

PCIT Training Center
CAARE Center,
Dept. of Pediatrics,
UC Davis Medical Center

TEACHER-CHILD INTERACTION TRAINING (TCIT)



TCIT pilot project funded by First 5 Riverside

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PCIT



Teacher Child Interaction Training (TCIT)

- PCIT program adapted for preschool teachers since educators face the challenge of managing disruptive children in their classrooms
- Disruptive behaviors impact the teachers' ability to teach an entire classroom effectively
- TCIT impacts more children in a classroom setting



Applying TCIT with Preschool Children

- Focus is on enhancing teacher-child relationship.
- Increases teacher's attention to child's positive behavior
- Decreases child's negative attention seeking behavior
- Allows children more lead to develop initiative and problem-solving



TCIT in Action

□ VIDEO



Preventing Misbehavior

Concepts Teacher Can Use in the Classroom

PRIDE

Praise

Reflection

Imitation

Description

Enthusiasm

**Skills to Manage
Behaviors**

Be Direct

TCIT Training

- Trained 8 Child Development Centers
- Conducted 3-all day trainings in which 100 CDC staff learned principles of positive classroom management (TCIT) that are based on Parent-Child Interaction Therapy (PCIT)
- Teachers identified 195 index children in their classrooms with behavioral problems and completed SESBI assessments of them before beginning TCIT
- Therapists collected data on teachers' and aides' use of recommended skills prior to training

TCIT Training *cont'd.*

- Therapists visited classrooms weekly for 12 weeks to coach and model skills for teachers and aides, helping them to implement TCIT skills with children in their classroom
- Therapists assessed teachers' and aides' skills weekly
- Therapists re-assessed classes and children after 3 months of TCIT intervention

Examinations of TCIT's Effectiveness at Family Service Association Child Development Centers

- Examination of TCIT 1st Generation
 - ▣ Dr. Susan Timmer & Dr. Jean McGrath
 - UC Davis CAARE Diagnostic & Treatment Center In collaboration with WestEd Center for Prevention and Early Intervention
 - ▣ Findings
 - Increase in use of PRIDE Skills
 - Decrease in use of critical commands and critical statements
 - Significant decrease in number of commands
 - Significantly more likely to follow up with praise after giving a command
 - Intensity of child behavior problems reduced significantly
 - Number of child behavior problems decreased significantly

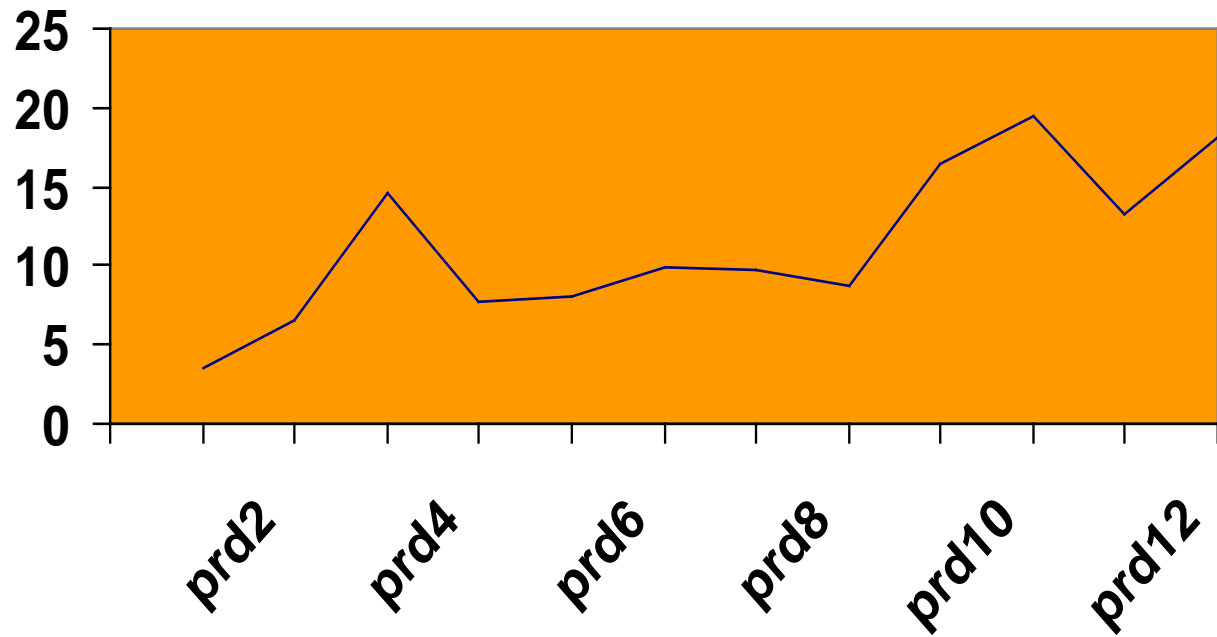
Examinations of TCIT's Effectiveness at Family Service Association Child Development Centers

- Examination of TCIT 1st, 2nd and 3rd Generations
 - ▣ Family Service Association Clinic
 - ▣ Findings from the Classroom/Teacher Observation Assessment
 - 80% of teachers and aides showed overall improvement
 - Increase in collaboration between teachers and aides to enforce rules
 - Teachers and aides attended to positive behavior more than negative behavior
 - Significant improvement in giving commands one at a time
 - Increase in teachers and aides observations of students' appropriate /positive behavior

PRIDE Skills

- Teachers and aides showed increased use of praise, reflection, behavioral descriptions with students during 5 minute transitions by the 12th TCIT session

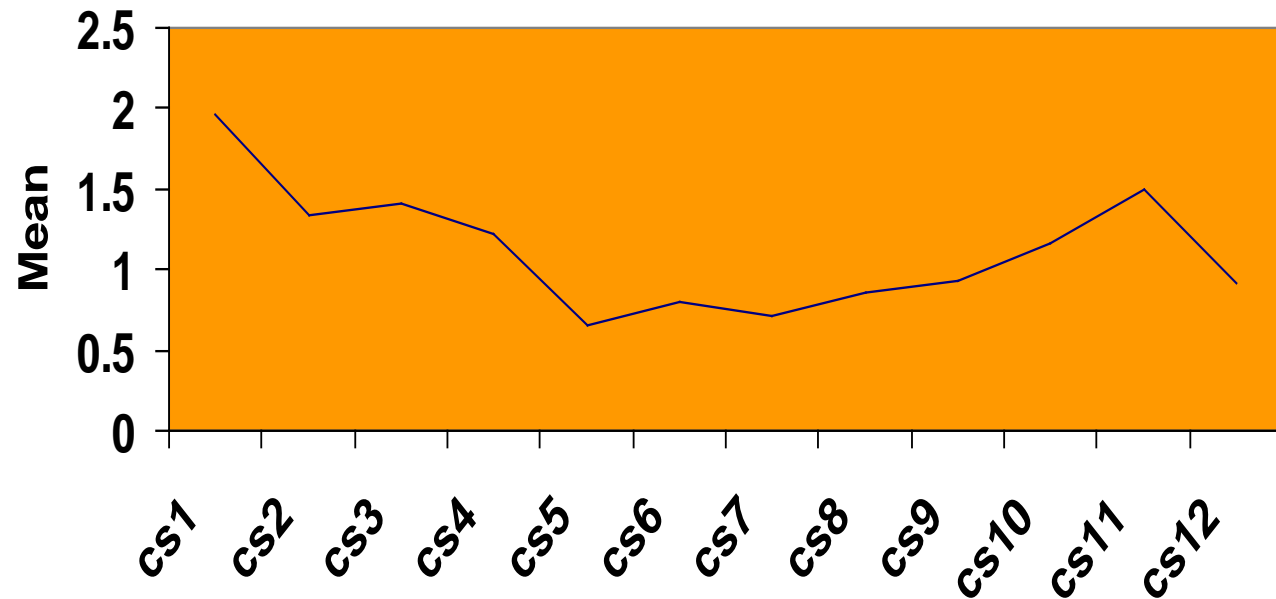
Mean numbers of Praises, Reflections, Behavioral Descriptions: Sept 2011-Jun 2012



Decreasing Negative Talk

- Teachers and aides decreased use of critical commands (e.g., “Stop!”) and critical statements (e.g., “That’s not helpful”) with students during 5 minute transitions by the 12th TCIT session

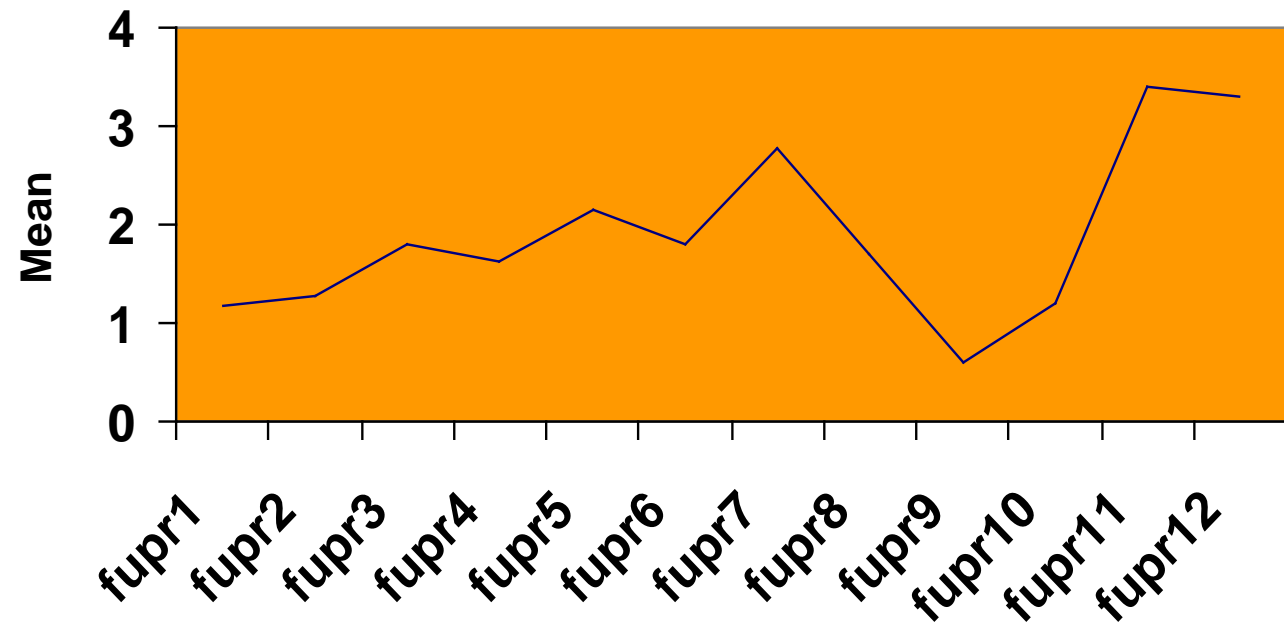
**Mean number of Criticisms:
Sept 2011-Jun 2012**



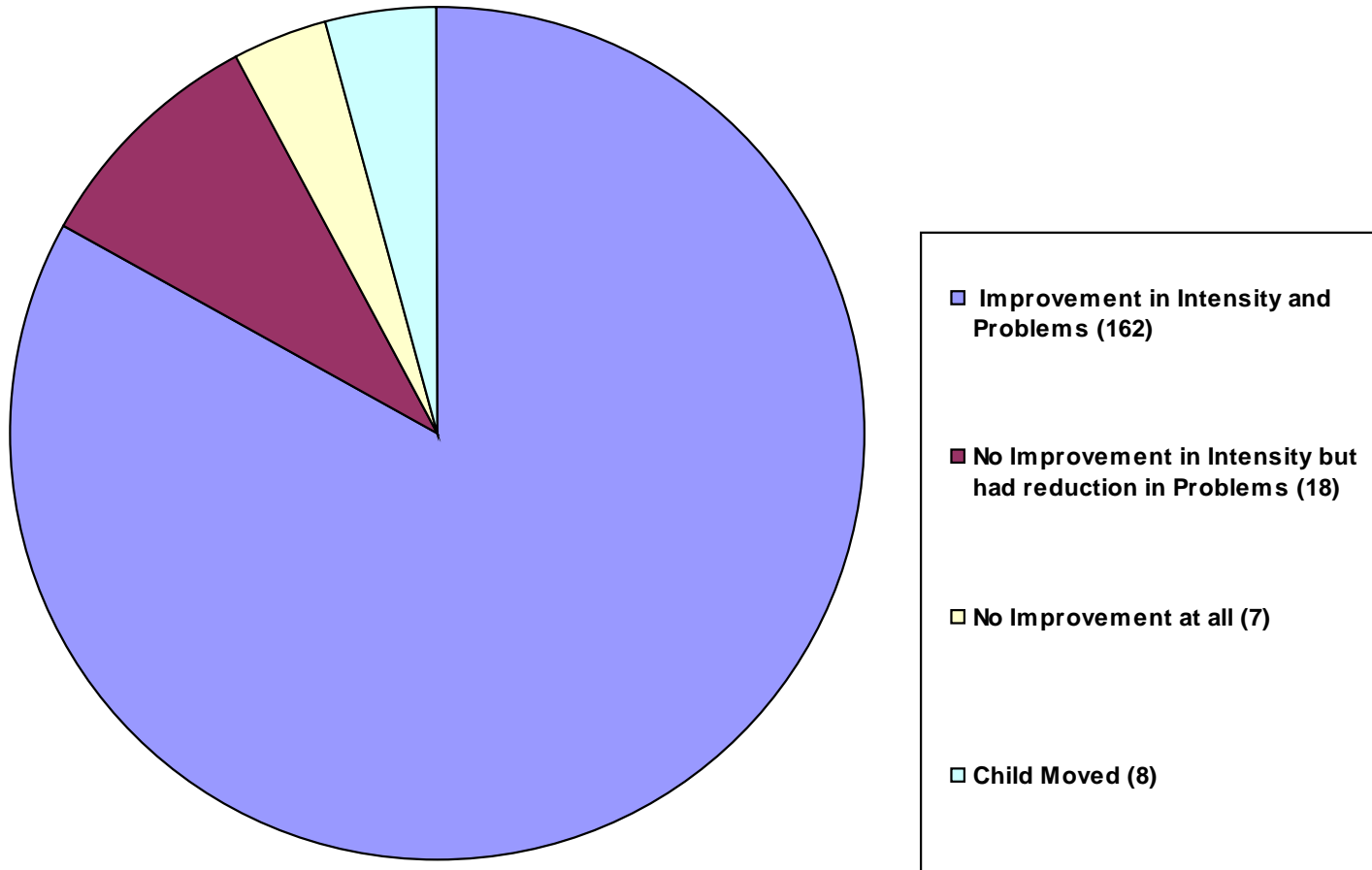
Increased Praise following Commands

- When Teachers and aides gave commands, they were more likely to follow up with praise during 5 minute coding of transitions by the 12th TCIT session

Mean number of Praises given after a Command: Sept 2011-Jun 2012



SESBIs



Administrative Challenges

- Paid overtime to CDC staff for TCIT Trainings
 - ▣ Budgeted for anticipated attendees for weekend trainings
- Teachers & children leaving/moving sites
 - ▣ Increased communication between TCIT therapists and school staff to continue services
- TCIT therapist to teacher ratio “1:8”
 - ▣ TCIT therapists had increased flexibility
 - ▣ Consideration for future TCIT therapist schedules. “1:4” ideal ratio

Clinical Challenges

- Helping TCIT therapists understand the classroom dynamic
 - ▣ TCIT therapists learned to join the classroom so that children saw them as “teachers”
- Teachers had varying capacities for learning
 - ▣ TCIT therapists adjusted coaching style and found time to speak to teachers one-on-one
- Language-Teachers were not always fluent in dominant language of class.
 - ▣ Teachers were paired up with bilingual TCIT therapists
- Identifying index children for SESBI's
 - ▣ TCIT therapists had to explain that scores were not a reflection of teachers ability to handle concerns/classroom
- Making TCIT work during flow of classroom
 - ▣ TCIT therapists increased mindfulness of classroom schedule & flexibility
 - Ex., Requested Classroom Activities List

Successes

- A total of 1423 children were impacted by the FSA CDC staff's utilization of PRIDE Skills
- Increased collaboration between the FSA Clinic Department & FSA Child Development Department
 - ▣ Facilitated a flow of referrals for PCIT
 - ▣ Easier for parents to enroll in services
 - ▣ Were able to impact more families
- Improvement was greater when children participated in both TCIT & PCIT
 - ▣ The same skills were reinforced both at school and at home and the same target behaviors were being addressed
- Implementation of classroom “booster sessions” and “booster refresher trainings” are being done to continue to promote the success of TCIT at FSA

FSA PCIT Team



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