



PCIT Training Center

"Parent-Child Interaction Therapy:
Treatment Outcomes and Implementation
to Community Mental Health Settings"

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95th Annual Convention
Western Psychological Association
Red Rock Convention Center
Las Vegas, NV





THE SACRAMENTO BEE

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Child abuse researcher/therapist since ~1979 Prior history of CSA research

This is how it got started...

- 10 child fatalities described in the Sacramento Bee
 - Something else was happening!
- Transition to physically abusive families
- An NIMH grant
- 1999 PCIT Training Center







OBJECTIVES

Goals for presentation participants:

- Obtain a basic understanding of PCIT
 - Relationship Enhancement- CDI
 - Discipline- PDI
- Understand what makes PCIT work
 - Improving parenting skills- increasing warmth, teaching behavior management
 - Decreasing behavior problems- parent positive attention to appropriate behaviors
 - Improving the quality of the parent-child relationship
- Hear about research developments
 - PCIT and child maltreatment
 - Culture and PCIT
- PCIT for Traumatized Children Web Course
- A PART Models of POIT Training



Where did PCIT come from?



PCIT was first developed in the early 1970s at Oregon Health Sciences University by Dr. Sheila Eyberg. She was influenced by:

- Diana Baumrind
 - Concept of authoritative parenting
- Constance Hanf- Mother of Positive Parenting
 - Maternal use of differential social attention
 - Ignoring 'uncooperative' behavior
 - Direct commands
 - Praise for compliance
 - Time-out for non-compliance
 - 'COACHING'

Dr. Eyberg added ASSESSMENT to this model, blending it into the fabric of the protocol:

- Eyberg Child Behavior Inventory
- DPICS coding





What is PCIT?

PCIT PULSE Video Removed







What is PCIT?

PCIT is a dyadic Intervention treating children 2 to 7 years old with disruptive behaviors and caregivers who have (at least) regular contact with children.

- Therapists coach the parents while playing with their children, using an FM receiver (2 way mirror/ video feed)
 - Adaptations in home settings
 - Adaptations in low-tech settings
- Course of treatment- 14 20 weeks
 - CDI Enhance the parent-child relationship, teaching parents to attend to appropriate child behavior
 - PDI Teach parent effective behavior management techniques
- Assessment driven
 - Assessment informs didactic, coaching strategies
- Process of treatment- from "hear" to "do"
 - Intake assessment→ didactic teaching→ coaching→ skills mastery







Child Directed Interaction (CDI)

PRIDE Skills

Praise
Reflection
Imitation
Description
Enthusiasm







Parent Directed Interaction (PDI) BE DIRECT

Be Specific with commands

Every command positively stated

Developmentally appropriate

Individual commands

Respectful and polite

Essential commands only

Choices when appropriate

Tone of voice neutral





Typical PCIT Room







Typical Observation Room



PCIT Treatment & Observation Room







What makes PCIT work?

Research tells us...

In a meta-analysis of parenting programs (Kaminski et al., 2008), what works is:

- Increasing positive parent-child interactions and emotional communication skills
- Teaching parents to use time-out
- Encouraging consistency

PCIT Process



- Emotional Availability research
- Automatic attributions and parental meta-cognition



What does PCIT coaching look like?



PCIT PULSE Video Removed







OVERVIEW

PCIT FINDINGS

IMPROVED SKILL ACQUISITION

- More parent reflective listening, physical proximity, and prosocial verbalizations
- Less sarcasm and criticism
- Positive attitudes

IMPROVED PARENT FUNCTIONING

- Less parental stress
- Fewer psychological symptoms
- Greater sense of control
- High satisfaction with treatment

IMPROVED CHILD FUNCTIONING

- Fewer child behavior problems, reduced to normal limits
- Improved child responsiveness to parent

GENERALIZATION OF EFFECTS

- Long-lasting effectsdemonstrated up to 6 years
- Generalized to untreated siblings, home, and school







PCIT & Violent Families

REDUCING CHILD MALTREATMENT

- Increase parents' skills
- Manage child behavior problems
- Improve quality of dyadic interaction

IMPROVED SKILL ACQUISITION

DECREASE RISK

- Decrease child abuse potential
- Decrease child mental health problems
- Decrease parental stress

- Improve school performance
- Increase positive peer interactions
- Improve personal relationship skills
 - - Sharing, taking turns
 - - Emotional regulation

IMPROVED FAMILY & COMMUNITY FUNCTIONING







CULTURE

Research established the acceptability, efficacy, and effectiveness with several cultural groups

Latinos

PCIT has been found efficacious in Spanish speaking and English speaking Latinos living in the San Diego area. PCIT also has been found efficacious for Puerto Rican Latinos.

Chinese

PCIT has been translated into Chinese. A randomized trial found it to be efficacious among Hong Kong Chinese.

African Americans

PCIT has been found efficacious among African American families

Native Americans & Hmong

PCIT has been found to be acceptable to

Native American and Hmong families with few
adjustments

Good practice emphasizes family strengths

Natural is better and more likely to generalize.

Therapists should be respectful of differences and provide parent voices and choices.







TRAUMA

Why would an empirically supported treatment for disruptive behaviors reduce trauma symptoms in young children?

TRAUMA SYMPTOMS

- Nightmares
- Anxiety

BEHAVIORAL DISTURBANCE

- Noncompliance
- Aggression

AFFECTIVE DYSREGULATION

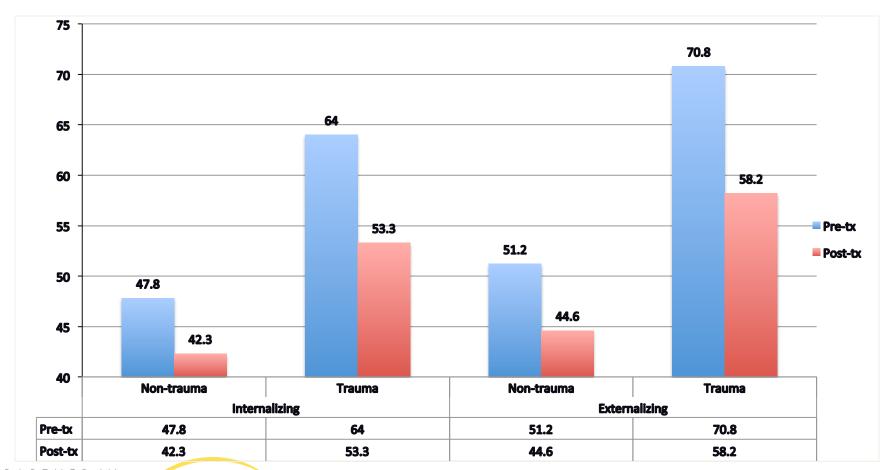
- Temper tantrums
- Crying/ whining







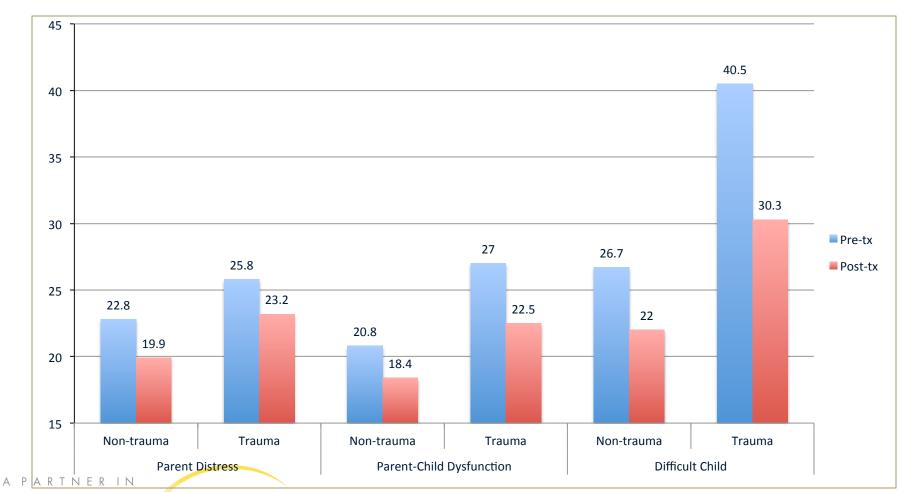
Client outcomes: Pre- and post-PCIT mean CBCL scale scores by trauma group





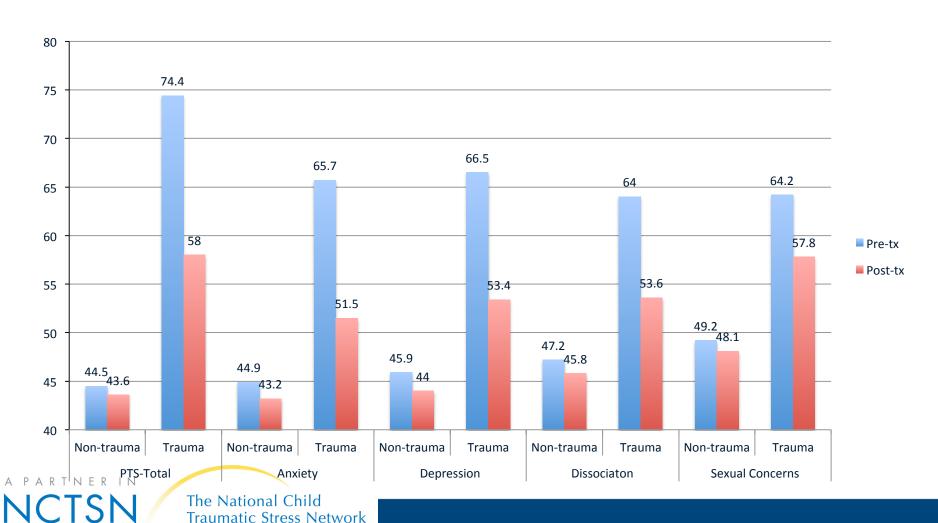


Client outcomes: Pre- and post-PCIT mean PSI scale scores by trauma group





Client outcomes: Pre- and post-PCIT mean TSCYC scale scores by trauma group



TRAINING



UC Davis PCIT Training Center history

- Established in 1999 to train 13 California agencies in PCIT.
- Attain a competency level among trainees that will enable agency therapists to provide PCIT services.
- Train designated agency therapists (ToTs) to provide agency supervision of PCIT services and train future staff (2nd generation+) in PCIT service delivery.
- Children who receive PCIT services from the trainee agency will demonstrate significant behavioral improvements and symptom reduction after completion of PCIT.
- Currently we have trained 250+ community mental health agencies throughout California and other states/countries





TRAINING



UC Davis PCIT Training Center vision

- To improve the quality of mental health services to children and families.
- Increase the number of trained and qualified mental health providers in rural and urban areas with the expertise to comprehensively respond to the special needs of children and families through the delivery of PCIT services.
- Bridge the gap between effective research and effective practice.
- Expand the depth and breadth of scientific knowledge in mental health, child maltreatment, and PCIT.





PROGRESS



California Counties with PCIT

The National Child

Traumatic Stress Network



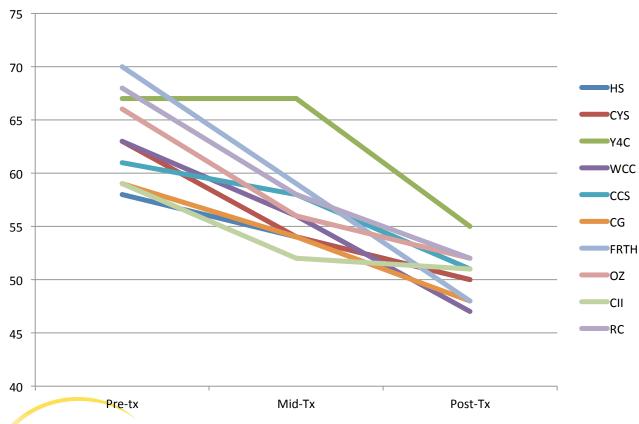
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> Alaska-3 Washington Missouri-2 Illinios



UC Davis PCIT trained agencies' client outcomes

Eyberg Child Behavior Inventory- Intensity Scale: Mean T-Scores from Pre-, Mid-, & Post-Tx Assessments



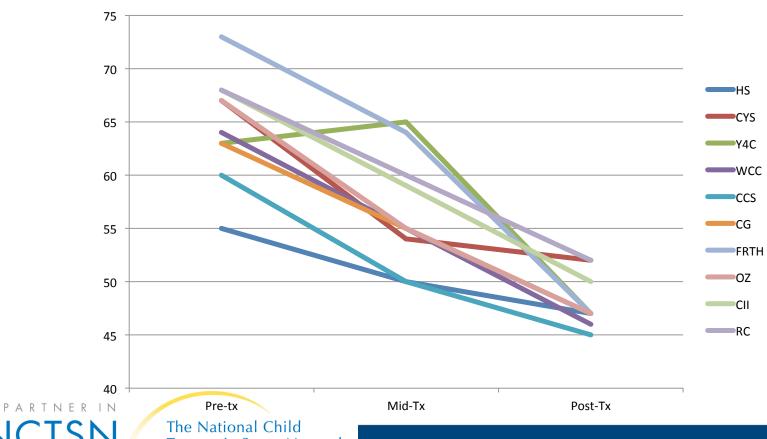


The National Child Traumatic Stress Network



UC Davis PCIT trained agencies' client outcomes

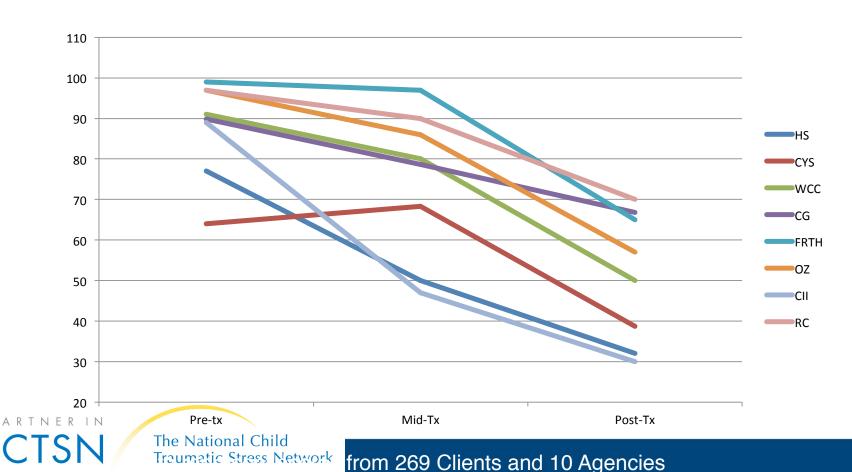
Eyberg Child Behavior Inventory- Problem Scale: Mean T-Scores from Pre-, Mid-, & Post-Tx Assessments





UC Davis PCIT trained agencies' client outcomes

Parenting Stress Index- Total Stress: Mean Percentile Scores from Pre-, Mid-, & Post-Tx Assessments





TRAINING MODEL

UC Davis PCIT Training Center

PROGRAM DEVELOPMENT

- Consultation to give training overview, discuss equipment
- Help select trainees
- Evaluate agency referral process to support PCIT

FUNDAMENTAL SKILL ACQUISITION

- Completion of Web Course, passing quiz with 80% correct
- 11 Modules, 10 hours of on-line training, with video examples
- Practice coding using web course

SKILL BUILDING

 Day long visit from trainer at your agency to review and practice basic skills necessary to begin providing PCIT

COACHING

- Trainer will guide trainees through the course of treatment, coaching them either on site or via videoconferencing.
- 11 day long coaching sessions (88-102 hrs) plus 6 consultation sessions (1 hr each) via telemedicine.







"Implementation is Personal"

Training: Knowledge, Skills, and Culture



Cars – driver ed & driver training

Airplanes – aeronautics and flight simulators



PCIT – in vivo training and immediate feedback







REMOTE TRAINING

PCIT Training through videoconference technology





Challenge:

Putting telemedicine equipment into existing audiovisual system.





The National Child Traumatic Stress Network



REMOTE TRAINING

What does this look like?

PCIT PULSE Video Removed







"Implementation is Personal"

Getting them trained is not that hard; getting them to 'stay trained' is hard.

Getting clinicians to understand, adopt, and sustain new cognitions, beliefs, behaviors is hard.

Using the personal (listening, competence, trust) to develop culture consistent with new practices is key.







"Implementation is Personal"

Why PCIT in public mental health?

Other parenting interventions are also very good – e.g., Incredible years, Triple P...

- Children with more severe problems
- Parents with more challenging behaviors

Benefit from: In vivo treatment

Simple and concrete skills

Practice to mastery

Intensity of the intervention







Making implementation work

The Everlasting Story (Fly Falcor Fly!)

- Powerpoint presentations
- PULSE video
- Web course 'Introduction' module
- Rack Cards
- Resource and information
- Develop training videos
- Develop program handout
- Program marketing









CONTACT US

Website: pcit.ucdavis.edu

Web Course: pcit.ucdavis.edu/pcit-web-course











THANK YOU!

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Powerpoint Presentation: pcit.ucdavis.edu/resources/

powerpoint-presentations/



