

Caregivers' Experience with Family-Centered Service Delivery Across Services In Their Community for Individuals with Autism and Other Developmental Disabilities



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Background

- Family-centered care (FCC) is a service approach that emphasizes the integral role that families play in their child's service provision.¹
- Families of individuals with developmental disabilies benefit from and value FCC,¹ yet it is not consistently implemented across settings.²
- To our knowledge, no studies have evaluated FCC in day habilitation (DH) services, which serve over 519,000 individuals in the U.S.³

Objectives

- Our study aimed to assess FCC in DH and four other commonly accessed services using the Measure of Processes of Care (MPOC-20).⁴
- We examined how MPOC-20 factors differ across service categories and within the DH category.

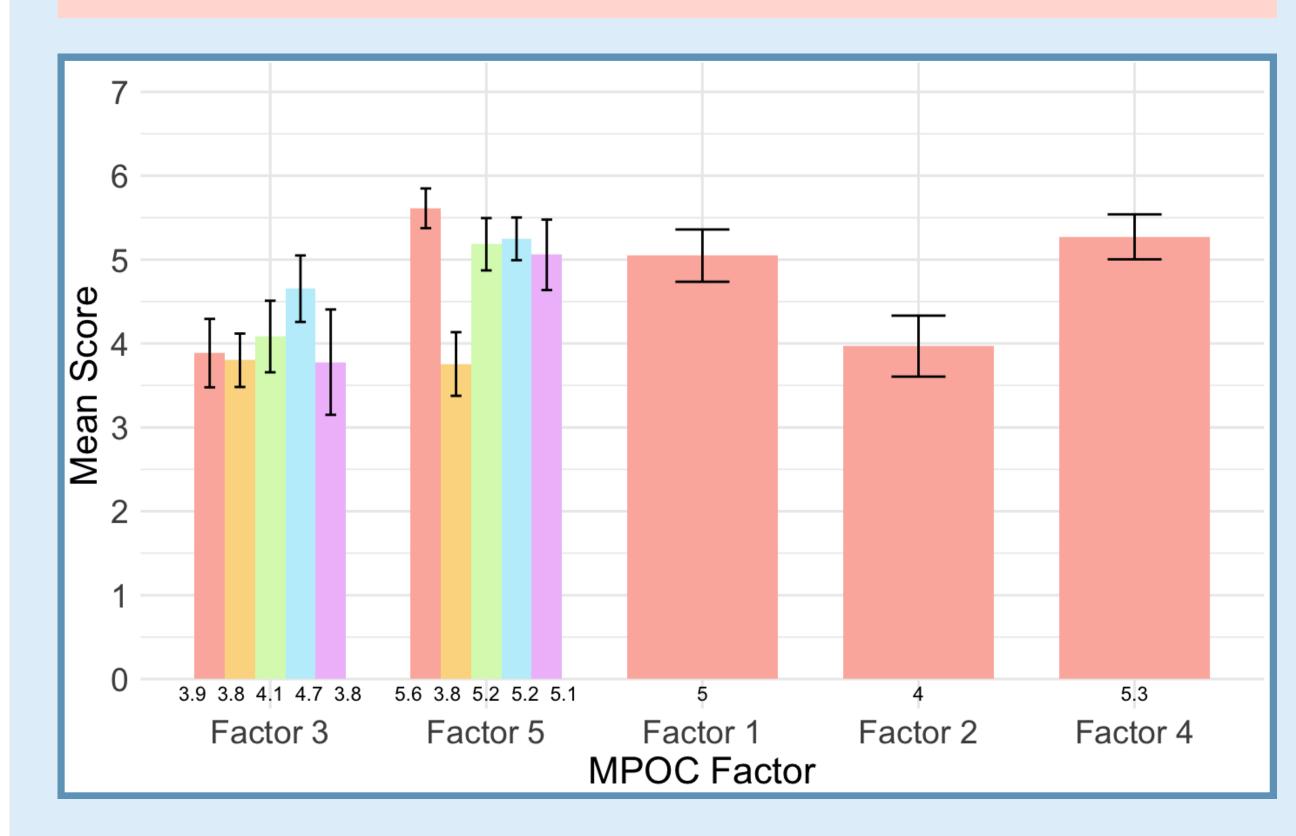
Methods

- 43 caregivers (90.7% female) of individuals diagnosed with autism (58.1%) and/or intellectual disability (55.9%) (age *M* = 16.0 y, *SD* = 5.8 y;
 65.1% male) participated in this study.
- We used separate one-way ANOVAs to test for differences in Factors 3 and 5 across service categories.
- We used paired t-tests to compare all factors within the DH category.

Caregiver Service Use by Category

Service	N use (%)
Day Habilitation (DH)	43 (100%)
In-School Therapuetic (IT)	28 (65.12%)
Community-Based Therapeutic (CT)	18 (41.86%)
Professional Health (PH)	32 (74.42%)
Community Support (CS)	21 (48.84%)

MPOC-20 Factor Mean Scores



MPOC-20 Factors

Factor 1	Enabling and Partnership
Factor 2	Providing General Information
Factor 3	Providing Specific Information about the Child
Factor 4	Coordinated and Comprehensive Care
Factor 5	Respectful and Supportive Care

Results

- Factor 3 did not vary across service categories (F = 0.78, p = .544), while Factor 5 was significantly different across service categories (F = 5.38, p < .001).
- Post-hoc comparisons revealed that DH (p < .001) and PH (p = .007) were each rated higher than IT.
- Within DH, scores were significantly different for all pairs of factors (ps < .003), except for Factors 1 and 4 (p = .170) and Factors 2 and 3 (p = .351).

Implications

- Our findings suggest that while services may not differ in information provision, they vary in delivery of respectful and supportive care, supporting prior research suggesting variability.
- Additionally, DH services may also be especially effective in facilitating caregiver-provider partnership opportunities, while being less skilled in providing general or diagnostic-related information.
- Future work should further examine inter-service differences in providing FCC.

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