

Providing Intensive, In-Home Supports for Parents with Intellectual Disabilities

Trupti Rao, Psy.D.

October 2, 2013

Presented at the 2013 TASP International Conference –
Innovative Partnerships and Practices: The Path to Success for Parents with
Learning Disabilities and Other Cognitive Limitations



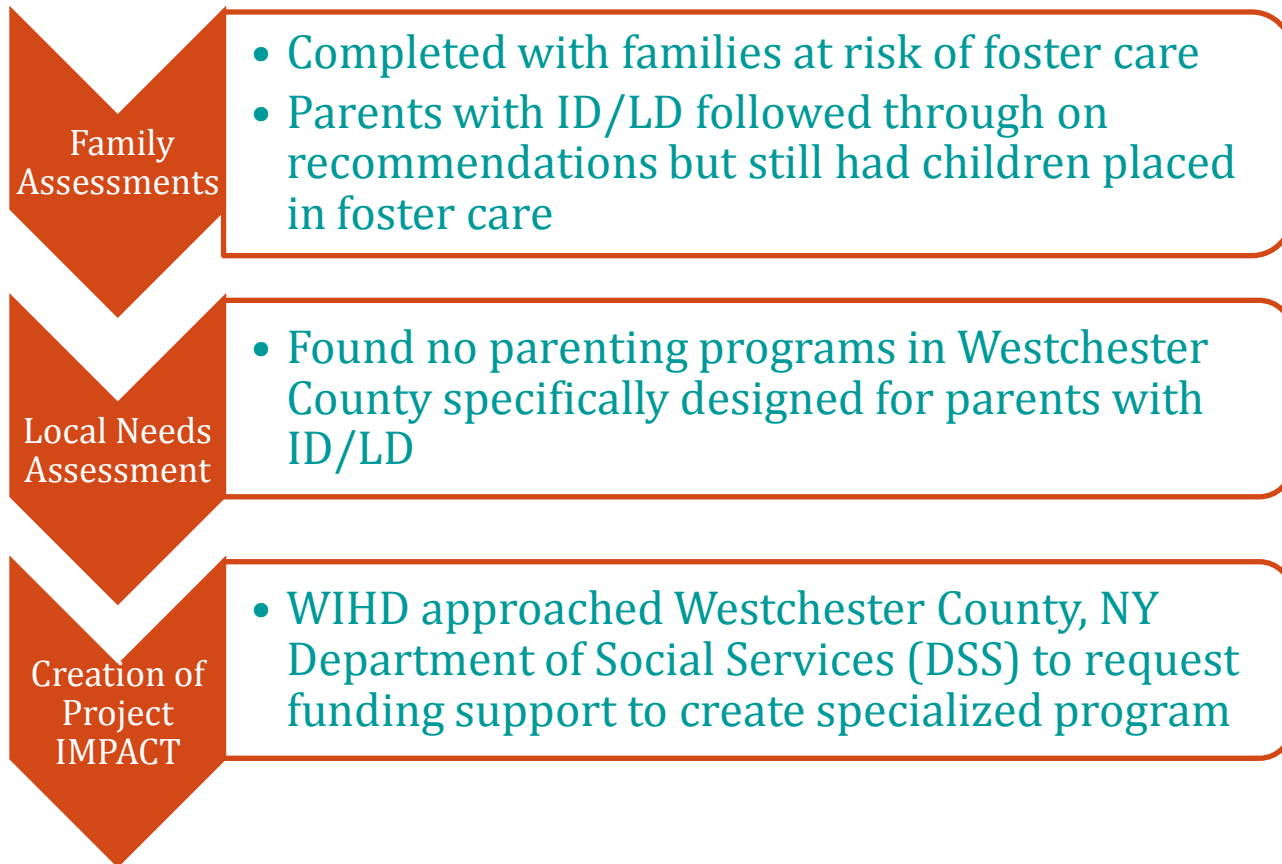


Project IMPACT: Improving Parenting Achievements Together

A parenting program for parents with Intellectual & Learning Disabilities (ID/LD)



History of the Program's Development



Program Goals

- To provide specialized parenting support to parents in Westchester County with ID/LD.
- To help prevent placement or replacement of children into foster care.

Description of the Program

- Staffing:
 - Clinicians: 2 Social Workers (1 Bilingual)
 - Coordinator: Psychologist
- Intensity:
 - Clinicians work with 3 families at a time.
 - Each family is seen:
 - 1-½ to 2 hours a day
 - 3 days a week
 - for 4-6 months.

Referral Criteria

- Parent has documented history of cognitive needs (IQ of 80 or less) or history of significant learning needs.
- Children are currently in care of parents, but receiving services from DSS due to alleged maltreatment.

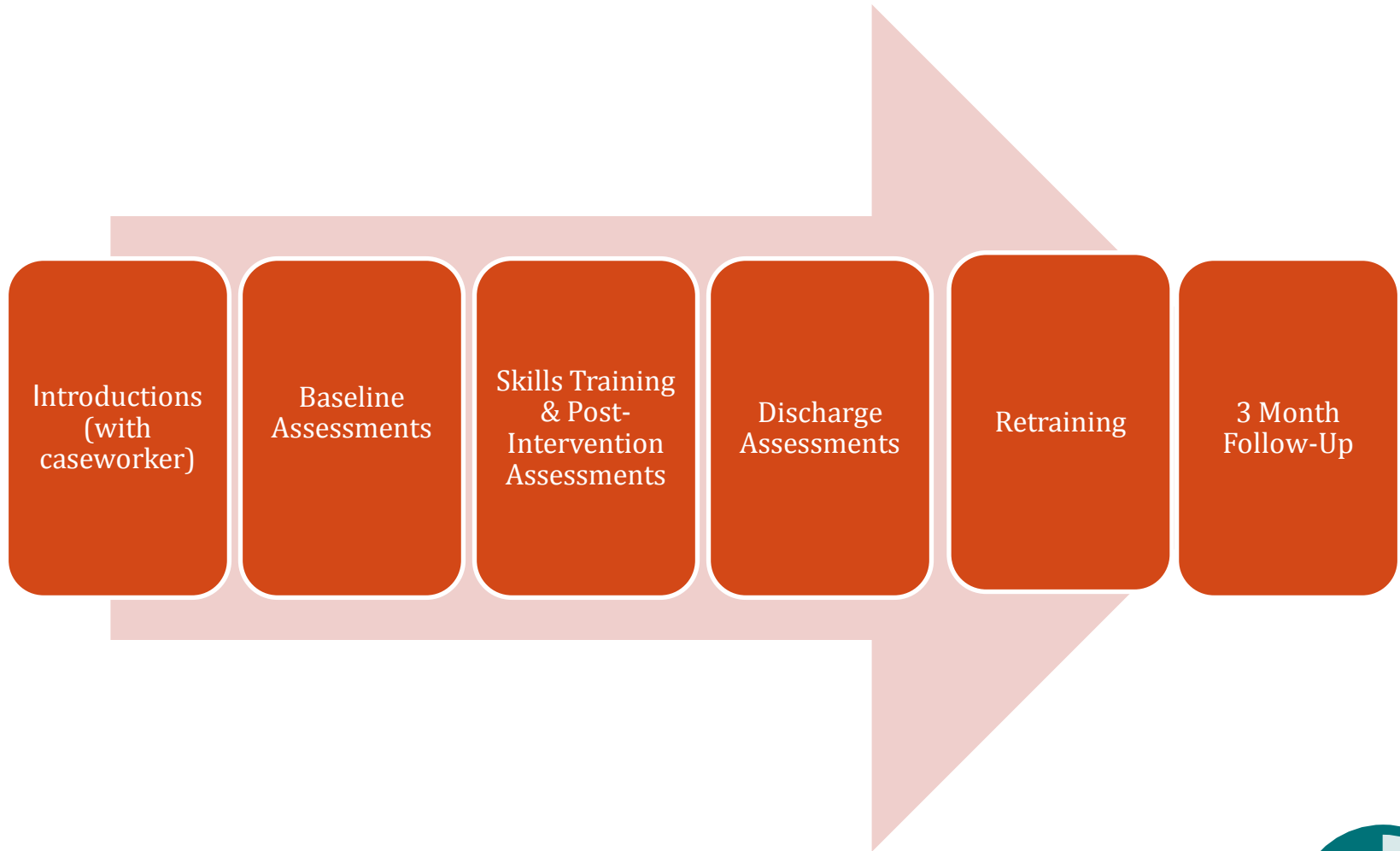


Key Program Domains

- Curriculum ranges from basic child care skills to more complex decision-making/problem-solving skills:
 - Interaction Skills
 - Promoting Development
 - Basic Child Care
 - Safety
 - Health Safety
 - Home Management/Budgeting
 - Problem-Solving
 - Advocacy



Program Timeline



Forms of Intervention Utilized

- Verbal Instruction:
 - Psychoeducation
 - Modeling & Role-Playing
- Interactive Activities
- Reinforcers
- Video-Tape Feedback
- Technological Supports:
 - Videos
 - Cell Phones/Apps

A Typical Visit: Interaction Skill of Praise

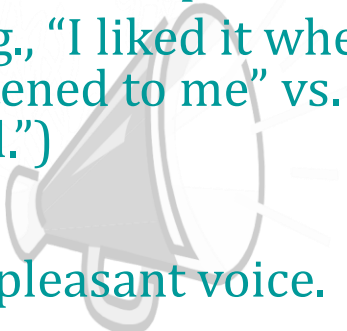
- Discussion: What is Praise?
 - Praise is a verbal statement to the child indicating something positive a child has done.
- Discussion: Why is Praise Important?
 - Praise plays a critical role in teaching new, positive behaviors to the child.
 - Praise helps to build self-esteem.
- Discussion: How to Provide Praise
 - Review *“How to Provide Praise”* Handout.
- Praise Teaching:
 - Engage the child in an activity or choose an age-appropriate activity if necessary.
 - Modeling – therapist praises the child first.
 - Prompt parent to praise child several times & provide beginning statement (e.g., “I like when you ___”).
- Feedback:
 - How did parent do with praise & how did child react (e.g., smiling, talkative).
 - Discuss whether it was easy or difficult to provide praise.
- Provide *“Ways to Praise & Encourage your Child”* handout.

Praise Handouts



How to Provide Praise

- Use praise immediately after the desired behavior.
- Focus on the specific behavior
 - (e.g., “I liked it when you listened to me” vs. “Good girl.”)
- Use a pleasant voice.
- Look at your child.
- Smile at your child.



Ways to Praise Your Child

“That’s great!”

“You’re doing such a good job!”

“Fantastic!” “All right!”

“Outstanding!”

“Nice going!”

“You should be very proud of yourself!”

“That’s the way to do it!”

Example of Interactive Activity



Demographics & Assessment

- Demographics on Child Functioning
 - Adaptive Behavior-*Vineland-2*
 - Child Behavior-*Child Behavior Checklist (CBCL)*
- Measures on Parent Functioning
 - Stress-*Parenting Stress Inventory (PSI)*
 - Abuse Risk-*Child Abuse Potential Inventory (CAPI)*
- Measure on the Home
 - *HOME* Inventory
- Measure of Parenting Skills
 - Skill Observations (covering over 20 different skills)
- Satisfaction Surveys

Example of Skill Observations: “Praise”

| | |
|--------------------------------------------------------------|--|
| Makes positive statement about child and/or behavior. | |
| Uses praise immediately after desired behavior. | |
| Has a positive tone of voice and facial expression. | |
| Makes eye contact. | |

| | |
|---|------------------------------------------------|
| 0 | Not Completed/Completed Incorrectly/Refused |
| 1 | Completed/Not Applicable given child’s age |



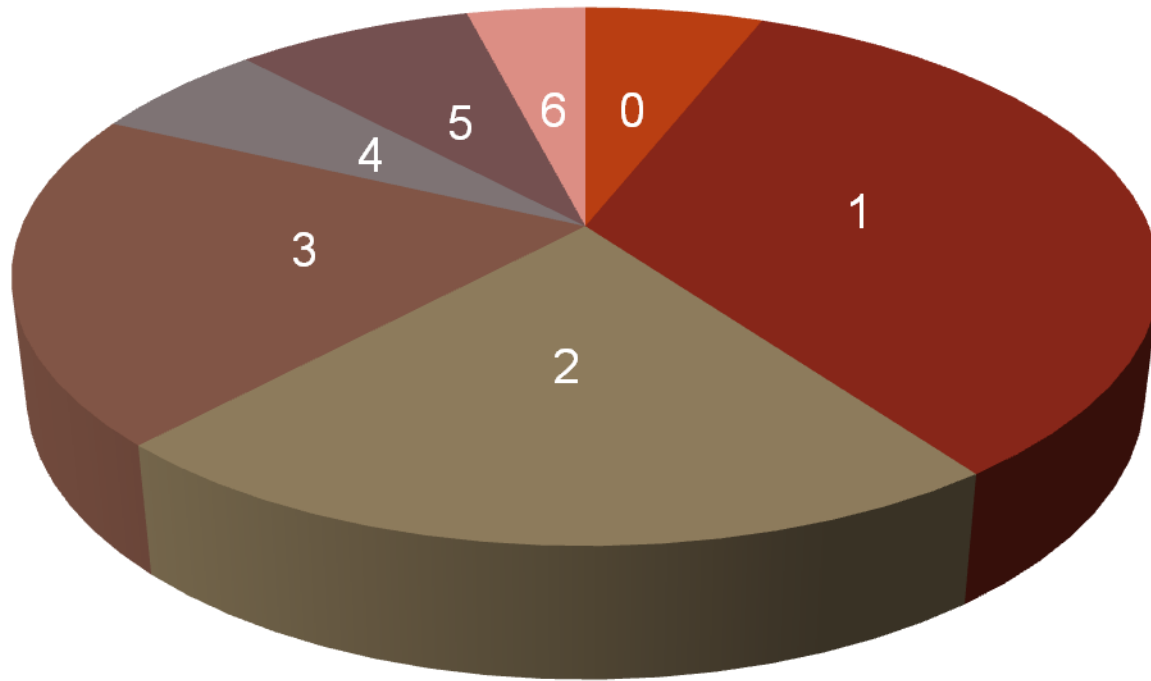
2006 to 2012 Demographics & Findings



Parent Demographics ($n = 50$)

| | | | |
|------------------------|-------|----------------------------|-------|
| Age | | IQ | |
| Mean | 33 | Mean | 65 |
| Range | 20-50 | Range | 44-84 |
| Language | | Race | |
| English | 66% | Black | 50% |
| Spanish | 22% | Hispanic | 32% |
| English/Spanish | 12% | White | 18% |
| Gender | | Co-Occurring Needs | |
| Male | 14% | Mental Health | 60% |
| Female | 86% | DV | 46% |
| | | Both | 40% |
| Prior Parenting | 64% | Disability Services | 14% |

of Concurrent Services



Child Demographics ($n = 107$)

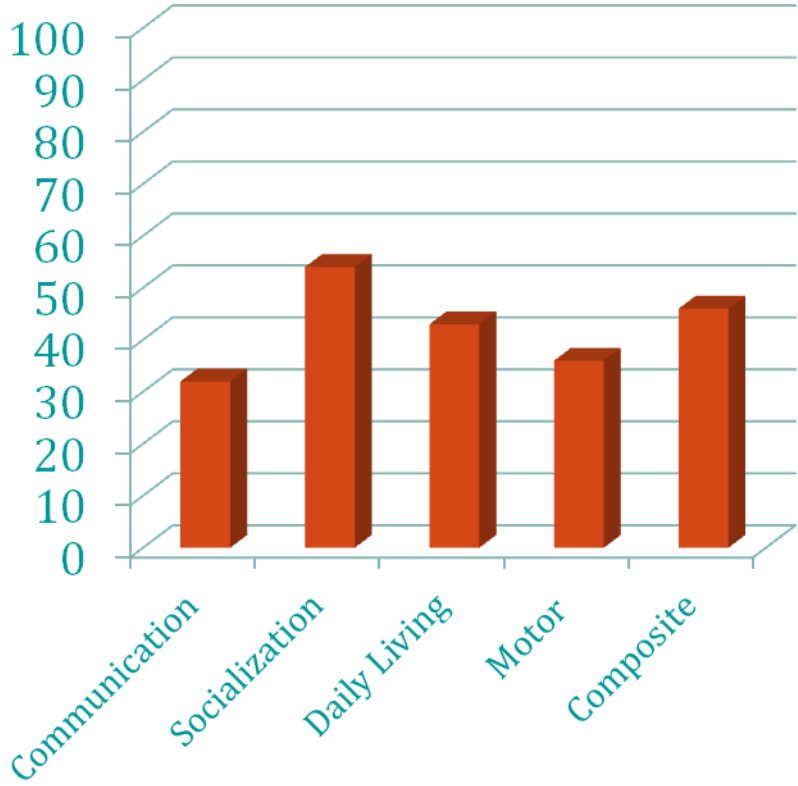
| | |
|------------------------------------------|--------------|
| # of Children In Family | 1 – 6 |
| Mean Age | 6 |
| Age Range | Infants – 17 |
| % of Children with Documented Disability | 49% |



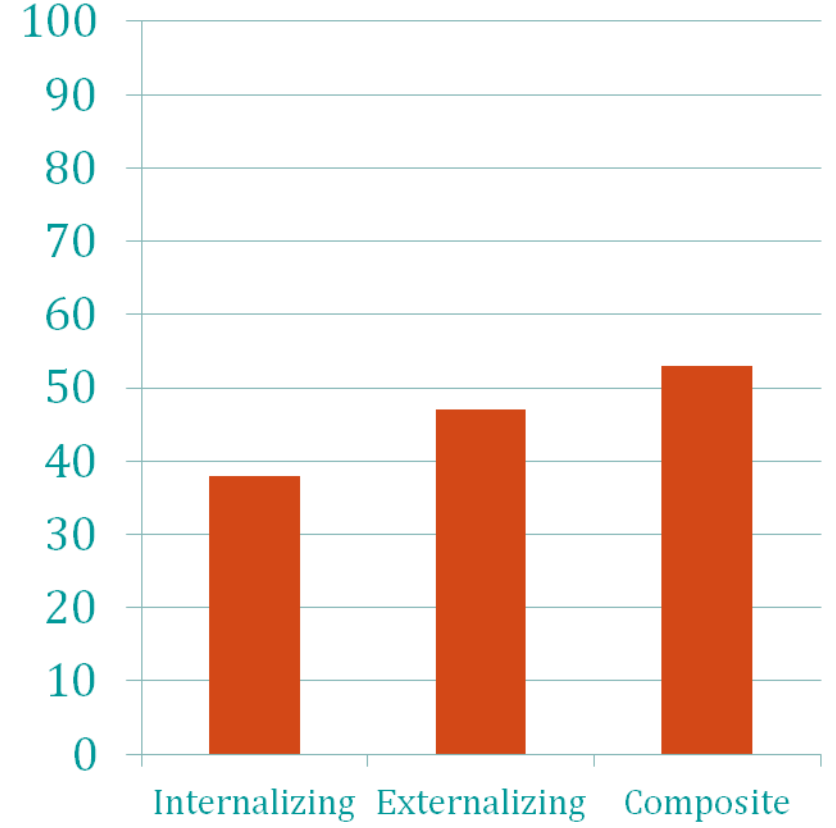
Child Adaptive & Behavioral Functioning:

% of needs

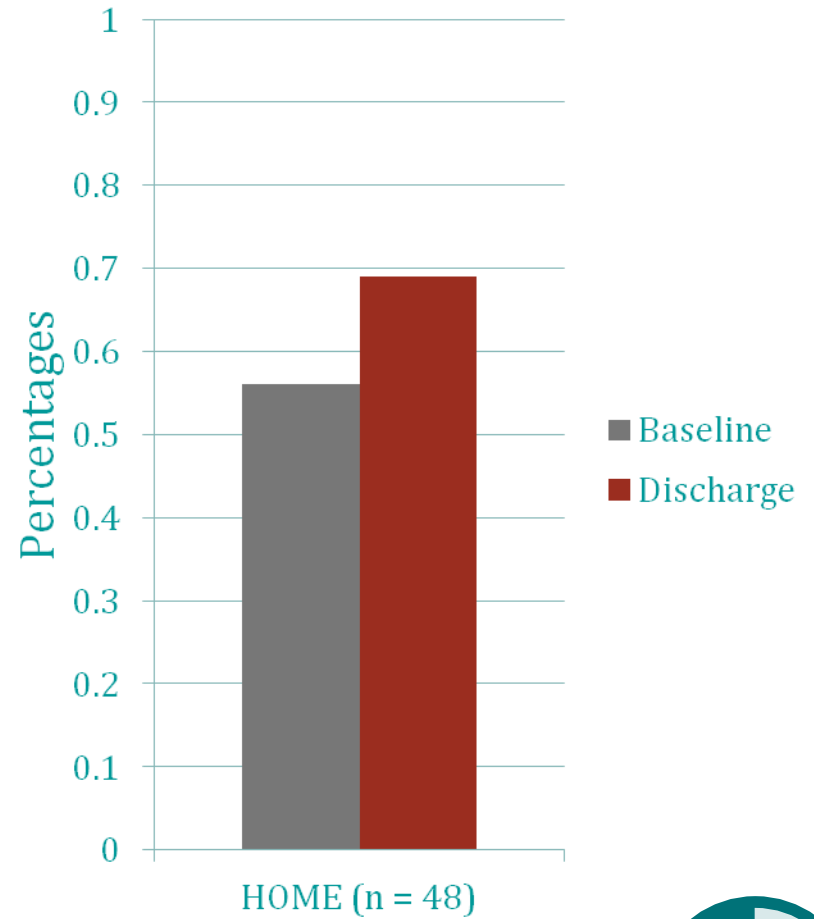
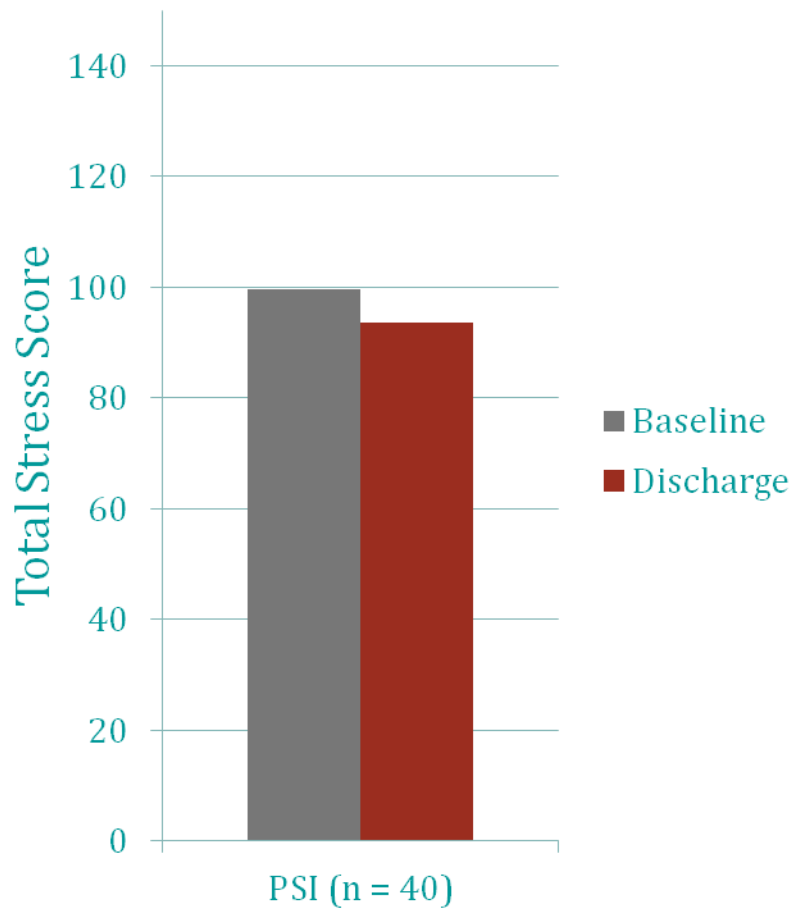
Vineland-2



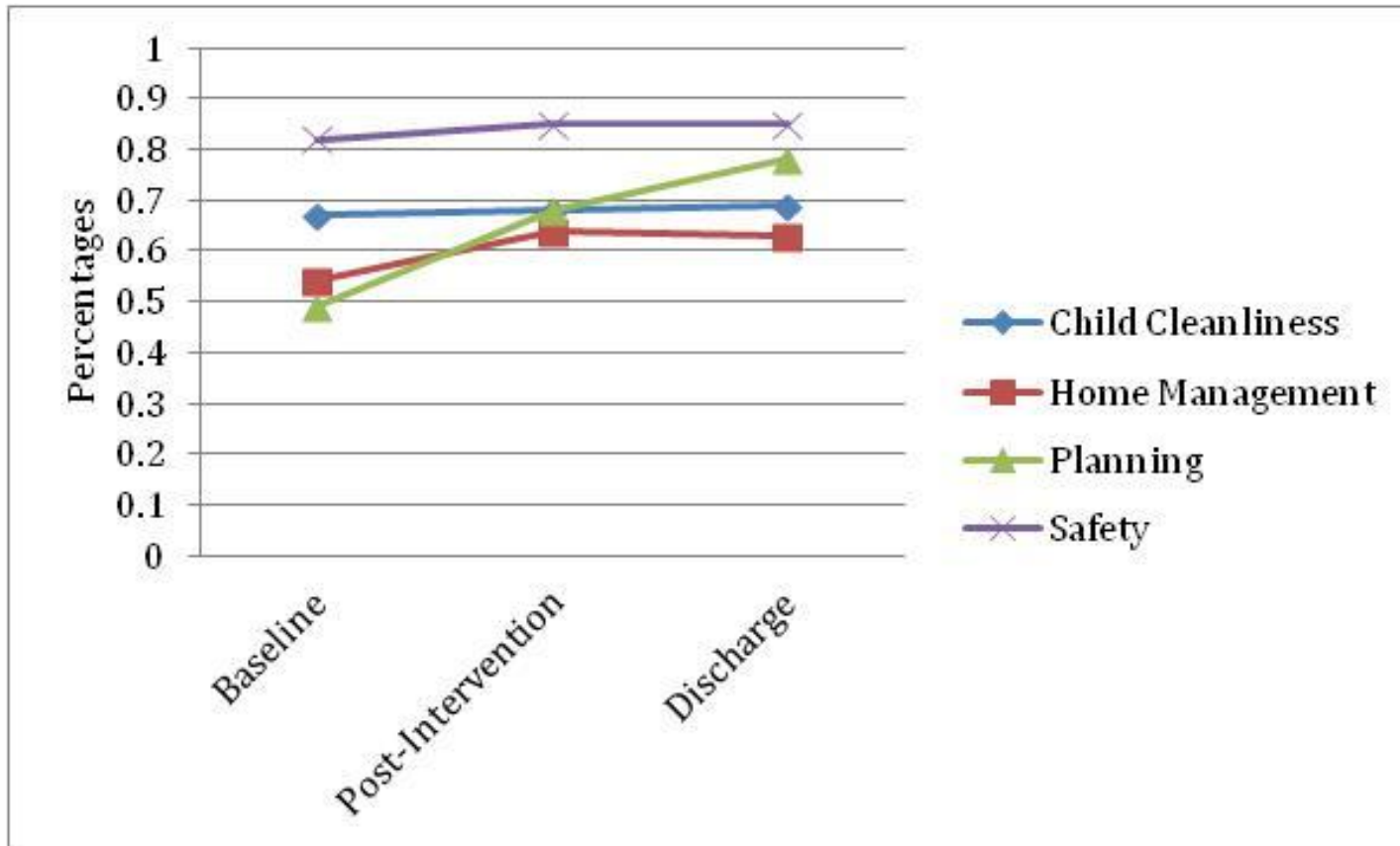
CBCL



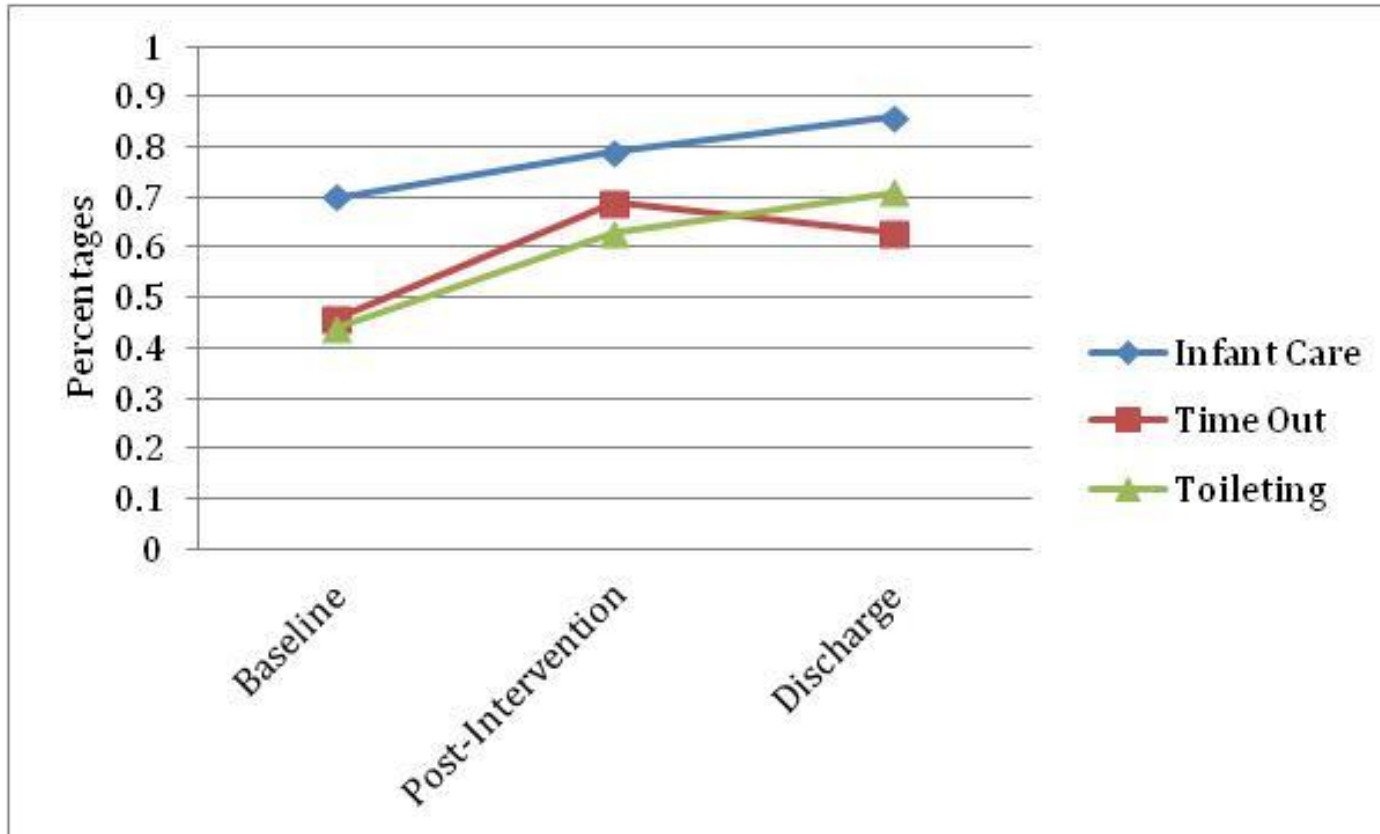
Parent & Home Functioning



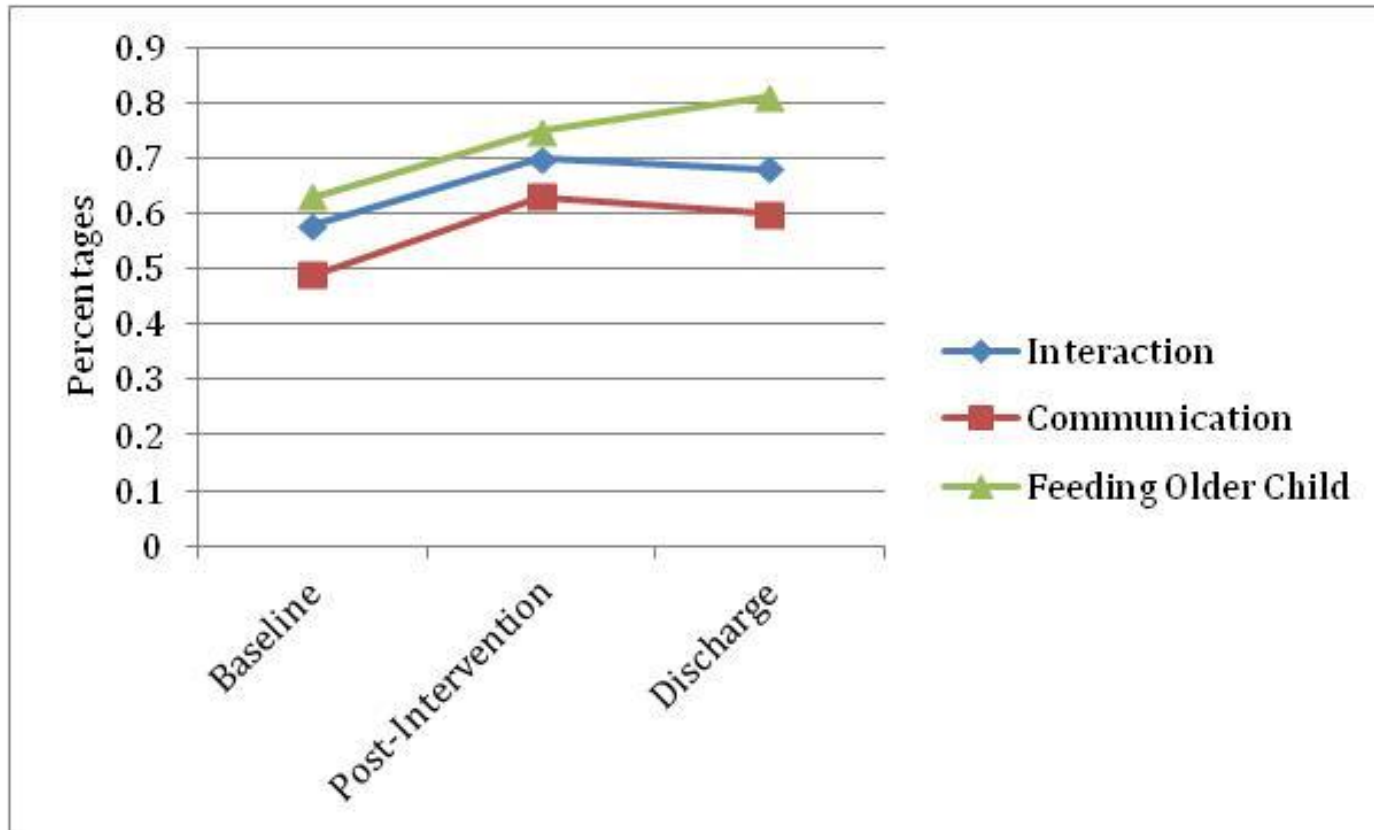
Parent Skills



Parent Skills



Parent Skills



Program Satisfaction

| Category | Client Response (<i>n</i> = 50) | Caseworker Response (<i>n</i> = 32) |
|----------------------------------|-------------------------------------|--------------------------------------------|
| “A lot” happy with services | 78% | 97% |
| “A little” happy with services | 20% | 3% |
| “Not at all” happy with services | 2% | 0% |
| “Would recommend” program | 98% | 100% |
| “Would not” recommend | 2% | 0% |



One Year F/U ($n = 36$)

Family Status

- 35 families remained intact

DSS Involvement

| | |
|---------------------------|-------------|
| Continued DSS Involvement | 24 families |
| Ended DSS Involvement | 7 families |
| Unknown | 5 families |





Home Visitation Programs?





Exploring the Appropriateness of Home Visitation Programs

- Survey completed by 41 providers from Evidence-Based Home Visitation Programs
- Referrals: Limited amount (7%) from Developmental Disability system



Exploring the Appropriateness of Home Visitation Programs

- Providers reported:
 - moderate amount of contact with parents with ID/LD
 - moderate level of comfort when working with parents with ID/LD
- 57% described working with parents with ID/LD as *moderately more challenging*
- 4% identified it as *extremely more challenging*



Exploring the Appropriateness of Home Visitation Programs

- Providers reported:
 - moderate amount of flexibility within their current home provider program
 - using strategies found in the literature to be successful for working with parents with ID/LD, such as assisting parents with completion of paperwork/positive reinforcement for participation
 - moderate need for further training when working with parents with ID/LD

