

Results of a Training Program with Providers Serving Homeless Families



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Study Description

The purposes of this project were to: 1) train program staff working with homeless families with young children (birth through 6 years) to promote secure and trusting parent-child relationships using Promoting First Relationships (PFR); and, 2) to evaluate the effects of training on: (a) staff skills and knowledge, and (b) parent and child functioning for families who received PFR services.

Training Model

Promoting First Relationships training involved two main components: 1) ten group meetings, 2 ½ hours in length, in which agency staff learned PFR concepts and strategies, and how to positively support each other in their work with clients (reflective practice with PFR trainers); and 2) individual on-site application of PFR with families during mentored sessions with PFR trainers.

The common elements of the PFR consultation model are:

- Joining and interviewing techniques and tools that support parents and other caregivers as the primary source of knowledge about their children
- Videotaped caregiver-child interactions that provide insight into individual caregiver-child relationships, and help caregivers become reflective observers of their own interactions with their children
- Positive and instructive feedback to caregivers as they interact with the children in their care, to promote healthy parent-child relationships, and caregiver confidence and competence
- Reflective questions to help caregivers understand and label their own feelings and needs, and the feelings and needs of their young children
- Curricular content, based on attachment theory, that helps caregivers understand the theoretical foundations of social and emotional development of young children, birth to three
- Curricular content that helps providers promote the development of secure caregiver-infant relationships
- Curricular content that helps providers promote exploration and healthy development of self during toddlerhood
- Understanding, reframing and intervening with children's challenging behaviors

Sample

Three recruited staff members completed the Promoting First Relationships (PFR) training model and delivered PFR services to families. Family participants in this project were 18 parent-child pairs (the parent in this case was a mother) ranging from two months to four years. One third of the parents were African-American, the others Caucasian/non-Hispanic.

Measures

1. Staff knowledge and skills

- Coded, videotaped 20-minute sessions of staff interacting with a parent and child from the staff person's caseload, before and after PFR training using the Buehlman, Kelly & Korfmacher (2007) coding scheme. Coders counted three types of verbal feedback by the staff member that focused on the parent's interaction with the child: *reflective questions* that helped the parent enter the world of the child; *positive instructive feedback* (why something the parent just did is important to child development); and *positive feedback* (specific and contingent on what the parent is doing well in the moment). All other talk by the staff member to the parent not focused on the interaction with the child was coded as *other comments*.
- Four pre- and post-training questionnaires assessing: 1. staff work stress (designed for project); 2. beliefs about self-efficacy (*Pearlin mastery Scale*; Pearlin & Schooler, 1967); 3. attitudes toward child-rearing (*Raising A Baby* derived from measures by MacPhee, 1981 and Schaefer and Edgerton, 1985); and 4. Self-report of how to promote social and emotional development of young children (Kelly & Buehlman, 2000).

2. Parent and Child Functioning

- (a) Coded, videotaped parent and child pair interactions during teaching (*NCAST Teaching Scale*, Barnard, 1994), which examines caregiver Sensitivity to Cues, Responsiveness to Distress, Social-Emotional Growth Fostering, and Cognitive Growth Fostering; and child Clarity of Cues and Responsiveness to Parent.
 - (b) Coded, attachment security with *the Toddler Attachment Sort-45* (TAS45; Kirkland, Bimler, Drawneek, McKim, and Schölmerich, 2004), a 45-item observational tool completed after a data-collection visit in the shelter home, designed to measure the quality of the parent-child attachment relationship; generates profiles that reflect patterns of secure and insecure child-parent attachment relationships.
 - (c) Coded, videotaped parent-child interaction during a 15-minute free-play session for the number of parent-initiated and child-initiated social interactions.
- Parents also completed three self-report measures pre- and post-training, including *Raising A Baby* described above and:
- *The Brief Infant Toddler Social Emotional Assessment (BITSEA)* (Carter & Briggs-Gowan, 2000). The BITSEA problems scale predicts later behavior problems, and BITSEA measures of competence correlate with observed competence and predict later competence measures (Briggs-Gowan, et al., 2004).



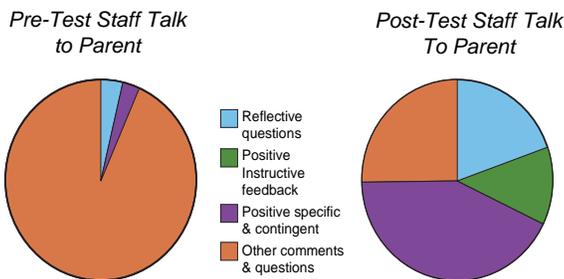
- *The Parenting Stress Index/Short Form* (Abidin, 1990) assesses the parent's psychological distress and distress from perceived parent-child dysfunctional interaction and difficult child behaviors.

Results

To understand the results of this small-sample intervention, we calculated an indicator of 'effect size' (Cohen's d) which reflects the mean difference between scores before and after the intervention. Effect size gives a standard metric for interpretation across intervention studies, and provided a standard for determining the intervention effectiveness. We followed the convention recommended by Cohen (1988), who defined effect sizes as "small, $d = .2$," "medium, $d = .5$," and "large, $d = .8$ " (p. 25).

1. Staff knowledge and skills

- Pie-charts depicting pre- and post-training talk with families are shown in Figure 1. Staff members increased their use of reflective questions, positive instructive feedback, and positive contingent feedback from before to after training. The effect sizes for these changes were large ($d = 1.2$ to 2.5). Staff members also dramatically decreased their use of other comments directed to parents that did not focus on the parent-child relationship.
- Analyses of the duration codes reveal similar results. Before training, staff members spent almost no time providing positive feedback to parents while observing them with their children (on average, staff members spent less than one minute in this kind of positive feedback), while after training, positive feedback during the parent and child interaction occurred for most of each session (on average, 19 out of 20 minutes). Conversely, before training, staff members spent on average 19 out of 20 minutes talking to the parent only. Altogether, these outcomes show the effectiveness of the PFR training to change staff behavior in the direction of supporting parent child relationships instead of focusing solely on the parent.



- Staff members reported some decrease in perceived work stress. The effect size is ($d = .28$) considered small, but still indicates some reduction in perceived work stress. It is interesting that staff reported even a small decrease in work stress considering the additional work load of learning and delivering new trainings. No change was reported in self-efficacy.
- Staff members rated their own knowledge of promoting parent-child relationships before and after their training. Analysis of ratings pre- and post- PFR trainings showed a very large effect size ($d = 5.3$); that is, staff members rated themselves as much more aware of how to promote healthy parent-child relationships after receiving PFR training.
- *Raising a Baby* questionnaire analysis showed that staff members' attitudes become more progressive and child-centered from before to after training. This was a large effect size ($d = 1.2$), indicating that the intervention had a substantial impact on staff attitudes about how to raise socially and emotionally healthy babies. Attitudes like these tend to be very stable, and are unlikely to have shifted without the PFR training.

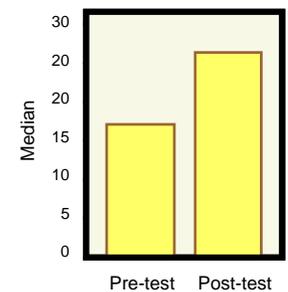
2. Parent and Child Functioning

- Parenting Behavior. Parent *Social-Emotional Growth Fostering* on the NCATS Teaching scale increased from 7.7 to 8.6 ($d = .50$), a medium effect size, indicating that the ability of parents to support their children's social and emotional health improved from before to after training.
- Parenting Attitudes. On the *Raising a Baby* parent self-report, there was a change in parent attitudes from pre- to post-training. The overall effect size was medium ($d = .61$). Most items changed, but three were particularly important. At the post-test, parents disagreed more strongly with two statements: "Strong-willed toddlers need to be spanked to get them to behave" and "Parents spoil babies by picking them up when they cry" and they agreed more strongly with the statement "Parents should expect that toddlers are going to protest and tantrum." These three items relate directly to the goals and activities of the PFR curriculum: to promote parent sensitivity and responsiveness that leads to infant security and trust (secure attachment), and to understand and respond appropriately to challenging behaviors in the toddler period that support healthy individuation.
- Parenting Stress. Parenting distress decreased somewhat from pre- to post-training. The effect size ($d = .28$) is small. In general, parents reported less distress from dysfunctional parent-child interaction, suggesting that, after training, they were finding more pleasure and rewards interacting with their children.
- **Child Attachment Security. The pre- and post-training attachment profiles generated by the *Toddler Attachment Sort-45 (TAS45)* for 14 children between 1 and 4 years were classified as "secure" or "insecure." Before training, 57% of the children had secure profiles; after training, 79% had secure profiles. This was a large effect size ($d = 1.2$) and considerably better than the small average effect size ($d = .20$) found in the analysis of 88 studies reported by Bakermans et al (2003).**
- Child Initiations. Child initiations to the parent in the free-play task increased (17 to 26). This was a medium effect size ($d = .52$). The number of parent initiations was stable from pre- to post-training. This result is illustrated in Figure 2. In looking at this effect, one could hypothesize that as parents became more available interactive partners, children were more apt to initiate interactions with their parents.
- Child Competence. Parents' perception of their children's competence, as rated on the BITSEA, increased. This was a medium effect size ($d = .41$). From pre- to post-training, parents rated their children as having a better array of behaviors that permits one to develop and engage in positive interactions with others, and as better able to regulate emotions. Parents also reported fewer behavior problems post-training, a small effect size ($d = .30$).

3. Effect of the PFR training context

We found that the effects of PFR training on parents and children described above were similar across all contexts. In other words, we found positive effects of PFR training on the parent-child relationship whether the intervention was delivered by the CIMHD/ PFR consultants or the PHN staff trainees, in individual or group settings. This indicates that shelter staff can be effectively trained to improve parent-child outcomes, one of the major goals of this project.

Child Initiations to Parent in Free Play



Summary of PFR Training Effects for Staff.

PFR training improved staff attitudes toward children and parents, expanded staff knowledge of relationship-focused content, and changed actual staff behavior with families such that staff members became less directive, more positive, and more supportive of the parent-child relationships. In a model of change, staff members began to engage in more supportive relationships with parents so that, in turn, parents became more supportive with their children.

Summary of PFR Training Effects for Parent and Child Functioning.

Participating in the PFR training had positive effects on parent attitudes, parent perceived stress, and parents' observed social and emotional growth fostering of their children. As a result of changes in parenting attitudes and interactive behavior, the children (observed interacting with their parents) began to interact more with their parents, became more securely attached, and parents rated their children more socially competent than before the training, with fewer behavior problems.