

PSYCHOLOGICAL AND SPECIALIST SERVICES

Australian Psychologists Working in Child Protection Services' Perspectives on Training and Use of Parent Child Interaction Therapy (PCIT) and Parent Child Interaction Therapy with Trauma Directed Interaction (PCIT with TDI)

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RESEARCH GAPS

- There is a crucial need mitigate and reduce the long-term impacts of childhood trauma into adulthood (Tarren-Sweeney, 2021).
- Psychologists within a child protection agency are able to make a positive impact in a child and families lives through psychological treatments.
- PCIT is delivered in over 22 countries internationally. A large number of psychologists trained in PCIT are with DCJ.



RESEARCH AIMS

- Gain valuable insights from psychologists working in a child protection setting about training and implementation of trauma treatments.
- Are PCIT and PCIT with TDI viewed as favorable treatments?
- What barriers could be addressed in training and implementation to improve use of these treatments?
- Is PCIT with TDI viewed as more favorable because of its trauma adaptations?

METHOD

- The Clinician Use of and Satisfaction with PCIT (CUSP, Christian et al., 2014) survey was emailed to psychologists trained in PCIT ($N = 20$) and PCIT with TDI ($N = 5$)
- Qualitative information was collected on protocol areas including co-therapy model (two clinicians per family), barriers to the implementation, use of assessment, the didactic (teach) session, coaching, mastery criteria, termination criteria and supervision.





RESULTS- Quantitative

- Both PCIT and PCIT with TDI were considered acceptable and favorable treatments.
- Those from PCIT with TDI viewed the adapted version as more effective in reducing trauma symptoms, improving child and caregiver relationship.



RESULTS-QUALITATIVE

Training and Consultation:

- Positive experience for both groups with requests for ongoing consultation groups to consolidate learning.

Satisfaction with PCIT and PCIT with TDI:

- Teach and coach sessions give caregivers an opportunity to practice skills and problem solve with support.

Barriers to Implementation:

- Agency level- Having access to appropriate resources and equipment.
- Family level-Parent/carer trauma and instability in placement impacted upon treatment.

THANK YOU



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