Social Connectedness of Families in Wraparound: Implications for Practice

James R. Cook & Ryan P. Kilmer
The University of North Carolina at Charlotte

Importance of Informal/Natural Supports in Wraparound

- Provide support professionals cannot
- Sustainable after professionals leave
- Part of natural environment
- May know family well
- Can provide links to other supports in the natural environment

(see Burns & Goldman, 1999; VanDenBerg & Grealish, 1996)

Use of Informal/Natural Supports in Wraparound

- Informal supports often not involved in teams
  - Epstein et al. (2003) - 33% of meetings
  - Davis & Dollard (2004) - 32% of meetings; 40% of plans
  - Cook et al. (2007) - 29% of meetings

Use of Informal/Natural Supports in Wraparound: Potential Issues

- Emphasis on “evidence-based practice” may discourage use of informal supports
- Professionals tend to rely on professionals
- Linkages with informal supports are not billable
- Families may not want to include informal supports

Assessing Support Families Receive from Informal Sources

- The Assessment of Social Connectedness asks caregivers to report on support from:
  - Neighbors
  - Friends
  - Partners/Spouses
  - Family
  - Service Providers
  - Faith Community
  - Family Support Organizations
  - Coworkers

Assessing Support Families Receive

- Caregivers are asked, for each source, how much of the following types of support they receive:
  - Information/Advice
  - Emotional
  - Tangible (e.g., food, transportation)
  - Financial
  - Crisis
- And the degree to which they wish they had received more of these types of support in the last 6 months
**Data Collection**

- These “Social Connectedness” (SC) questions are included in the National Evaluation (NE) interview.
- We started collecting SC information in year 2 of NE data collection.

**Data Collected Thus Far**

- To date, we have:
  - 143 initial SC interviews with caregivers
  - These initial SC data reflect different time points of the NE
  - 80 were included in Time 1 NE interview
  - 31 included in Time 2 NE interview
  - 28 included in Time 3 NE interview
  - 48 follow-up SC interviews have been conducted.

**Measurement Scale**

- Caregivers are asked, for each source, if they’ve received support from that source in the past 6 mo.
- If yes, respondents use a 4-point scale to report about each type (e.g., emotional):
  - 1 = Not at all (no support received)
  - 2 = A Little
  - 3 = Somewhat
  - 4 = Very much support
- Ratings summed:
  - Across 5 types (range 5-20)
  - Across 8 sources (range 8-32)

**How Much Do They Receive?**

- Support received across 8 sources (8=None; 32=“Very Much” from all 8 sources)

**From What Sources?**

- Presence of support received past 6 mo (n=133)

**Do Those in the SOC Longer Evidence More Support?**

- Short answer: No
- In fact, those longer in SOC report no differences and, in some cases, less support over time. For example:
  - Service Providers: 10.4 > 7.8, 9.6, F(2, 133) = 4.33, p=.015
  - Family Support Org: 6.9 > 5.4, 5.8, F(2, 132) = 3.55, p=.031
And they report less support desired:

- Want More Support

<table>
<thead>
<tr>
<th>Initial</th>
<th>6mo</th>
<th>12mo</th>
</tr>
</thead>
<tbody>
<tr>
<td>15.2</td>
<td>12.3</td>
<td>13.6</td>
</tr>
</tbody>
</table>

$F(2, 135) = 5.06, p=.008$

- While suggestive, these data are only cross-sectional

Upon Follow-Up, Does the Level of Reported Family Support Improve?

- Again: No

- In fact, for those for whom we have two SC data points (separated by 6 months; $n = 45$), analyses do not detect differences, except:

<table>
<thead>
<tr>
<th>First</th>
<th>Follow-Up</th>
</tr>
</thead>
<tbody>
<tr>
<td>9.5</td>
<td>8.6</td>
</tr>
</tbody>
</table>

$t(46) = 1.92, p=.061$

And this result is not in the desired direction…

What Type of Support Do Families Want?

What Patterns of Support Do Families Receive?

Take-Home Points

- The majority of those surveyed are reporting low levels of support overall
- Only one ‘profile’ of support includes meaningful support from informal sources outside of one’s family
- Relatively low utilization of family support services
- Relatively low support received from providers

Some Other ‘Early Returns’

Example relationships between support source and service utilization/satisfaction:

- Family Support Organization and
- Family received wraparound services .60
- Family received non-SOC services .47
- Faith Community Support and
- Family received the help we wanted -.44
- Family received as much help as we needed -.55
- Caregiver satisfaction with services at T2 -.49
Implications for the System At-Large

• The system needs to:
  • Work to understand and address the lack of perceived support from providers
  • Identify strategies to extend the reach of family support organizations
  • Work to understand the role of faith-based support
  • Consider mechanisms for meeting needs that do not fall under traditional “mental health” umbrella

Implications for Providers

• Providers would be well-served to:
  • Assess support needs/experiences
  • Work to understand the full range of needs experienced by their families
  • Ensure their families are aware of community-based resources (family support agencies, informal support options)
  • Connect families with supports in the community

Next Steps and Future Directions

• Do those evidencing different ‘profiles’ of support also exhibit differences in service utilization, adjustment, etc. over time?
• Relationships between SC and caregiver strain?
• Examine linkages between social connectedness and indicators of well-being and family functioning
  • To what degree does type of support predict these indicators?
  • Are certain types more strongly associated with well-being?

Contact Us

James R. Cook, Ph.D. Ryan P. Kilmer, Ph.D
Department of Psychology
University of North Carolina at Charlotte
9201 University City Blvd.
Charlotte, NC 28223-0001
Fax: 704-687-3096
704-687-4758 704-687-3689
jcook@uncc.edu rpkilmer@uncc.edu