

Nestern Centre for School Mental Health



ABSTRACT

Mental health challenges are common among children, and can interfere with learning and adjustment to school. Although early intervention is critical and the school-family partnership plays an integral role in the development and implementation of individual education plans (IEPs), there are few supports to assist families in navigating this partnership. This study describes the experiences of parents who participated in the Parents in Partnership with Educators (PIPE) program, an individualized intervention for families who are struggling to communicate and problem-solve with schools around the mental health needs of their children. File review and semi-structured interviews were conducted for ten families. Results indicated that the program gave parents unconditional support and guidance, as well as new skills to help them communicate their perspective in a meaningful way. Parents reported feeling empowered, informed, and prepared to advocate for their children.

INTRODUCTION

Students may require personalized and tailored school supports guided by an individual education plan (IEP). Parental involvement in the development of a student's IEP is both critical and legally mandated¹, however; research suggests that parent participation during IEP meetings is relatively low compared to teachers' and administrators'². This discrepancy between the law to involve parents and the reality of their involvement is of importance given the body of research linking parental involvement to positive student outcomes³.

There are several barriers hindering successful parent-school partnerships, such as scheduling conflicts, parental lack of knowledge about school policies and/or academic terminology, and perceived inequality on the IEP team⁴. Poverty, educational attainment, and immigrant status also influence the degree of parental involvement⁵. Families of low socioeconomic status (SES) and with lower levels of education have been found to participate less during IEP meetings⁶.

Parental interventions aimed at improving communication among stakeholders are lacking, and there is no literature to date specifically addressing parents with children struggling with a mental health concern.

The Parents in Partnership with Educators (PIPE) program was developed in London, Ontario, CA. This research was conducted within a communitybased partnership with the director of the PIPE program from January 2018 through October 2018.

Parents' Experiences with an Individualized Intervention Designed to Strengthen the Family-School Partnership: The ¹Centre for School Mental Health, Faculty of Education, Western University, ²Child and Youth Development Clinic, Western University, ³M.I. Understanding

The goal of the program is to help parents become positive advocates for their child by widening their understanding of their own and the school's expectations and building their confidence as knowledgeable and important members of the school team.

MEASURES

De-identified parent files (n = 10) • Included all intake assessments and field notes recorded by the program representative; including information such as family history, meeting dates, and meeting attendees

Semi-structured Interviews (n = 8) Gathered more descriptive data about parents' experiences with the program

INTERVIEW PARTICIPANTS

DATA ANALYSIS

- **File Review**

Interviews • Content analysis was employed as this process allows for the identification of central themes to emerge from the raw data

OBJECTIVES

Explore why parents enroll in the program and what they gain from their involvement.

2. Gain a deeper understanding of the factors that help parents improve their communications with their child's school.

PIPE PROGRAM

The intervention involves four steps over a short period of time: 1) An information gathering session focused on identifying the core problems/conflicts/barriers between family and school personnel.

2) A skills-based session aimed at developing a structured binder with all of the materials related to the child's education and care and to practice conflict resolution and negotiation skills.

3) A school-based meeting where the PIPE representative attends with the parent.

4) A follow-up session with the representative to discuss next steps.

METHODS

• Eight parents (100% female) from Southwestern Ontario, CA • Maximum of four children concurrently on IEPs in one family (M =1.75, SD = 1.09• Children ranged from 4-13 years old (64.3% male, 35.7% female; M = 8.91, SD = 3.26)

• Descriptive statistics from the intake notes were used to summarize participant demographics

• Field notes were analyzed using a pre-set codebook

The program is relatively new and is currently being piloted with only one facilitator. It is will be important to continue to evaluate as it grows.

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FINDINGS

FILE REVIEW

Main conflicts with the school:

- A short-term misunderstanding or disagreement with the school surrounding the child's needs (37.5%)
- A long-term dispute with the school (12.5%)
- A poor relationship with the current teacher (18.8%)
- Concerns surrounding school transfers (18.8%)
- Unknown (12.5%)

Program components:

- Formal intake meeting between the parent and representative (93.8%)
- Organized binder compiled with the parent (87.5%)
- Representative attended a school meeting with the parent (75%)
- Follow-up meetings were not recorded in the files

IMPACTS OF PARTICIPATING IN THE PIPE PROGRAM

Overarching Themes	Secondary Themes	
	Personalized support	
HAVING SOMEONE "ON YOUR TEAM"	Willingness and openness to attend school meetings	It was ju to actua the proc
	Guidance in the form of resources	
LEARNING AND HONING NEW SKILLS	Organization skills (i.e., binder) Communication skills	On spe Being c meeting 101)
	Self-confidence	
PARENTS' ROLE AS ADVOCATES	Personal responsibility Stigma reduction and openness	Everyor well, wh are the are his
	with others	

CONCLUSIONS

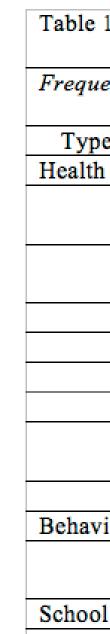
Overall, study findings suggest that participation in the PIPE program gave parents a "second wind" and a renewed sense of confidence and hope.

Results generated further knowledge on the ways in which parental role construction influences school involvement, and illustrated the importance of encouraging self-efficacy and confidence in parents. The PIPE program objectives align closely with previous literature on parents' views on how to make the IEP process more meaningful⁷.

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Note: N = 16. Most children presented with multiple concerns (M = 2.50, SD = 1.30) *Details of an official diagnosis were not provided.

Frequencies of Health, School, and Family Related Concerns			
Type of Concern		Percent (%)	
Health concern			
	Speech and language delay diagnosis	18.75	
	Possible speech and language delay*	6.25	
	Anxiety diagnosis	31.25	
	Possible anxiety*	6.25	
	Oppositional defiant disorder diagnosis	12.50	
	Attention-deficit/-hyperactivity disorder diagnosis	18.75	
	Possible sensory issues*	18.75	
	Possible fine motor skill issues*	6.25	
	Sleep disorder diagnosis	6.25	
	Possible sleep disorder*	12.50	
	Learning disability diagnosis	6.25	
Behavioural concern			
	Self-regulation (incl. aggression)	18.75	
	Attention	12.50	
School concern			
	School refusal	12.50	
	Peer victimization	25.00	
Family concern			
	Experienced domestic violence	6.25	

Exemplar Quote

just a huge relief to find somebody who was willing Jally just sit and listen and genuinely help me with ocess. (ID 100)

ecific strategies learned:

organized and being well prepared before going to ngs at my son's school. Very well prepared. (ID

one's always talking about what's not working... vhat is working? What was the good quality? What e things that are good about my son, not just what problems. (ID 100)