Discovering Parent Empowerment: Findings from Two Evaluations of Parent Advocate Trainings

Belinda H. Ramos, M.A.¹, Geraldine Burton, F.D.C.¹, Nicole McDonnell, B.A.¹, James Rodriguez, M.S.W, Ph.D.¹, Kimberly Hoagwood, Ph.D.¹, Marleen S. Radigan, Dr.P.H.¹, Sudha Mehta, M.P.H.¹, Chip McCormick, Ph.D.¹, Serene Glin, Ph.D.¹, Maura Crowe, M.A.¹; Center for the Advancement of Children’s Mental Health, Columbia University/NYSPI, New York State Office of Mental Health

Introduction

Columbia University has developed a theory-based parent intervention program for family advocates intended to strengthen advocacy and support for parents of children with mental health needs in New York State. The Parent Empowerment Program (PEP) is a manualized training program that has been piloted with a group of family support workers from New York City and subsequently with a group of statewide parent advocates. These initiatives evaluated the impact of the training on their skills, knowledge, and sense of professional effectiveness. This poster presentation will provide quantitative and qualitative findings from these projects and outline the implications of training family support workers in empowerment and engagement strategies.

Background

Despite advances in developing effective interventions for childhood mental health problems, significant gaps persist in families’ access to and use of service. Barriers include: lack of knowledge about service effectiveness, quality or availability of services, and distrust of professionals. A development of a theory-based parent empowerment intervention was approached by Bickman, et al.,(1998) to increase parent’s self-efficacy in obtaining services for their children.

Methods

Participants

G1

• N = 27 FSW’s recruited from parent resource centers and family support programs in NYC
• 15 Trained (T1) (4-drop)
• 12 Comparison (T2) (1-drop)
• 60 Parent Advisors from 3 regions of NYS
• 81 Long Island Region N= 15
• R2 Central/Nutrition Region N = 23 (1-drop)
• R3 Western Region N= 22 (1-drop)

G2

• N= 127 parents were recruited from the FSW’s caseloads
• 70 T1 parents
• 57 T2 parents

G1

• N = 60 Parent Advisors from 3 regions of NYS
• R1 Long Island Region N =15
• R2 Central/Nutrition Region N =23 (1-drop)
• R3 Western Region N= 22 (1-drop)

Procedures

• G1 trained over 10 consecutive weeks with monthly “booster” sessions for 1 year; optional parent handbook
• G2 trained over one week with bi-weekly 90 minute group conference calls for 5 months; additional 12 hour in-person “booster” session; parent handbook during consultation

Measures

• G1: basic demographics, work setting and environment, mental health services efficacy, self-assessment, knowledge assessment, focus groups, training evaluations; T1/T2 parents: depression index
• G2: mental health services efficacy, self-assessment, family empowerment scale, job perception, adherence checklist, training evaluations

Findings

Evaluation

• Approvals of the training were generally high
• Trainers felt they…
• gained new skills
• learned new information
• were satisfied
• became more knowledgeable
• improved as parent advocates

• Module training evaluation averaged 3.9 (range 0-4), overall training approaches demonstrated high satisfaction (G1>2.9, range 0-3; G2>4.8, range 1-6)
• Self-reported assessments indicate improvements over time for skills and knowledge keyed to the manual

Challenges

• G1 participants had limited opportunity for direct parent contact; limited time, competing job responsibilities and demands, high caseloads

• G2 participants identified difficulties in working with parents with mental health needs themselves (as demonstrated with G1 participants), child service delivery systems, lack of services in rural areas

Impact

• Conclusively, there was little impact on efficacy, a key outcome measure
• G1 participants demonstrated immediate increases post training that decreased after 1 year
• G2 participants scores showed small gains post training, decreased at 6mo.
• Across all time points for G1 caregivers
• Family empowerment measure for G2 showed no significant changes over the 6mo

Lessons Learned: PEP Training and Delivery

• Key outcome measures were difficult to affect in light of FSW’s challenges
• The program seemed geared to newer FSW’s; more advanced training in necessary
• Participants felt role plays, group interaction, and topical discussions brought a strong sense of camaraderie
• A consistent theme throughout the various modules was difficult to ascertain
• The provided framework was insufficient in providing a clear directive for the topics and activities
• The goals and framework for the training need restructuring
• Improving engagement strategies, empowerment strategies, and a clearer directive for effectively using content
• Provide more “real to life” practice opportunities
• Give ample opportunity for application in real work settings
• Skills areas: Training should be made more relevant to challenges
• Context areas: Training should be cleaner about knowledge level

Implications

Lessons learned in implementing PEP in G2 required a clear focus on re-developing the framework, fidelity measures, training model, and training strategies

Next Steps...

1. Integration of formalized engagement strategies
   • Engagement strategies now a core component
   • Mary list of telephone engagement strategies combined with an empowerment through theatre strategy
   • These “Role Rehearsals” provide: real life vignettes
   • Opportunity to practice engagement strategies
   • Intensive training and peer supervision
   • Utilize engagement techniques for priority/goal setting

2. Framework consistent with parent support principles and models of change
   • Provides a rationale for understanding the work of parent support
   • A basis for honing in key skills

The overarching framework of PEP brings together what we know from the parent support field and behavioral science and combines them into strategies for helping parents

Figure 1a: G1/T1 and G2 Pre-,Post and 1 Year/6Mo Changes In Self Assessment

Figure 2a: G1 About You and Where You Work: FSW’s are trying to fill in the gap between parents and services and are challenged in meeting the need

Figure 3a: Parent Support Principles

Parent Support:

1. Is Individualized.
3. Is Respectful and Culturally Competent.
5. Builds Knowledge.
7. Solves Problems.
8. Fosters Outcomes and Success.
9. Broadens Horizons
10. Promotes Advocacy

Figure 3b: Factors that Lead to Change

1. Provide/teach knowledge and skills
2. Address environmental constraints
3. Increase salience (behavior, expectation, influence, awareness)
4. Adherence measure modified to key components derived from the combined theoretical framework
5. Measure developed to check for training utilization
6. Evaluate component for trainer fidelity

Figure 4: Parent Empowerment Training Model

Parent Empowerment Program Trainer’s Edition

Parent Empowerment Program Role Rehearsal’s Book

Improving Children’s Mental Health Through Parent and Community Engagement: Parent Advocates Guide

Improving Children’s Mental Health Through Parent and Community Engagement: Workbook

Figure 5: Poster Evaluation Form

Parent Evaluation Form

Parent’s name:

Date:

Comments:

Note: A rating system of 1-5 was used to rate each section of the program.

Olin, Ph.D.¹, Maura Crowe, M.A.¹; ¹Center for the Advancement of Children’s Mental Health, Columbia University/NYSPI