Parent Peer Support Programs in In-Home Services

INTRODUCTION

Parent peer support programs can be broadly defined as programs which engage parents, as peers, to provide some form of formal or informal support to other parents who may share similar experiences. Over 800,000 parents are referred to peer support programs each year (Polinksy et al., 2010). Programs like Circle of Parents and Parents Anonymous® provide formalized structures for parents who are at risk of or who have been involved in child maltreatment to connect to a larger system of social support. This brief summarizes the theory and research underpinning parent peer support, provides examples of various parent peer support programs, and outlines resources for child welfare agencies who wish to implement these types of programs. Program examples are located at the end of their respective sections; general resources are located at the end of this brief.

Parent support groups typically allow parents to share information on parenting, resources available in the community, and other places parents might be able to receive needed services. These groups can be located in a therapeutic setting (i.e. a therapist's office or a clinic) or in a community setting (e.g. churches, synagogues, mosques, neighborhood centers, shelters, etc.). Parent peer support groups may include paraprofessionals or professionals as a support or resource to the group. Their structure may be more or less formal and include some educational components presented by a professional, but the primary focus of the groups is for parents to provide support to one another in a setting that is safe and non-judgmental.[1] A synthesis of studies on parent support programs describes four common elements of support programs which appear to be helpful to parents and improve outcomes for the parent and/or the child:

- Psycho-educational approaches which give information on child development and parenting skills;

- A mutual support process, which allows parents to provide emotional support and information on resources to each other;

- Professional/paraprofessional facilitation of the groups;

- Parents participate in the decision making process for the group (Cameron, 2002; Goodson, 2005).

THE THEORETICAL BASIS FOR PARENT PEER SUPPORT

DePanfilis (1996) suggests that social isolation is related to child maltreatment and offers analysis on models of social support interventions to help reduce child maltreatment. In general, social support provides a variety of mechanisms which help individuals and groups cope with difficult situations. Thoits (1987) advanced the idea that social support from peers assists with coping by providing empathic understanding from individuals who have faced similar circumstances. Further, social support acts as a mechanism for coping assistance by providing emotional concern, instrumental aid, information about the environment, and appraisal to the individuals who are providers or recipients of social support (House, 1981). Appraisal is the process where an individual receives feedback about their behavior, actions, or ideas. In parent support, the appraisal process allows the parent to be supported in their parenting decisions by their peers, which helps to bolster their parenting confidence. Appraisal also holds parents accountable when their decisions may negative affect their children or the group.

Tracy and Whittaker (1987) provide a list of types of social support interventions, three of which may be embodied by parent peer support programs: support groups, network facilitation, and skills training. Goodson (2005) documented a variety of program mechanisms connected to parent support programs, including case management, support groups, educational seminars, provision of concrete goods and services, telephone/web-based support, and formal and informal social networking. Support groups provide members with the opportunity to give and receive help from others who are in similar situations or who have experienced similar situations

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1. Programs with a primary educational purpose and a secondary parent support component are not considered in this brief.

in the past (Riessman & Carroll, 1995). The relationship is reciprocal; those who are providing help to others are also receiving help from those same individuals, perhaps simultaneously or at a later time. The theoretical benefit lies in helping as well as being helped; helping others empowers parents, thereby increasing self-efficacy.

THE EVIDENCE BASE FOR PEER SUPPORT PROGRAMS

The support provided by parents in peer support programs strives to improve outcomes for the population served. In programs serving families in the child welfare system, the outcomes sought may include reducing child maltreatment outcomes (e.g. parental distress, rigidity, psychological aggression, and physical abuse), reducing risk factors (e.g. parental stress, life stressors, domestic violence, drug/alcohol abuse) and increasing protective factors (e.g. quality of life, emotional and instrumental support, general social support, family functioning, etc.) (FRIENDS, 2008; Pion-Berlin et al., 2011; Polinksy et al., 2010).

Evaluations of parent peer support programs have presented outcomes which address child maltreatment outcomes, risk factors, and protective factors in child welfare. Some outcomes of peer support programs in child welfare include:

- Reduction in child maltreatment outcomes, such as parental distress, rigidity, and psychological/physical aggression towards children (FRIENDS, 2008; Pion-Berlin et al., 2011; Polinsky et al., 2010).

- Reduction in risk factors, such as parental stress, life stressors, domestic violence, and drug/alcohol abuse (FRIENDS, 2008; Cameron, 2002; Gay, 2005; Pion-Berlin et al., 2011; Polinsky et al., 2010).

- Reduction in stress related to caring for a child, especially in situations where the caregiver is a kinship caregiver (Denby, 2011; Strozier, 2012).

- Increase in protective factors, such as improved general social support, family functioning, sense of parenting competence, and emotional and instrumental support. Improved use and awareness of support systems and community resources (Berrick et al., 2010; Cameron, 2002; Denby, 2011; Falconer et al., 2008; FRIENDS, 2008; Gay, 2005; Pion-Berlin et al., 2011; Polinksy et al., 2010).

- Reduced involvement and entry/re-entry in the child welfare system. Faster reunification times and higher rates were noted for parents with peer mentors than for those without peer mentors (Anthony et al., 2009; Cameron, 2002; Rauber, 2009).

Based on these outcomes, child welfare agencies and families may benefit from using parent peer support programs as part of their in-home services approach, with the goal of providing support to families in the home and preventing escalated involvement with the child welfare system. However, DePanfilis (1996) found that peer support programs were not successful on their own; parent peer support programs should not be provided in lieu of other traditional services, but in addition to these services.

COMMON ELEMENTS OF EVALUATED PARENT PEER SUPPORT PROGRAMS

Numerous studies have been conducted on the effectiveness of parent peer support programs; however, a common criticism of studies of parent support programs is the scarcity of studies with strong internal validity due to the lack of random assignment or a quasi-experimental design. As Barth (2010) has suggested, when there is not a strong evidence base for a particular model, it may be useful to examine the existing research for common elements.

Goodson (2005) performed a meta-analysis of evaluation data from over 200 parent support programs which provided a summary of parent and child outcome data for parent peer support programs. She concluded that the parent support programs with the strongest effects on children's social and emotional development were those that targeted a specific need for the child, had a professional staff member, and/or used peer support as a component of the program. Goodson (2005) found that parenting support groups which used direct educational services for children (i.e. a children's group) were the most effective at supporting cognitive development in children. She also found that programs which offered a combination of parent support and education on child development had the best effects on increasing positive outcomes for children.

Cameron (2002), in a study of parent mutual aid organizations in Canada, found that participation in parent mutual aid organizations led to statistically significant improvements in parental self-esteem, a greater likelihood of parents accessing and identifying social support, a decreased level of involvement with child protective services, and increased ability of parents to cope with perceived stress than in the comparison group. The data also showed that participation in mutual aid organizations led to a decrease in removal rates. Children of parents in the comparison group were twice as likely to be placed in the child welfare system as children of parents who participated in the mutual aid organizations.

Cameron based the design of the parent mutual aid organizations on seven programming principles: 1) facilitating high levels of weekly interpersonal contact; 2) offering a

wide range of helping activities; 3) creating a safe place to be and access to a positive network of peers; 4) providing opportunities for members to become friends outside of groups; 5) enabling members to become helpers as well as receivers of help; 6) assisting members in taking responsibility for running their own organization; and 7) encouraging members to take part it broader positive social movements (Cameron, 2002). According to Cameron (2002), these seven programming principles create an evidence-informed approach to providing peer support to parents.

The next section of the brief addresses two distinct approaches to parent support – peer support groups and peer mentoring – describing the most popular and well-researched programs.

Parent Peer Support Groups

The parent peer support groups in this brief are open to parents whose children remain in the home as well as those whose children are in out-of-home care. Parents can be referred to these programs during the provision of in-home services with the goal of preventing unnecessary removal.

Circle of Parents

Circle of Parents is a peer-led parent support group that uses a parent leader and professional facilitator. It provides a safe, non-judgmental environment for parents and may also offer a children's group. It is confidential, non-judgmental, and client-paced without a prescribed curriculum (Falconer et al., 2008; Gay, 2005). Circle of Parents is designed to minimize risk factors and increase protective factors by: reducing isolation, building self-esteem, and encouraging a positive parenting approach; normalizing parenting issues and concerns by exposing group members to other families; improving communication and problem-solving skills; linking members to community resources and sources of help within the group; and helping group members become confident/competent parents (Falconer et al., 2008).

The key elements of Circle of Parents groups are designed to address the following social support functions: emotional sustenance; counseling, advice, or guidance; access to information, services, material resources, and assistance; skills acquisition; and social monitoring and social control (Thompson, 1994 cited in Gay, 2005).

Falconer evaluated the effectiveness of Circle of Parents' program in four states (2006). The evaluation collected data on parenting skills, self-management skills, quality of child/parent interaction, and support system awareness and use of resources in the community. Social support was also measured by using items from self-management and support systems awareness and use (Falconer et al., 2008). Using

self-reported data from parent groups in Florida, Minnesota, North Carolina, and Washington, analyses suggested that parents who participated in Circle of Parents benefited from improving the quality of the parent/child relationship, improving parenting skills, and improving support system awareness and use. Additionally, Florida's evaluation data suggested that a significant number of participants also improved their self-management skills. Based on the evaluation, parents who attended the group more than 7 times had better outcomes than did parents who attended less often (Falconer, 2006; Falconer et al., 2008; FRIENDS, 2008).

Parents Anonymous®

The Parents Anonymous® model uses a combination of mutual support and shared leadership. The organization sponsors peer support groups which use a shared leadership model with a professional staff/facilitator and parent leadership. It also operates a phone helpline and internet resources for parents and conducts a Shared Leadership in Action program that trains parents to advocate in their communities and at the policy level. All of these programs provided by Parents Anonymous® are designed to incorporate one or more facets of the Strengthening Families approach put forth by the Center for the Study of Social Policy (Pion-Berlin et al., 2011).

The premise of shared leadership in Parents Anonymous® is a strengths-based approach that promotes "working with" the family in order to promote a variety of protective factors; this is counter to more traditional intervention models that attempt to reduce risk factors by using a "blaming and shaming" approach. This strength-based model identifies strengths in parents, caregivers, children, and youth and has demonstrated effectiveness in improving protective factors in all five domains: 1) parental resilience; 2) social connections; 3) knowledge of parenting and child development; 4) concrete support in times of need; and 5) children's social and emotional competence (Center for the Study of Social Policy, 2014).

A national evaluation of PA's peer support groups was completed using a series of three interviews over a six month period. After one month, all parents who continued with the group showed a reduction of some child maltreatment indicators. After six months, the parents had maintained the progress in the decrease of risk factors and reduction of child maltreatment indicators made after one month (FRIENDS, 2008; Pion-Berlin et al., 2011; Polinksy et al., 2010). Particularly important in this study is the progress made by "high risk" parents who made significant progress at the one month and six month evaluations in decreasing all child maltreatment outcomes and risk factors and increasing all protective factors (Pion-Berlin et al., 2011).

Peer Mentor Programs

Peer mentor programs are primarily staffed by parents who have experience as consumers of the child welfare system. Peer mentors are generally identified by child welfare workers who have previously worked with them in a client-worker role. The goal of these programs is to provide families with an individual who has shared experience in navigating the child welfare system and who may be recognized as an unintimidating presence for the family receiving services. Currently parent peer mentor programs target families whose children are in out-of-home care. Nationally, there are only a few programs that use mentors to help families while children remain at home; others use peer mentors to help families reunify faster and to provide maintenance to families post-reunification (Rauber, 2009). Child welfare agencies should review their existing policies and practices to determine if this type of program can also help during the provision of in-home services.

Expectations vary in eligibility criteria for becoming a peer mentor, but the general requirements include maintaining sobriety for one year (in the event of a substance abuse diagnosis), successful reunification with their children, and having a "warm and engaging personality". Peer mentors receive regular supervision from by agency personnel (Anthony et al, 2009, p. 29). Many agencies require training for peer mentors, which generally includes mandatory reporting requirements, parent engagement, resources and referrals, professional expectations, boundaries, and county/state/agency overviews. To pay these peer mentors, some agencies hire peer mentors in temporary support positions, as their agency may not have a permanent position designated for parent mentors; some have collaborated with organizations like AmeriCorps in order to secure funding for peer mentors (Family2Family, 2006).

In their direct service role with families, peer mentors may provide education, referrals, and resources to parents; lead parent support groups; staff parent support lines; and support and advocate for parents. From an agency perspective, peer mentors may provide the parent voice in child welfare worker training, attend home visits and family team meetings alongside child welfare workers, and assist child welfare workers with other tasks (Anthony et al, 2009; Berrick, Young, Cohen, & Anthony, 2011; Family2Family, 2006; Frame, Berrick, & Knitel, 2010).

Family to Family and "Parent Partners"

Family to Family, a California statewide child welfare initiative supported by the Annie E. Casey Foundation, included an initiative to develop birth parent participation models (Family2Family, 2006). Of the different models used for birth parent participation, one such program which has been evaluated is "Parent Partners", a peer mentor program.

Parent Partners was started in June of 2004 in Contra Costa County, California. Anthony, Berrick, Cohen, and Wilder (2009) found that parents who were served by the program valued the level of shared experiences that the peer mentors had with the parents being served by the program. They also found that parents appreciated the availability of the peer mentors, the ease with which they were able to communicate with the mentors, and the emotional and material support the peer mentors were able to provide to them. Anthony and others (2009) also found that parents who were served by a mentor had better reunification timelines than parents who had not been served by peer mentors.

According to Anthony and others (2009), allied professionals (child welfare workers, lawyers, and other professionals in the child welfare field) viewed the involvement of peer mentors as positive: the shared experience between peer mentors and parents helped inspire trust between the parents and peer mentors. Allied professionals also appreciated that peer mentors were able to "translate" the jargon being used in the various systems with which parents were connecting, peer mentors were able to connect more closely with parents due to a difference in the boundary expectations compared to other professionals, and peer mentors provided much needed support to both parents and allied professionals in a system where time is scarce and face-to-face contact may be limited.

Some concerns have arisen about the use of parents as peer mentors. Because of their past experiences with the system, peer mentors can begin to over-identify with the parents they are serving, causing stress on the peer mentor. Since parent peer mentors are not trained professionals—a strength in terms of their ease in relating to parents receiving services—they have not been socialized to respect boundaries in the same way that professionals have, which has been a concern of peer mentor supervisors (Anthony et al., 2009; Family2Family, 2006). Frame, Berrick, and Knittel (2010) assert that peer mentors need to be provided with adequate support and supervision to maintain appropriate boundaries that will protect both mentee and mentor.

Parent Partners (Iowa)

Parent Partners in Iowa are peer mentors who have successfully navigated the child welfare system, progressed in their recovery, and reunified with their children. While there are specific eligibility criteria for Parent Partners, there are varying levels of involvement in the program so that parents who may not currently meet the eligibility requirements have an avenue for becoming more involved in the future.

Parent Partners assume a variety of tasks, including training

other peer mentors; orienting families to the child welfare system; sharing their experiences with child welfare workers, families, and other individuals; working one on one with parents in order to provide support for parents who are currently involved with child welfare; attending family team meetings, court appearances, treatment/recovery appointments, and other gatherings to act as a support for birth parents; and working collaboratively with child welfare workers and other allied professionals involved with the family. They have specialized training, receive compensation for their time and mileage, and are provided with clinical supervision from a licensed master level clinician. They are also provided supervision from a coordinator. Iowa Parent Partners, with technical assistance from the Midwest Child Welfare Implementation Center, has developed a set of materials which can serve as an important resource for other jurisdictions implementing a parent partner program.

The National Resource Center for In-Home Services has provided technical assistance to the Iowa Parent Partner Program, assisting them in building on existing training materials for parent partner coordinators and providing guidance for developing professional ethics and boundaries. For further information about this program and other parent peer support approaches, contact the National Resource Center for In-Home Services, www.nrc-ihs.org, or contact Lisa D'Aunno, Project Director, at 319-335-4932; lisa-daunno@uiowa.edu.

RESOURCES

Family2Family
Birth Parent Involvement Models: Discussion notes from the California Family to Family (F2F) Coordinators' Meeting (April, 2006).

http://www.f2f.ca.gov/res/birthparent.pdf

Contents: Program overviews and examples of job descriptions and contractor paperwork for parent peer mentors.

Circle of Parents
Parent Leadership Ambassador Training [Facilitator training guide]

www.friendsnrc.org/joomdocs/platguide.pdf

Contents: The facilitator's guide to a training curriculum for parent leaders in the Circle of Parents program.

Familias Fuertes y Saludables Program
Familias Fuertes y Saludables Program [Final report].

http://bit.ly/NojPLJ

Contents: This document contains information on a peer support program for migrant families, including an explanation of their program model.

Authored by John Paul Horn, LMSW, graduate research assistant, University of Iowa School of Social Work.

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