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Your Mind Matters: Promoting the Wellbeing of the Parent-Child **Dyad through Family Education**

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Your Mind Matters: Promoting the Wellbeing of the Parent-Child Dyad through Family Education

McKayla A. Becker, OTS

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BACKGROUND

- There is an evident bond that is formed between a child and the parent throughout their lives, however this bond can be hindered by barriers that affect the quality of care a parent can provide.
- Mental health symptoms are not unique to families, as about 17 to 28% of parents may deal with these symptoms in their life (Sell et. al., 2021).
- Mental health conditions including depression, anxiety, posttraumatic stress disorder, and enduring traumatic experiences have been noted to influence the parent-child relationship (Wolicki et al., 2021; Kelstrup & Carlsson, 2022)
- "Parental Burnout" is a coined term depicting the mental and physical exhaustion occurring from a chronically stressful situation and individuals may experience suicidal ideations or turn to abusive or neglectful behaviors towards their children because of this burnout (Mikolajczak et al, 2019; Saavedra Rionda et al., 2021).
- Healthy interactions between the parent-child dyad promote life skills and emotional development (Gee et al., 2021).
- Parents and caregivers were more likely to provide positive parenting interactions with their children, when presented with positive coping strategies such as education on regulating emotions, noting cognitive biases, and promoting problem-oriented coping skills to handle the difficult emotions (Sell et al., 2021)

PURPOSE

The purpose of this project was to promote wellbeing and resilience within the parent-child dyad through family education provided through Waconia School's Districts Early Childhood and Family Education (ECFE) program.

THEORETICAL FOUNDATIONS

Families Systems Theory

This was the guiding theory to understand that family dynamics are personal and shaped by their own variances (Bamm & Rosenbaum, 2008).

Adult Learning Theory: Andragogy

This theory was used to understand that adults are center of their learning experiences and are therefore internally self-motivated to learn (Knowles, 1978). The materials and curriculum provided focused on solution-based approaches, included direct language and reasoning, and allowed for discussion-based interactions within the presented material to encapsulate the audience.

Trauma Informed Care Model

The principles were incorporated to support and empower parents: safety, trustworthiness and transparency, peer support, collaboration and mutuality, empowerment, voice and choice and culture, historical and gender issues (SAMHSA, 2014).

Recovery Framework

This theory outlined principles of undergoing the process of change to reach individuals full potential (SAMHSA, 2012). In order to meet families where they are at a safe environment must be created while respecting where they are at within the change cycle.

METHODS AND ACTIVITIES

This capstone was completed at District 110 Early Childhood and Family Education (ECFE) Program in Waconia, MN.

Participants/Population

Families and staff within the Waconia School District's Early Childhood and Family Education program.

Project Outcomes

- Promote mental health coping strategies to parents who may have experienced trauma or disruptions in their ability to parent
 - o Implement and develop a 6-week course (topics included stress management; emotional regulation; tough conversations; positive self-talk; sensory strategies; and adding occupational balance) and one stand-alone session promoting parent-child wellbeing; develop caregiver handouts to promote the parent-child dyad and create a resource guide to be shared with the Waconia community and educators to promote mental wellbeing
- Increase personal and professional knowledge of parenting and occupational therapy in the context of individuals who have experienced a form
 of trauma
- Determine the effectiveness of providing parental classes to individuals to increase their mental health satisfaction
- Understand and increase leadership skills within the caregiver educator role and advocate for the profession of occupational therapy
 Assessment Instruments
- Parenting Sense of Competence Scale (PSOC) is a 17-item, 6-point Likert-scale questionnaire and was constructed to understand a parent's sense of satisfaction and efficacy within the parenting role (Gibaud-Wallston & Wandersman 1978; Johnston & Mash, 1989)
- Child-Parent Relationship Scale (CPRS) is a 15-item, 5-point Likert-scale self-report questionnaire that encapsulates the perception of the relationship between the parent-child dyad (Driscoll & Pianta, 2011). Two subscales fall into this assessment conflict and closeness. Conflict which measures the degree to which a parent feels that his or her relationship with a child is characterized by negativity. A higher score on the conflict questions suggests parents feel their relationship with their child is characterized by negativity, therefore a lower score is more desirable on the conflict subscale. Closeness is the extent to which a parent feels that the relationship is characterized by warmth, affection, and open communication. A higher score on the closeness questions suggests the parent/child relationship is characterized by warmth, affection, and open communication. Therefore, a higher score is desirable on the closeness subscale.
- Feedback Surveys: six short surveys were provided to participants that looked at application of learned topics to daily life and key take-aways from the program

Table 1.

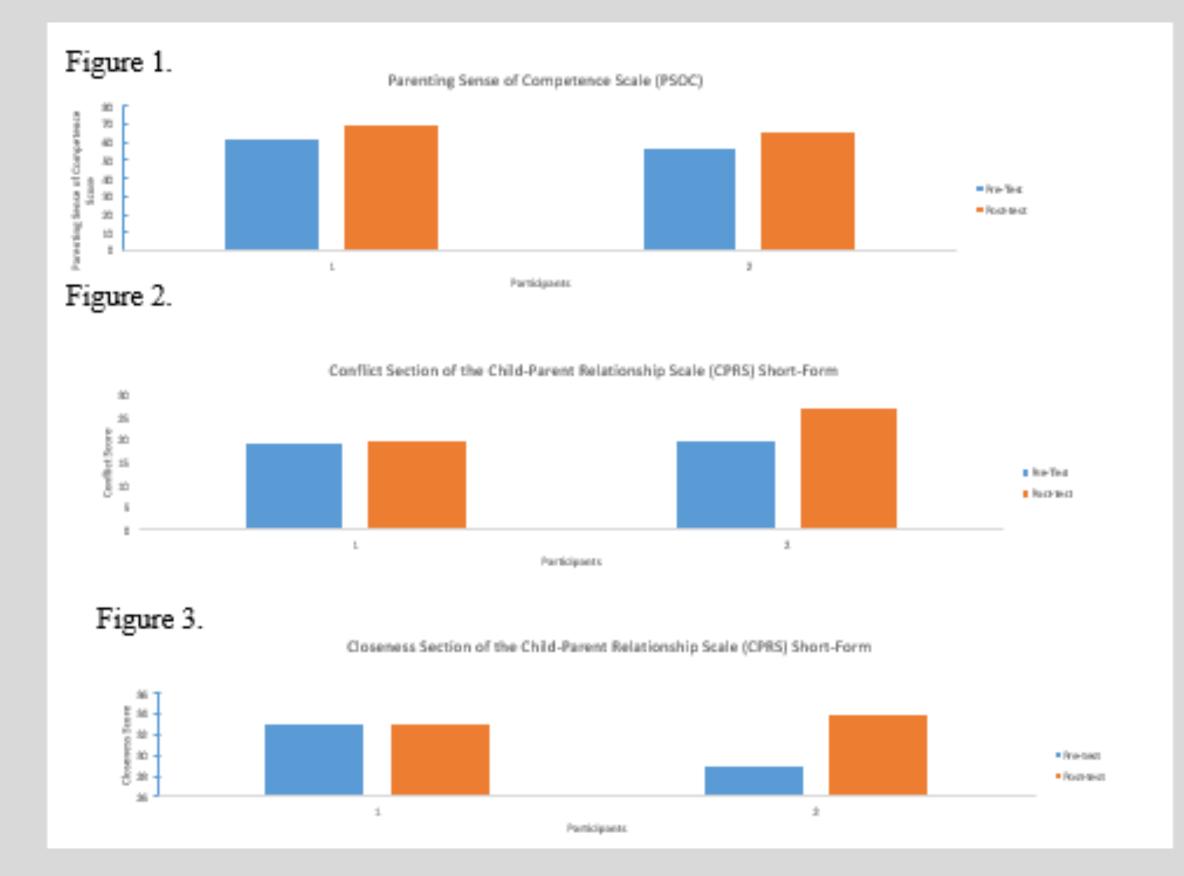
DISCUSSION

- Parents benefited from education on specific strategies to promote healthy parent-child interactions
- Program could benefit from longer sessions times and/or number of weeks to see higher PSOC and Closeness scores and reduction in Conflict scores.
- Parents may have become more aware of conflicting challenges because of this program which may have led to the increase in this category comparative to the pre-test
- Limited participation in assessments impacted overall results of the program
- The student expanded skills and knowledge in group facilitation and promoting parent-child well-being

IMPLICATIONS

- Parenting, or caring for children is a fundamental instrumental activity of daily living according to the *Occupational Therapy Practice Framework 4th Edition* (OTPF-4) (AOTA, 2020).
- Occupational therapy can play a role in family education and support parent and child's wellbeing
- Recommendation to continue providing mental health related resources to families in order to promote parent-child wellbeing

RESULTS



Comments from parents addressing key take-aways from sessions	Usefulness Ratin (1-5 Likert Scale
Lesson One	·
How to know the right resource for help	4
Stress isn't always bad	5
Ways I connect with different age kids separately and together	3
Tips for stress management	3
Reducing Stress/tools for parent and child	3
Lesson Two	
Identifying "Shark Music Behaviors" ahead of the incident can help us	4
navigate tough situations within ourselves and with our children	
Lesson Three	
Supporting my child in a positive way	4
We can and should talk about "Big Things" - like suicide and other problems	5
Loved how everyone was so open. To stop myself and ask for help and	5
remind them they can too	
Direct, Honest Conversations are the best	4
Lesson 4	
Give grace as we learn say things in the positive	4
Great conflict and fighting tips	5
Negative self-talk can have negative effects on your children	4
That questioning your parenting means you care	4
Lesson 5	
Certain behaviors can be counteracted by regulating sensory areas	4
Sensory Diet Activity	5
Helping each other (parent/child) even when they have different	5

Note. Feedback Surveys outlining the specific lessons, key take-aways, and their related usefulness of the lesson based on a Likert scale of 1 to 5; with 1 being not useful, 3 being useful, and 5 being very useful.

Table 2.

Home management strategies learned and used by participants to support parent-child wellbeing Usefulness of the Course Specific Strategies Categories Saying No; Asking for support; Walk; Implementing a Feelings Chart; Validating/Sharing feelings; Deep Breaths; Savoring a Food Item; Active Listening; Normalizing Seeking Help; Talked about Mental Health w/ your child; Used a Calm Kits, Positive Self Down Kit or Corner; Used a Sensory Talk, Sensory Strategy; and Identified Negative Self-talk Strategies Saying No; Positive Thinking; Self-Care **Emotional Building** task; Walk; Zones of Regulation; Validating/Sharing feelings; Deep Breaths; Grounding, Talking about Mental Taking Notice of your Body; Modeling Health, Positive Positive Behaviors; Self-Esteem Building; Self-Talk, Sensory Talked about Mental Health w/ your child; Used a Sensory Strategy; and Reframed Strategies

Note. Strategies were reported through self-report of participants circling which items they have used at home

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REFERENCES

