

The "Parent Connectors" Program

An empirical investigation of a parent support program

Krista Kutash, Ph.D. & Albert Duchnowski, Ph.D.
Deputy Directors, Research and Training Center for Children's Mental Health
Louis de la Parte, Florida Mental Health Institute
University of South Florida - Tampa
MARCH 2, 2009

This study was supported, in part, by the U.S. Department of Education, Office of Special Education Programs (OSEP) under grant number H324C040040.



1

© Cartoonbank.com



REVEY

"They're harmless when they're alone, but get a bunch of them together with a research grant and watch out."



2

Changing Roles of Families



- Cause
- Patient

↓

- Credible Informant
- Equal Decision-Making Partner
- Evaluator/Research Partner
- Policy Maker



3

Are you Ready ?




Are you ready to embrace family values yet?

OPINION BY MATT GREENING




4

Major Variables



- Strain and Burden Reduction
- Lack of Engagement
- Attitudes & Hope
- Support



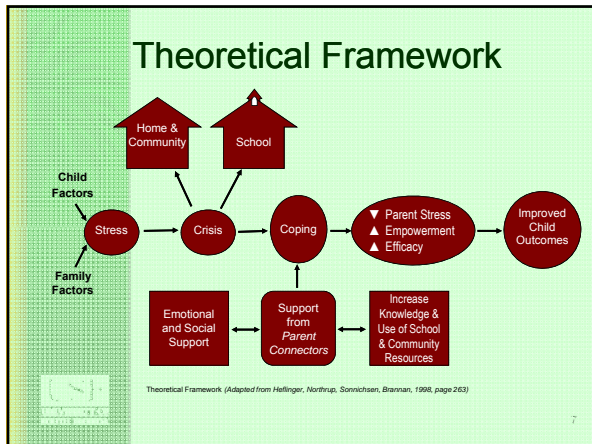
5

Family Support and Education Project

Parent Connections



6



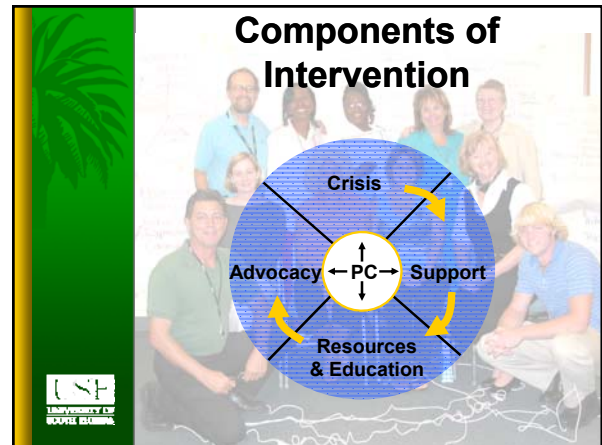
What is the *Parent Connector Program*?

A peer to peer support program for parents of children with emotional disturbances (ED).

Trained family members serve as *Parent Connectors* to deliver family support through weekly telephone contact.

Implementation

- Parents of children who have ED were provided a 16 hour training program on how to be a *Parent Connector*.
- *Parent Connectors* were provided with weekly group supervision by a psychologist to discuss the contact with each parent.
- *Parent Connectors* provided weekly phone calls and had an opportunity to meet their families face-to-face at three dinners held at the school.



Implementation and Fidelity to Intervention

Family Contact Log

Standard	Met	Not Met	Comments
1. Establish relationship with parent			
2. Provide information about program			
3. Establish communication			
4. Provide information about school			
5. Provide information about community resources			
6. Provide information about crisis services			
7. Provide information about support services			
8. Provide information about advocacy services			
9. Provide information about resources & education			
10. Provide information about crisis & support services			
11. Provide information about advocacy services			
12. Provide information about resources & education			
13. Provide information about crisis & support services			
14. Provide information about advocacy services			
15. Provide information about resources & education			
16. Provide information about crisis & support services			
17. Provide information about advocacy services			
18. Provide information about resources & education			
19. Provide information about crisis & support services			
20. Provide information about advocacy services			
21. Provide information about resources & education			
22. Provide information about crisis & support services			
23. Provide information about advocacy services			
24. Provide information about resources & education			
25. Provide information about crisis & support services			
26. Provide information about advocacy services			
27. Provide information about resources & education			
28. Provide information about crisis & support services			
29. Provide information about advocacy services			
30. Provide information about resources & education			
31. Provide information about crisis & support services			
32. Provide information about advocacy services			
33. Provide information about resources & education			
34. Provide information about crisis & support services			
35. Provide information about advocacy services			
36. Provide information about resources & education			
37. Provide information about crisis & support services			
38. Provide information about advocacy services			
39. Provide information about resources & education			
40. Provide information about crisis & support services			
41. Provide information about advocacy services			
42. Provide information about resources & education			
43. Provide information about crisis & support services			
44. Provide information about advocacy services			
45. Provide information about resources & education			
46. Provide information about crisis & support services			
47. Provide information about advocacy services			
48. Provide information about resources & education			
49. Provide information about crisis & support services			
50. Provide information about advocacy services			

Who were the participants in the study?



Parents of and students served in special education ED settings in a school district in a large metropolitan area.




13

Characteristics of Study Sample

Family

People in home (n=115)
 Avg. # of persons in home: 4.5
 Avg. # of children in home: 2.8

Poverty level (n=112)
 At or below poverty level: 44%
 Average income: \$25,520




14

Characteristics of Study Sample

Student (n=115)

Gender	Male	76%
Age	Mean Age	14.6 yrs.
	Age Range	10 to 19 yrs.
Ethnicity	Black	55%
	White	24%
	Hispanic	10%
	Bi-racial	8%



15


Characteristics of Study Sample

Student (n=115)

69% of sample in clinical range on emotional functioning (SDQ)

85% of sample in clinical range on level of impairment (BIS)

Students have a long history of special education placement (7.5 yrs.)



16





17

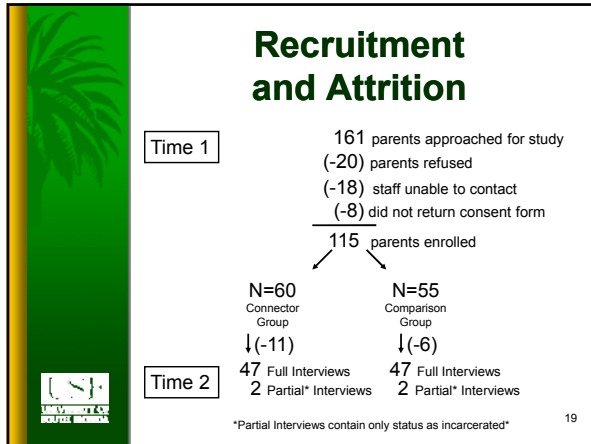
Research Design

- Nine month pre-post design
- Parent-Child dyads randomly assigned to two conditions

<p>Comparison Group</p> <p>Teachers receive specialized training in increasing parent involvement</p>	<p>Connector Group</p> <p>Teacher Training <i>Plus</i> Parents receive weekly telephone calls from <i>Parent Connector</i></p>
--	---



18



Support Delivered

Over the nine month period for the 60 parents in the Parent Connector group:

	Never Engaged (n = 11)	Early Terminators (n = 7)	Full Participants (n = 42)
Number of attempts before talking with parent			
Average (SD)	5.3 (10.0)	3.4 (5.3)	2.6 (2.9)
Range	0 - 35	0 - 15	0 - 10
Number of conversations			
Average (SD)	37.3 (21.2)	58.7 (16.7)	52.6 (12.9)
Range	4 - 77	33 - 83	33 - 81
Minutes of conversation			
Average (SD)	34 (20)	162 (114)	265 (144)
Range	0 - 60	63 - 363	70 - 876

- ### Comparison of the Three Groups
- No significant difference in:
 - Student's emotional and behavioral functioning and impairment
 - Parental services self-efficacy, stress, or empowerment
 - Significant differences in student age
 - Students in the **Never Engaged** group were significantly older than students in the other two groups (16 years vs. 14 yrs)

Goal 1 Reduce Stress, Increase Empowerment and Efficacy

Construct (Parent Respondent)	Instrument
Efficacy	<ul style="list-style-type: none"> • Vanderbilt Mental Health Services Efficacy Questionnaire
Parental Stress	<ul style="list-style-type: none"> • Caregiver Strain Questionnaire • The Ohio Scale – Hopefulness Subscale • Support Functions Scale
Parental Empowerment	<ul style="list-style-type: none"> • Family Empowerment Scale


Goal 2 Increase Use of Mental Health Services

Construct (Respondent)	Instrument
Student Receipt of Mental Health Services (Parent & School Staff)	<ul style="list-style-type: none"> • Service Assessment for Children & Adolescents (SACA) • Counselor Report

Goal 3 Improve Student Outcomes

Construct (Respondent)	Instrument
Improve emotional and behavioral functioning of students (Parent Report)	<ul style="list-style-type: none"> • Student Difficulties Questionnaire (SDQ)
Decrease level of impairment (Parent Report)	<ul style="list-style-type: none"> • Brief Impairment Scale (BIS)
School Attendance (School staff)	<ul style="list-style-type: none"> • Attendance Report
Academic Achievement (Student)	<ul style="list-style-type: none"> • Wide Range Achievement Test 3 Reading/Math(WRAT3)

Results





25

Outcome - Goal 1 Improve Caregiver functioning

Of all five measures of family functioning targeted:

- Reduce Caregiver Strain
- Increase Empowerment
- Increase Support Network
- Increase MH services Efficacy
- Encourage Hopefulness

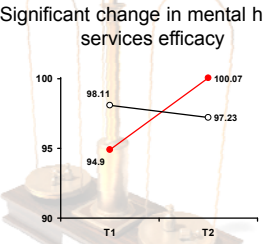
Only MH Services Efficacy statistically changed over time with the caregivers in the Parent Connectors group significantly improved over the caregivers in the comparison group.



26


Outcome - Goal 1 Increase MH Services Efficacy

Significant change in mental health services efficacy



Group	T1	T2
Parent Connector Group	94.9	100.07
Comparison Group	98.11	97.23


● Parent Connector Group
○ Comparison Group
 f^2 (interaction term) = 4.147 $p = .047$



27

Outcome - Goal 2 Increase MH Service Use by Youth

Research staff had school-based mental health counselors record the number of minutes of mental health services all youth received over the entire school year or about 9 months.




28

Outcome 2 Increase Use of Mental Health Services

	Connector Group Mean	Comparison Group Mean	P value	Effect Size Cohen's d*
Counseling at School (Total Average)	28 Hrs	17 Hrs	.027	.55
Individual Counseling (Student Only)	21 Hrs	12 Hrs	.029	.56
Individual Counseling (Family member Only)	2 Hrs	1 Hrs	.086	.68
Family counseling (Family & Student)	2 Hrs	1 Hrs	.287	.42

*Cohen's d: Small = .2; Medium = .5; Large = .8




29

Outcome - Goal 3: Improve youth functioning

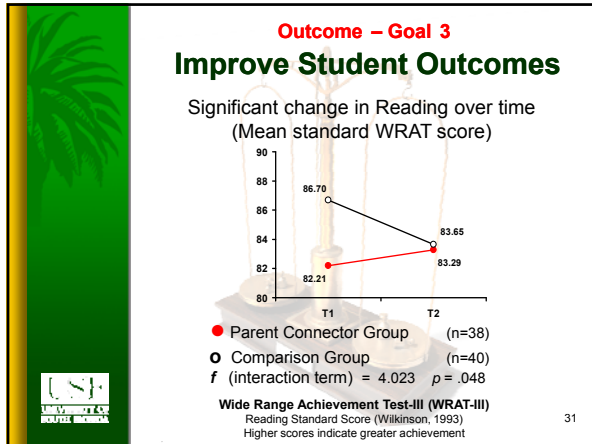
4 areas:

- Improve Emotional functioning (SDQ)
- Improve level of impairment (BIS)
- Improve student attendance
- Improve academic functioning (as reflected on standardized reading and math tests).

Two areas: (1) reading levels and (2) school stability.



30



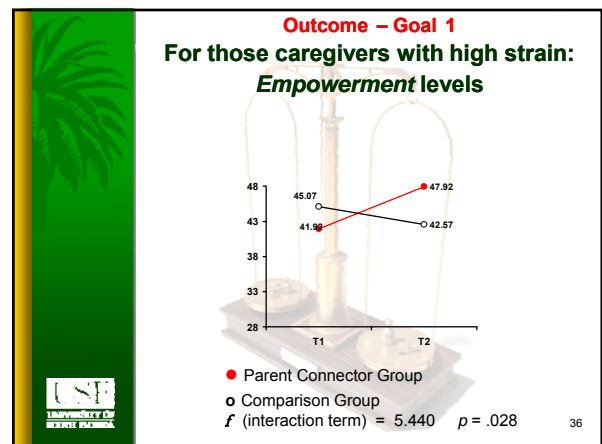
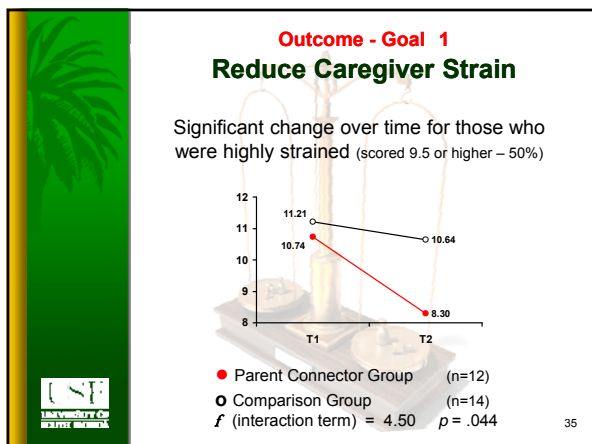
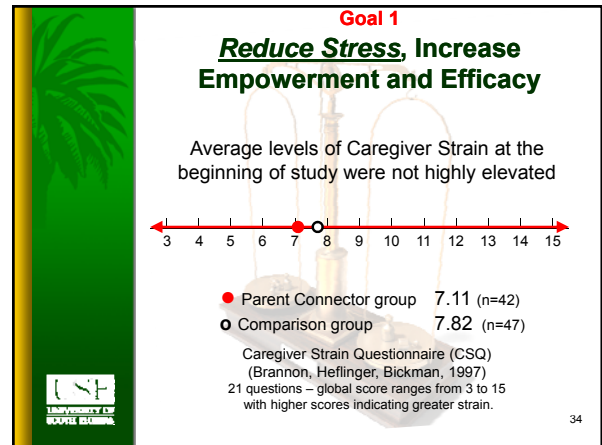
Overall Results

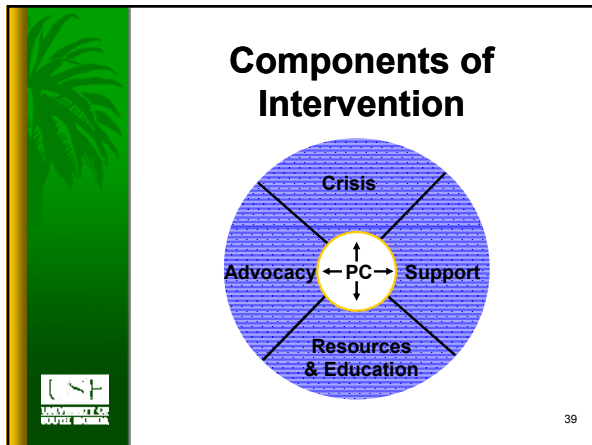
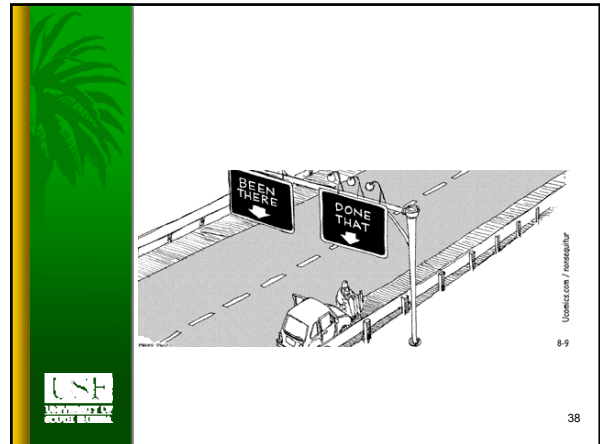
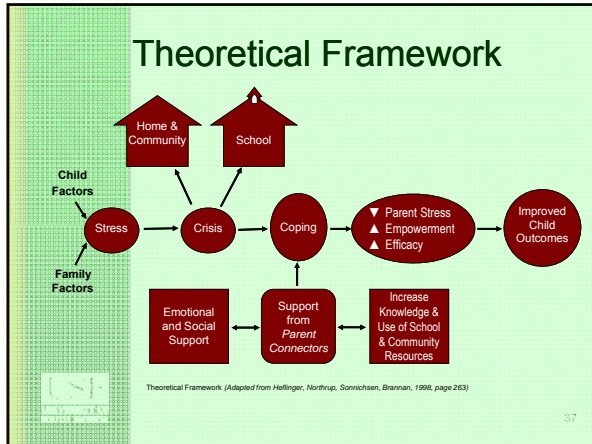
Found positive changes for the PC group

- Positive change in Caregiver level of MH services Efficacy
- Youth used more MH services
- Youth improved academic achievement and school stability

Wanted more! Was it a problem with the theory or with instruments or both?

33





Theory of Change					
Educational Challenges	Parents need	Address needs through	Short term outcomes	Intermediate outcomes	Long term outcomes
<i>Parents of children w/ED:</i> <ul style="list-style-type: none"> • Feel blamed • Don't feel in control of lives • Are overwhelmed & passive during school meetings • Have low expectations for their children • Do not understand the nature of ED or the social service & education systems intended to help them 	<i>Knowledge of:</i> <ul style="list-style-type: none"> • Etiology of ED • Educational & social service systems • Promoting positive child engagement in school • Skill development • How to help with homework • Collaborate with teachers • Accessing services & support 	<i>Trained Peers (Parent Connectors) will provide:</i> <ul style="list-style-type: none"> • Information • Support • Promote positive expectations for child • Skills to effectively collaborate with school staff 	<i>Parents will:</i> <ul style="list-style-type: none"> • Demonstrate acquisition of new knowledge and skills • Develop beliefs of self-efficacy and self-determinism, & empowerment • Believe that child can succeed in school and life 	<i>Parents will:</i> <ul style="list-style-type: none"> • Be more effective collaborators with teachers • Increase use of services and support for their child 	<i>Students with ED have:</i> <ul style="list-style-type: none"> • Increased attendance • Decreased suspension • Increased academic achievement

More Information

Krista Kutash, Ph.D.
kutash@fmhi.usf.edu
 (813) 974-4622
<http://www.fmhi.usf.edu>

University of South Florida
 Louis de la Parte Florida Mental Health Institute
 13301 Bruce B. Downs Boulevard, Tampa, Florida 33612
This study was funded in part by the Office of Special Education Programs grant: H324040040