year olds 589
pre-schoolers 615

behavior therapy
sensory extinction procedures 614
obesity treatment 637

child psychiatry
review of current trends 593, 609, 616

conditioned hyperventilation
factor in apnea 582

1
cognitive impairment
Personality Inventory for Children-Revised 581

crisis
helping children 592

custody
use of fables in clinical assessment 617

episodic dyscontrol syndrome
difficulties in diagnosis, management 624

depression
patterns of emotion variables 578
use of ego defenses 625

diagnoses
diagnostic discrepancy and clinical inference:
a social-cognitive analysis 574
using children's stories 579
cognitive impairment 581

diresetting
parents of firesetters 604

handicapped children
sleep problems 586
amount of speech 618

hyperactivity
correlates and predictors of 583
parent training 595
attention deficit disorder 627
size of rewards 630
teachers' ratings 633

interviewing
techniques with children 577

isolated vs. neglected children
social skills training 639

mental problems
self report 621

mentally retarded
psychiatrist's role 613
reducing inappropriate behavior 634

munchausen syndrome
parent creates or fabricates illness in his or her child 585

obsessive compulsive disorder
association with other disorders 629

peer group
  rejection scale 575
  rejection and neglect 603
  conversations (patterns of discourse) 608
  knowledge and concern towards a peer with cancer 640

personality disorders
  schizotypal 620

phenylketonuric
  behavioral characteristics 631

refugees
  mood disturbance and psychological distress 623

sexual abuse
  review of literature 580
  behavior problems 597

socially impaired
  play test 598

temperament style
  children with recurrent pain 591

1989 Vol 63 No 1  [Note 89  mid point for 5 year review]

parent/caregivers interactions with children/adolescents =
  2 references  out of 130  [Total listed below =128]

adolescent
  obsessive compulsive disorders (14 case studies) 800
  use of the Schedule for Affective Disorders &
    Schizophrenia 801
  development of eating problems 805
  preoccupation with "Satanism" 812
  activities checklist 821
  identification with case-workers 824
  psychosomatic disorders survey 845
  menstrually related mood disorder 849
  self image of emotionally disturbed 857
  action groups in out patient settings 867
  case study: delusional state 874
  perceptions of family cohesion 877
  teenage mothers -- childhood of 882
  MMPI - adequacy of norms 883
  definitions & descriptions of mental health 887
    conceptual level of 12th graders 889
    immigrant adolescents 890
  stress, illness and depressed mood 899
  risk for schizophrenia 901
  cognitive functioning 902
family cohesion scales 904
correlates of antisocial behavior 910
predictive power of first grade teacher ratings 911
perceptions of interparent conflict 924

adopted children
psychiatric disorders in 860

affective disorders
methodological and conceptual problems in this research 861

alcoholic families
affective and distancing among family members 811

antisocial behavior
a developmental perspective 884

anxiety disorders
self reports of test anxiety 809
and achievement 836
effect of videotaping on anxiety 868

aphasic children
instances of gazing in dyadic situations 908

aspergers' syndrome 909

attention disorders
frequency of aggression 816
responsivity to methylphenidate 826
peer communication 863
hyperactivity scores 873
acquisition of attention skill 913

autism
use of interpersonal gestures 806
social-cognitive model of 807
epidemological study of male to female ratio 813
international 843
effects on siblings 844
learning through observing 846
development of a screening system 847
behavior checklist 833
prediction of classroom behavior 840
understandings of seeing, knowing, and believing 866
family systems perspective 876
efficacy of haloperidol 885
neuroleptic therapy 886
age and onset 898
evaluation by state agencies 914
evaluation of checklists 915
social typologies 916
speech training 928
behavior profiles
multiaxial assessment -- parent, teacher, observational, cognitive, and personality correlates -- 6-11 yr olds 870
use of diagnosis interview schedule 920

behavior therapy
a twenty year overview 923

depression
self perception profile 799
social status measures 802
dysfunctional attribute styles 803
compared with schizophrenia spectrum 804
Beck depression inventory 808
sexually abuse correlation 818
adjective check lists
diagnoses 829
maternal 838
self reported depressive attributional style 851
children of parents with recurring depression 881
Center for Epidemiologic Studies of Depression (CES-D) instrument 891
suicidal behavior 892
association with anxiety 907
maternal depression 919

disruptive behavior
language disorders 820
evaluations of parents, teachers, hospital staff 853
scales differentiating conduct-disorder and emotionally disturbed 854
effects of increased physical exercise 871
conduct disorder 894
use of time-delay responses 903

Down's syndrome
use of gestures 806

DSM-III clinicians' diagnoses
comparison with DISC-C (Diagnostic Interview Schedule for Children) 920

families
generalized dysfunction 905
functional roles e.g. intrafamiliar relationships, and their relationship to mental health 895

firesetting 858

functioning
the role of family, society & heredity 896

hyperactivity
diagnosos of 888
acquisition of attention skill 913
high-risk children
  longitudinal study (birth to 32 years) 922

infancy
  development of coping strategies 823
  language disorders 839
  stuttering 918

juvenile delinquency
  interrelations of empathy, cognition & moral reasoning 864
  relationship of family structure and environment 865
  history of attention deficit disorder 875

leukemia
  concepts of death among patients 817

matricide
  case study 878

mental health services for children
  the state of the art 912

nocturnal enuresis
  treatment of 815
  prediction of 917

non-attendance at a child guidance clinic
  parents 880

parent rating scale
  the revised Conners Scale 819

parent reports of children's emotional or behavioral difficulties
  905

parent training research
  review of 1975-85 literature 925

pediatric preoperative procedures
  review of processes, outcomes, future directions 927

"pervasive disintegrative disorder" 2 case studies 814

pre-natal
  stress 837

psychiatric disorders
  SES, marital status, maternal education as variables distinguishing disturbed from normal children 810
diagnoses of parent informant checklists 856
psychiatric inpatient treatment
parents in treatment team 926
psychodrama research
therapy and theory 825
school refusal 862
self injurious behavior
identifying variables 827
sexually/physically abused
self report of psychological symptoms 818
cycle of abuse 830
adolescent abusive behavior towards parents 832
explanations of 844
behavioral/emotional indicators 859
sexual offenders 872
life-span coping and adaption 879
sleep problem
use of behavior modification 921
stress
response to anorexia nervosa 906
stuttering
relation between severity and overt-rejection by
mothers 918
suicide
self-poisoning rates for 10-14 year olds in England
855
survivors
children and grandchildren of 900
thematic apperception test
for Hispanic and Black outpatients and school children 822
violence
family 831, 832
X syndrome
mental retardation 841

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parental bonding and depressive disorders 337
African-American unwed fathers 339
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and sex-typed personality characteristics 342
bulimic prevalency rate 343
life stressor & social resources 344
antisocial behavior & parental social class 347
prevalence of depression 349
suicidal treatment alternatives 356
use of alcohol & drugs 358
social problem solving 361
Type A behavior 365
peer reactions to suicide 377
San Diego suicide study 378
substance abusers' MMPI profiles 393

alcoholic and nonalcoholic parents
children's response to adults' angry behavior 332

anxiety disorders
DSM-III symptoms 334

antisocial behavior
nonobtrusive measures of 363

attention deficit disorder
Diagnostic Inventory for Children & Adolescents 369

autism
effects of haloperidol 330
mothers' use of imitative play for facilitating social
responsiveness 345
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skills 368
language skills 379
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fenfluramine use 387
spontaneous communication 388
social behaviors 389
mothers' views of age of onset 390
high-functioning autistic children 391
family problems during pregnancy 394

behavioral functioning
Coddington Life Events Record & Achenbach
behavior Checklist 335
drug effects on hyperactive girls and boys 333
Global Assessment Scale 340
behavioral stress 372, 398
epidemiology of behavior problems 396
borderline children
diagnosis and treatment DSM-III 397

conduct disorder
variance in ratings of 351
person perception 373
study of oppositional disorder 381
parent retaining 395

deliquency
criminal career from childhood to age 32 350
attributions for social failure & aggression 355
substance abuse 357
maternal attributes and future criminal behavior 385

Down syndrome
attentional and affective characteristics 365

encopreses
medical management 384

enuretic children
life changes and protective factors 360

homeless children
psychopathology and developmental delay 352
prevalence of psychotic symptoms 376

hyperactivity
examination of scores and categories 353

language disabilities
relation to human figure drawing 341

learning disabilities
keyboard spelling training 370
behavior problems 392

newborn
irritability and maternal depressive symptoms 399

physically/sexually abused
abusers justification 346
children's knowledge of sexuality 354
abuse knowledge among professionals 359
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defining maltreatment 380

preschoolers
adjustment at age 9 338
stability and change in behavior problems 348
bereavement responses 367
type of child care 375
sleeping patterns 382
impact of infant colic 383
Table 1
5 Year Review 1987-91
Child Development Abstracts and Bibliography
(Published by the University of Chicago Press for the Society for Research in Child Development - SRCD)

<table>
<thead>
<tr>
<th>Year</th>
<th>Total Abstracts of Psychiatry and Clinical Psychology Articles</th>
<th>Total Abstracts of Parent/Child Interaction Articles</th>
<th>Review Articles (Assessment, Observing, Parenting, Research)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1987</td>
<td>254</td>
<td>5</td>
<td>3</td>
</tr>
<tr>
<td>1988</td>
<td>374</td>
<td>5</td>
<td>3</td>
</tr>
<tr>
<td>1989</td>
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% of Articles Devoted to "Interactions"

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<th>Year</th>
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Check points - See Appendix A

<table>
<thead>
<tr>
<th>Year</th>
<th>Volume</th>
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Table 2

17 Journals Publishing Adult-Child Interaction Articles during a 5 Year Period

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Reference List for Locating Articles in Child Development Abstracts and Bibliography

( For example: 65(1) is in Vol 65 Issue 1 1991 )

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<thead>
<tr>
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</table>
Table 3: Purpose of Research/Clinical Intervention

Alvery  parents' teaching interactions

**Purpose:** Implement parent training program to influence mothers' use of verbal praise reinforcers in their teaching interactions with their child.

Barkley  methylphenidate effects on m/preschool cld interactions

**Purpose:** Extend previous research by more closely assessing whether mothers will "soften" their management style by reducing their use of directives and commands as child's compliance rate increases when they are on medication.

Barkley  ritalin effects on mother-child interactions

**Purpose:** Replicate study of "softening" management style with a six year old sample taking ritalin.

Barkley et al  m/c interactions over 8 year span

**Purpose:** Follow up study of mother/adolescent compliance interaction with 1979-80 six year old sample.

Beckwith  preterm infants & mothers level of responsive interactions

**Purpose:** Develop intervention program to increase mothers observation and responsiveness skills.

Boylin  family interaction during adolescent psychiatric patients treatment

**Purpose:** Revisit whether family interaction automatically means an decrease in adolescent patients compliance.
Brone: Family interactional patterns influence on obesity & anorexia

**Purpose:** Develop family intervention strategies to offset the dominating interaction features identified in past studies of families of both anorexics and the obese (i.e. change family interaction structure so that family members do not speak for each other, and family interaction content so that competent acts by adolescents are highlighted).

Cambell: M/C interactions during play

**Purpose:** Demonstrate how an observation system can help connect discrete behavior categories of control and noncompliance with global "qualitative" features of mother/child conflict and affective behaviors.

Chatoor: M/infant dyadic interactions

**Purpose:** Consider individual variation in effect of infant feeding attempts by mothers (i.e. effect of the situation and the individual infant's temperament).

Cole: M/F/depressed 8-12 years interactions

**Purpose:** Identify behaviors which provide a "rich schedule of positive reinforcement."

Cramer: M/infant interactional variable case study evaluation of changes in brief therapy

**Purpose:** Identify how interactional variables (i.e. behavior toward infant) may be tied to maternal perceptions or maternal interpretations of child's behavior.
David m/disturbed/hyperactive boys communication

**Purpose:** Demonstrate that parent/child communications reflect, at least in part, a reciprocal rather than a strict imitation relationship (i.e. show that a 50-50 split of four communication types does not occur, nor that clinicians should expect that the use of a type such as disagrees by one interactant causes a similar communication type by the other interactant).

DeSalvatore family interaction during task activities

**Purpose:** Counter the "stigma" of activities in our professional culture by reinforcing use of rewards and more effective means of managing children can extend to play and leisure time (i.e. influence acceptance of play and leisure as both therapeutic and sophisticated).

DiLalla social interaction among abusing and neglecting parents and their children

**Purpose:** Global "organization of behavior" categories from naturalistic (at home) observations can provide a common language that has not yet been forthcoming from the wide array of molecular behavior categories used to date across studies.

Drotar maternal interactional behavior with nonorganic failure-to-thrive 6 month old infants

**Purpose:** Address problems related to measurement of maternal interaction behaviors (i.e. use a combination of discrete interactional behaviors during feeding; discrete home environment features; plus qualitative dimensions of maternal sensitivity to infant).
Dumas  m/c interactional measures in conduct-disorder children

**Purpose:** The nature of the link between maternal depression and child conduct may be poorly understood because "children are selectively maladjusted" (p.520).

Dumas  noncompliant children's interactions with parents

**Purpose:** Address past studies that suggest that child compliance can be significantly increased by teaching caregivers to issue clear-cut commands (i.e. the relative importance and type and quality of commands by mothers and fathers remains unclear and poorly understood).

Eyberg  p/c interaction therapy

**Purpose:** Describe a behavioral therapy approach which integrates child play therapy techniques with behavior management skills.

Fraser  parent/infant interactions

**Purpose:** Studies of adult/child interaction should begin with a synthesis of child language research in order to identify how parent/child interaction implies many things and, therefore, that the audience of articles needs to know on what basis were the choice of features of adult/child interaction to be studied made.
Gardner  interaction between mothers and conduct-problem children

**Purpose:** What is lacking in present studies is a sense of the types of activities families engage in addition to the 5% of conflict time studied so frequently.

Hauser  family interaction sequences during visits to psychiatrically hospitalized adolescents

**Purpose:** The analysis of family processes requires new methodological consideration to consider sequences of behavior and move research results beyond summarizing frequency counts of behaviors.

Haynes-Semen  toddler's interactions with mothers

**Purpose:** What abuse or neglect patterns of parenting may be transmitted from early childhood experiences? What m/c experiences during mealtime, diapering, and playtime can be identified in terms of parents' attention and reciprocity? How does the parent interpret/explain the child's behavior during these activities?

Hoffman  optimal mother-infant interaction

**Purpose:** Reexamine the finding that infants of mildly to moderately depressed mothers showed, like their mothers, less positive affect and a narrower range of emotion than infants of nondepressed mothers.
Howlin autistic children's socialized language patterns and parents eliciting utterances communication style

Purpose: Teach parents of autistic children to make greater use of linguistic structures that are associated with language development.

Hughes parents communication skills training

Purpose: Behavior management training should include parents being taught to recognize certain "dysfunctional" communication skills, e.g. interruptions, threats, accusations, and unwarranted or global generalizations.

Johnston m/c interactions in families of children with externalizing disorders

Purpose: Direct examination of links between parenting behavior, children's disorders, and maternal characteristics (e.g. self-esteem, depressive symptoms, marital satisfaction) is difficult.

Kasari caregivers regulations of behavior interactions with autistic children

Purpose: Comparison of caregivers interactions with 4 year old autistic and mentally retarded, and caregivers of 2 year olds with similar mental age Catelle or Stanford-Binet scores, suggest few differences in interactive behaviors of 49 mothers and 5 fathers.
Konstantareas maternal speech to children (answering questions, asking questions, using language modeling, using directives, using shorter lengths of utterances)

**Purpose:** Move beyond counting the total number of mother/child utterances to identify the pattern of linguistic input, and hence, communication patterns sensitive to children's competence levels.

Olson parent/toddler responsive, cognitively stimulating, interactions

**Purpose:** Do "qualities" of mother/child interaction predict individual differences in children's impulsivity over a four year period (i.e. 7 composite "quality" indicators based on observation of 30 items)?

Pianta m/c interactions in teaching situations

**Purpose:** Mothers structuring of teaching situations, management of problem-solving during teaching, and "quality" of instruction assistance can be used to trace changes in family patterns which account for developmental outcomes.

Rastram family interactions in a "typical anorexia nervosa family"

**Purpose:** Comparison of survey answers of 51 mothers of 14 year olds with anorexia nervosa (AN) suggests that empirical evidence for the widely held of family problems of a particular kind are nonexistent.
Shapiro communicative -- synchronous dialogue -- interaction between mothers and their autistic children

**Purpose:** This study demonstrated how parents application of methods to set up a dialogue with their autistic child provides an observation tool that can be useful to study m/c interaction with other families in other settings.

Stivers parent/adolescent communication

**Purpose:** The results from a 40 item inventory used to assess communication are reported as information to refute the position that suicide may be due to inadequate or insufficient parent/adolescent communication.

Strayhorn parent/preschoolers interaction training

**Purpose:** This article includes the argument that teaching parents teaching interactions can be maximized by employment of trainers whose cultural background helps to establish rapport with low-income, high-risk parents.

Trommsdoff mothers frequency of articulation of prosocial goals interactions and children's empathy

**Purpose:** Comparison of teachers and mothers survey answers on target childrens articulation of empathy is presented without publication of the survey definition of empathy.
Wahler strategies geared to changing attention dysfunction in m/c interactions (synchrony with cues offered through their children's various behaviors)

Purpose: This review of research and practice argues that follow-up studies to determine how long parents maintain behavior management skills learned in clinical intervention should include gathering information on repeated exposure to adverse contextual events which may interfere with their use, as well as the contribution -- or lack of contribution -- of training to increasing parents' use of verbal observational categories to describe events.

Webster stressed and depressed parents interaction with children

Purpose: Reexamine 1970s studies which reported that there were no significant differences between mothers and fathers use of commands in their interactions with conduct problem children.
<table>
<thead>
<tr>
<th>Author</th>
<th>Interaction Topic</th>
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<tbody>
<tr>
<td>Alvery</td>
<td>parents' teaching interactions</td>
<td>mothers' verbal praise</td>
</tr>
<tr>
<td>Barkley</td>
<td>methylphenidate effects on m/c interactions</td>
<td>mother commands, commands/questions, question, praises, negative interaction, no response</td>
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<td>Barkley</td>
<td>Ritalin effects on m/c interactions</td>
<td>child complies, off task, negative interaction, plays independently, no-response</td>
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<td>Barkley</td>
<td>m/c interactions over 8 year span</td>
<td>&lt;same as above&gt;</td>
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<tr>
<td>Beckwith</td>
<td>preterm infants &amp; mothers interactions</td>
<td>quality of responsiveness, talking, talking en face, holding, mutual visual regard, contingency to distress</td>
</tr>
<tr>
<td>Boylin</td>
<td>family interaction during adolescent psychiatric patients treatment</td>
<td>family interaction as visits</td>
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<td>Brone</td>
<td>family interaction training to influence obesity &amp; anorexia</td>
<td>this review of studies suggests training family members not to speak for each other</td>
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</table>
Cambell  m/c interactions during play
maternal
directive statements
praise
suggests alternative
control statements
child
negative
noncompliant
aggressive

Chatooor  m/infant dyadic interactions
feeding scale factors

Cole  m/f/depressed 8-12 year olds interactions
parental verbal content
positive
negative
implied criticism

Cramer  m/infant interactional variable changes in brief therapy
case study
positive responses
avoidance responses
aversive responses

David  m/hyperactive boys communication
interaction as series of
4 types of
assertions and responses

DeSalvatore  parent ed training
practice scripts
of family talk

DiLalla social interaction among abusing and neglecting parents and their children
group activity positive
request
prohibit verbally
restrict
pleasant interaction
comply
refuse
ignore
protest
aggress
tickle
nonphysical punishment
physical punishment
<table>
<thead>
<tr>
<th>Author</th>
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<td>Drotar</td>
<td>maternal interactional behavior with nonorganic failure-to-thrive 6 month old infants</td>
<td>quality of sensitivity/insensitivity cooperative/interference acceptance/rejection accessibility/ignoring [based upon 3 discrete interaction behaviors during interaction — timing, pacing, termination]</td>
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<td>Dumas</td>
<td>m/c interaction: conduct-disorder children</td>
<td>mother aversive child aversive mother positive child positive</td>
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<td>Dumas</td>
<td>noncompliant children's interactions with parents</td>
<td>direct commands indirect commands prescribes [based upon 18 different commands]</td>
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<tr>
<td>Eyberg</td>
<td>p/c interaction therapy</td>
<td>5 do's and don't &lt;practice 5 minutes a day&gt;</td>
</tr>
<tr>
<td>Fraser</td>
<td>parent/infant interactions</td>
<td>qualitative indicators from child language research</td>
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<tr>
<td>Gardner</td>
<td>interaction between mothers and conduct-problem children</td>
<td>identify activities for research design considerations</td>
</tr>
<tr>
<td>Hauser</td>
<td>family interaction sequences during visits to psychiatrically hospitalized adolescents</td>
<td>qualitative indicators from language research</td>
</tr>
<tr>
<td>Haynes-Semen</td>
<td>toddler's interactions with mothers</td>
<td>identify qualitative indicators of maternal attention and reciprocity</td>
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</table>
Hoffman  optimal mother-infant interaction  maternal (6)
infant (2)

Howlin  parents communication style and autistic childrens' socialized language patterns
qualitative indicators from language research
[maternal -- 10 language directed utterances
child -- 7 socialized utterances]

Hughes  parents communication skills training
recognize dysfunctional and provide negative reinforcement of:
timeouts
threats
accusations
unwarrented or global generalizations

Johnston  mother interactions with children with externalizing disorders
maternal
direction
praise
negative
noninteractive
interaction
child

Kasari  caregivers interaction with autistic children
attention regulation
behavior regulation
responsiveness

Konstantareas  maternal speech to children
directives
control
reinforcement
[for motor behavior]
questions
answers
reinforcement
[for verbal utterances]

Olson  parent/toddler interactions
warm responsiveness
avoidance of restriction
teaching and responsiveness
nonrestrictive
attachment security
verbal stimulation
nonpunitve control

Pianta differences in m/c interactions
at 3 and 1/2 years

mother
supportive presence
respect for autonomy
structuring situation
& setting limits
hostility
quality of instruction
confidence in dealing
with the task

child
persistence
enthusiasm
negative affect expressed
compliance
overall experience in the
session
reliance on mother
affection
avoidance

Rastram family interactions in a
"typical" anorexia nervosa family
44 item questionnaire

Shapiro m/ autistic child
difficulties/complexity of
setting up
dialogues
with child

Stivers parent/adolescent communication
40 item questionnaire

Strayhorn teaching parents teaching
teach elements of
curriculum

Trommsdoff m/c development of empathic
interactions
questionnaire on empathy

Wahler effective parent training in
m/c interactions
parents learning new
observation categories
(i.e. new constructs for
Webster stressed and depressed parents' interaction with children

maternal
commands
criticisms
child
deviance
noncompliance

observing and verbalizing child's behavior)
**TABLE 5 : COMPILATION OF INTERPRETATIVE REVIEW COMPONENTS**

<table>
<thead>
<tr>
<th>Author</th>
<th>Observed Behavior(s)</th>
<th>Observation Time</th>
<th>Task(s) performed</th>
<th>age</th>
<th>Size of Sample</th>
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<tr>
<td>Alvery (1)</td>
<td>maternal use of reinforcers (verbal praise)</td>
<td>2-5 hr. training session</td>
<td>learn verbal praise examples</td>
<td>7,8,9</td>
<td>3</td>
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<td>Barkley 1988 (10)</td>
<td>maternal commands: command-question question praise negative reaction no response Child behaviors: compliance competing (off-task) negative interaction independent play no response</td>
<td>20 min.</td>
<td>5 tasks in clinic playroom (pick up toys; copy design; complete counting problems; draw a line through a maze; play independently)</td>
<td>3-4</td>
<td>27</td>
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<td>Barkley (3)</td>
<td>interaction = 's mother commands child complies mother praises</td>
<td>20 min</td>
<td>&lt;same as above 6 yrs.</td>
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<td>Barkley (5)</td>
<td>m/a interaction: commands/put down defends/complain problem-solution facilitates talks</td>
<td>10 min</td>
<td>14.9 yrs</td>
<td>25</td>
<td>plan a vacation discuss and attempt to resolve the five most angry conflicts reported by the mother</td>
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<tr>
<td>Author</td>
<td>n/r</td>
<td>Task(s) performed</td>
<td>age</td>
<td>Size of Sample</td>
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<tr>
<td>Beckwith</td>
<td>n/r</td>
<td>develop observation skills</td>
<td>infants</td>
<td>35</td>
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<td>Boylin</td>
<td>check charts to correlate visits with any acting out</td>
<td>visit adolescent in hospital</td>
<td>14-18</td>
<td>94</td>
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<tr>
<td>Cambell</td>
<td>15 min</td>
<td>play with child as you would at home (lab had 9 toys)</td>
<td>2-3</td>
<td>64</td>
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</tbody>
</table>

**Observed Behavior(s)**

- 5 categories of responsiveness
  - *talking*
  - *talking in face*
  - *holding*
  - *mutual visual regard*
  - *contingency to distress*

- acting out (i.e. aggressive non-compliant after family visits)

- maternal structuring:
  - *directive*
  - *statements*
  - *praise*
  - *suggest alternative*
  - *control*

- child behaviors:
  - *negative*
  - *non-compliant*
  - *aggressive*
<table>
<thead>
<tr>
<th>Author</th>
<th>Observed Behavior(s)</th>
<th>Observation Time</th>
<th>Task(s) performed</th>
<th>age</th>
<th>Size of Sample</th>
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<td>20 min</td>
<td>recreate</td>
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<td>20 mnths. 42</td>
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<td>maternal *positioned for reciprocal exchange</td>
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<td></td>
<td>the at-home feeding experience</td>
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<tr>
<td></td>
<td>*talk</td>
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<tr>
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<td>*positive remarks</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
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<td>feeding factors</td>
<td></td>
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<td>child *distracted</td>
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<td>*cried</td>
<td></td>
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<tr>
<td></td>
<td>*turned away</td>
<td></td>
<td></td>
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<tr>
<td>Cole</td>
<td>parental verbal content:</td>
<td>10 min</td>
<td>complete 8-12</td>
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<tr>
<td></td>
<td>positive</td>
<td></td>
<td>game (roll ball bearing through a series of image paths without it dropping into a hole)</td>
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<td>negative</td>
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<td>implied criticism</td>
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</tr>
<tr>
<td>Cramer</td>
<td>positive responses (all maternal actions &amp; interpretations that treat child's action as normal assertiveness curiosity exploration invitation to interact)</td>
<td>5 therapy sessions</td>
<td>mother 10</td>
<td>1</td>
<td>and infant attend psychotherapy sessions together</td>
</tr>
<tr>
<td>Author</td>
<td>Behavior(s)</td>
<td>Time</td>
<td>Task(s)</td>
<td>Sample</td>
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<tr>
<td>--------------</td>
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<td></td>
</tr>
<tr>
<td>David</td>
<td>verbal content (4 communication types: confirms disagrees disconfirms induces)</td>
<td>n/r</td>
<td>agree on conclusions for each percept contained in 10 Research cards</td>
<td>30</td>
<td></td>
</tr>
<tr>
<td>De Salvatore</td>
<td>patterns of-- competition; problem-solving; mistake-making; creativity; productivity; partnership of parents</td>
<td>parent ed teaching</td>
<td>use different pre-written scripts to facilitate learning new patterns of interaction</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Di Lalla</td>
<td>*positive social interaction *caretaking *discipline *refusal *hostility</td>
<td>1 min</td>
<td>&quot;free activity&quot; (mean) in the family's home</td>
<td>20</td>
<td></td>
</tr>
<tr>
<td>Drotar</td>
<td>discrete interactive behavior during feeding (timing, pacing, termination)</td>
<td>n/s</td>
<td>feeding at home</td>
<td>20</td>
<td></td>
</tr>
<tr>
<td>Dumas</td>
<td>behaviors which form the following clusters of m/c behaviors:</td>
<td>30 min</td>
<td>laboratory play (mean) setting</td>
<td>33</td>
<td></td>
</tr>
</tbody>
</table>

- m adversive
- c adversive
- m positive
- c positive

51

(child's home ("go about daily routine," but no TV or phone calls)
<table>
<thead>
<tr>
<th>Author</th>
<th>Observed Behavior(s)</th>
<th>Observation Time</th>
<th>Task(s) performed</th>
<th>age</th>
<th>Size of Sample</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dumas</td>
<td>18 different commands (e.g. direct commands, indirect commands, prescribes)</td>
<td>1 hr</td>
<td>child's home</td>
<td>6.3 yrs</td>
<td>22 mothers and fathers</td>
</tr>
<tr>
<td>Eyberg</td>
<td>don't rules: *indirect commands, *unlabeled praise</td>
<td>practice 5 minutes per day</td>
<td>play with child while wearing a bug-in-ear device through which author coached parents</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gardner</td>
<td>(11 activity codes) joint activity, joint conversation, play alone, sub play, talk, maintenance, TV, angry conflict, control, sib-fight, rough-and-tumble</td>
<td>4 times 4 hours total</td>
<td>get on with 4 yrs (mean) whatever they normally do (no rules re: phone, TV)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

4 times 4 hours total
<table>
<thead>
<tr>
<th>Author</th>
<th>Behavior(s)</th>
<th>Time</th>
<th>Task(s)</th>
<th>Sample</th>
<th>Size of Sample</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hauser</td>
<td>m/f/adolescent</td>
<td>40-45 m</td>
<td>defend individual position on a moral dilemma and then attempt to reach a consensus</td>
<td>79</td>
<td></td>
</tr>
<tr>
<td></td>
<td>*Constraining cognitive</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>*disturbing</td>
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<tr>
<td></td>
<td>*withholding</td>
<td></td>
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<tr>
<td></td>
<td>*(Affective</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><em>indifference</em></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td><em>devaluing</em></td>
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<tr>
<td></td>
<td><em>gratification</em></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>*(Enabling</td>
<td></td>
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</tr>
<tr>
<td></td>
<td><em>cognitive</em></td>
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<tr>
<td></td>
<td><em>explaining</em></td>
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<tr>
<td></td>
<td><em>focusing</em></td>
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<tr>
<td></td>
<td><em>problem solving</em></td>
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<tr>
<td></td>
<td><em>curiosity</em></td>
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<tr>
<td></td>
<td><em>(Affective</em></td>
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<tr>
<td></td>
<td><em>accepting</em></td>
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<tr>
<td></td>
<td><em>understanding</em></td>
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<tr>
<td>Haynes-Seman</td>
<td>no pre-coding categories</td>
<td>n.s.</td>
<td>meal diapering play</td>
<td>1</td>
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<tr>
<td></td>
<td><em>(non-Affective</em></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>categories</td>
<td></td>
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<tr>
<td>Hoffman</td>
<td>maternal</td>
<td>10 m</td>
<td>free play in a laboratory playroom</td>
<td>22</td>
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<tr>
<td></td>
<td><em>(affectionate</em></td>
<td></td>
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<tr>
<td></td>
<td><em>physical contact</em></td>
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</tr>
<tr>
<td></td>
<td><em>(contingent responding</em></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><em>(distress-reducing physical contact</em></td>
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<tr>
<td></td>
<td><em>(facilitate involvement with toy, etc.</em></td>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td><em>(contingent responding with toy, etc.</em></td>
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<tr>
<td></td>
<td><em>(infant</em></td>
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<td></td>
</tr>
<tr>
<td></td>
<td><em>(contingent responding</em></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><em>(involvement with toy</em></td>
<td></td>
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<tr>
<td>Author</td>
<td>Observed Behavior(s)</td>
<td>Observation Time</td>
<td>Task(s)</td>
<td>Size of performed age</td>
<td>Sample</td>
</tr>
<tr>
<td>-------------</td>
<td>-----------------------------------------------------------</td>
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<tr>
<td>Howlin</td>
<td>*maternal use of 10 &quot;Language development&quot; directed utterances: *children 7 socialized utterances: echoes questions questions/answers spontaneous directions/commands &quot;automatic&quot; other (reading)</td>
<td>weekly home visits for 6 months, then bi-wkly 12 months</td>
<td>maternal questions (mean) answers limitations echoes reductions expansions mimickery corrections reinforcements</td>
<td>6.5 yrs. 16</td>
<td></td>
</tr>
<tr>
<td>Hughes</td>
<td>positive reinforcement</td>
<td>seven 1.5 hr sessions</td>
<td>parent training (mean age)</td>
<td>12 yrs 42</td>
<td></td>
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<tr>
<td>Johnson</td>
<td>*maternal: direction interaction praises negatives nomination</td>
<td>20 min</td>
<td>5 tasks: (delay (mean age) pick-up toys; complete maze; arrange block design; complete math problem)</td>
<td>8 yrs 40</td>
<td>40</td>
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<tr>
<td>Author</td>
<td>Behavior (s)</td>
<td>Observation Time</td>
<td>Task(s) performed</td>
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<tr>
<td>Kasari (3)</td>
<td>attention regulation; behavior regulation; responsiveness</td>
<td>12 m</td>
<td>5 tasks playroom lab (play with any of 9 toys: play with doll, bed, &amp; bottles; play with puzzles; play without toys; put toys away)</td>
<td>4.5yr</td>
<td>36</td>
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<tr>
<td>Konstantareas (6)</td>
<td>maternal directives * control * reinforcement for motor behavior * questions * answers * reinforcement for child's spoken utterances (i.e. expansions, corrections of child's verbalization)</td>
<td>15 m</td>
<td>interact as you would at home</td>
<td>2 yrs</td>
<td>620</td>
</tr>
<tr>
<td>Olson (7)</td>
<td>warm responsiveness; avoidance of restriction; teaching &amp; responsiveness; nonrestrictive; attachment security; verbal stimulation; nonpunitive control</td>
<td>two 3 hour home observations</td>
<td>child-4 tasks (matching; drawing; walking; delay of present opening)</td>
<td>2 yrs</td>
<td>80</td>
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<tr>
<td>Author</td>
<td>Behavior (s)</td>
<td>Time</td>
<td>Task(s) performed</td>
<td>age</td>
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<td>-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
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</tbody>
</table>
| Pianta     | maternal * supportive presence  
* quality instructional assistance  
* structuring of the situation  
* Hostility toward child  
* confidence in dealing with the task  

| child
| persistence  
| enthusiasm  
| negative affect  
| compliance  
| reliance/dependency  
| affection  
| avoidance  

| Shapiro    | set up dialogues with child  

| Strayborn  | *communicates enthusiasm  
* gives approval  
* non-directive conversation  
* plays imaginatively  

| Time       | 3  
<table>
<thead>
<tr>
<th></th>
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<tr>
<td>10-min</td>
<td>segments</td>
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<table>
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<tr>
<th>Task(s) performed</th>
<th>age</th>
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</thead>
<tbody>
<tr>
<td>teaching</td>
<td>3.5</td>
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| in 4 problem-solving situations  
| copy block pattern;  
| name objects with wheels  
| place objects according to color and shape  
| trace a maze  

<table>
<thead>
<tr>
<th>Task(s) performed</th>
<th>age</th>
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</thead>
</table>
| place objects according to color and shape  
| trace a maze  

<table>
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<tr>
<th>Time</th>
<th>25 m</th>
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<tbody>
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<td>10-min</td>
<td>segments</td>
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<th>Size of Sample</th>
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<table>
<thead>
<tr>
<th>Task(s) performed</th>
<th>age</th>
</tr>
</thead>
</table>
| play  
| lab  
| teach child elements of curriculum developed by researchers  

<table>
<thead>
<tr>
<th>Task(s) performed</th>
<th>age</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.3 yr</td>
<td></td>
</tr>
<tr>
<td>3.9 yrs</td>
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</tbody>
</table>

<table>
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<tr>
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<table>
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<th>Task(s) performed</th>
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</thead>
<tbody>
<tr>
<td>3.3 yr</td>
<td></td>
</tr>
<tr>
<td>3.9 yrs</td>
<td></td>
</tr>
<tr>
<td>Author</td>
<td>Observed Behavior(s)</td>
</tr>
<tr>
<td>-----------------</td>
<td>---------------------------</td>
</tr>
<tr>
<td>Webster-Stratton (4)</td>
<td>parent, commands, criticism, child, deviance, noncompliance</td>
</tr>
</tbody>
</table>

**Key**
- n/r: not reported
- n.s.: not specified
Bibliography


Hughes, R.C., & Wilson, P.H. (1988) Behavioral parent training: Contingency management versus communication skills training with or without the participation of the child. *Child and Family Behavior Therapy, 10(4),* 11-23.


