

Special Education Schools as settings for Families Change:

A collaboration between health, disability and education to improve outcomes for children with an intellectual disability.



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Acknowledgements



- Dr David Dossetor, Director -Mental Health, The Children's Hospital at Westmead



- Lesley Whatson, Statewide Behaviour Intervention Service - Ageing Disability and Home Care. Department of Family and Communities

- 11 Government Education Schools across New South Wales, Australia.



BACKGROUND



Intellectual Disability

- IQ \leq 70 and deficits in adaptive behaviour
- Learning disability in UK
- Intellectual or cognitive disability in USA
- Others?
- Approx 1-3% of population





- 2009 CHW conducted research into the mental health needs of children and adolescents with an intellectual disability in special education schools in NSW.
- High prevalence rates of mental problems and disorders (40% compared to 14% in general student popn) .
- There were very few (> 5) evidence based mental health prevention/promotion programs available for this popn.
- Very few programs being implemented in schools.



GSSTP Pilot

- Approx 5 published studies on Group Stepping Stones Triple P (GSSTP)
- None in school environment
- Mini pilot in 3 schools.



School Environment

- Schools are considered as community centres.
- School is a novel, non-stigmatising setting which could have a significant impact on clinical outcome for the families involved.
- Competing with a crowded curriculum



OBJECTIVES



Aims

- To add to the evidence base of mental health prevention programs available for students with an intellectual disability.
- Inaugural delivery of GSSTP in a school environment, as opposed to clinical setting.
- Encourage co-facilitation between disability agency and schools.



Hypothesis

- Implementation of GSSTP in schools will:
 - improve the behaviour of children at home and school
 - Have a positive impact on mental health, behaviour management skills and confidence of parents.



METHOD



Design

- Experiential design, time series with pre/post testing by parents (treatment participants) and class teachers (independent informants).
- No control group (unfortunately).
- Our sample was not randomised, an opportunity sample.



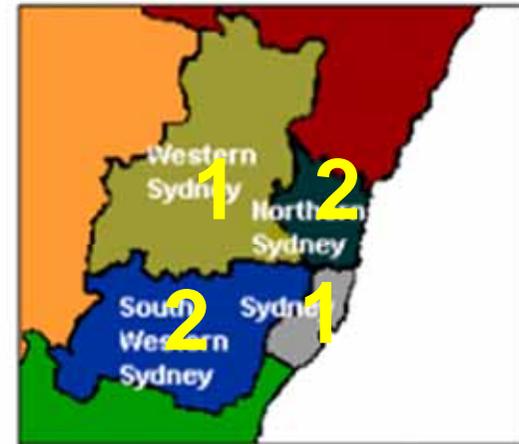
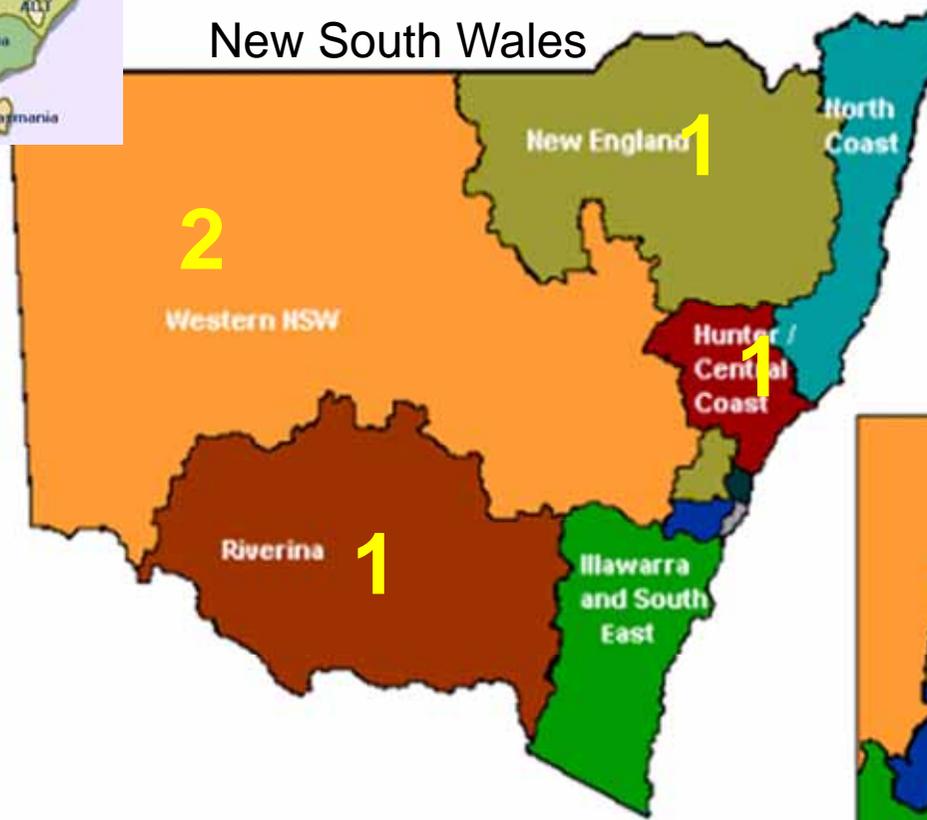
Participants

- Parents or caregivers of a child attending a special education school that caters for intellectual disability.
- Recruitment of parents through school
- 89 participants recruited from 11 schools.





the children's hospital at Westmead



Procedure

- **Step 1: Expressions of interest from schools**
- **Step 2: Nomination of facilitator by school**
 - Either School Counsellor, ClassTeacher or Executive Member
- **Step 3: Training and Accreditation of facilitators**
 - 10 special schools that cater for ID + 1 support class school
- **Step 4: Recruitment of Participants**



Procedure

- **Step 5: Matching of interagency facilitators**
 - School staff & Behaviour Specialists from state disability agency
- **Step 6: Implementation of Group Stepping Stones Triple P**
- **Step 7: Pilot Evaluation**



Staff to Support Implementation

- Mentor
- Research Lead
- Clinical Research Psychologist
- Logistical Coordinator
- Support Staff



Resources

- School staff time and commitment
- Disability funds
- Health leadership/coordination



Intervention

- Group Stepping Stones Triple P - *Positive Parenting Program*[®], the adaption for parents of children and adolescents who have a disability.
- Run in the group format within the school (except one school who only recruited one family).
- Co-facilitated in ten schools by school staff and local disability staff member.
- All schools started the intervention in the same school term
- We supported the principals, school facilitator and disability sector facilitator with regular phone calls, emails and three group video conferences.
- We had clinical psychologists available should any facilitator feel the need to seek support about any issues that were raised in the groups.
- Extra staff provided to the school for the initial assessment if requested



Overview of Sessions

Session 0

- Assessment

Session 1

- Positive Parenting

Session 2

- Promoting Children's Development

Session 3

- Teaching New Skills and Behaviours

Session 4

- Managing Misbehaviour and Parenting Routines

Session 5

- Planning Ahead

Sessions 6-8

- Telephone: Implementing Parenting Routines
- Assessment feedback

Session 9

- Program Close
- Assessment



Measures

1. Family background- **Family Background Questionnaire*** (Adapted from Zubrick *et al*, 1995).
2. Child adjustment- **Developmental Behaviour Checklist*** (Einfeld and Tonge, 2002).
3. Parenting style- **Parenting Scale*** (Arnold *et al*, 1993).
4. Parenting confidence- **Parenting Tasks Checklist*** (Sanders and Woolley, 2005).
5. Conflict over parenting- **Parent Problem Checklist** (Dadds and Powell, 1991).
6. Parental Adjustment- **Depression, Anxiety and Stress Scale*** (Lovibond and Lovibond, 1995)



RESULTS



Demographics of the Children (complete data set)

Children

- 42 Male & 14 female = 56
- 37 ASD
- 22 ID
- 11 Other Neurological Syndrome
- 11 Other physical disability
- 40 had received services from NGO's



Results

Developmental Behaviour Checklist - Parent

- Disruptive/Antisocial: 18% decrease*
- Self Absorbed: 6% decrease
- Communication Disturbance: 1% decrease
- Anxiety: 10% decrease
- Social Relating: 11% decrease
- Total: 10% decrease*

*= $<.05$

**= <0.01 (significance levels)



Results

Developmental Behaviour Checklist - Teacher

- Disruptive/Antisocial: 29% decrease**
- Self Absorbed: 26% decrease**
- Communication Disturbance: 16% decrease*
- Anxiety: 24% decrease**
- Social Relating: 32% decrease**
- Total: 25% decrease**

*= $<.05$

**= <0.01 (significance levels)



Results

Parenting Scale

- Laxness: 19% decrease**
- Overactivity: 18% decrease**
- Verbosity: 22% decrease**
- Total 19% decrease**

*= $<.05$

**= <0.01 (significance levels)



Results

Parenting Tasks Checklist

Highly Significant improvements in parents behavioural efficacy

- 11% increase in confidence between settings**
- 19% increase in confidence related to general behaviour management**

*= $<.05$

**= <0.01 (significance levels)



Results

Depression Anxiety Stress Scales DASS

- 56% reduction in depressive symptoms**
- 52% reduction in anxiety**
- 43% reduction in parental stress**

*= $<.05$

**= <0.01 (significance levels)



Anecdotal Reports

"We learnt a lot of things from this Stepping Stones Triple P program to apply to our child and to improve his attitude. So thank you very much"

"Triple P Program was very satisfying for me I learnt a lot from it and I would do the program again if I was asked. P.S. The book is very helpful. Thank you".



CONCLUSIONS



Conclusions

- School-based delivery of the GSSTP parenting program is an effective early intervention for children with an intellectual disability.
- Parent stress, anxiety levels decreased and confidence in parenting increased.
- Changes in parenting at home appeared to have an affect on reduced behaviour problems in the classroom.
- Collaboration across government agencies to deliver better mental health outcomes for children and their parents/carers.
- Additional byproducts of the groups included increased parent peer support and improved parent/school relations.
- First study using an independent behavioural observer (teacher).





<http://www.macarthuradvertiser.com.au/story/245053/parents-gain-skills-to-tackle-tricky-kids/>



Future Directions

- Focus on ASD in 2013
- Almost 45 schools interested
- 20 schools selected to attend training



www.schoolink.chw.edu.au

CHW
S C H O O L
Link

Supporting the mental health of children and adolescents with an intellectual disability

General

- Home
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CHW School-Link Website

Welcome to the Children's Hospital at Westmead (CHW) School-Link Website.

The NSW School-Link Initiative has been addressing mental health in schools since 1999. The Children's Hospital at Westmead (CHW) has recognised the potential to further develop the existing School-Link Initiative by focusing on students with an intellectual disability, as they are a significantly at-risk population for experiencing mental health problems and disorders.

CHW School-Link Newsletter

View the latest March 2011 issue of the CHW School-Link Newsletter [here](#).

mental health and intellectual disability...

(3 items remaining) Downloading picture http://www.schoolink.chw.edu.au/universal/images/manager/loading.gif... Internet | Protected Mode: On 100%



Newsletter

- Quarterly Newsletter. Contributions and any suggestions for content are most welcome to:

Hebah Saleh (editor) | School-Link Officer
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- *Sign up to our e-list to receive our quarterly newsletter and from time to time relevant emails about professional development opportunities*

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Book Alert!

*Mental Health for Children and Adolescents with Intellectual and Developmental Disabilities:
A Framework for Professional Practice.*

www.ipcommunications.com.au

