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Report from the Field: The Results of a Community Needs Assessment for Parent Education in Houston, Texas

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Introduction
The Centers for Disease Control and Prevention (CDC) has identified the establishment of safe, secure, and nurturing relationships (SSNRs) as a critical component in the development of children and the prevention of child maltreatment. Safe relationships allow children to be free from fear and secure from physical or psychological harm. Safe relationships are predictable and stable. Nurturing relationships require parents and caregivers to be available and able to consistently and sensitively respond to and meet the needs of their child. Safe, secure, and nurturing relationships are fundamental to a child’s brain development and have a positive impact on a child’s physical, emotional, social, behavioral, and intellectual abilities. An evolving body of research has demonstrated that parent education can have a positive impact on the establishment of safe, secure, and nurturing relationships. Parent education leads to lower rates of social, emotional, and behavioral problems in children; improved parent-child relationships; lower rates of maternal stress and depression; and lower rates of child maltreatment. Parent education also improves school readiness.

Given the many benefits safe, secure, and nurturing relationships and parent education, CHILDREN AT RISK, a policy and advocacy organization headquartered in Houston, Texas, established the Center for Parenting and Family Well-Being (CPFWB) with the explicit purpose of catalyzing efforts among youth-serving organizations in the greater Houston area to explore the value of adopting evidence-based approaches to parent education. Towards that end, one of the first efforts undertaken by the CPFWB was to design and conduct a needs assessment among relevant stakeholders around parent support programs in Houston. The needs assessment identified how many parents were receiving parent education each year, if parents were receiving evidence-based interventions, the potential impact of implementing evidence-based parent education across the Houston community, and perceptions about anticipated challenges and barriers towards adopting evidence-based parent training in a community wide fashion. The purpose of the assessment was to determine if there was a perceived need and community readiness to provide evidence-based parent education in the community.

Setting
CHILDREN AT RISK (C@R) is a non-profit organization with a mission to serve as a catalyst for change to improve the quality of life for children through strategic research, public policy analysis, education, collaboration
and advocacy. C@R has over 20 years of experience in research, advocacy and driving change at the local and state level. To support its efforts, C@R has developed a Law Advisory Board, a Public Policy Advisory Board, and an Institute comprised of 72 attorneys, academics, and leaders from the public policy, academic and nonprofit community. The three advisory boards provide guidance on all data, research, policy, and law initiatives at C@R. Two representatives from the C@R Institute and Board participated in a Houston-based PREVENT coalition. PREVENT coalitions are designed to facilitate evidence-based primary abuse prevention through education, networking and technical assistance. After a rigorous review of evidence-based child abuse prevention strategies, the Houston-based PREVENT coalition identified the implementation of evidence-based parent education across the community as having the greatest likelihood of reducing rates of child maltreatment. However, the coalition identified that first a needs assessment was necessary to better understand the current services available, gaps in services, and the capacity and willingness of the community to implement evidence-based parent education across the community. With generous funding from local foundations, C@R launched the CPFWB to conduct this assessment.

Methodology
The CPFWB conducted a needs assessment of parent education in Houston and developed a coalition of organizations interested in parent education. The needs assessment was conducted under the guidance of an Academic Advisory Council, which was composed of six academic leaders drawn from a number of academic institutions in Houston. The needs assessment was broadly conceived and included the following elements, each further defined below: key informant interviews, focus groups, data collection, literature review, and a participating stakeholder survey.

Key informant interviews were conducted with nonprofits, governments, parent educators, parents, PTO presidents, hospitals, subject-matter experts, schools, health clinics, and faith-based organizations. Key informants were initially identified through C@R’s network of partners and then each interviewee was asked to identify other organizations and individuals that should be contacted. Over 70 interviews were conducted in person or on the phone.

Three focus groups were conducted with parents and pediatricians. Parents were recruited through a local school. Pediatricians were recruited
through relevant committee meetings during the Texas Pediatrics Society Annual Meeting in Plano, TX.

Data were collected from agencies that provide parent education. Agencies were asked about the curricula they use, the number of parents they reach each year, evaluation protocols, outcomes achieved, greatest challenges and barriers, and what types of support would be most useful for their organization. Data on the curricula used and the number of parents attending classes was compared to registries of evidence-based programs, including the California Evidence-Based Clearinghouse for Child Welfare and the Substance Abuse and Mental Health Administration’s National Registry of Evidence-Based Programs and Practices, to determine the number and the percentage of parents receiving evidence-based programs. Data were also collected from the Texas Department of Family Protective Services and the Department of State Health Services Hospital Discharge Database to assess the potential impact a parenting program would have on child maltreatment rates, foster care placements, and pediatric hospitalizations.

A literature review was conducted to assess the impact of evidence-based parent education. The literature review focused primarily on the well-known, evidence-based parenting program, the Positive Parenting Program (Triple P). The University of Queensland maintains a database of journal articles on Triple P that can be accessed at http://www.pfsc.uq.edu.au/research/evidence/. The University of Queensland database, PubMed, and Google Scholar were used to complete the literature review. Triple P’s programs are based on more than 30 years of research including a randomized clinical trial conducted among South Carolina counties in 2007. Triple P uses a public health approach to organize its primary-, secondary- and tertiary-level prevention efforts; this approach has had a demonstrated impact on decreasing substantiated cases of child maltreatment.\textsuperscript{4} Triple P is a multi-tiered system of parent education programs that aims to judiciously meet the varying levels of parent education needs of parents and families.

In conjunction with the needs assessment, a coalition of organizations that were interested in pursuing evidence-based parent education formed a learning collaborative. The learning collaborative, referred to as the Partnership, included representatives from social service agencies, schools, nonprofits, universities, local government, parent educators, businesses, clinics, and museums. The Partnership met quarterly and provided input on the future direction of parent education in the city of Houston. Each quarterly meeting included a speaker and a group discussion.
The CPFWB also hosted a three-day Parenting and Family Well-Being Forum to raise awareness of the value of evidence-based parenting support programs. The Forum was funded through the American Academy of Pediatrics, and speakers included the President of the American Academy of Pediatrics and the CEO of Prevent Child Abuse America. Over 300 people attended the Forum.

Through the input of the Partnership and the Academic Advisory Council, the CPFWB developed recommendations on the need and role of parent education in the city of Houston. Surveys were distributed to the partners to determine if there was a consensus on how to address parent education in Houston, Texas. The survey questions are available in Appendix A and the recommendations and outcomes are described in the findings section. The results of the needs assessment were shared with the community through a press conference and the release of a report, The State of Parent Education in Houston, TX: An Opportunity to Strengthen Family Well-Being, Prevent Child Maltreatment, and Prepare Children for a Brighter Future.

Findings
The needs assessment of parent education in Houston, Texas revealed that the majority of parents do not attend parenting classes. Providers of parent education identified lack of funding and stigma associated with attending parenting classes as the biggest challenges to reaching more parents each year. However, most of the key informants revealed a need and an interest in making evidence-based parent education more accessible to parents in the community. Other common themes from the key informant interviews included: the need for a marketing campaign to decrease the stigma associated with attending parenting classes, the importance of broadening the focus from child maltreatment to family well-being, and interest in Triple P's multi-tiered approach and strong evidence-base.

Harris County, which encompasses Houston, TX, is home to more than 1 million children, 800,000 parents, and 62,000 newborns each year, yet only 13,000 parents attend parenting classes offered by the primary agencies involved. Furthermore, only one-third of these parents receive a parent education curriculum that is based upon published evidence. Based upon the published literature, the key informant interviews, and the input of the Partnership, the CPFWB developed parent education improvement recommendations.
CPFWB Parent Education Improvement Recommendations:

- There is a need in Houston, Texas for a population-based approach to parent support programs to reach more parents with evidence-based programming.
- The research and academic literature on Triple P is compelling, and the CPFWB anticipates it could have a significant positive impact on the well-being of children, families, and community health indicators.
- There is community support for the implementation of a population-based parenting support system. Triple P provides a model for a population-based approach, but the Triple P program should be integrated with other evidence-based programs that are used or supported by the Greater Houston community.
- Implementing a population-based parenting support system will require substantial infrastructure and coordination between agencies and organizations. Current agencies that provide parenting classes have limited capacity. Training enough providers for a population-based approach will require training of staff at schools, hospitals, medical practices, faith-based organizations, etc.
- More research is needed on how to structure, fund, and prioritize populations to effectively implement a population-based approach to parent education.

The CPFWB Partnership was surveyed to identify if there was consensus on these recommendations. Twenty-eight organizations completed the survey, with a response rate of 70%. Eighty-five percent of the respondents agreed with the recommendations and 15% agreed with minor revisions.

Conclusion

The CPFWB conducted an academically led needs assessment, while simultaneously developing partnerships with organizations that are interested in parent education. We believe that simultaneously forming a partnership and conducting a needs assessment allowed us to create recommendations and develop a path forward that were both supported by research and endorsed by our partners. As a result, the recommendations developed by the CPFWB are being put into action. Through the support of a local Medicaid provider, the CPFWB has launched a Triple P pilot program and trained 80 providers in evidence-based parent education. The providers represent a school district, a faith-
based organization, an after-school program, and two social service agencies and are offering parenting support programs of varying intensities to meet the needs of the community. A small promotional campaign accompanies the pilot. In addition to putting the CPFWB’s recommendations into action, the CPFWB is looking for policy solutions to create a sustainable funding source for parent education, developing guidelines and an infrastructure to scale-up parent education, and evaluating our efforts to continually learn and improve our efforts of bringing social services to scale.

Furthermore, the CPFWB activities provide a real-world example of applying the CDC’s framework for steps to create SSNRs in a community. The CPFWB needs assessment incorporated the key elements of the CDC’s framework including: raising awareness of SSNRs and parent education, partnering with organizations, collecting and using data to inform decisions, implementing evidence-based programs, assessing policies that impact SSNRs, educating policymakers, and promoting positive community norms. The CPFWB has expanded the CDC’s recommendation to promote positive community norms by expanding the conversation from child maltreatment prevention and the creation of SSNRs to a broader framework that includes promotion of good mental health, school readiness, and family well-being. Parent education has many benefits and a broader framework allows for the inclusion of more partners and funding opportunities. The CPFWB will continue to build partnerships, expand the pilot, evaluate its efforts, and advocate for sustainable funding to continuously expand parent education in Houston, Texas and beyond.
Appendix A

Center for Parenting and Family Well-Being Partnership Survey

1. Overall, do you agree with the CPFWB Preliminary Recommendations?
   
   ____ Yes  
   ____ No  
   ____ I would agree with the recommendations if the following changes were made: __________________________

2. If no, please mark with recommendations you agree with (Check all that apply):
   
   ____ Recommendation #1  
   ____ Recommendation #2  
   ____ Recommendation #3  
   ____ Recommendation #4  
   ____ Recommendation #5

3. Of the recommendations you do not agree with, please write down the reasons why: _______________________________

4. Please indicate how much you agree with the following statements:

   It is important that more parents in the Greater Houston area have access to parent education classes.

   Strongly Disagree    Disagree    Agree    Strongly Agree

   The Greater Houston area would benefit from a population-based parent support system.

   Strongly Disagree    Disagree    Agree    Strongly Agree

   Triple P provides a good framework on how to approach parent education in the Greater Houston area.
Strongly Disagree    Disagree    Agree    Strongly Agree

*Parent education classes should be proven effective (evidence-based).*

Strongly Disagree    Disagree    Agree    Strongly Agree

5. The Center for Parenting and Family Well-Being (CPFWB) strives to be a resource for the greater Houston community and to support parent education efforts. What areas do you think it would be most helpful for the CPFWB to focus on? Please check all that apply.

___Developing partnerships and an infrastructure to increase the availability of parent education classes.

___Securing funding for parent education.

___Social marketing to decrease the stigma of attending parenting classes

___Providing educational opportunities to partners.

___Evaluating the effectiveness of parenting programs.

___Advocating for policy changes.

6. Please provide any additional comments, suggestions, or feedback:

7. If you or your organization is interested in training opportunities in Triple P and evidence-based parent programs, please enter your contact information below.
References


