Texas Agency 2

Working to improve the lives of Children, Families & Communities

Evaluation Report 2017 - 2018Nurturing Parenting Program 5-19



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Introduction

This Texas agency is a voluntary, strength-based home visiting program that provides services intended to enhance the abilities of parent/caregivers to protect their children from abuse/neglect. The program provides parental education to ensure independent and improved family functioning through home-based services and by connecting the family to community resources. This program puts children first by providing families with intervention, referral, support and training.

This report provides program evaluation results for the use of the *Nurturing Parenting Program 5-19* for clients referred by the Department of Family Protective Services from November 2017 to August 2018.

Nurturing Parenting

The *Nurturing Parenting Programs 5-19* are family-centered trauma-informed and designed to build nurturing parenting skills as an alternative to abusive and neglecting parenting and child-rearing practices. The long-term goals are to prevent recidivism in families receiving social services, lower the rate of multi-parent teenage pregnancies, reduce the rate of juvenile delinquency and substance abuse, and stop the intergenerational cycle of child abuse by teaching positive parenting behaviors. The *Nurturing Programs* target all families at risk for abuse and neglect with children birth to 18 years and include primary prevention, secondary prevention, and tertiary (treatment) programming.

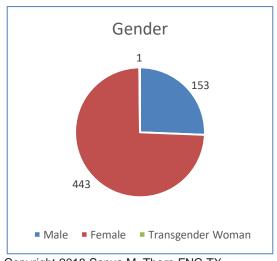
Evaluation and Data Analysis

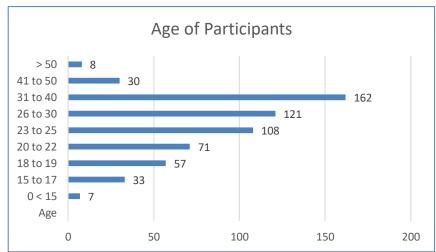
The evaluation and analysis of *Nurturing Parenting 5-19* includes a pre-test and post-test using the AAPI Assessment Tool.

Assessment Tool	Description
Adult Adolescent	The AAPI is designed to assess the parenting and child rearing attitudes of adult and
Parenting Inventory	adolescent parent and pre-parent populations. Inventory responses provide an index of
(AAPI)	risk for practicing behaviors that are known to be associated with child abuse and neglect.
	The two versions of the AAPI (2.0 & 2.1) contain the same questions.

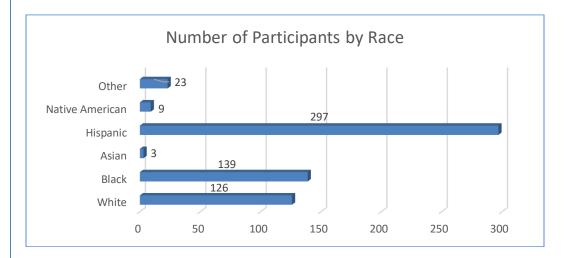
Demographics

A total of 422 participants completed the AAPI 2.0 Pre-Test between November 2013 through July 2017. An additional 175 participants completed the AAPI 2.1 Pre-Test between July 2016 through August 2018. In total, this means that 597 participants completed the Pre-Assessment as they began their participation in the agency's *Nurturing Parents Program* 5-19 between November 2013 through August 2018. Demographic data for this combined group are presented below.

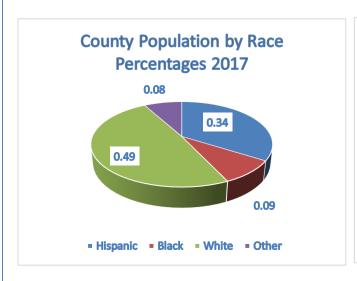


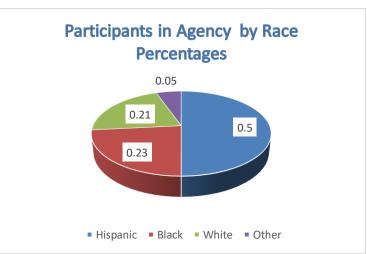


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Although all of the participants in this agency's program (located in Travis County) are received through the referral process from the Department of Family and Protective Services (DFPS), it is interesting to compare the participants included by percentages of the group to the percentages of the general population in Travis County itself as reported by the 2017 census (https://www.census.gov/quickfacts/fact/table/traviscountytexas/PST045217). This comparison is not meant to be a reflection on the work of the agency but as a way to note some disproportionality between these two groups (general population vs. participants in Texas Agency 2). Notably, Black and Hispanic (those of color) are referred for services at rates higher than their percentage in the general population of Travis County.





Adult-Adolescent Parenting Inventory (AAPI-2.0 & 2.1)

The AAPI-2.0 and AAPI 2.1 are designed to assess the parenting and child rearing attitudes of adult and adolescent parent and pre-parent populations. Inventory responses provide an index of risk for practicing behaviors that are known to be associated with child abuse and neglect. The inventory provides a risk index for five specific parenting and child rearing behaviors including: (1) Expectations of Children, (2) Parental Empathy towards Children's Needs, (3) Use of Corporal Punishment, (4) Parent-Child Family Roles, and (5) Children's Power and Independence (explained below).

Each of the five subscales is scored and then plotted on the AAPI-2 Parenting Profile providing an index of risk for abusive and/or neglecting behaviors. The risk scores are presented in three categories including high risk, medium risk, and low risk to child maltreatment. This risk index also provides direction for design and use of the *Nurturing Parent Program* as a program to "treat" abusive and neglecting parent-child or parent-teen dysfunctional interactions through a

process called "re-parenting." In this re-parenting, parents increase their understanding of the abuse and neglect they experienced as children and how these parenting beliefs and patterns were passed on to their children.

Using Research for Program Delivery

With over 30 years of research by Dr. Stephen Bavolek, the *Nurturing Parent Program* recognizes that, as a result of our early and continual positive and negative childhood experiences, a belief system forms which guides us in making choices for our behavior. Over time, these experiences normalize our thought processes which can form healthy and and/or diseased cellular networks. These networks shape our behavior. Assessment is therefore most effective when designed to gather information at the beginning and end of programs with parents that assess long standing parenting habits and beliefs and any changes after the intervention of the *Nurturing Parent Program*. The AAPI is designed and validated to demonstrate these belief systems and changes. Using the initial assessment, agencies and facilitators can create effective parenting interventions that are designed to build positive, nurturing parenting behaviors. Agency reports and statistical analysis can aid in interpretation of the inventory assessments and group program data as groups begin the *NPP*. After the standard 16-week program participation, the combination of pre and post-test measures can show changes in belief systems that shape behaviors.

"At first I was angry that I had to do this class. I was even angry I had to see a therapist. Coming to these classes has been hard yet rewarding. I learned how to discipline my child without having to hit them. Because I got whooped [as a child], I don't have to go down the road my parents I would take this class again because it helped me in ways I never thought it could."

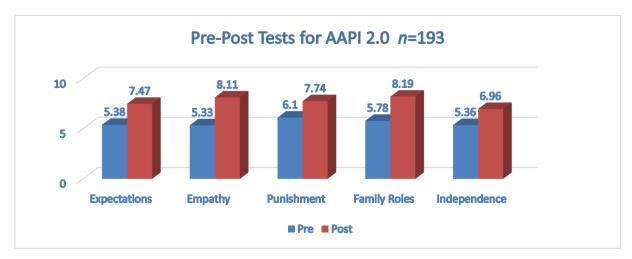
Matched Pre and Post Assessments for Program Results

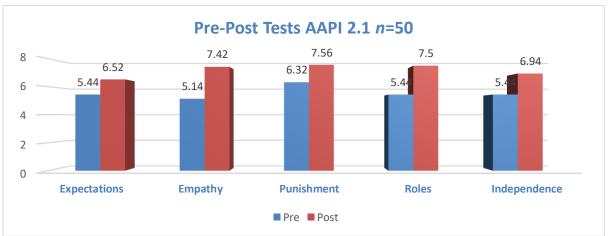
Best results of the service or program delivery are best measured when participants complete both the pre and the post assessment. Unfortunately, with the data available there were less than 50% completed sets of data for participants; 193 from the AAPI 2.0 initial group of 422 and 53 participants from 175 participants in the AAPI 2.1 assessment group (246 out of 597), with the acknowledgement that some participants are still in programs or have just begun the sessions.

AAPI-Constructs		
Subscale (Construct)	Description	
Expectations of Children	Assesses parents' appropriate and inappropriate expectations of their children. Expectations that exceed the child's developmental capabilities are inappropriate.	
Parental Empathy Towards Children's Needs	Assesses parents' level of empathy for their children's needs. Low levels of parental empathy would include a fear of spoiling their child.	
Use of Corporal Punishment	Assesses parental beliefs in the value of physical punishment. An example of a strong belief in the value of corporal punishment would be that hitting, spanking, and slapping children is appropriate and required.	
Parent-Child Family Roles	Assesses reverse and appropriate family roles. An example of a reverse family role is when a parent expects their child to make life better by providing love and comfort. An example of an appropriate family role is when a parent allows their child to express developmental needs.	
Children's Power and Independence	Assesses the restrictions and value of power and independence that is placed on the child. An example of restricted power is when a parent tends to view children with power as threatening. An example of valued power is when a parent places high-value on children's ability to problem solve.	

The data from the completed assessments (participants completing a pre and a post-test overtime do show 1) significant progress for improvement on the subscales (constructs) measured and 2) a significant decrease in risk index score for child abuse or neglect as shown in the following sections.

"In this program, I've learned how to express empathy to my children and between my children. I've learned it's okay to let my children express their feelings in any and all situations."



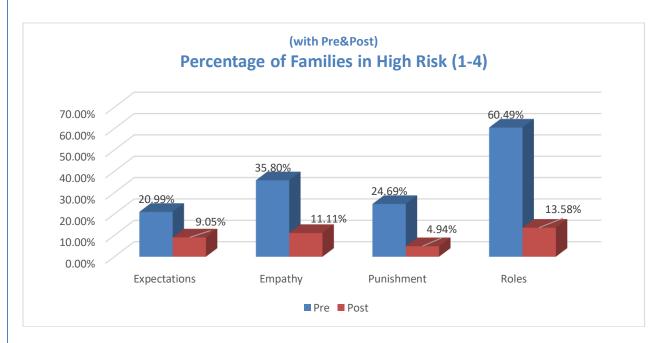


A t-test was conducted on each data set (AAPI 2.0 and AAPI 2.1) to determine if the observed increases in mean scores on the subscales in each data set were statistically significant. The tests revealed that the observed increases in mean scores were significant for all subscales. Using a standard of significance as $p \le .001$, the p = .004 (AAPI 2.0) and p = .001 (AAPI 2.1). This means we can say with 99.9% certainty that the increases in mean scores on the subscales were not merely due to chance. Moreover, the medium effect sizes for the improvements on each subscale suggest that the statistical significance found for those subscales' gains was not merely due to a factor such as large sample size. In other words, the program very likely had an impact on clients' level of risk/abuse in each area assessed by the AAPI.

Index of Needs - Scores

A risk index score was calculated on each subscale for the initial assessments. A score of 1-4 indicates that the participant is at high risk for child abuse and/or neglect. A score from 5-7 indicates that the participant is at medium risk and a score from 8-10 indicates that the participant is at low risk for child abuse and/or neglect. The figure below shows the average subscale risk index scores for initial and final assessments on the four most critical indicators — inappropriate expectations, lack of empathy, attitudes towards use of corporal punishment and parent-child roles. These four critical areas demonstrate that the percentage of families that initially scored in the high-risk area of the index decreased after the intervention with the *Nurturing Parent Program* used by the _____ agency.

"During the course of this program, I have learned many things about myself, my family and how we interact... I feel like I have been better able to work through many self-doubts and misinterpretations.... I feel like I have a better handle on what I should be doing as both a mother and as an adult. Thank you."



A standard *t-test* to check for a statistical measure of significance of these changes did not meet the criteria of $p \le .001$. However, this graph itself does demonstrate that there is improvement in outcomes in moving participants out of the high-risk index of needs on the four areas of need, although there is still room for improvement in outcomes.

Summary

243 participants completed an initial and final assessment of the AAPI-2.0 or AAPI 2.1 during their participation in the NPP 5-19 program. The clients tended to decrease their level of risk in all categories of child abuse/neglect. Additionally, the majority of clients improved their scores on each subscale from pretest to posttest.

Highlights

- There was an increase in empathy (shown by a decrease in "lack of empathy") between the pre and post assessment. Empathy has been shown to be critical in good parenting. Dr. Bavolek, the developer of the *Nurturing Parent Program* defines empathy as two-fold: (1) the affective capacity to share in another's feelings, by first valuing self and (2) the cognitive ability to understand another's feelings, needs and perspective by first understanding your feelings, needs and perspective. Through the *NPP 5-19* participants are better able to recognize their own feelings, value self, increase their self-awareness and learn to value and provide nurturing care to their children.
- There was an increase in alternatives to corporal punishment which means there was an increase in alternatives to creating fear, anxiety and a sense of powerlessness in their children's bodies as a means to force them into submission to behave a certain way. Participants have more appropriate forms of discipline that create an environment of cooperation and culture of nurturing.
- The biggest increase seen by participants was in the role construct. This means participants developed their adult voice and power to make the best decisions for themselves and their children and they understand the purpose for routines, consistency and predictability when raising children.

Recommendations

• Increase the number of completed assessments in order to include a pre and post tests for all program participants. This will allow for better delivery of services and assessment of outcomes.

•	During data entry, under Programs, facilitators will enter their name.
•	When entering the Post-Test (Form B) data, use the Agency Client ID column to enter the number of sessions (or
	home visits) completed for that participant. We would like to begin capturing the number of face-to-face
	services a family receives.
•	Increase the number of Fathers served by the program.
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