Working in Partnership with Families:
A Model of the Processes of Helping

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Plan for Presentation

Need for a Model.

Family Partnership Model.

Implications.

Applications of the Model.

Illustrate the evidence base.
Need for a Model

Few models easily accessible to all.

Implicit expert models widespread.

Psychosocial problems extremely prevalent.

Service dissatisfaction.

Most vulnerable have least service access.
Need for a Model

High refusal rates.

High drop out rates.

Low adherence to advice.

Prevention/promotion crucial by all workers.
Theoretical Basis of Partnership Model

Working in Partnership with Parents: The Parent Adviser Model.
London: Harcourt Assessment.
Intended Outcomes of Helping

Do no harm

Help parents identify, clarify and manage problems.

Enable parents (e.g. self-efficacy).

Enable development and well-being of children.

Facilitate social support and community development.

Enable service support.

Compensate where necessary.

Improve the quality of care.
Family Partnership Model

Helper Qualities → Helper Skills

Parent Characteristics

Helping Process → Partnership

Outcomes

Service and Community Context

Construction Processes

South London and Maudsley NHS Foundation Trust
The Helping Process

RELATIONSHIP BUILDING

EXPLORATION

UNDERSTANDING

GOAL SETTING

STRATEGY PLANNING

IMPLEMENTATION

REVIEW

END

South London and Maudsley NHS Foundation Trust
Family Partnership Model

Helper Qualities  Helper Skills  
Parent Characteristics  Helping Process  Outcomes

Service and Community Context

Construction Processes
Partnership

Working together with active participation/involvement

Sharing decision making power

Recognition of complementary expertise and roles.

Sharing and agreeing aims and process of helping

Negotiation of disagreement

Mutual trust and respect

Openness and honesty

Clear communication
Family Partnership Model

Helper Qualities → Helper Skills → Helping Process → Outcomes

Parent Characteristics

Partnership

Service and Community Context

Construction Processes
Helper Interpersonal Skills

Attention/Active listening
Prompting and exploration
Empathic responding
Enthusing and encouraging
Enabling change in ideas
Negotiating
Problem management
Family Partnership Model

Helper Qualities

Helper Skills

Parent Characteristics

Helping Process

Partnership

Outcomes

Service and Community Context

Construction Processes
Helper Qualities

- Respect
- Genuineness
- Empathy
- Humility
- Quiet enthusiasm
- Personal integrity
- Intellectual and emotional attunement
- Technical expertise
Family Partnership Model

Helper Qualities

Helper Skills

Parent Characteristics

Helping Process

Partnership

Outcomes

Service and Community Context

Construction Processes
Parent Characteristics

Nature of problems

Barriers to engagement

Motivation to change

Attitudes and beliefs about services

Expectations of outcome

Socioeconomic circumstances

Culture
Family Partnership Model

Helper Qualities

Helper Skills

Parent Characteristics

Helping Process

Partnership

Outcomes

Service and Community Context

Construction Processes
Service and Community Context

Support for staff

Characteristics of service

Characteristics of population

Geographical characteristics
Parallel Processes: Platinum Rule

“Do unto others as you would have others do unto others.”

Pawl (1994-95)
Family Partnership Model

- Helper Qualities
- Helper Skills
- Parent Characteristics
- Helping Process
- Partnership
- Outcomes

Service and Community Context

Construction Processes
Construing

All take in and process information for meaning

All construct a model of the world

In order to anticipate and adapt

Model derives from individual experience

Unique to the individual

Not necessarily conscious or verbal

Constant process of testing, clarification and change

Social interaction determined by constructions of others
Implications of Model

- Personnel selection
- Training
- Management/supervision
- Selection and training of managers
- Service design
- Process research
Family Partnership Training: Style

Designed on the Partnership Model
Reflecting/demonstrating the Partnership Model
Conceptual and skills focused
Interactive throughout
Based upon Socratic questioning
People Trained

Health Visitors, Paediatric and School Nurses

Therapists: Speech, Physios, & OTs

Paediatricians, Psychologists, Psychotherapists

Teachers: All Ages and Special Needs

Early Years and Child Care Staff, Youth Workers

Social Workers and Educational Welfare Officers

Parents and Voluntary Agency Staff
Family Partnership Model
Applications

Childhood Disability

Adult Disability

SCBU Follow-up for Very Low Birth Weight

Preschool Emotional & Behavioural Problems

Promotion of Child Mental Health

Prevention of Abuse and Neglect

School and Community Development
## EEPP Satisfaction with Training

(n=54)

<table>
<thead>
<tr>
<th>Category</th>
<th>Mean</th>
<th>(sd)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Style (1-4):</td>
<td>3.6</td>
<td>(0.4)</td>
</tr>
<tr>
<td>Content (1-5):</td>
<td>4.2</td>
<td>(0.4)</td>
</tr>
<tr>
<td>Confidence (1-4):</td>
<td>3.3</td>
<td>(0.5)</td>
</tr>
<tr>
<td>Skills gain (1-5):</td>
<td>4.3</td>
<td>(0.5)</td>
</tr>
<tr>
<td>Total satisfaction (1-5):</td>
<td>4.5</td>
<td>(0.6)</td>
</tr>
</tbody>
</table>
Core Course Feedback

To what extent would you recommend the course to other colleagues?

Highly recommend: 187 68%

Recommend: 73 26.5%

Not sure: 14 5.1%

Unlikely to recommend: 1 0.4%

Would not recommend: 0 0%
Core Course Feedback

To what extent did you feel respected during the training?

Very much so: 199 72%
A lot: 71 26%
A little: 5 2%
Not at all: 0 0%
Effects of Training: Self-efficacy (n=26)

Pre-training mean 55.2 (p<0.0001)
Post-training 29.4

15 items of 19 changed significantly.

15 waiting for training: no significant change over same period; no items changed significantly.

(Rushton & Davis, 1992)
## Effects of Training: Empathy

<table>
<thead>
<tr>
<th></th>
<th>Pre-training</th>
<th>p</th>
<th>Post-training</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trained (n=26)</td>
<td>4.0</td>
<td>0.005</td>
<td>5.0</td>
</tr>
<tr>
<td>Untrained (n=15)</td>
<td>4.1</td>
<td>ns</td>
<td>4.1</td>
</tr>
</tbody>
</table>

(Effect size=0.50)

Rushton and Davis (1992)
## EEPP Families In Need (UK)

<table>
<thead>
<tr>
<th></th>
<th>HV Judgment</th>
<th>Research Judgment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intervention</td>
<td>62 (55%)</td>
<td>77 (68%)</td>
</tr>
<tr>
<td>Comparison</td>
<td>25 (24%)</td>
<td>73 (71%)</td>
</tr>
</tbody>
</table>
Frequency Rated by Trained and Untrained Health Visitors

<table>
<thead>
<tr>
<th>Event</th>
<th>Trained</th>
<th>Untrained</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mental health problems (p&lt; 0.001)</td>
<td>19</td>
<td>3</td>
</tr>
<tr>
<td>Marital discord (p= 0.008)</td>
<td>23</td>
<td>6</td>
</tr>
<tr>
<td>Social isolation (p&lt; 0.001)</td>
<td>30</td>
<td>4</td>
</tr>
<tr>
<td>Financial problems (p&lt; 0.001)</td>
<td>19</td>
<td>1</td>
</tr>
<tr>
<td>Adverse life events (p= 0.041)</td>
<td>15</td>
<td>6</td>
</tr>
</tbody>
</table>
## Accuracy of Need Identification

<table>
<thead>
<tr>
<th>Country</th>
<th>Intervention</th>
<th>Comparison</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cyprus</td>
<td>55%</td>
<td>67%</td>
</tr>
<tr>
<td>Finland</td>
<td>61%</td>
<td>68%</td>
</tr>
<tr>
<td>Greece</td>
<td>78%</td>
<td>32%</td>
</tr>
<tr>
<td>Serbia</td>
<td>53%</td>
<td>47%</td>
</tr>
<tr>
<td>UK</td>
<td>66%</td>
<td>32%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>62%</strong></td>
<td><strong>49%</strong></td>
</tr>
</tbody>
</table>
# Mothers’ Satisfaction with EEPP Service

<table>
<thead>
<tr>
<th>Country</th>
<th>Intervention</th>
<th>Comparison</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cyprus</td>
<td>33</td>
<td>38</td>
<td>0.003</td>
</tr>
<tr>
<td>Finland</td>
<td>20.5</td>
<td>21</td>
<td>0.2</td>
</tr>
<tr>
<td>Greece</td>
<td>13</td>
<td>20</td>
<td>0.0002</td>
</tr>
<tr>
<td>Serbia</td>
<td>16</td>
<td>19</td>
<td>0.08</td>
</tr>
<tr>
<td>UK</td>
<td>20</td>
<td>25</td>
<td>0.03</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>20.5</strong></td>
<td><strong>25</strong></td>
<td></td>
</tr>
</tbody>
</table>

Average effect size = 0.4
Random Parent Survey (%) n=50

<table>
<thead>
<tr>
<th></th>
<th>Pre-Training</th>
<th>Post-Training</th>
</tr>
</thead>
<tbody>
<tr>
<td>Respected</td>
<td>64</td>
<td>88</td>
</tr>
<tr>
<td>Understood</td>
<td>54</td>
<td>82</td>
</tr>
<tr>
<td>Supported</td>
<td>62</td>
<td>86</td>
</tr>
<tr>
<td>Listened to</td>
<td>56</td>
<td>84</td>
</tr>
<tr>
<td>Important</td>
<td>46</td>
<td>80</td>
</tr>
</tbody>
</table>

Parent felt Very much:

Rose Kruze (2007) Personal communication.
Child, Youth and Family Health, Townsville, Queensland.
## Random Parent Survey (%) n=50

<table>
<thead>
<tr>
<th>Professional Very:</th>
<th>Pre-Training</th>
<th>Post-Training</th>
</tr>
</thead>
<tbody>
<tr>
<td>Honest</td>
<td>69</td>
<td>90</td>
</tr>
<tr>
<td>Interested</td>
<td>72</td>
<td>88</td>
</tr>
<tr>
<td>Trustworthy</td>
<td>74</td>
<td>84</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Relationship:</th>
<th>Pre-Training</th>
<th>Post-Training</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mutually respectful</td>
<td>59</td>
<td>72</td>
</tr>
<tr>
<td>Partnership</td>
<td>47</td>
<td>72</td>
</tr>
<tr>
<td>Helpful</td>
<td>79</td>
<td>86</td>
</tr>
<tr>
<td>Met needs</td>
<td>69</td>
<td>82</td>
</tr>
</tbody>
</table>

Rose Kruze (2007) Personal communication
Oxford Home Visiting Project

131 families randomized.

68 Intervention.

63 Controls (services as usual).

5 risk factors per family on average.

Intention to visit weekly until child aged 12 months.

Average number of visits 41 of 72 intended.
Oxford Home Visiting Project

High refusal rate.
Largely because distrust and misunderstanding of professionals.

12 month Outcomes

Only 3% drop out.

Higher maternal sensitivity and infant cooperativeness in Intervention Group.

Majority of standardised measures favoured Intervention Group.

Increase in protection proceedings (6% vs. 0%)

One death in controls (open verdict)

Health Visitor Views

Very positive about intervention.
Better skilled at relationship building.
More empathic towards the families.
Better at identifying relationship problems.
Weekly supervision crucial.
Intervention had beneficial effects.

Themes from Oxford Post-Service Interviews

Strong initial reservations about the service.

But positive first impressions improving quickly.

Relationships developed and deepened.

Benefits: self-confidence, helpful advice, parenting skills, leaving violent relationships, more in control.

Improved attitudes and relationships with other professionals.

Kirkpatrick, Barlow, Stewart-Brown & Davis (2004)
Parenting Stress Index

<table>
<thead>
<tr>
<th></th>
<th>Pre</th>
<th>Post</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intervention</td>
<td>100.4</td>
<td>(p=0.0001) 87.7</td>
</tr>
<tr>
<td>Comparison</td>
<td>104.3</td>
<td>(p=0.65) 102.9</td>
</tr>
</tbody>
</table>

Effect Size: 0.59
Clinical caseness cut off: 90+

See Davis & Spurr (1998)
### Maternal Self-esteem

<table>
<thead>
<tr>
<th></th>
<th>Pre</th>
<th>Post</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intervention</td>
<td>1.92</td>
<td>(p=0.008)</td>
</tr>
<tr>
<td>Comparison</td>
<td>2.15</td>
<td>(p=0.08)</td>
</tr>
</tbody>
</table>

**Effect Size:** 1.00

See Davis & Spurr (1998)
<table>
<thead>
<tr>
<th></th>
<th>Pre</th>
<th>Post</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intervention</td>
<td>1.94</td>
<td>1.54</td>
</tr>
<tr>
<td></td>
<td>(p=0.0001)</td>
<td></td>
</tr>
<tr>
<td>Comparison</td>
<td>2.14</td>
<td>2.22</td>
</tr>
<tr>
<td></td>
<td>(p=0.80)</td>
<td></td>
</tr>
</tbody>
</table>

Possible score from 0-6

See Davis & Spurr (1998)
## Child Behaviour Checklist

<table>
<thead>
<tr>
<th></th>
<th>Pre</th>
<th>Post</th>
<th>Effect Size</th>
<th>Clinical Caseness Cut Off</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Intervention</strong></td>
<td>70.5</td>
<td>59.5</td>
<td>0.79</td>
<td>64+</td>
</tr>
<tr>
<td>Significance</td>
<td>(p=0.0001)</td>
<td>(p=0.2)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Comparison</strong></td>
<td>73.1</td>
<td>68.8</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

See Davis & Spurr (1998)
## Home Inventory: Birth To Three

<table>
<thead>
<tr>
<th></th>
<th>Pre</th>
<th>Post</th>
<th>Effect Size:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Intervention</strong></td>
<td>26.9</td>
<td>(p=0.0001)</td>
<td>32.5</td>
</tr>
<tr>
<td><strong>Comparison</strong></td>
<td>28.1</td>
<td>(p=0.15)</td>
<td>26.0</td>
</tr>
</tbody>
</table>

See Davis & Spurr (1998)
Suffering

Suffering is not a question that demands an answer;
It is not a problem that demands a solution;
It is a mystery that demands a presence.

Anon.
For Further Information

www.cpcs.org.uk

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