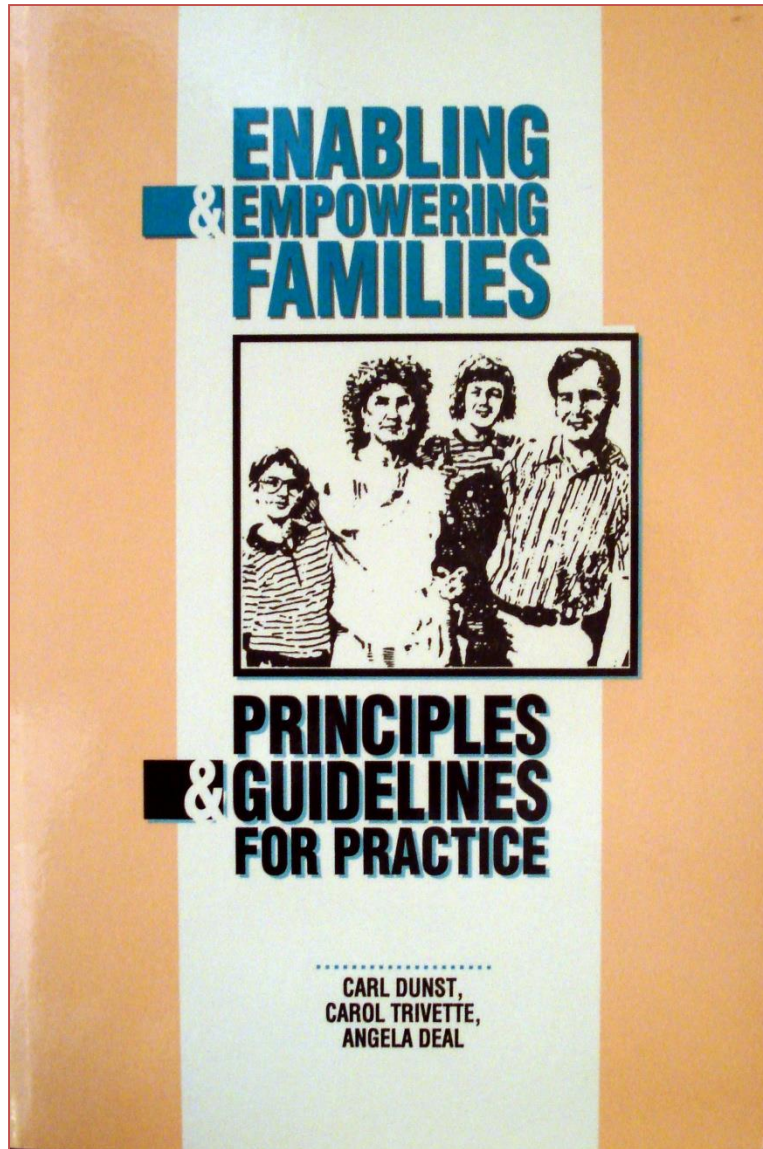


# Family-Oriented Intervention: Practices and Outcomes for Children, Parents and Families

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## Purposes of the Presentation

- Describe a revised and updated version of a family systems intervention model based on both 30 years of research and lessons learned from use of the model for working with families of young children
- Describe findings from studies of the relationships between family-centred help giving practices and parent, family, and child behaviour and functioning



The approach to early childhood intervention and family support described in *Enabling and Empowering Families* (published in 1988) used tenets from a number of different theories to identify key features that formed the foundations for the principles and practices guiding work with young children and their parents

## Definitions of Enablement and Empowerment

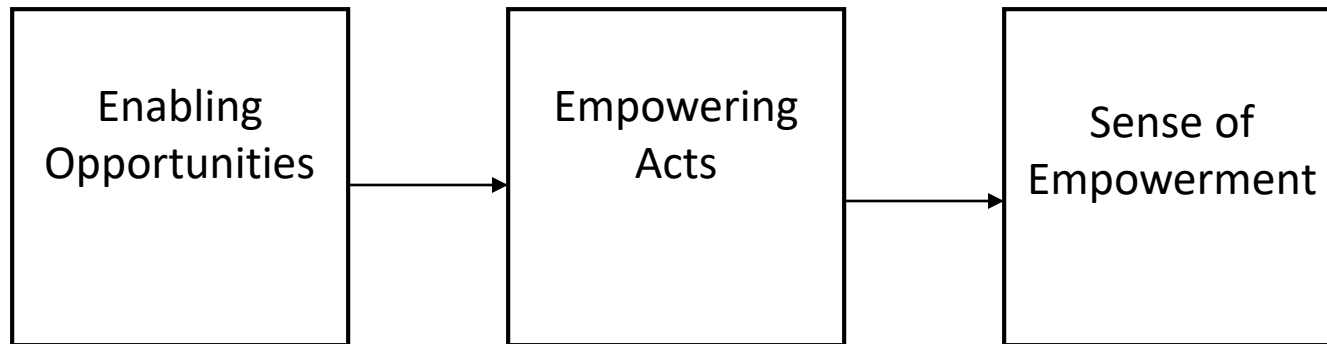
***Enablement:*** To make able; to provide a means or an opportunity

***Enabling:*** Create or provide opportunities for a person to become more able or competent

***Empowerment:*** The act of decision-making, choice, and the sense of capability resulting from empowerment acts

***Empowering:*** The sense of control and self-efficacy resulting from enabling experiences and opportunities

# Relationship Between Enabling Experiences and Empowering Acts and Consequences



# Theories and Models Guiding the Development of the Family-Systems Intervention Model

- Urie Bronfenbrenner's theory of the ecology of human development
- Julian Rappaport's theory of empowerment
- Albert Bandura's self-efficacy theory
- Nicholas Hobb and his colleagues model of family strengthening practices
- Nick Stinnett's framework of family strengths (qualities of strong families)
- James Garbarino's theory of social environments
- Philip Brickman and his colleagues model of capacity building help giving practices

## A Social Systems Perspective of Parenting Capacity

“Whether parents can perform effectively in their child-rearing roles within the family depends on the role demands, stresses, and supports emanating from other settings...Parents’ evaluations of their own capacity to function, as well as their view of their child, are related to such external factors as flexibility of job schedules, adequacy of child care arrangements, the presence of friends and neighbours who can help out in large and small emergencies, the quality of health and social services, and neighbourhood safety. The availability of supportive settings is, in turn, a function of their existence and frequency in a given culture or subculture. This frequency can be enhanced by the adoption of public policies and practices that create additional settings and societal roles conducive to family life.”

(Bronfenbrenner, 1979, p. 7)

# Julian Rappaport's Perspective of Empowerment

“Empowerment implies that many competencies are already present or at least possible....Empowerment implies that what you see as poor functioning is a result of social structure and lack of resources which make it impossible for existing competencies to operate. It implies that in those cases where new competencies need to be learned, they are best learned in a context of living life rather than in artificial programs where everyone, including the person learning, knows that it is really the expert who is in charge.” (*Rappaport, 1981, p. 16*)

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Rappaport, J. (1981). In praise of paradox: A social policy of empowerment over prevention. *American Journal of Community Psychology, 9*, 1-25.



# Family-Systems Intervention Model

- Definition of Intervention
- Social Systems Framework
- Conceptual Foundations
- Operational Elements and Features

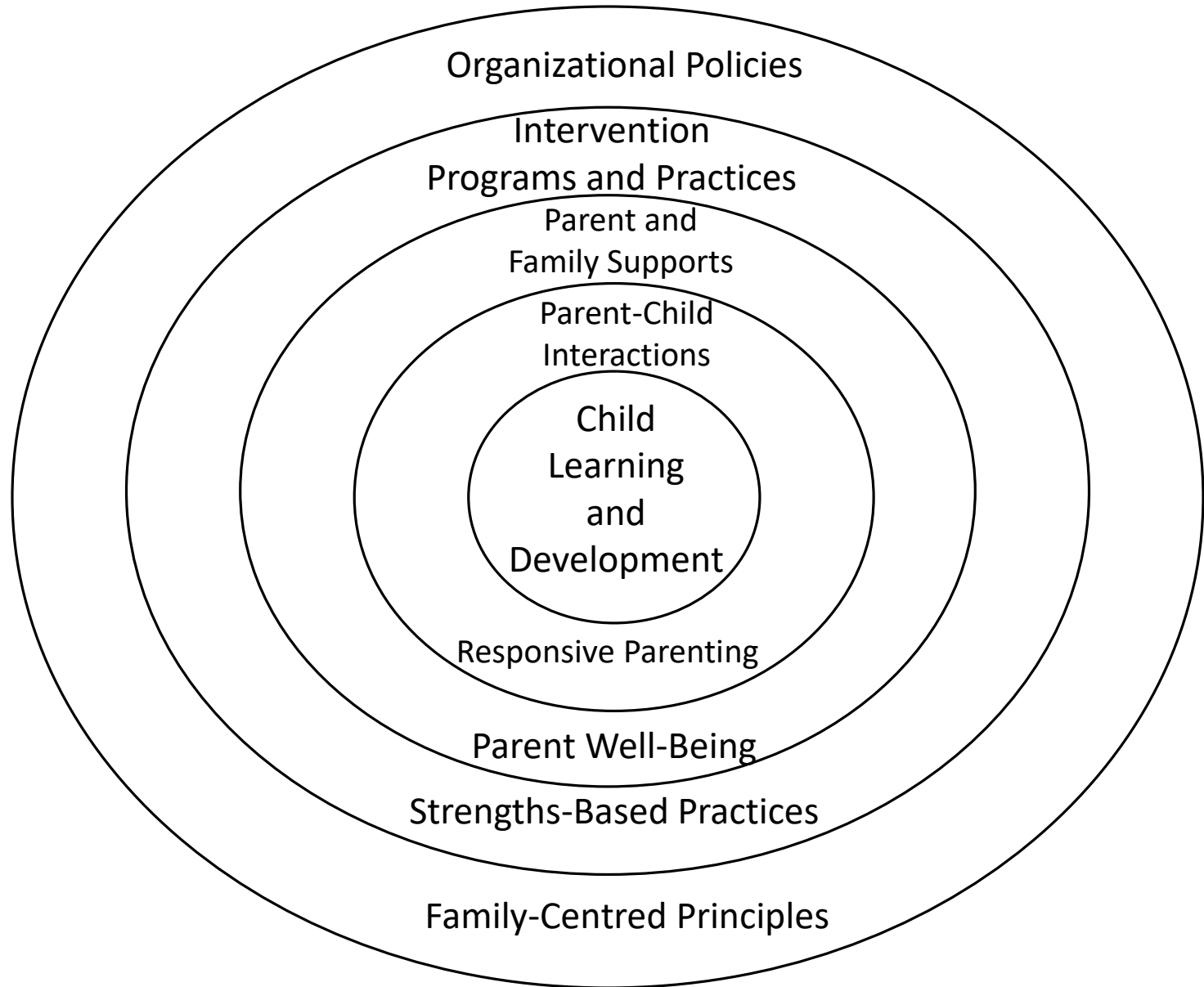
## Definition of Intervention

Provision of supports and resources to families from informal and formal social network members that either or both directly and indirectly influence and improve parent, family, and child behaviour and functioning.

## Social Systems Framework

A family is viewed as a social unit embedded within other informal and formal social support networks [where] the behaviour of a developing child, his or her parents, other family members, and the family unit as a whole, are influenced by events in settings outside the family which either or both directly and indirectly influence parent, family, and child behaviour and functioning.

# Embedded Social Systems Relationships



## Conceptual Foundations (Capacity Building Paradigm)

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Promotion Models	Enhancement and optimization of competence
Empowerment Models	Create opportunities to use existing abilities and learn new competencies
Strengths-Based Models	Emphasis on the use of strengths to obtain resources improving functioning
Resource-Based Models	Use of a broad range of resources and supports as “interventions”
Family-Centered Models	Family choice and family involvement in obtaining resources and supports

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# Contrasting Approaches to Intervention

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Capacity-Building Models	Traditional Models
Promotion	Treatment
Empowerment	Expertise
Strengths-Based	Deficit-Based
Resource-Based	Service-Based
Family-Centered	Professionally-Centered

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## Operational Elements of the Family-System Model

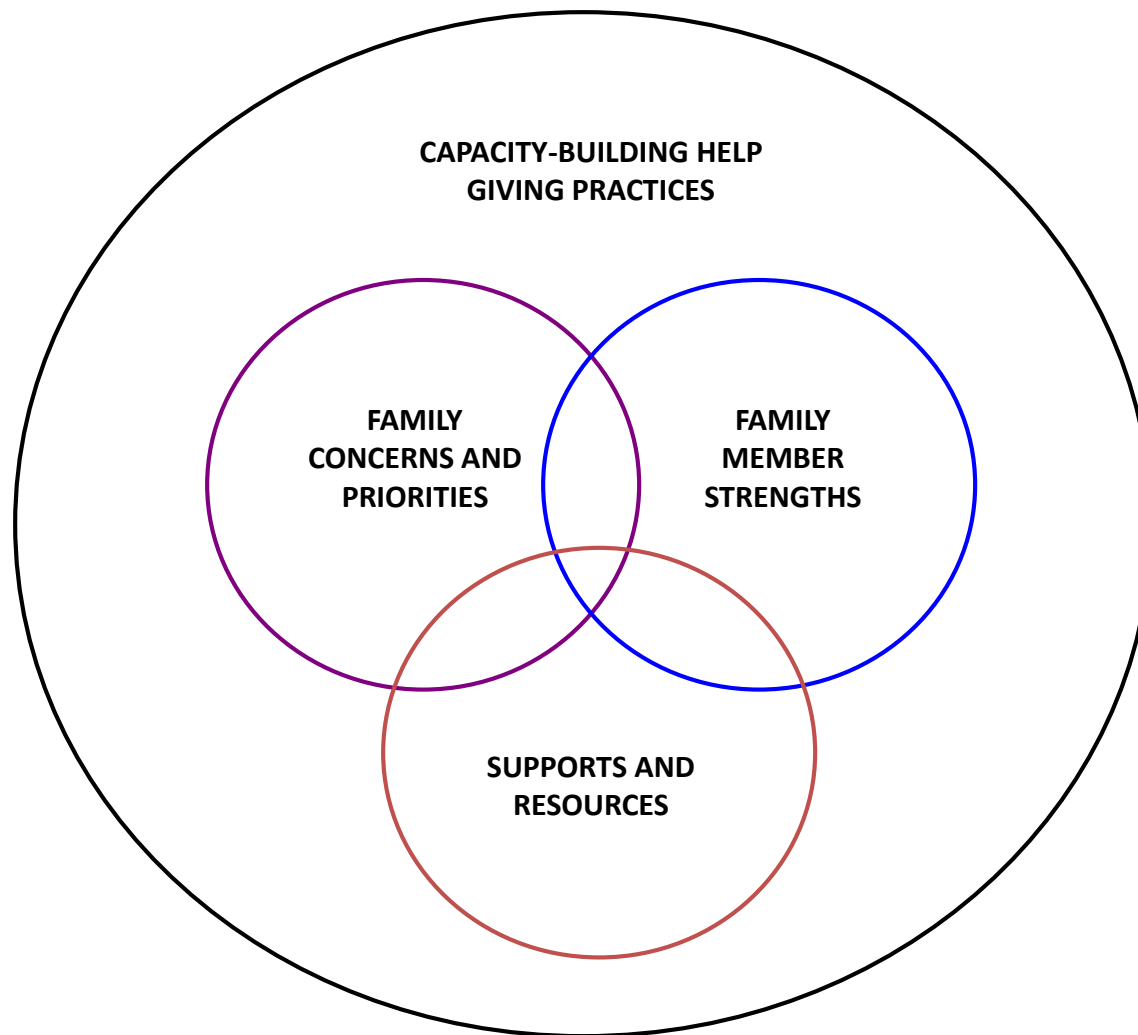
- Family Concerns and Priorities
- Family Member Strengths
- Supports and Resources
- Capacity-Building Help giving Practices

## Main Focus of Each of the Model Components

- Family concerns and priorities are viewed as determinants of how people spend time and energy engaged in desired or necessary activities
- Family strengths are considered the abilities and interests of people used to engage in desired activities
- Supports include the information, assistance, experiences, opportunities, etc. for addressing family concerns and priorities
- Capacity-building help giving practices strengthen the ability of family members to obtain supports and resources resulting in a sense of competence



# Family-Systems Intervention Model



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Dunst, C.J., & Trivette, C.M. (2009). Capacity-building family systems intervention practices. *Journal of Family Social Work*, 12(2), 119-143.

## Definition of Family-Centred Capacity-Building

Family-centred capacity-building refers to the methods and procedures used by practitioners to create enabling experiences and opportunities to strengthen existing and promote the development of new parenting and family abilities in a manner that enhances and strengthens self-efficacy beliefs and parent and family knowledge and skills

## Family-Centred Practices

Research conducted by myself and my colleagues has consistently found that there are two clearly discernable subsets of family-centred practices that “fall into” distinct categories of practice:

- Relational Practices
- Participatory Practices

# Relational Practices

Relational practices include behaviours typically associated with effective help giving (active listening, compassion, empathy, etc.) and positive staff attributions about program participant capabilities

- These kinds of practices are typically described in terms of behaviours that strengthen program participant and practitioner interpersonal relationships (mutual trust, collaboration, etc.)
- Relational practices also include help-giver beliefs about existing family member strengths and their capacity to become more competent as well as practitioner respect for personal and cultural beliefs and values

# Participatory Practices

Participatory practices include behaviours that involve program participant choice and decision making, and which meaningfully involve participants in actively procuring or obtaining desired resources or supports for achieving desired life goals

- These kinds of practices strengthen existing competencies and provide opportunities for learning new capabilities by engaging family members in informed choices and acting on those choices
- Participatory practices also include help-giver responsiveness to a family's situation and changing life circumstances, and help-giver flexibility to these situations and circumstances

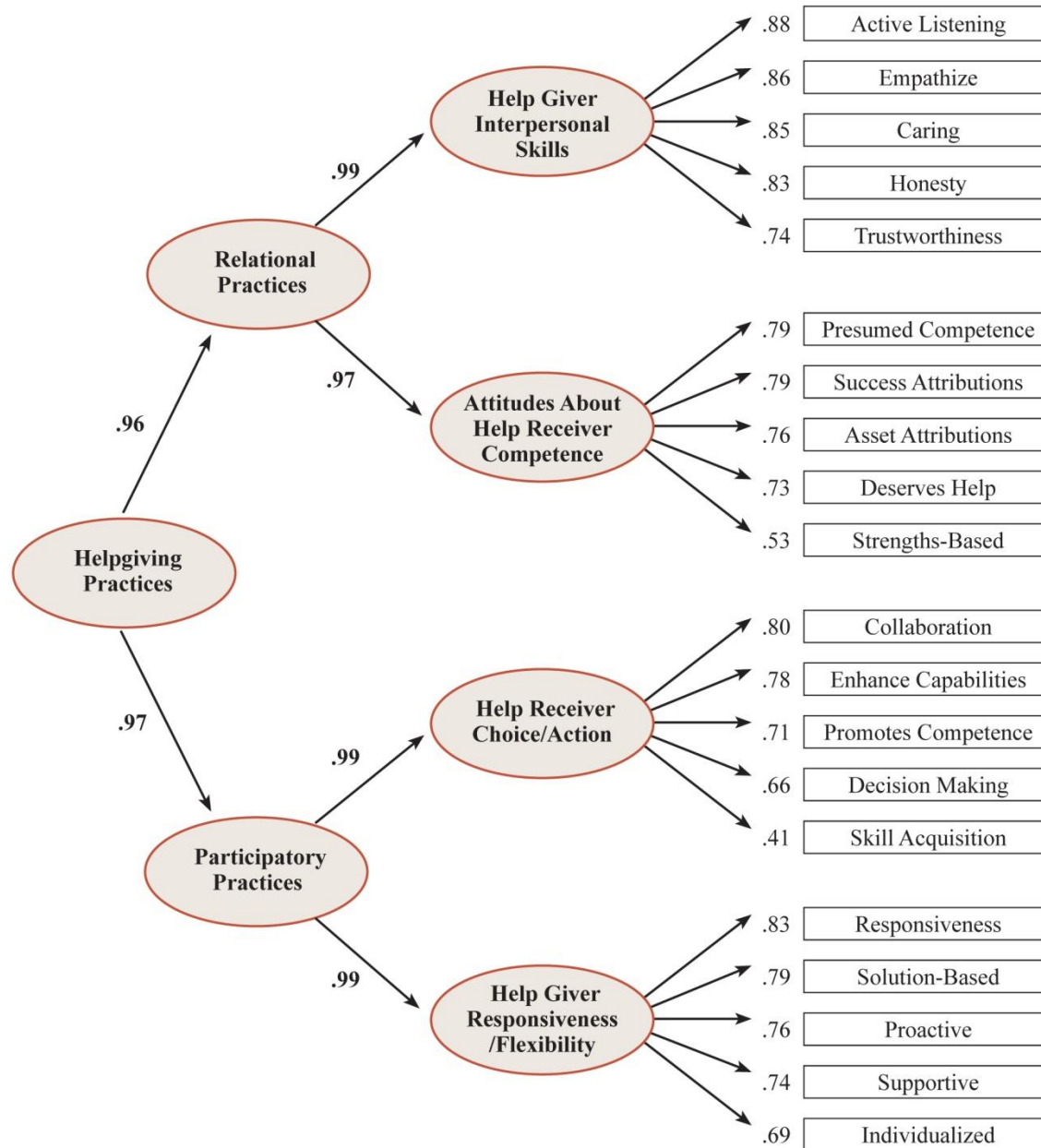
# Confirmatory Factor Analysis of Family-Centred Practices

Our most recent research on the structure of capacity-building help giving practices used confirmatory factor analysis to determine if the patterns of relationships among the items on the *Help Giving Practices Scale* (Trivette & Dunst) provides support for a multicomponent model.

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Trivette, C.M., & Dunst, C.J. (2007). *Capacity-building family-centered helpgiving practices* (Winterberry Research Reports Vol. 1, No. 1). Asheville, NC: Winterberry Press.

# Confirmatory Factor Analysis of Family-Centred Help Giving Practices Indicators



*Fit Indices*  
0.90 to 0.95

## Examples of Different Kinds of Family-Systems Research

- Measuring practitioner adherence to family-centred practices
- Meta-analyses of family-centred practices research
- Structural equation modelling of the influences of family-centred practices on family outcomes
- Meta-analytic structural equation modelling of early intervention practices on parent, parent-child and child outcomes



# Measuring Adherence to Family-Centred Principles and Practices

- Adherence to family-centred principles and practices is measured in terms of program participant judgments of the extent to which program staff interact with and treat them and their family members in ways consistent with the intent of family support principles and practices
- Family-centred principles and practices are considered a ***behavioural promise*** and ***program guarantee*** that staff will treat families in ways consistent with the intent of the principles and practices
- A consumer sciences perspective was used to assess staff adherence to family support principles and practices where consumers (parents) were considered the primary source of evidence that program staff interacted and treated families in ways consistent with family-centred program principles and practices

## Measuring Adherence to Family Support Principles

- In a typical adherence study or survey, program participants are asked to indicate on a 5-point scale ranging from *never* to *always* the extent to which staff treat or interact with the respondent and his or her family in the ways indicated
- A typical survey includes 5 or 6 family-centred relational indicators and 5 or 6 family-centred participatory indicators
- Percentage of indicators receiving the highest rating on a 5-point scale, indicating that a respondent and his or her family are *always* treated in the way consistent with the scale indicators, is used as the measure of adherence

## Example of a Family-Centred Practices Indicator Scale

<b><i>EXPERIENCES WITH FAMILY RESOURCE CENTER STAFF</i></b>					
Staff sometimes differ in how they interact with and treat children and their families. Please indicate how the <b><i>Family Resource Centre</i></b> staff interacts with and treats you.	Never	Very Little	Some of the Time	Most of the Time	Always
Really listen to my concerns or requests	1	2	3	4	5
See my child and family in a positive, healthy way	1	2	3	4	5
Provide me information I need to make good choices	1	2	3	4	5
Are responsive to my requests for advice or assistance	1	2	3	4	5
Try hard to understand my child and family's situation	1	2	3	4	5
Recognize my child and family's strengths	1	2	3	4	5
Help me be an active part of getting desired resources	1	2	3	4	5
Are flexible when my family's situation changes	1	2	3	4	5
Encourage me to get what I want for myself	1	2	3	4	5
Are sensitive to my personal beliefs	1	2	3	4	5
Support me when I make a decision	1	2	3	4	5
Recognize the good things I do as a parent	1	2	3	4	5

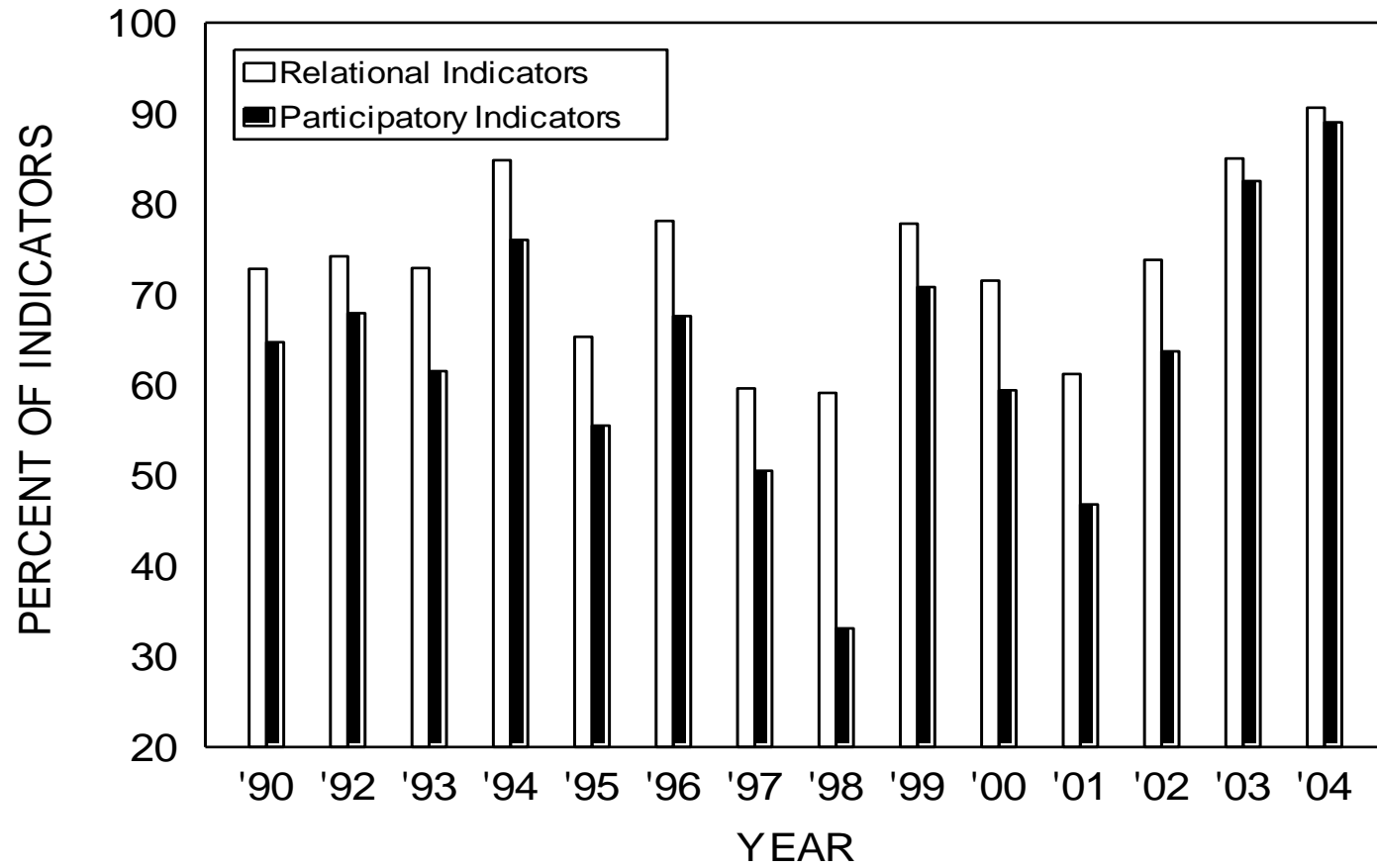
## Sources of Information for Assessing Adherence to Family-Centred Practices

- Eighteen (18) studies conducted between 1990 and 2004 at the Family, Infant and Preschool Program (Morganton, NC, USA)
- One thousand ninety six (1096) program participants
- Thirteen thousand five hundred and eleven (13,511) indicators

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<sup>a</sup> Dunst, C.J., & Trivette, C.M. (2005). *Measuring and evaluating family support program quality*. Winterberry Press Monograph Series. Asheville, NC: Winterberry Press.

## Degree of Adherence to Family-Centred Practices



# Research Syntheses of Family-Centred Help Giving Practices

- Meta-analysis of 52 studies conducted by more than 20 researchers and research teams in seven countries<sup>a,b</sup>
- Meta-analysis of 18 studies conducted by Dunst, Trivette, and colleagues in one early childhood intervention and family support program<sup>c</sup>

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<sup>a</sup> Dunst et al. (2007). Meta-analysis of family-centred help-giving practices research. *Mental Retardation and Developmental Disabilities Research Reviews*, 13, 370-378.

<sup>b</sup> Dunst et al. (2008). *Research synthesis and meta-analysis of studies of family centred practices*. Winterberry Press Monograph Series. Asheville, NC: Winterberry Press.

<sup>c</sup> Dunst et al. (2006). *Family support program quality and parent, family and child benefits*. Winterberry Press Monograph Series. Asheville, NC: Winterberry Press.

# Meta-Analysis of Family-Centred Help-giving Practices Research<sup>a</sup>

## *Family-Centred Practices*

Relational and participatory family-centred practices measured by 12 different family-centred practices scales

## *Studies*

52 studies conducted in 7 countries (N=11,187 study participants)

## *Outcomes*

Program helpfulness, self-efficacy beliefs, social support, child behaviour functioning, parent and family well-being, and parenting competence and confidence

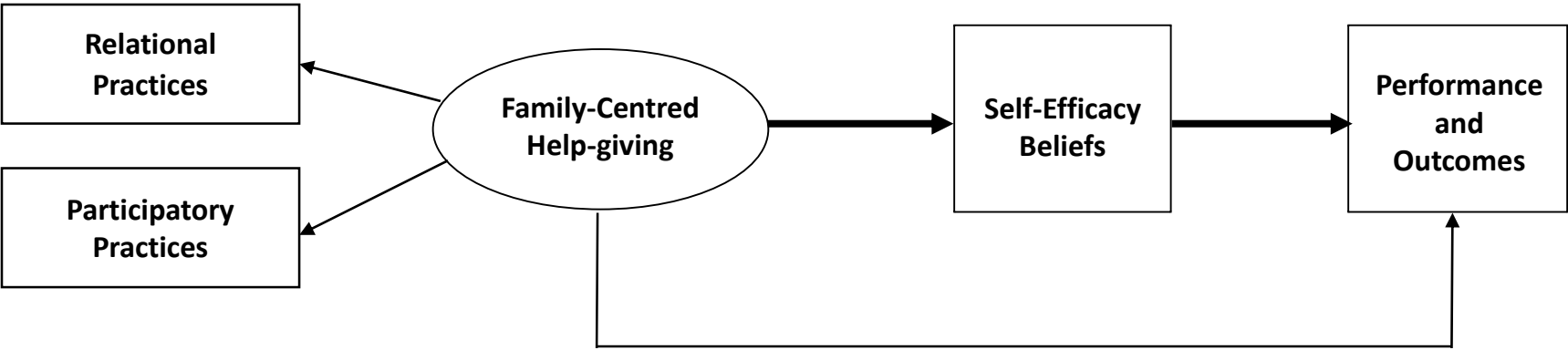
## *Measure of Effect Size*

Correlation coefficient for the relationship between relational and participatory practices and the study outcomes. The average weighted correlations for all studies combined were used as the best estimate of the size of effect between measures.

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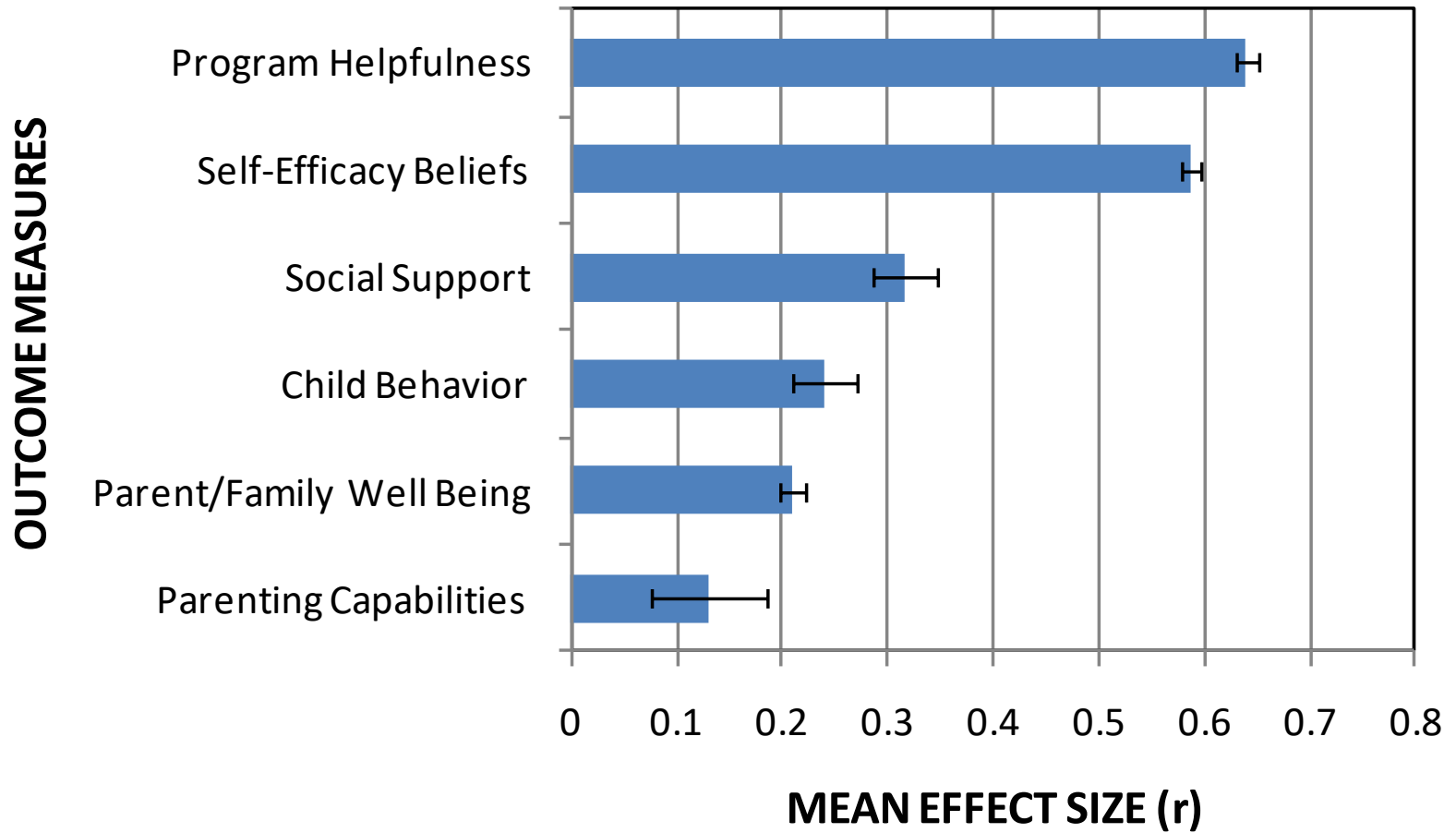
<sup>a</sup> Dunst, C.J., Trivette, C.M., & Hamby, D.W. (2007). Meta-analysis of family-centred help giving practices research. *Mental Retardation and Developmental Disabilities Research Reviews*, 13, 370-378.

# Relationships Among Family-Centred Help Giving Practices, Self-Efficacy Beliefs and Program Participant Outcomes

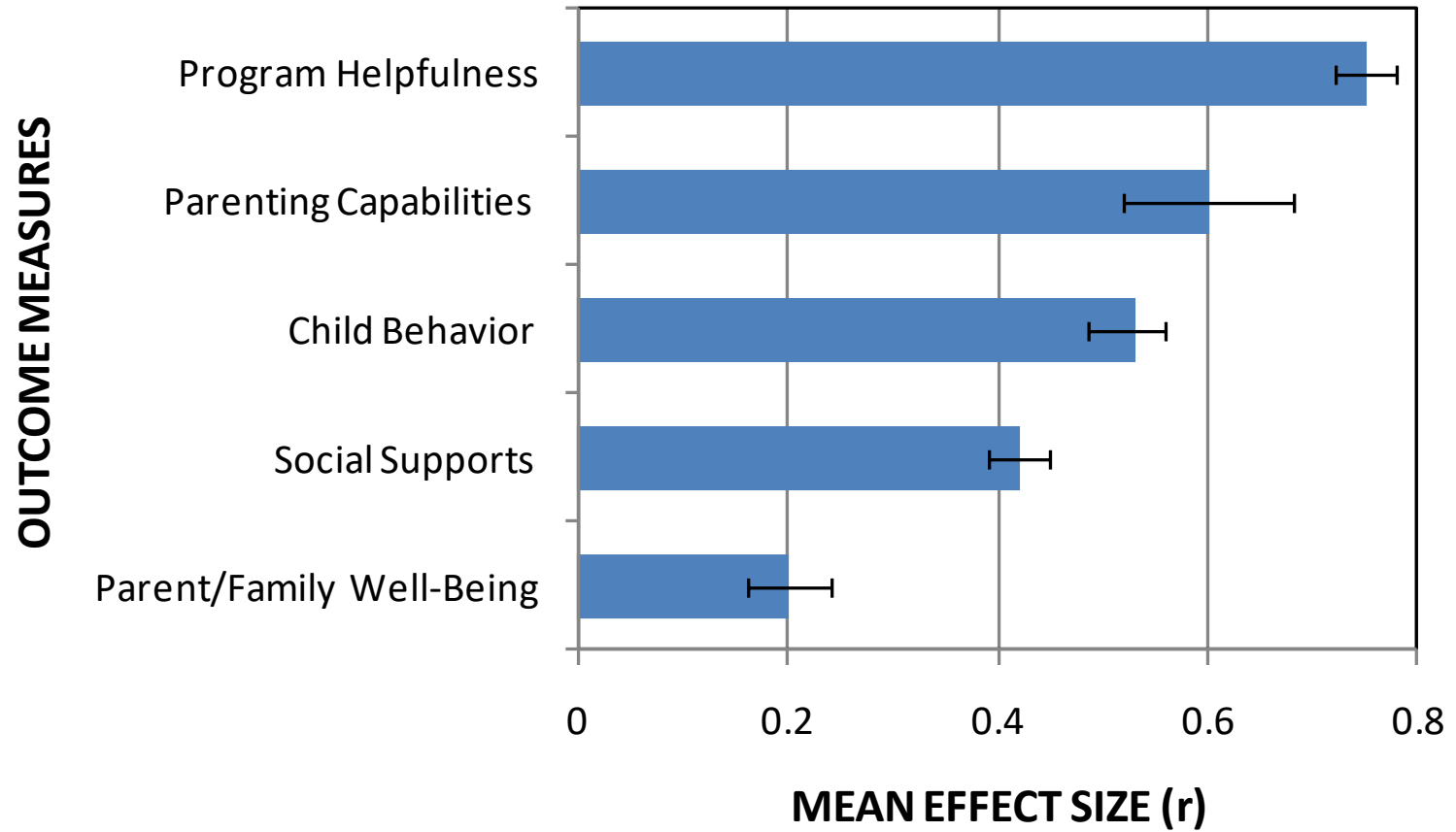




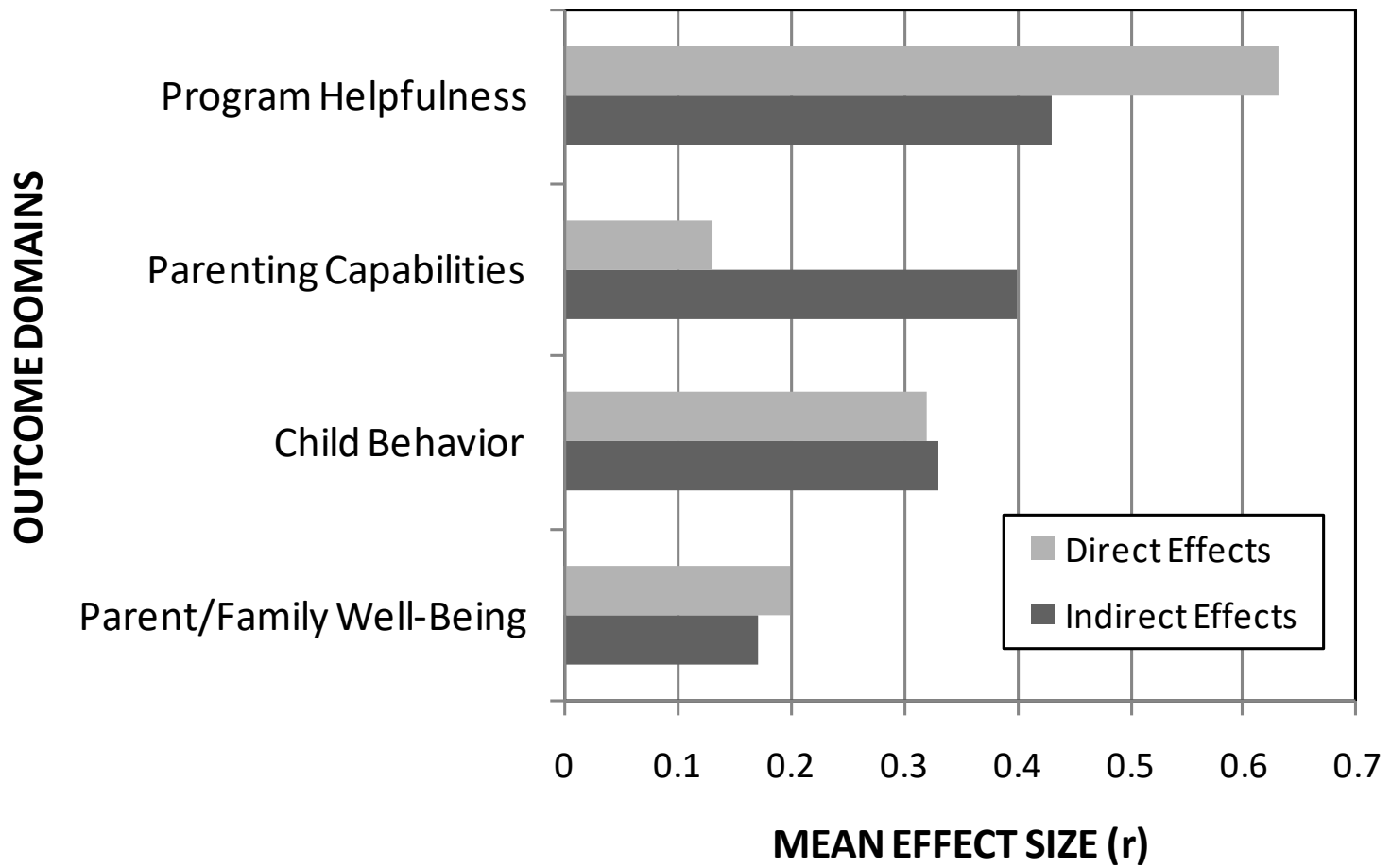
## Direct Effects of Family-Centred Practices on Parent, Family, and Child Behaviour and Functioning



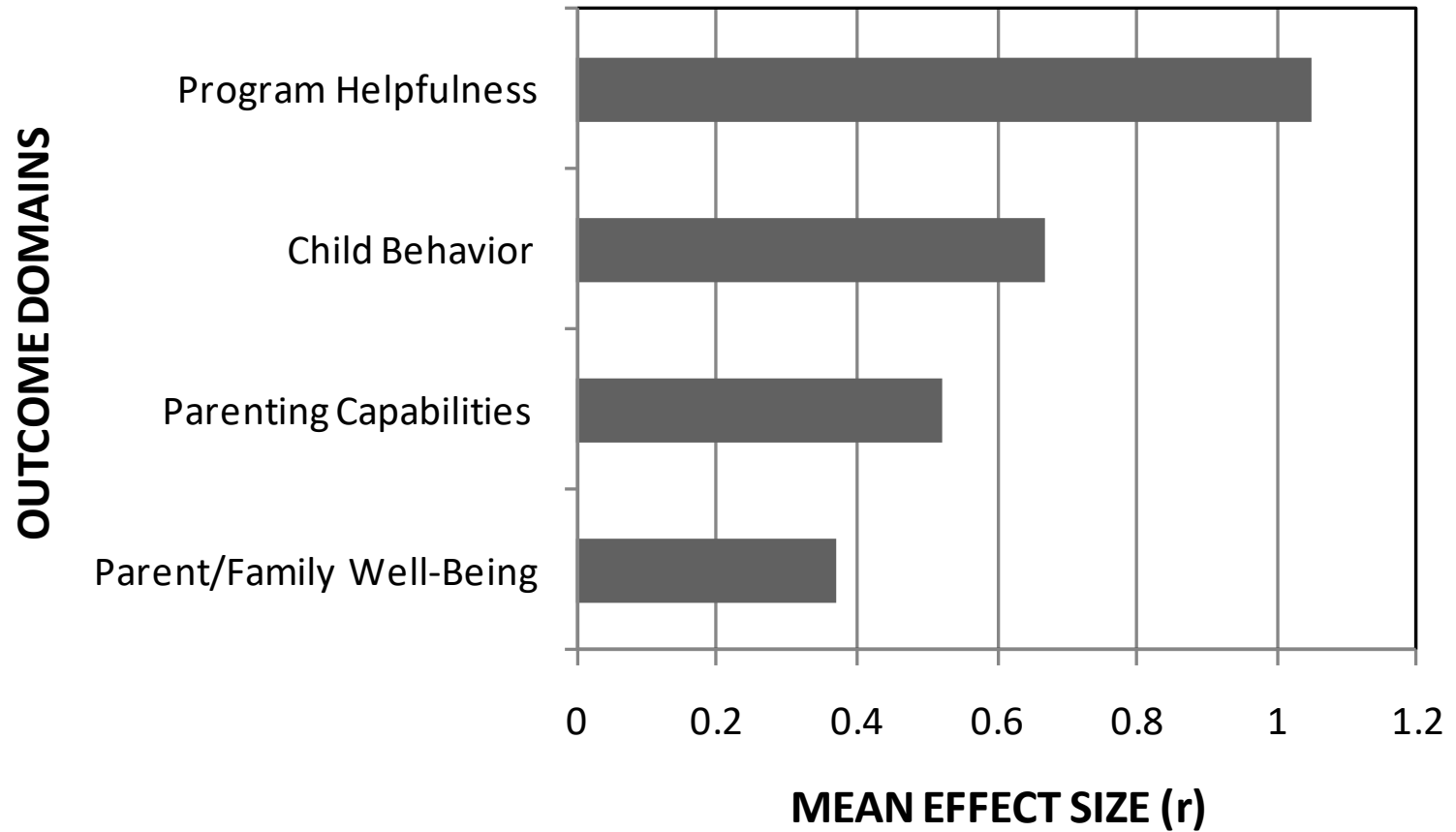
# Direct Effects of Self-Efficacy Beliefs on Parent, Family, and Child Behaviour and Functioning



## Direct and Indirect Effects of Family-Centred Practices on the Study Outcomes



## Overall Effects (Direct + Indirect) of Family-Centred Practices on the Study Outcomes



# Structural Equation Modelling Study

# Effects of Early Childhood Intervention Variables on Parent and Family Well-Being

## *Purpose*

Evaluate the influences of family-centred practices and different structural intervention variables on parent and family well-being

## *Participants*

250 parents and young children with developmental disabilities or delays involved in 59 different early childhood intervention programs

## *Measures*

Family-centred practices, different early intervention program variables, self-efficacy beliefs, socioeconomic status, and parent and family well-being

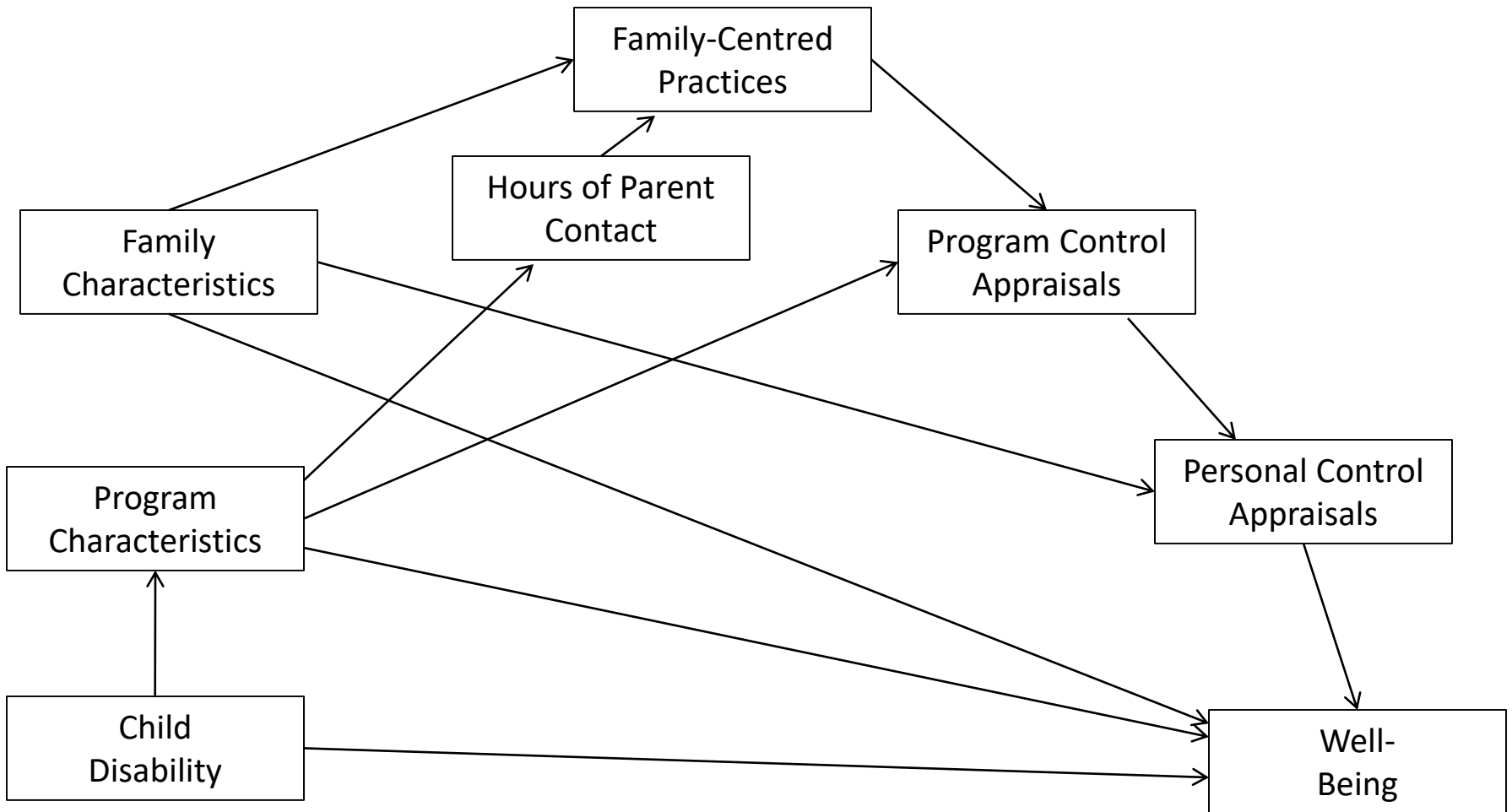
## *Method of Analysis*

Structural equation modelling to identify the direct and indirect effects of early intervention on parent and family functioning

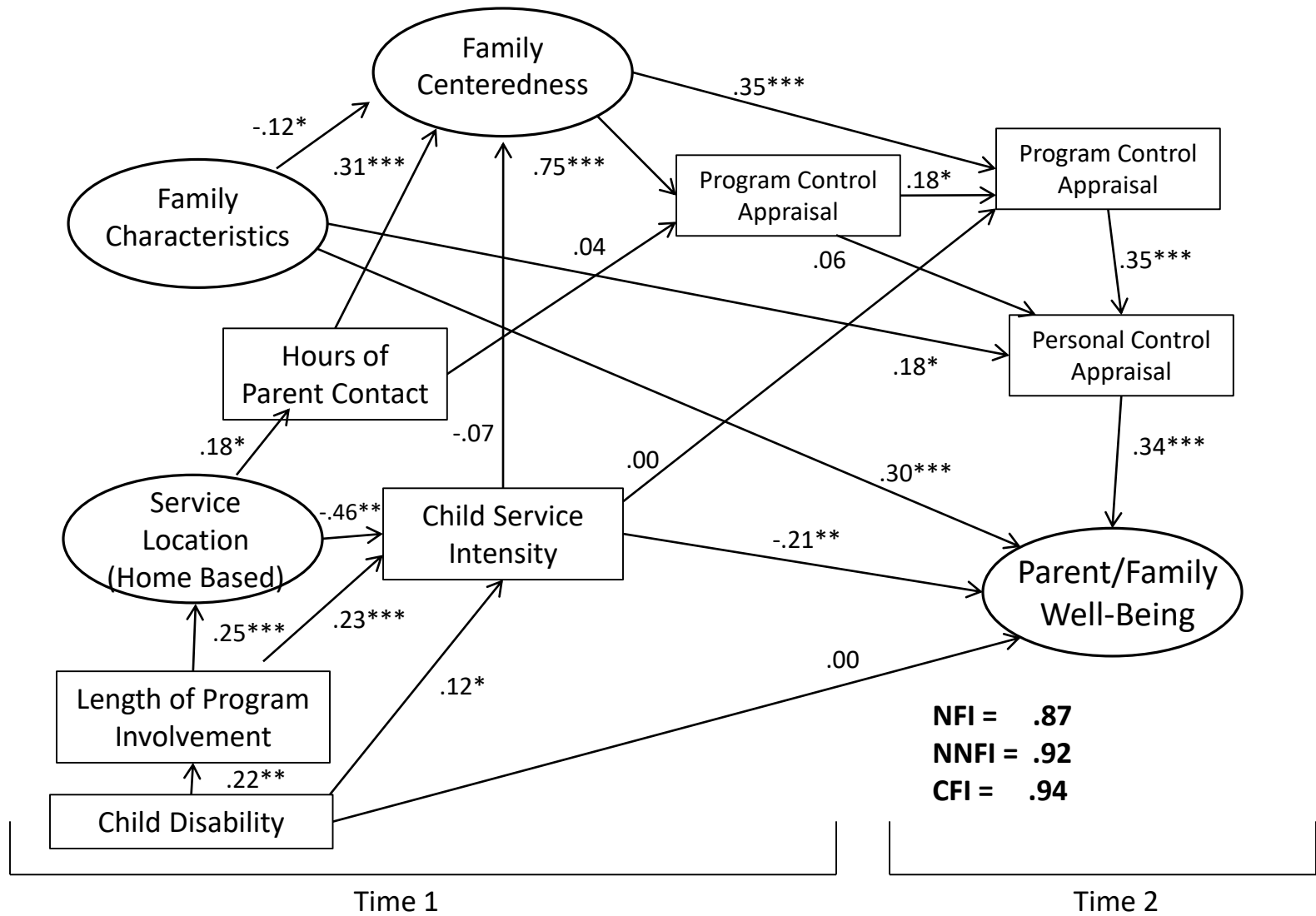
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Dunst, C.J., Hamby, D.W., & Brookfield, J. (2007). Modeling the effects of early childhood intervention variables on parent and family well-being. *Journal of Applied Quantitative Methods*, 2, 268 – 288.

# Hypothesized Relationships Among Program and Person Variables and their Influences on Psychological Well-Being



# Structural Equation Modelling Result



\*p < .05, \*\*p < .01, \*\*\*p < .001, \*\*\*\*p < .0001.



# Meta-Analytic Structural Equation Modelling Studies

# Meta-Analytic Structural Equation Modelling of the Influences of Family-Centred Care on Parent and Child Psychological Health<sup>a</sup>

## *Studies*

15 investigations of family-centred care that included measures of family-centred practices, self-efficacy beliefs, parent psychological health, and child psychological health

## *Sample*

N= 2948 parents and other caregivers

## *Family-Centre Care Measures*

Help-Giving Practices Scale, Family-Centred Practices Scale, and Enabling Practices Scale

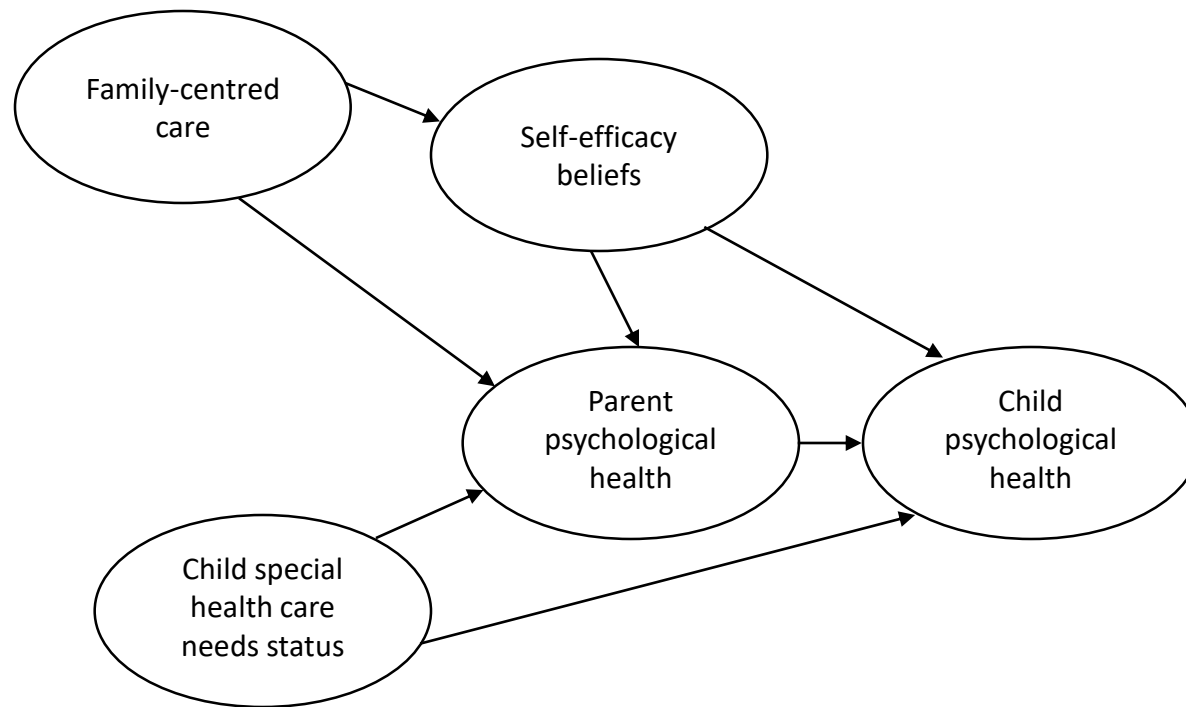
## *Hypothesis*

Based on contentions in the family-centred care literature, family-centred practices were expected to directly affect parent psychological health and parent health in turn affect child psychological health. Based on our own research, the relationships between family-centred care and parent and child health were expected to be mediated by self-efficacy beliefs.

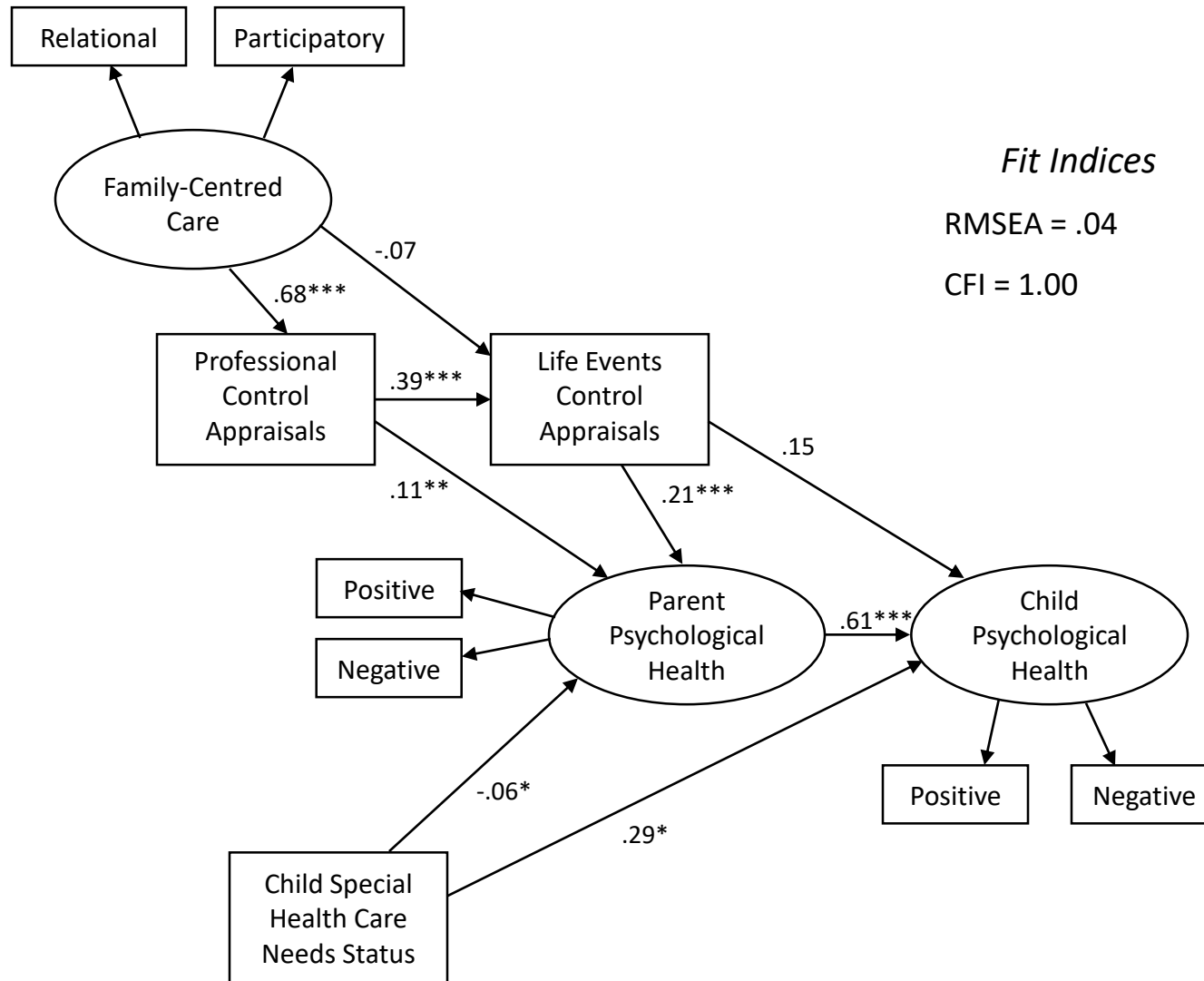
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<sup>a</sup> Dunst, C.J., & Trivette, C.M. (2009). Meta-analytic structural equation modeling of the influences of family-centered care on parent and child psychological health. *International Journal of Pediatrics*, 2009. doi: 10.1155/2009/596840.

# Structural Equation Model for Evaluating the Effects of Family-Centred Care, Self-Efficacy Beliefs, and Child Special Health Care Needs on Parent and Child Psychological Health



# Meta-Analytic Structural Equation Modelling Results



. \* $p < .01$ , \*\* $p < .001$ , \*\*\* $p < .0001$ .

# Influences of Family-Systems Intervention Practices on Parent-Child Interactions and Child Development<sup>a</sup>

## *Studies*

Eight studies that included measures allowing us to trace the effects of capacity-building help-giving practices and family-systems intervention practices on parent-child interactions and child development

## *Sample*

910 preschoolers and their parents involved in different kinds of help-giving programs

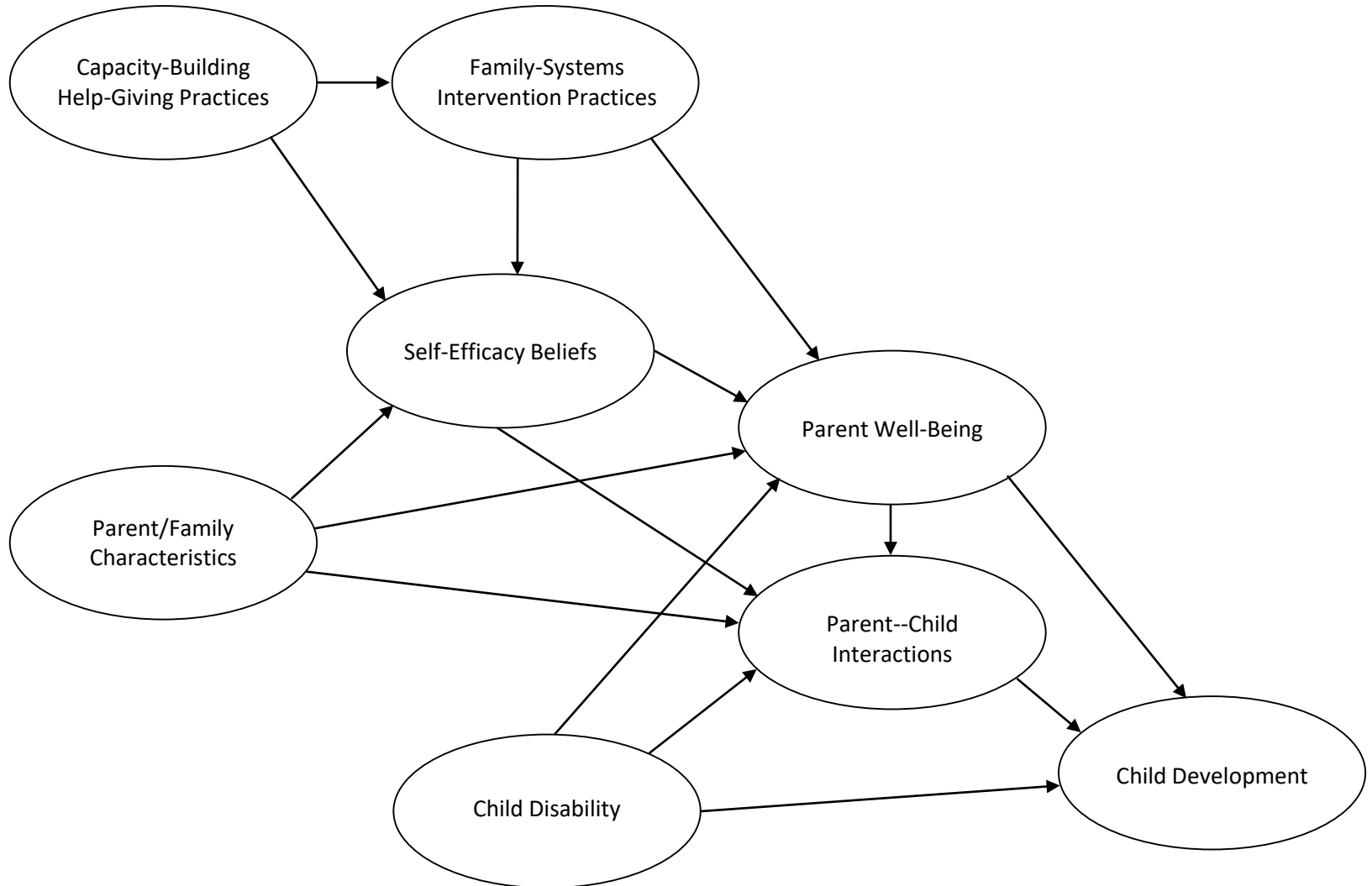
## *Predictions*

The influences of help-giving and family-systems intervention practices on parent-child interactions and child development would be indirect and mediated by self-efficacy beliefs and parent well-being

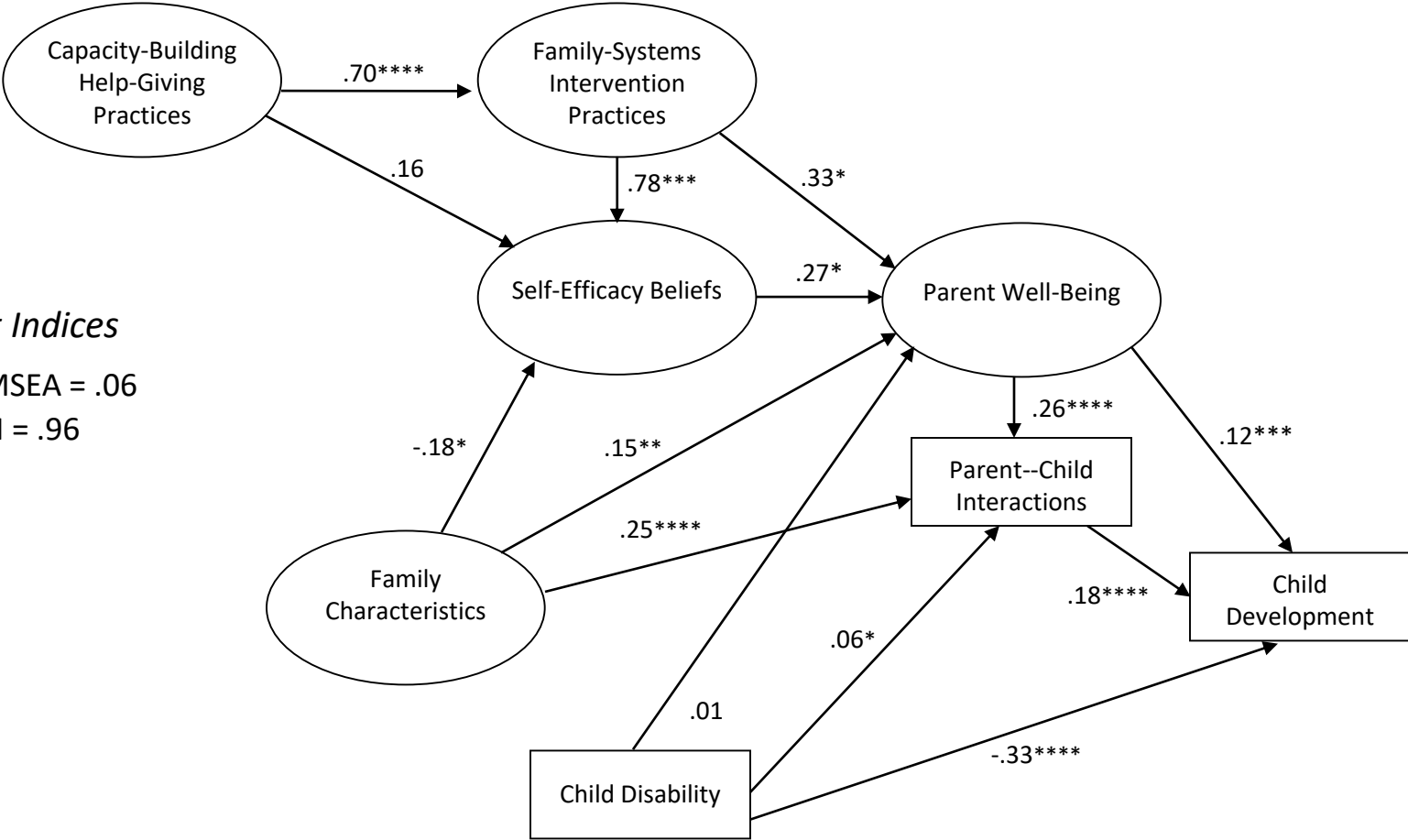
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<sup>a</sup> Trivette, C.M., Dunst, C.J., & Hamby D.W. (2010). Influences of family-systems intervention practices on parent-child interactions and child development. *Topics in Early Childhood Special Education*, 30, 3-19.

# Model for Assessing the Direct and Indirect Effects of Different Predictor Variables on Parent-Child Interactions and Child Development



# Meta-Analytic Structural Equation Modelling Results



*Fit Indices*

RMSEA = .06  
CFI = .96

\*  $p < .05$ . \*\* $p < .01$ . \*\*\*  $p < .001$ . \*\*\*\*  $p < .0001$ .

## Some Concluding Remarks and Comments

- The family-systems intervention model has proved useful for working with families who differ considerably in their concerns and priorities, life circumstances, personal and cultural beliefs, etc.
- The lessons learned from using the model has helped considerably in terms of better operationalization of key elements of the family-systems approach to working with families.
- Research on the family-systems model has generally found that the largest majority of hypothesized relationships are supported by findings from different studies.