Nationwide Parenting Education and Support

- 1996: Approximately 50,000 programs
- 2003: 800,000 caregivers in the child welfare system received some form of parent training

Yet...
- There is little evidence of effectiveness
- Only 10% of practitioners are utilizing evidence-based family strengthening interventions, according to one report

Promising Programs
- The Incredible Years
- Multi-systemic Therapy
- Oregon Social Learning Center’s Parent Management Training
- Parent-Child Interaction Therapy
- Home Visitation
- Project SafeCare
- Triple-P, Positive Parenting Program

Promising Practices in Parenting Education and Support:
Emerging Themes...
Programs are developmentally appropriate and developmentally timed

- Developmental appropriateness
  - Are services/interventions appropriate for the life stage and developmental needs of child and/or parent?
- Developmental timing
  - Are services and interventions targeted to the age and developmental level and stage of the target group?

Implications for Practice

Design programs to target specific age ranges of children

- Provide parents with parenting information based on ages and stages of child development and transitions in the family
- Assure that goals developed with families are developmentally appropriate
- Assure that interventions are developmentally appropriate
Programs are strengths-based, family-empowering and family-centered

- Strength-based
  - Build on family competencies
- Family-empowering
  - Aim to enhance competencies and self-sufficiency, and honor parent’s expertise
- Family-centered
  - Serve the needs of both parents and children

Implications for Practice

- Involve parents in all aspects of decision-making
- Encourage parents to identity their strengths and supports
- Assist parents to set their own goals and make their own decisions
- Consider the perspective of whole family, including personal, child and family goals
- Seek to help parents feel good about their child, themselves and their family

Programs are relationship-based for both parent-child and provider-parent relationships

- Parent/Child
  - Effective programs focus on increasing positive parent child interactions and family relationships to support a child’s earliest and most consistent learning environment

Programs are relationship-based for both parent-child and provider-parent relationships

- Provider-Parent/Child
  - Relationships between providers & caregivers critical to positive long-term outcomes - blend education, practical assistance and social support
  - Effective helping relationships are collaborative and built on trust, respect, and mutual understanding
Implications for Practice

Emphasize parent child interactions and family relationships throughout the program.

Hire, train and support staff to build strong relationships with families.

Understand that healthy relationships between parents and staff help parents build healthy relationships with children (parallel process).

Communicate about role expectations.

Embrace collaboration.

Programs use multi-component, comprehensive interventions applied flexibly and according to family needs.

- Includes instruction in child development and positive discipline; specific parent training; and advice, interactive skills training and opportunities for parent child interaction.

- Enables programs to address multiple domains of the caregiving environment.

- Are more effective in modifying a broad range of risk and protective factors.

Programs use multi-component, comprehensive interventions applied flexibly and according to family needs.

- Flexibility in instruction and service delivery.

- Enables parents to participate in ways that suit individual circumstances, needs, interests and learning styles.

- Teaching a variety of techniques recognizes there is no "one size fits all" approach to parenting.

Implications for practice.

Use multiple strategies for delivering services (i.e. home visits, support groups, parent-child interaction).

Offer multiple components (i.e. child development program, parent groups, one-on-one).

Use multi-modal strategies for instruction.
Focus on reducing risk factors and strengthening support networks and other community services.

- Builds social support to enhance parent functioning and ultimately child development.
- Connects families to other needed interventions (i.e. mental health services).
- Creates a continuum of care and fosters service integration.
- Assists families in realizing goals.
- Offers role models for learning.
- Helps identify participant families (recruitment).

Programs link families to early childhood & support networks and other community services.

Implications for Practice

- Collaborate and coordinate with other community providers so families receive needed, unduplicated and integrated services.
- Build social support among participants and identify other sources of support.
- Refer when needed services are more specialized or beyond the scope of staff expertise.

Programs address risk factors, identify protective factors, respond to specific family needs.

- Circumstances that theory suggests will lead to positive and/or negative outcomes are addressed.
  - Focus on reducing risk factors and strengthening protective factors.
  - Program is based on the needs and characteristics of the population being served.

Programs address risk factors, identify protective factors, respond to specific family needs.

- Both child and parent/family needs are identified and addressed as they arise.
- Concrete needs of the family are addressed.
- As many risk factors as possible are targeted.

Build social support among participants and identify other sources of support.

Collaborate and coordinate with other community providers so families receive needed, unduplicated and integrated services.

Refer when needed services are more specialized or beyond the scope of staff expertise.

Both child and parent/family needs are identified and addressed as they arise.

Concrete needs of the family are addressed.

As many risk factors as possible are targeted.
**Implications for Practice**

Adapt flexibly to the unique and/or changing needs of the participants whenever possible.

Individualize for each family, regardless of the service delivery techniques.

Train staff to identify needs and risk factors, and how to respond to them.

Train staff to identify protective factors, and how to strengthen them.

Use a family assessment to assist in the identification of needs, risks, and strengths.

Programs are culturally and linguistically responsive, based on an ecological model, and take community factors into account:
- Cultural values, aspirations, traditions, and needs, as well as strengths and differences, are respected, addressed, and not undermined.
- Diversity is valued and stereotyping is avoided.
- Language needs are understood and responded to.
- Ecological nature of parenting is understood.
- Recruitment and retention strategy is culturally and linguistically responsive.

**Implications for Practice**

Hire and promote staff who reflect the populations that they serve.

Train staff in cultural and linguistic responsiveness (competency).

Adapt programs to be culturally appropriate, while maintaining theoretical bases.

Invest the resources needed to be culturally and linguistically responsive (i.e. translation, materials).

Programs utilize strategies for recruitment and retention and ensuring accessibility:
- Interventions are delivered in ways that increase access to services for example:
  - Services are delivered in a wide variety of settings based on family needs.
  - Services are offered on varying days and times.
Programs utilize strategies for recruitment and retention and ensuring accessibility

- Retention is strengthened by using many of the other identified promising practices
- Specific attention is given to strategies for recruitment and retention
- Incentives have been shown to be more effective with fathers than mothers
  - Incentives may include food, child care, transportation

Programs ensure that staff are well-trained, possess strong interpersonal skills, demonstrate personal efficacy, and receive ongoing, high-quality reflective supervision

- Supervision should focus on:
  - Staff skill development
  - Reflective practice
  - Ensuring fidelity to the program model

Implications for practice

Be flexible

Select type of setting, number, timing and location of sessions based on goals of the intervention and needs of participants

Be reliable and consistent with schedules

Invest resources incentives

Programs ensure that staff are well-trained, possess strong interpersonal skills, demonstrate personal efficacy, and receive ongoing, high-quality reflective supervision

- Interpersonal and clinical skills include:
  - Rapport-building
  - Active listening
  - Empathy and genuineness
  - Communication
  - Ability to structure sessions and facilitate effectively
  - Cultural competence
Programs ensure that staff are well-trained, possess strong interpersonal skills, demonstrate personal efficacy, and receive ongoing, high-quality reflective supervision

- Provide training on a regular basis
- Provide opportunities for team building
- Ensure frequent, ongoing communication
- Have well-thought-out, clear and enforced staffing requirements

Programs are more effective with interventions of greater frequency (how often), intensity (how much) and duration (how long)

- Intensity should be based on well defined criteria of family functioning and need
- While greater frequency, duration and intensity have more significant and long-term outcomes:
  - Duration is more important than frequency
  - Intensity is more important than duration

Implications for practice

- Hire staff for their personal characteristics and content expertise
- Implement training and hiring policies that reflect desired staff qualities
- Set aside and dedicate time for supervision, training and meetings
- Develop and implement strategies for the reduction of staff turnover and burnout

Programs are more effective with interventions of greater frequency (how often), intensity (how much) and duration (how long)

- High-risk families
  - Increased intensity needed
    - Estimates of 25-50 hours
  - Gain little from superficial, periodic meetings
  - Engagement and retention strategies especially important
- Effectiveness has been limited by insufficient intensity

Effectiveness has been limited by insufficient intensity

While greater frequency, duration and intensity have more significant and long-term outcomes:

- Duration is more important than frequency
- Intensity is more important than duration
Implications for Practice

Determine the level of intervention necessary to achieve the desired change in program planning.

Determine the frequency (how often?), duration (how long?) and intensity (how much?) for services.

Be realistic with regard to demands of time and resources on both the program and participants.

What are the top 6 practices most commonly occurring in the literature?

1. Multi-component, comprehensive interventions involving multi-modal instruction and service delivery techniques.
2. Addressing and responding to known risk factors and specific family needs.
3. Well-trained staff who possess strong interpersonal skills, demonstrate personal efficacy and receive ongoing high-quality, reflective supervision.
4. Cultural and linguistic responsiveness and based on an ecological model.
5. Strengths-based, family-empowering and family-centered.
6. Sufficient level of intensity, frequency and duration.

Footnotes

Sources


References


References


