EMPOWERING PARENTS TO SUPPORT VULNERABLE CHILDREN: A PUBLIC HEALTH APPROACH

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OUTLINE

- Involvement of parents
- Vulnerable families
- Work approaches
  - Public health model
  - Proportionate universalism
  - Importance of early years
- Examples of evidence-based programmes
  - Universal programmes
  - Selective programmes
  - Indicated programmes
- Implications for services and school/educational psychologists
Involvement of Parents
ECOLOGICAL FRAMEWORK

- **Micro-system**
  - The biological child
  - The immediate family
  - The school
  - The neighborhood

- **Meso-system**

- **Other social systems in the wider environment (Exo-system & Macro-system)**
ECOLOGICAL FRAMEWORK

- Early childhood behaviour problems associated with inadequate or inappropriate parenting such as harsh/ineffective discipline, poor monitoring and lack of cognitive stimulation (Webster-Stratton & Taylor, 2001)
  - Parenting skill is one of the strongest predictors of good outcomes for children
  - Harsh, inconsistent parenting is predictive of poor youth outcomes (Hoeve et al, 2010)
Home learning stimulation and parental responsiveness are associated with child learning interest and language skills and the younger the child, the stronger the association (Bradley, Corwyn, Burchinal, Pipes McAdoo, García Coll, 2001)

Importance of home-school co-operation (Epstein, 2001)
EMPOWERMENT

- By enhancing parents’ skills in supporting their children, we are motivating the parents to take ownership of, and work hard, for their children’s future
VULNERABLE FAMILIES
VULNERABLE FAMILIES

- Poverty
- Immigrant status
- Lone parenthood
- Children with special education needs
- Children with early-onset conduct problems
WORK APPROACHES
PUBLIC HEALTH APPROACH

- Target population
  - Indicated programmes
  - Selective programmes
  - Universal programmes

Indicated
Selective
Universal
PROPORTIONATE UNIVERSALISM

• Actions must be universal, but with a scale and intensity proportionate to the level of disadvantage
• Improving well-being of the child population
  • Population approach → Universal services
  • Provision of a basic level of services to every child
• Reducing inequalities
  • High-risk approach → Proportionate services
  • Risk distribution is a continuum - children at higher risk will need more intensive services

Dr Shirley Leung
**IMPORTANCE OF EARLY YEARS**

- Degree of plasticity
- Investment in early years programmes as most cost-effective investment
10 – 12 parents in a group

Social learning model, using modelling, rehearsal and feedback

10 – 16 meetings of 90-120 minutes’ duration

Adhere to manual and consistent implementation
EXAMPLES OF EVIDENCE-BASED PROGRAMMES
Target participants – parents of children attending nursery classes

Goals

- Parents will be more competent and confident in supporting their children’s development in all areas, including learning skills and social skills
- Parents will co-operate and communicate more with preschools in promoting children’s development

Leung, Tsang, & Kwan (2015)
Hands-On Parent Empowerment-20 (HOPE-20)®

- Children’s development will be enhanced, and they will become more competent and caring individuals.
- Through inter-sectoral collaboration, preschools will be strengthened to provide whole-school support for the development of their students.
- Delivered in preschools in group format.
- Funded by Lo Ying Shek Chi Wai Foundation.

Leung, Tsang, & Kwan (2015)
HANDS-ON PARENT EMPOWERMENT-20 (HOPE-20)®

- Cluster randomized controlled trial design
- 18 preschools randomized into
  - Intervention group - 10 preschools (110 parents)
  - Control group – 8 preschools (63 parents)
- Analysis by intention-to-treat

Results
- Improvement in child learning and language skills
- Decrease in child behavior problems
- Decrease in parental stress
- Increase in parenting sense of competence
- Gains maintained three months after programme completion

Leung, Tsang, & Kwan (2015)
SELECTIVE PROGRAMME - POSITIVE PARENTING PROGRAMME (TRIPLE P)

- Behavioural family intervention based on social learning principles
- Target clients – parents with difficulties in managing their children up to 12 years old
- Goals
  - To prevent behavioural and emotional problems in children and teenagers
  - To prevent problems in the family, school and community before they arise
  - To create family environments that encourage children to realize their potential

Sanders (1999)
TRIPLE P IN HONG KONG

- Level 4 group programme
  - Four two-hour group sessions
  - Four telephone follow-up sessions
  - Homework
- Target participants – parents who indicated concerns about their children’s behaviour
- Delivered in Maternal and Child Health Centres and Child Assessment Centres

TRIPLE P IN HONG KONG

- Randomized controlled trial design
- 91 parents with children between 3 to 7 years old recruited from Maternal and Child Health Centres and Child Assessment Centres
  - Intervention – 46 parents
  - Control – 45 parents
- Analysis by intention-to-treat

Results

- Decrease in child behaviour problems
- Decrease in dysfunctional parenting practices and parent conflict over child behavior
- Improvement in parenting sense of competence and marital relationship

SELECTIVE PROGRAMME - HEALTHY START HOME VISIT PROGRAMME

- Target clients - disadvantaged families with preschool children in Tuen Mun area
- A home visit programme - parent assistants to deliver the home visit programme, under the supervision of a project co-ordinator
- Funded by Quality Education Fund and developed with Tung Wah Group of Hospitals

Leung, Tsang, & Heung (2014)
HEALTHY START HOME VISIT PROGRAMME

- Goals
  - Children’s holistic health will be enhanced and children will be more healthy and capable
  - Parents will be more competent and confident in promoting healthy life styles of their children, including physical, cognitive and psychosocial aspects
  - Parents will collaborate and communicate more with preschools in promoting children’s healthy life styles

Leung, Tsang, & Heung (2014)
Healthy Start Home Visit Programme

- Cluster randomized controlled trial design
  - Intervention group – 12 preschools (84 parents)
  - Control group – 12 preschools (107 parents)
- Analysis by intention-to-treat

Results
- Decrease in child behavior problems and parenting stress among participants
- Improvement in child learning, frequency of tooth brushing, healthy feeding practices, parent self-efficacy and social support among participants
- Consistent decrease in child behavior problems, and parenting stress; increase in self-efficacy and social support from pre-training to programme delivery among parent assistants

Leung, Tsang, & Heung (2014)
Healthy Start Home Visit Programme – School-based Model

- Cluster randomized controlled trial
  - Intervention – 10 preschools (102 participants)
  - Control – 10 preschools (122 participants)
- Interim results based on 19 preschools (213 participants)
  - Intervention – 9 preschools (91 participants)
  - Control – 10 preschools (122 participants)
- Data analysis based on participants with complete data
- Final analyses will be based on 20 preschools using intention-to-treat analysis
Healthy Start Home Visit Programme – School-based Model

- Interim results
  - Decrease in child behavior problems, sedentary activities and parenting stress among participants
  - Improvement in child learning, frequency of tooth brushing, healthy feeding practices and parent self-efficacy among participants
  - Decrease in child behaviour problems, and parenting stress; increase in self-efficacy and social support among parent assistants
SELECTIVE PROGRAMME - PARENT AND CHILD ENHANCEMENT (PACE)

- Target clients: disadvantaged families with 2-year-old children not attending nursery classes
- Goals
  - To promote child development in psychosocial and cognitive areas
  - To equip parents with the skills to enhance the development of their children
- Delivery format
  - Group meetings in social service centres
    - First hour – child learning activities
    - Second hour – parent training
- Funded by Public Policy Research Fund

Leung, Tsang & Lo (2015)
**Parent and Child Enhancement (PACE)**

- Randomized controlled trial design
  - Intervention group – 76 parent-child dyads
  - Control group – 73 parent-child dyads
  - Drop-out rate – 9.2% \((n = 7)\)
  - 84.1% \((n = 58)\) attended at least 80% of the sessions
  - 89.8% \((n = 62)\) attended 75% of the sessions
  - Analysis by intention-to-treat

Leung, Tsang & Lo (2015)
**Parent and Child Enhancement (PACE)**

- **Results**
  - Improvement in child learning and prosocial behaviour
  - Decrease in parental stress and child behaviour problems
  - Gains maintained at three-month follow-up
  - At 18-month follow-up, intervention group participants were able to maintain their programme gains

Leung, Tsang & Lo (2015)
Originally designed as an intervention programme for oppositional and defiant children (Hembree-Kigin & McNeil 1995)

A parent treatment programme for parents with problems in parenting, with children aged 2 to 8

Child abuse prevention programme

Funded by The Hong Kong Jockey Club Charities Trust

Services provided by Tung Wah Group of Hospitals
THE PARENT-CHILD INTERACTION THERAPY (PCIT)

- **Target clients** - oppositional and defiant children aged 2 to 7
- **Goals**
  - Improve the quality of the parent-child relationship
  - Change parent-child interaction patterns
- **Delivered in social service centres**
  - Individual programme
  - Therapist coaching parents behind one-way mirror with ear-bug equipment in vivo situation
THE PARENT-CHILD INTERACTION THERAPY (PCIT)

- Child Directed Interaction
  - PRIDE
    - Praise
    - Reflection
    - Imitation
    - Description
    - Enthusiasm
- Parent Directed Interaction
The Parent-Child Interaction Therapy (PCIT)

- Randomized controlled trial design
- 111 target parents with children aged between 2 and 7 years old
  - Intervention group - 54 parent-child dyads
  - Control group - 57 parent-child dyads
- Analysis by intention-to-treat
- Results
  - Decrease in child behaviour problems
  - Decrease in parenting stress, negative emotion, and negative parenting practices
  - Increase in positive parenting practices
  - Gains maintained three months after programme completion

Leung, Tsang, Sin & Choi (2014)
Indicated Programme - Happy Parenting Programme

- Target participants – parents with preschool children with developmental disabilities attending/waiting for rehabilitation services
- Goals
  - To reduce child behaviour problems
  - To decrease parenting stress and dysfunctional parenting strategies
- Delivered in Early Education and Training Centres
- Developed with Heep Hong Society

Leung, Chan, Lam, Yau, & Tsang (2016)
Happy Parenting Programme

- Randomized controlled trial design
- Participants – 120 parents
  - Intervention group – 62 parents
  - Control group – 58 parents
- Analysis by intention-to-treat
- Results
  - Decrease in child behavior problems, parental stress and dysfunctional parenting practices
  - Gains maintained three months after programme completion

Leung, Chan, Lam, Yau, & Tsang (2016)
INDICATED PROGRAMME - POLY KIDS PROGRAMME

- Target clients – parents of preschool children with developmental delay
- Goals:
  - Equip parents with the skills and knowledge to promote the cognitive, language, psychosocial, gross motor, and fine motor skills development of their children with developmental delay
  - Promote the cognitive, language, psychosocial, gross motor, and fine motor skills development of children with developmental delay through empowering the parents
  - Reduce the stress of parents of children with developmental delay

Cynthia Leung, Shirley Leung, Dustin Lau, Cynthia Lai, Tamis Pin
POLY KIDS PROGRAMME

- 16-session programme delivered by educational psychologist, speech therapist, occupational therapist and physiotherapist
- Content
  - Promoting parent-child relationship
  - Behaviour management
  - Learning
  - Language
  - Fine and gross motor skills
- Funded by Food and Health Bureau
POLY KIDS PROGRAMME

- Randomized controlled trial design
- Participants – 218 parents
  - Intervention group – 107 parents
  - Control group – 111 parents
- Analysis by intention-to-treat
- Results
  - Improvement in child learning and decrease in child behavior problems
  - Improvement in expressive language (interim analysis)
IMPLICATIONS FOR SERVICES AND SCHOOL/EDUCATIONAL PSYCHOLOGISTS
**PARENTING AS EFFECTIVE INTERVENTION**

- Theoretically relevant and empirically active – parenting as important variable in developmental pathway
- High in predictive power and in causal plausibility – effectiveness of parent training programs
- Potent and generative
- Modifiable in a cost-effective way

Vitaro & Tremblay (2008)
IMPLICATIONS FOR SERVICES

- Cross-sectoral and multi-disciplinary collaboration
- Integration of parent training programmes in a tiered system for supporting children with diverse learning needs
- Training and quality assurance
- Evidence-based practice
IMPLICATIONS FOR EDUCATIONAL/SCHOOL PSYCHOLOGISTS

- Schools as strategic places to provide parent training (Gross & Grady, 2002)
  - Schools have access to parents
  - Schools are accessible to parents
  - Schools and parent training programmes share the same goal of promoting child development
  - No stigmatization
IMPLICATIONS FOR EDUCATIONAL/SCHOOL PSYCHOLOGISTS

- Programme development and evaluation
- Programme delivery
- Support and back-up other school personnel to deliver the programme
- Recommending evidence-based programmes to schools
- Collaboration between university and frontline psychologists, working with social service agencies and schools, working with social workers and teachers
THANK YOU