



TEACHER-CHILD INTERACTION TRAINING (TCIT)

TCIT is a research-based professional training program that encourages positive teacher-child relationships by providing teachers with the effective tools for behavior management. It retains the key principles of Parent-Child Interaction Therapy (PCIT), an intervention program developed by Sheila Eyberg designed to improve strained parent-child relationships, while respecting the unique features of the classroom dynamic. Teachers are guided to manage several difficult behaviors, namely non-compliance, aggression, prolonged tantrums and difficulty with transitions; overall creating a more cooperative and manageable learning environment.



TCIT enhances the teacher-child relationship in two phases. Both phases include technical assistance, consultation and individualized coaching within the classroom. TCIT benefits from the use of a live feedback set-up during coaching sessions, allowing clinicians to simultaneously observe, guide and evaluate teacher-child interactions to determine the efficacy of the training. In TCIT, clinicians train teachers on the language of self-regulation and how to respond to both desired and undesired behaviors.

“Since the implementation of TCIT in some League classrooms, disruptive incidents dropped 32%”

- Principal Stephanie Golub -

Dr. Melissa Ortega, a PCIT certified trainer at the CDT, explains that teachers are guided to utilize ‘When -Then’ and ‘If -Then’ statements: for instance ‘once you are settled at your desk, I can help you get started’ and ‘when you raise your hand, I can call on you’. This encourages teachers to explicitly state the positive and negative consequences associated with the specific behavior. The classroom allows multiple models of appropriate behavior and thus provides teachers with additional alternative strategies. Coaching adopts several forms: encouragement, reflection, prompting to use the specific communication technique.

TCIT implementation resulted in teachers’ increased rates of positive attention of students’ behavior, decreased negative attention for students’ misbehavior. In addition, TCIT can improve the overall classroom environment, and it also allows the child to experience a greater sense of control over their behavior, leading to more positive interactions and less problem behaviors. Children develop skills for following directions that increase their ability to benefit from classroom instruction and to react appropriately to transitions, completion of tasks, persistence, active listening skills and overall improving their socio-emotional competence & learning.

What do Schools and Research say about TCIT?



A TCIT pilot project conducted by UC Davis Medical Center and Family Service Association (Dover et al., 2011-2012) showed increased use of praise, reflection and behavioral descriptions with students during 5-minute transitions by the 12th TCIT session, with 80% of teachers and classroom aides showing overall improvement. Teachers and aides also presented decreased use of critical commands (e.g. 'Stop!') and statements (e.g. 'That's not helpful') with students by the 12th TCIT session.

T CIT benefits children with behavior difficulties, but it also benefits well behaved children.

In a 2015 study, Fernandez and colleagues found that after receiving TCIT, teachers more frequently displayed positive attention toward student's appropriate behavior and decreased their attention to misbehavior. Teacher satisfaction with the training program was reported highly with significantly less disruptive-behavior-caused stress.

At the League School in New York, teachers typically reported positive effects, with fewer students seeking attention and breaking rules, and more staying on task, as soon as two weeks in (the program)... Since the implementation of TCIT in some League classrooms, disruptive incidents dropped 32%", said Principal Stephanie Golub.

“More and more, studies are showing that the use of TCIT skills in the classroom reduces disruptive and aggressive behavior while increasing compliance.”

– Dr. Melanie Fernandez –

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