

CLINICIAN-PARENT RELATIONSHIPS:

EFFECTIVE PRACTICES FOR SUPPORTING
PARENT ENGAGEMENT AND COMMUNICATION

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- **UCEBT Postdoctoral Fellow** (current)
- **PhD in psychology** from Utah State University (2017-2023)
- **Pre-doctoral internship** at Johns Hopkins All Children's Hospital (2022-2023)
- **Clinical specializations/interests**
 - Early childhood
 - Childhood psychological evaluations
 - Autism/NDDs
 - Disruptive/challenging behaviors
 - Behavioral parent training

ACCURACY, UTILITY, AND RISKS STATEMENT

This presentation discusses the research regarding factors influencing parental engagement, evidenced-supported strategies for increasing parental engagement, and outcomes of parental engagement in the service provisions of children and adolescents.

Misapplication of the strategies could result in poor outcomes.

PROGRAM NOTICES

Conflicts of Interest:

None.

Commercial Support:

None.

AGENDA

1. What is a clinician-parent relationship?

2. Importance of clinician-parent relationships

3. Factors influencing parental engagement and motivation

4. Outcomes of parental involvement

5. Strategies for increasing communication and engagement

6. Measuring Engagement

Question:

What role/context do you
engage with
parents/caregivers?



WHAT IS A CLINICIAN-PARENT RELATIONSHIP?

DEFINITION

Collaborative and supportive relationship between the child's service provider and parent / caregiver(s) to **encourage therapeutic progress.**

RESPONSIBILITIES

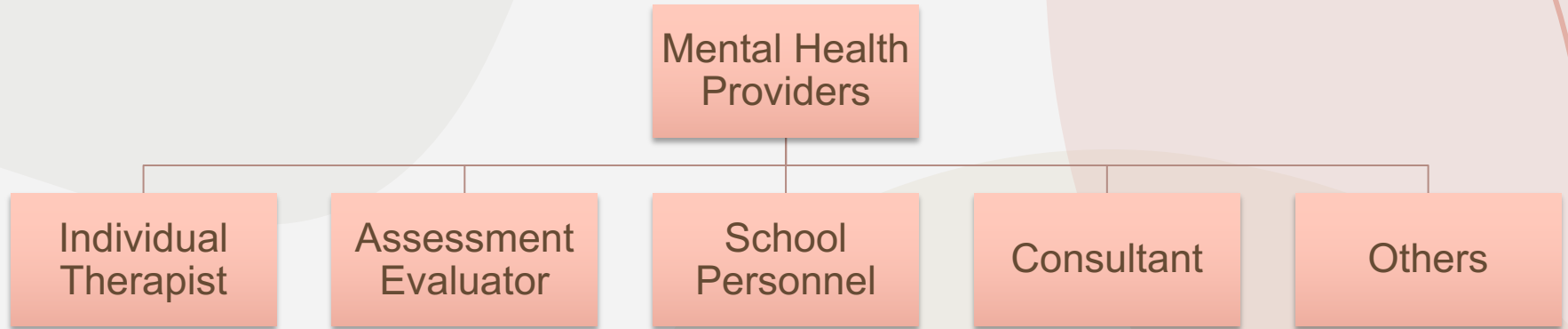
Parent

- **Initiate** services
- Child **attendance**
- **Communicate** family and personal needs
- **Present** for sessions
 - **Support** and **generalization** at home

Clinician

- **Support** for child
- Therapy **goals** and treatment **planning**
- **Insight** and **perspective**
- **Structure**
- Evidenced-based **recommendations**
- **Support** for family
- **Inclusion** of family members

ROLES AND CONTEXTS





IMPORTANCE OF CLINICIAN-PARENT RELATIONSHIPS

COLLABORATION AND ENGAGEMENT



CHILD ATTENDANCE

Unique role in obtaining
and **facilitating**
attendance in treatment



OPPORTUNITIES TO ENGAGE

More opportunities for
parents to engage when
present



PARENT ATTENDANCE

May bring children and be
physically present but still
not participate in session
activities, discussions,
and/or homework

GENERALIZATION OF SKILLS AND STRATEGIES

Access to child

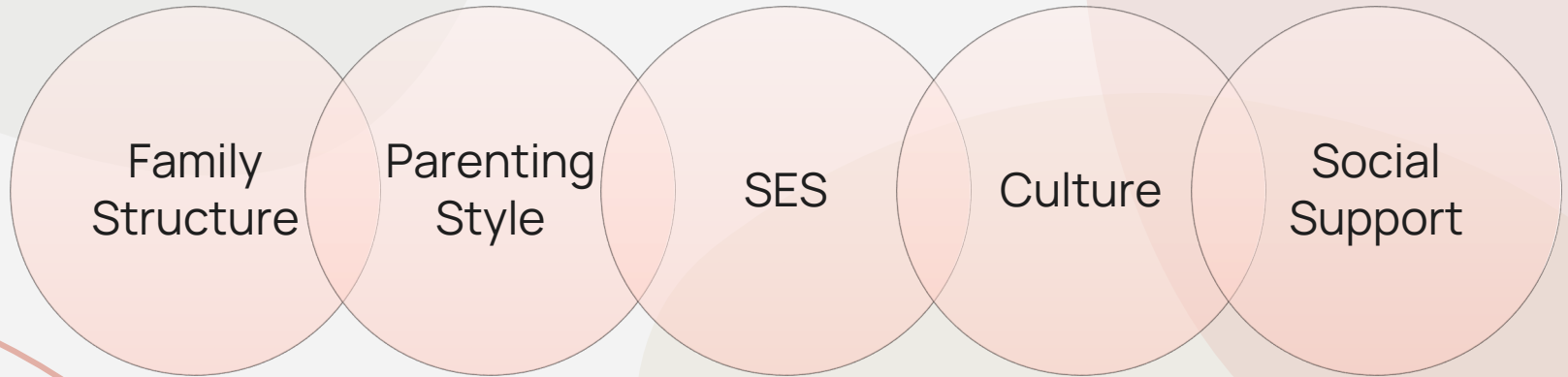
Promote skill acquisition and implementation

Provide in-the-moment feedback

Perspective and insight

Bridge between home and session

SYSTEMIC APPROACH





FACTORS INFLUENCING PARENTAL ENGAGEMENT AND MOTIVATION

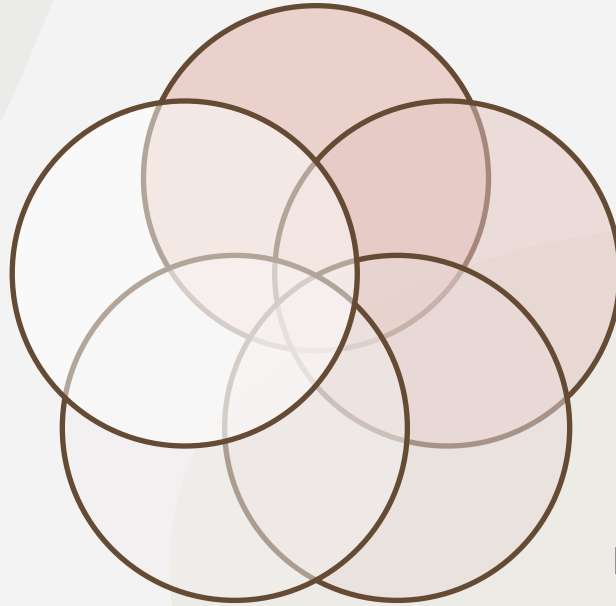
Clinician Factors

**Parent-Clinician
Relationship**

Child Factors

**Parent-Child
Relationship**

**Parent/Caregiver
Factors**



CLINICIAN FACTORS

Access and
Availability

Providing
Opportunities

Anxiety

Therapist
Listening

Rapport
Building

Personality
Characteristics

Emotional
Comfort

Patient
Centeredness

Healing Agent

PARENT FACTORS

Family Characteristics

- Parent's **age**
- **Parental role**
- Parent **personality**
- **Socioeconomic Status**
- **Economic stress**
- Family **stressors**
- **Single parenthood**

Family Processes

- Parental **mental health**
- Relational **conflicts**
- Relationship **quality**
- Household **chaos**
- Current **parenting skills**

Contextual Influences

- Beliefs about **parenting roles**
- **Cultural** factors
- **Help-seeking** beliefs
- Parent **readiness / expectations**
- **Motivation**
- **Locus of control**

CHILD FACTORS

Age

- Parental participation decreases with age

Impairment & Severity Level

- Caregiver strain = competing demands and depleted resources

PARENT-CHILD RELATIONSHIP

Strained Relationship

- **More resistant** to therapy suggestions
- **Pointing out conflicts** may not be beneficial
 - Not emotionally/mentally ready to receive suggestions

Abuse/Neglect from Parent

- **Assess benefits of parent involvement** in therapeutic process
 - Parent involvement may need to be deferred

External Issues

- **Family/Marital problems** = hinder emotional involvement
- **Misusing drugs and/or mental health concerns** = involvement on hold
- **Parental unresolved problems** = settle matters before meeting child's needs

PARENT-THERAPIST RELATIONSHIP

Blame

- Therapist can be the target of blame for resistant parents

Lack of Trust

- Resistance to implementing strategies at home
- Child therapy process

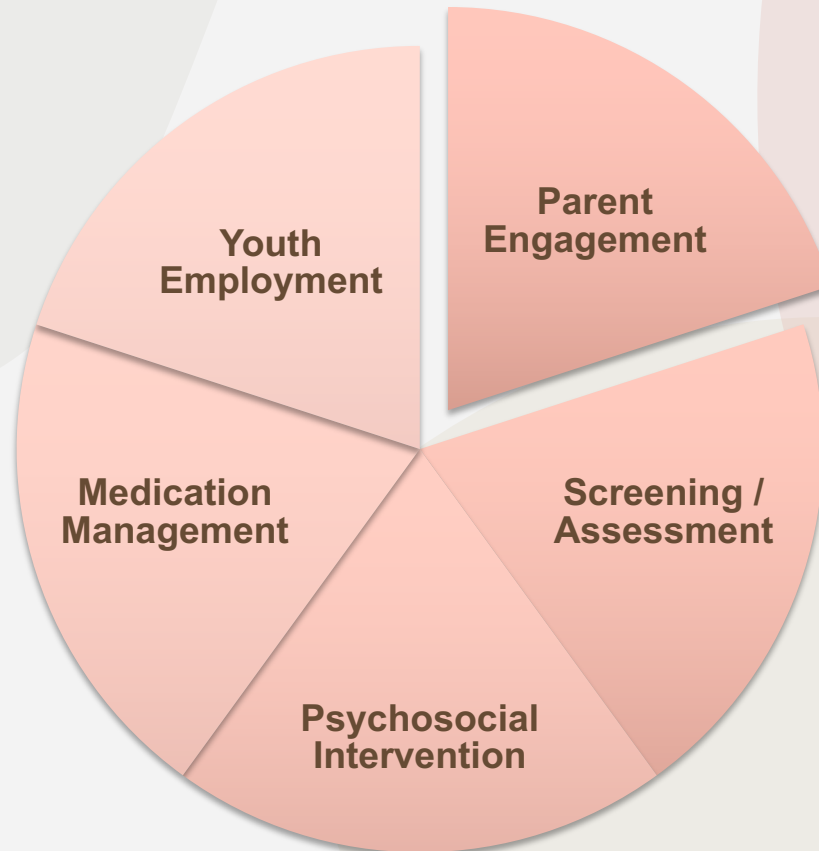
Question:

What factors have you observed to impact parent engagement (positively or negatively)?



OUTCOMES OF PARENTAL INVOLVEMENT

BEST PRACTICE FOR CHILD MENTAL HEALTH



OUTCOMES

Quality and effectiveness of child mental health services

Improved clinical outcomes

- functioning and symptom severity

Stronger treatment engagement

Increase in positive/supportive parenting

- Reduction in harsh/negative and inconsistent parenting

Increased program participation

- e.g., attendance, homework completion, involvement in discussion

Question:

What outcomes have you noticed with positive clinician–parent relationships and increased parent engagement?



STRATEGIES FOR INCREASING ENGAGEMENT AND COMMUNICATION

SELF-DETERMINATION THEORY

Autonomy

Intrinsic motivation

Taking ownership

Freedom of choice

Collaborative goals

Relatedness

Connection and
partnership

Therapeutic alliance

Building rapport

Setting collaborative
goals

Competence

Mastery and challenge

Achievable goals

Experience success

Communicate concerns
and aspirations

EARLY STRATEGIES

Practical and psychological barriers

- Practical (e.g., transportation)
- Attitude/Psychological
 - addressing beliefs about treatment process
 - expectations that treatment will be helpful
 - Motivation to participate

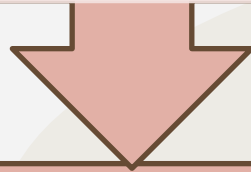
Therapy Techniques

- Motivational interviewing
- Addressing family systems and stress

THERAPEUTIC ALLIANCE

Prioritize Relationships

before disseminating strategies/suggestions



If **limited trust**, provide mild counseling for parents

Reflect feelings

Communicate
with empathy

Avoid power
struggles

Feeling heard
and understood

FAMILY APPROACH

Sharing opinions and asking questions

Providing point of view

Participation in therapeutic activities

Being a “co-provider”

Follow through with home action plan

EMOTIONAL SUPPORT

Limited/mild counseling for parents

- Encouragement and affective support
- Parents become aware of own needs
- Parents gain insight

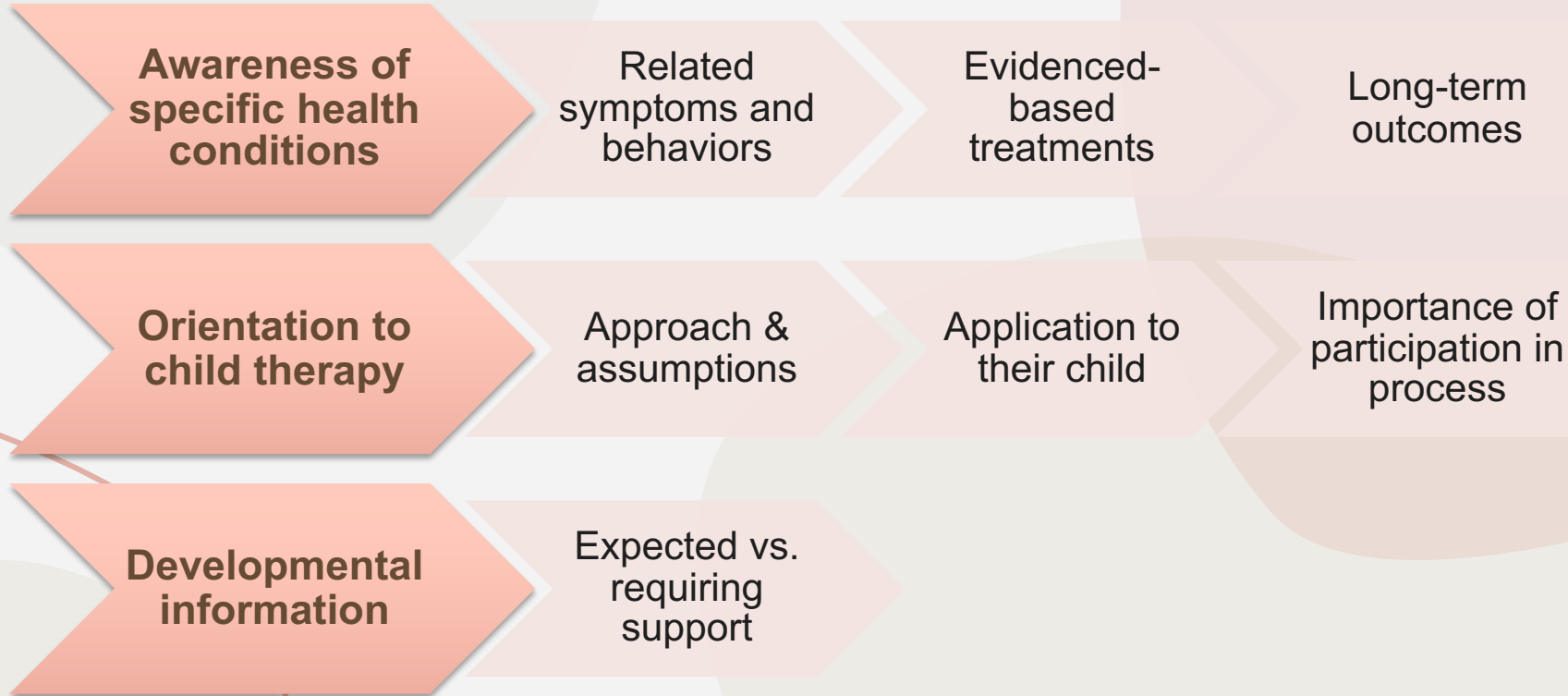
Validation for parents' position

- Do NOT blame parents for their limited engagement and unavailability

Maintain boundaries as the child's therapist

Refer parent to another therapist (if needed)

PSYCHOEDUCATION



EXPERIENTIAL ACTIVITIES



ROLE PLAY & DEMONSTRATE

Engage caregiver in practicing strategies in session



MODELING

Demonstrate strategies for caregivers



THERAPEUTIC GAMES

Include family members in therapeutic games



FACILITATE DISCUSSION

Encourage discussion between caregivers and child while providing support

CONSULTATION

Assess challenges

- Parent-child interactions
- Child difficulties

Provide feedback

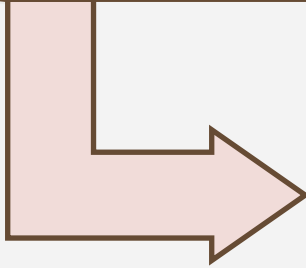
- Coping strategies
- Behavior management
- Effective Interactions

Provide Resources

DIVERSITY CONSIDERATIONS

Culture

- Beliefs
- Values and Priorities
- Roles



Expectations

- Caregiving practices
- Parent-child relationships

Therapeutic Alliance

- Trust and collaboration

Understand Own Perspective

- View of others
- Reactions

Reflective Practice

- Expectations for child and family
- Own expectations versus family's expectations

Reflective Questions

- How are your perspectives the same? Different?
- How might this affect your work with the family?

Question:

What strategies have you found to be effective in engaging parents in services?



MEASURING ENGAGEMENT

ENGAGEMENT INDICATORS

Affective

Positive attitude and affect

Enthusiastic energy

Joy and interest

Alertness

Behavioral

Participation / Collaboration

Self-efficacy

Questions, sharing,
affirmations

Positive body language

Sustained attention

Willingness to try new
things

Cognitive

Beliefs about perceived
need

Awareness of problem

Beliefs about effectiveness

Readiness for change

MEASURE EXAMPLES

Vanderbilt Therapeutic Alliance Scale (VATS)

- adults and adolescents

Therapeutic Alliance Scales for Children, Revised (TASC-r)

- child

Therapeutic Alliance Scales for Caregivers and Parents (TASCP)

- caregivers and therapists

DO YOU HAVE CLIENTS
OR FAMILIES WHO
WOULD BENEFIT FROM
ADDITIONAL SUPPORT?

PARENT TRAINING GROUP

STARTS MARCH 9 | \$420 | VIRTUAL

Decrease Challenging Behaviors & Strengthen the Parent-Child Relationship

This group is for parents who have a child in Kindergarten to 5th grade who has difficulty with:

- Homework
- Safety
- Following directions
- Socializing
- Challenging Behaviors
- Calming down

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- **MAR 12:** Tackling Tough Behaviors and Promoting Household Harmony
- **APR 9:** Balancing Self-Care in Parenthood

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QUESTIONS AND COMMENTS?

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