

Strengthening Families Program  
Riverside University Health System—Behavioral Health  
Countywide  
FY 2018-2019



**MHSA Prevention and Early Intervention  
Strengthening Families Program—Table of Contents**

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### ***Program Overview***

Strengthening Families Program (SFP) is a prevention program for children ages 6-11 and their families. SFP's goals include strengthening parenting skills, building family strengths, enhancing youth's school success, and reducing risk factors for behavioral, emotional, and social problems in high-risk children (those from communities that are underserved, low-income, exposed to violence, trauma, and other stresses). The program consists of 14 sessions and program completion standard is defined as at least one caregiver per family having attended 10 or more sessions. Participants were also given the opportunity to attend a booster session 3 or 6 months after the end of the program.

### ***Outcomes Evaluation***

Evaluation of program outcomes included three measures: the Alabama Parenting Questionnaire (APQ), the Strength and Difficulties Questionnaire (SDQ), and the Family Relationship Index (FRI). The APQ measures three dimensions of parenting: parental involvement, positive parenting, and inconsistent discipline. The SDQ measures both positive and negative psychological attributes among children, including emotional problems, conduct problems, hyperactivity, peer problems, pro social skills, and total strength and difficulties. The third measures, the FRI, measures family cohesion, expressiveness, and family conflict.

### ***Providers***

Community-Based Organizations (CBOs) were contracted to provide SFP throughout Riverside County. CBO providers included: My Family, Inc (MFI) in the Western and Mid-County regions, and the Riverside Latino Commission in the Desert.

### ***Enrollment***

Countywide, 193 families enrolled in the program with 267 individual parents or guardians. Each family could have multiple family members (mother, father, grandparents, etc.). In total, 71% (n=137) of families met the program completion criteria of attending 10 or more sessions. My Family Inc. (MFI) Mid-County enrolled the majority of families (38%, n=73), followed by West (32%, n=62), and Latino Commission (30%, n=58). Each provider was contractually obligated to have 40 families complete the program.

### ***Demographics***

- Out of the 267 parents and guardians, 96% reported being Hispanic/Latino and 75% reported Spanish as the primary language spoken, followed by 10% reporting English.
- Parents/Guardians were also asked to report their age and 42% were between the ages of 30 and 39.
- The majority of participants reported being mothers (65%) of the SFP child.
- In addition, 32 % of SFP children were 6 to 7 years old, 36% were 8 to 9, and 32 were 10 to 11 years old.
- Families identified their target child as male (55%) more frequently than female (44%).
- Parents/Guardians also reported on the primary language of their SFP child. Most children's primary language was English (58%), followed by both Spanish and English (25%). The SFP children were mainly Hispanic/Latino (95%).

### ***Family Risk Factors and Children Risk Factors Reported at Screening***

- The majority of families indicated living in an underserved or low income community (89%, n=172) as a family risk factor during screening.
- The majority of families indicated their children had low academic motivation (75%, n=145) during screening.

### ***Outcomes***

#### ***Parenting Skill Strengthened***

Countywide, parents showed statistically significant improvements on the Alabama Parenting Questionnaire in the areas of parental involvement, positive parenting, and inconsistent discipline.

#### ***Enhanced Children's School Success***

The Alabama Parenting Questionnaire asked parents and guardians about their involvement in the SFP child's school life in the parental involvement scale. Countywide, parental involvement increased and suggested that parents were more involved in their SFP child's school success at the end of the program.

#### ***Reduced Child Risk Factors***

The Strength and Difficulties Questionnaire showed statistically significant improvement in child risk factors. Parents reported statistically significant improvements with their children in regard to emotional problems, conduct problems, and total difficulties.

#### ***Family Strengths Improved***

Countywide improvements in overall family strengths were observed through the Family Relationship Index. Family cohesion and expressiveness increased, while family conflicts (fighting) decreased.

#### ***Satisfaction***

The majority of participants were satisfied with 98% reporting overall satisfaction with the program and 97% were satisfied with the group leaders. All of the participants reported they would recommend this course to others (100%).

#### ***Booster***

Countywide, 52 parents/guardians attended a booster session 3 months after the end of the program. Participants reported further improvement in their child's Hyperactivity, Peer Problems, Pro-Social Behaviors, and Total difficulties. Parents also reported a decrease in inconsistent discipline. Participants were satisfied with the booster session.

## MHSA Prevention and Early Intervention Strengthening Families Program—Enrollment

### **Enrollment into the Program**

Countywide, 193 families enrolled in the Strengthening Families Program. In total, 267 individual parents or caregivers participated in the program. MFI Mid-County had the highest number of families enrolled (73), followed by the MFI West (62), and Latino Commission (58).

### **Contract Expectations**

Each regional provider was contractually expected to have 40 families complete the program during fiscal year 2018-2019, each provider met the contract expectations for family completion.

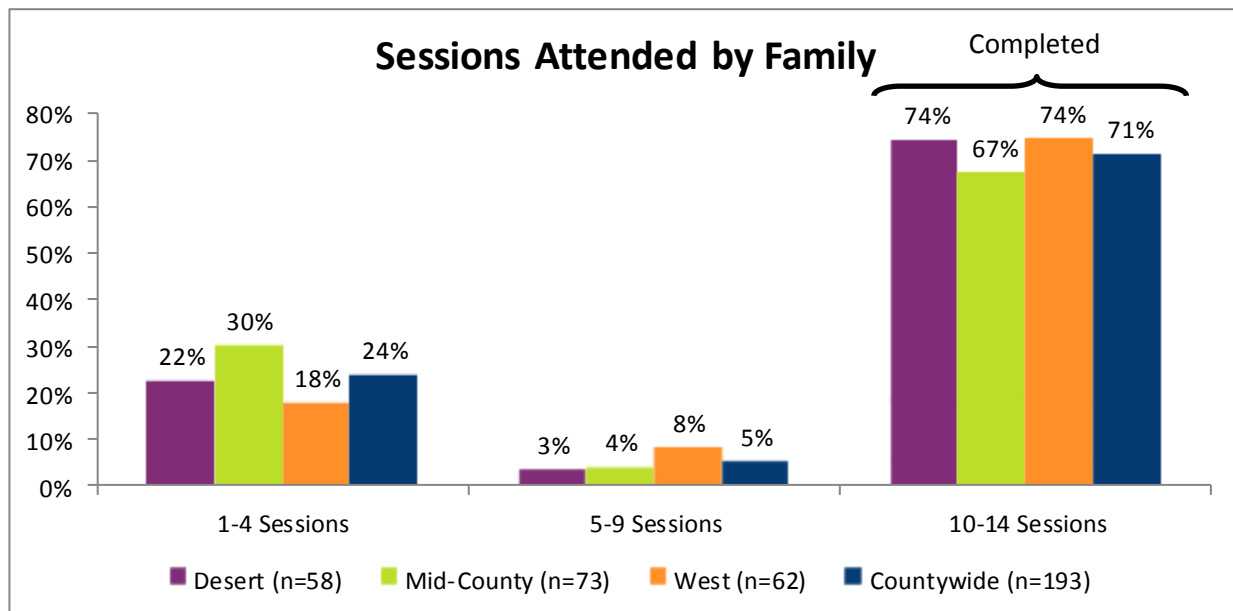
Table 1. Family Enrollment and Completion by Region

	Desert	Mid-County	West	Countywide
<b>Contract Expectations for Completion</b>	<b>40</b>	<b>40</b>	<b>40</b>	<b>120</b>
Family Enrollment	58	73	62	193
Family Completion	43	48	46	137
Percentage of Contract Completion	108%	120%	115%	114%

### **Session Attendance and Completion**

About three quarters of the families enrolled Countywide completed the program (71%, n=137). Program completion was defined as a family having attended 10 or more sessions.

Figure 1. Number of Sessions Attended by Family



### Demographics of Families

Participants' demographic information was collected during program screening.

Figure 2. Parent/Guardian Ethnicity

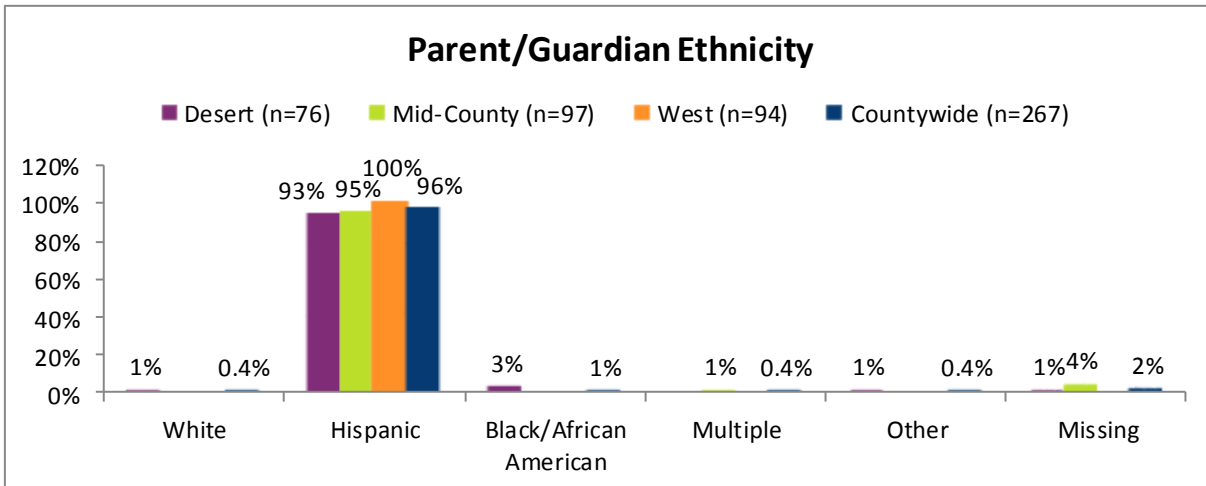
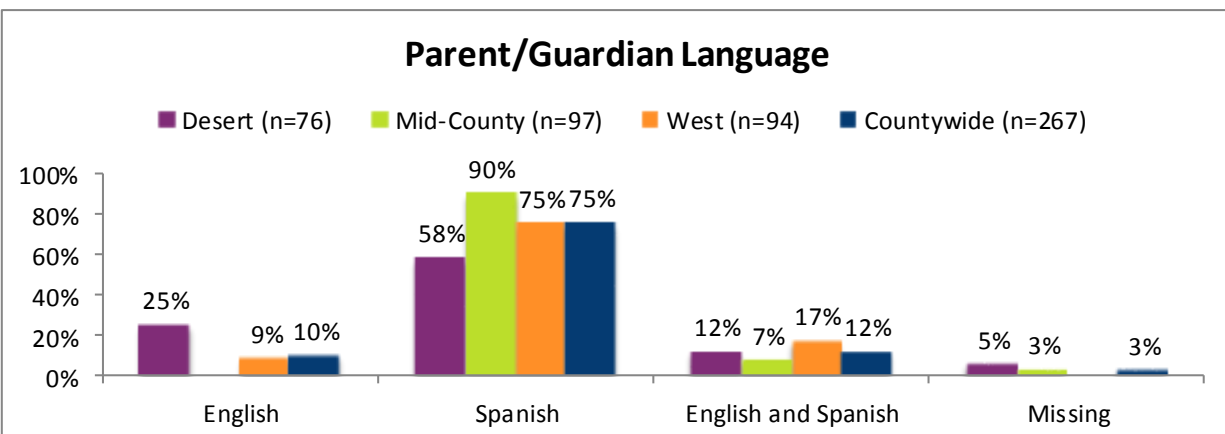


Table 2. Parent/Guardian Hispanic/Latino

Region	Central American	Mexican/American	Other Hispanic	Not Specified
Desert (n=71)	3%	96%	1%	-
Mid-County (n=92)	1%	45%	-	54%
West (n=94)	2%	34%	-	64%
Countywide (n=257)	2%	55%	.4%	43%

Countywide, the majority of parents/guardians identified as Hispanic/Latino (96%, n=257). The majority of Hispanic/Latino Parents/Guardians reported being Mexican/American (55%, n=141)

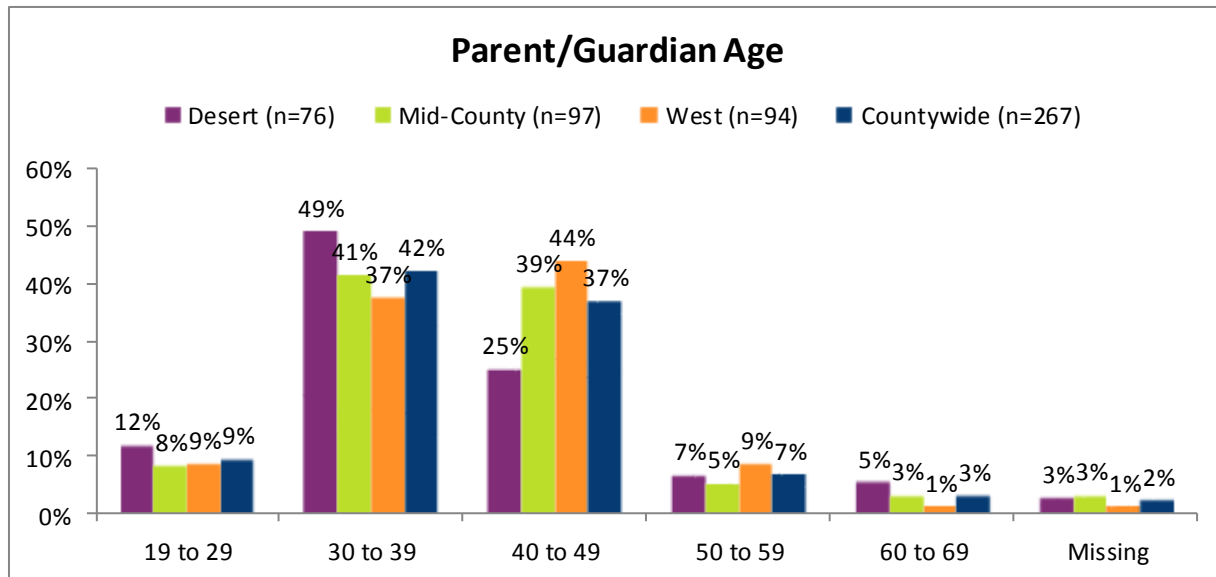
Figure 3. Parent/Guardian Primary Language



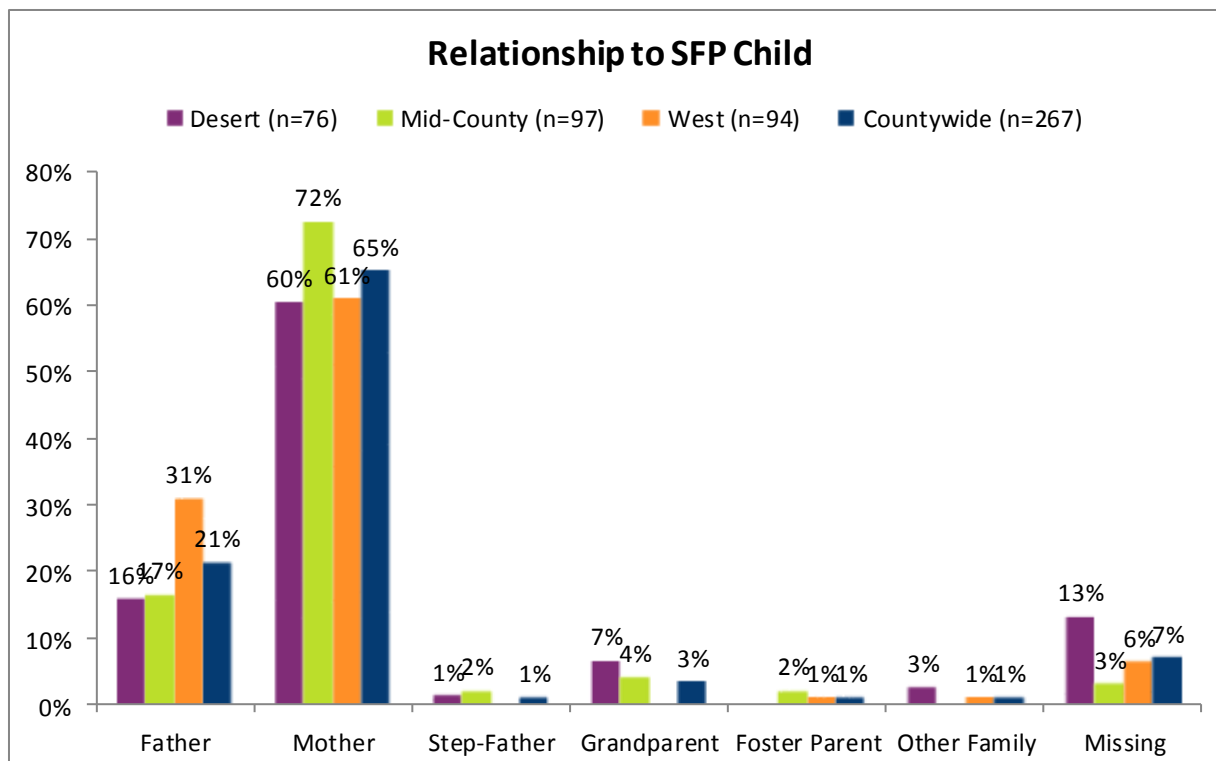
Countywide, the majority of parents/guardians identified Spanish as their primary language (75%, n=201).

## MHSA Prevention and Early Intervention Strengthening Families Program—Demographics

Figure 4. Parent/Guardian Age



Countywide, the majority of parents/guardians were between the ages of 30 and 39 (42%, n=112). The missing category includes the participants that declined to state age.



Countywide, the majority of parents/guardians identified as mothers to the SFP child (65%, n=173).

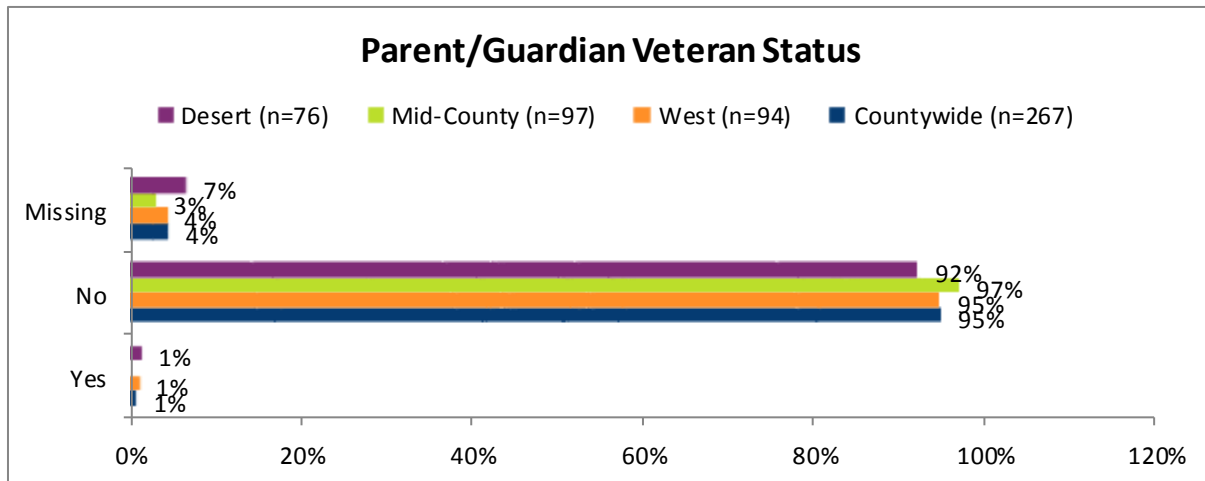
# MHSA Prevention and Early Intervention Strengthening Families Program—Demographics

Table 3. Parent/Guardian LGBTQ

Region	No	Yes	Unknown	Missing
Desert (n=76)	90%	1%	-	9%
Mid-County (n=97)	97%	-	-	3%
West (n=94)	99%	-	-	1%
Countywide (n=267)	96%	.3%	-	4%

Countywide, the majority of parents/guardians did not identify as LGBTQ.

Figure 6. Parent/Guardian Veteran Status



Countywide, 95% of participants were not veterans (n=253)

Table 4. Parent/Guardian Disability

Region	No	Yes	Missing
Desert (n=76)	88%	5%	7%
Mid-County (n=97)	97%	-	3%
West (n=94)	97%	1%	2%
Countywide (n=267)	94%	2%	4%

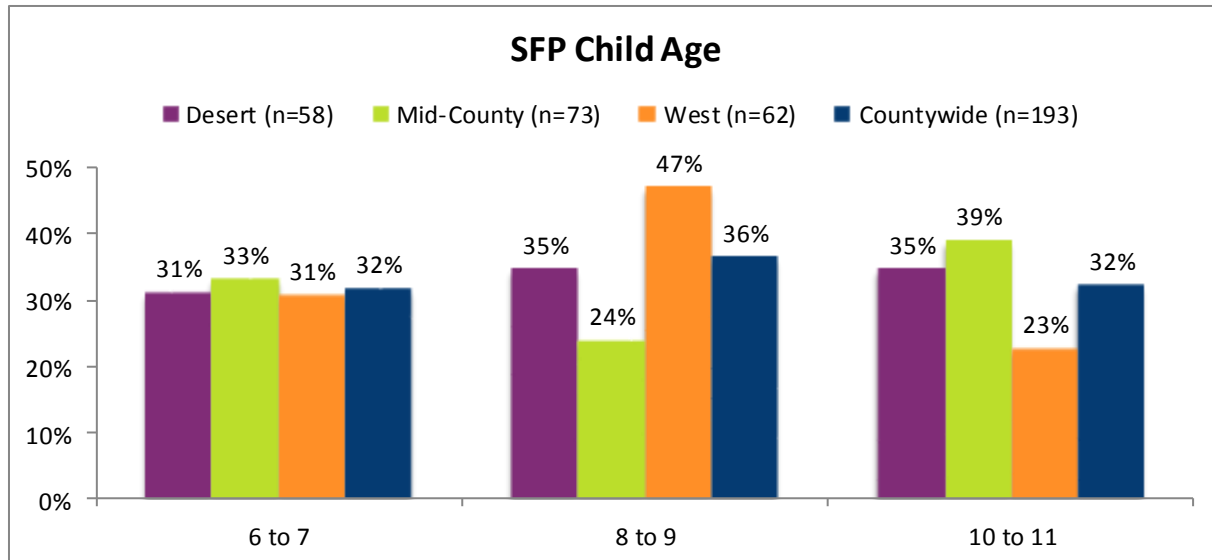
Countywide, the majority of parents/guardians did not have disabling conditions (94%, n=252)



### Demographics of Children

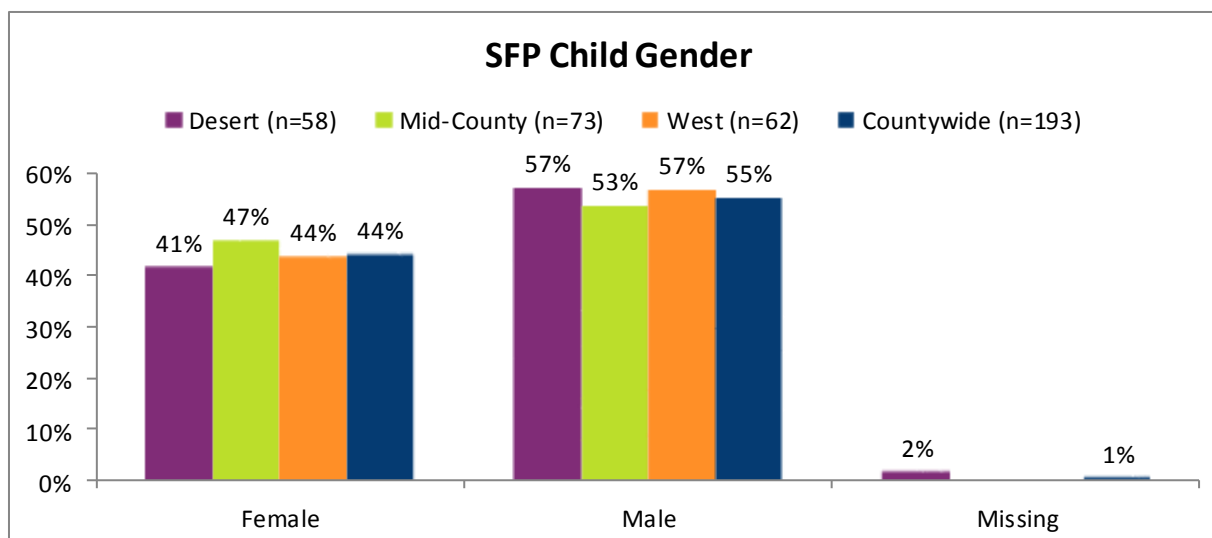
Families were asked to identify one child to focus on during SFP, if the family had more than one child, that was between the ages of 6 and 11. This child is referred to as the SFP child in the remainder of the report.

Figure 7. SFP Child Age



Countywide, 32% (n=61) of SFP children were 6-7 years old, 36% (n=70) were 8-9 years old, and 32% (n=62) were 10-11 years old.

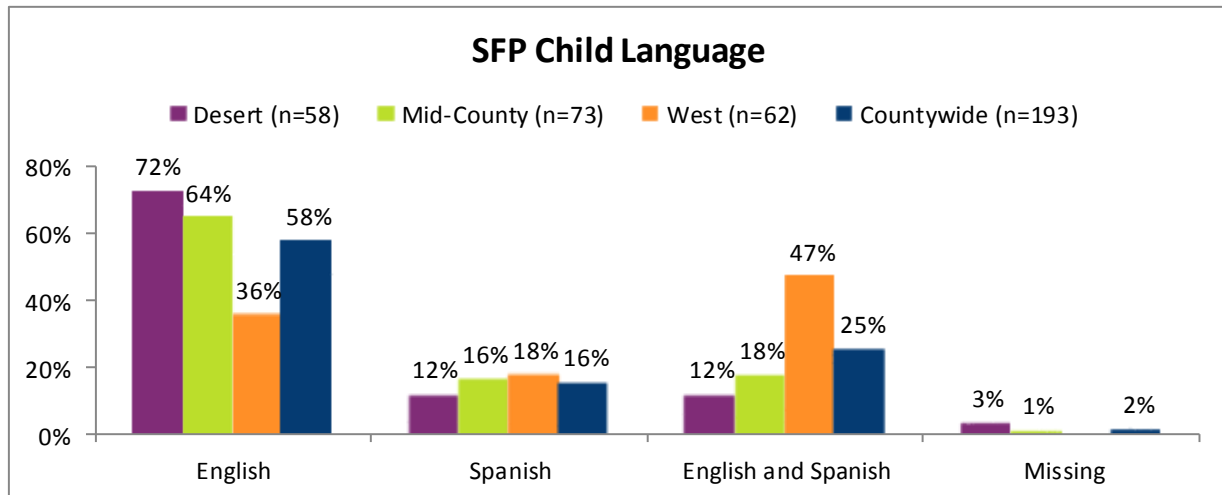
Figure 8. SFP Child Gender



Countywide, the majority of SFP children were male (55%, n=107) and 44% (n=85) were female.

## MHSA Prevention and Early Intervention Strengthening Families Program—Demographics

Figure 9. SFP Child Language



Countywide, 58% (n=111) of SFP children primarily spoke English.

Figure 10. SFP Child Race/Ethnicity

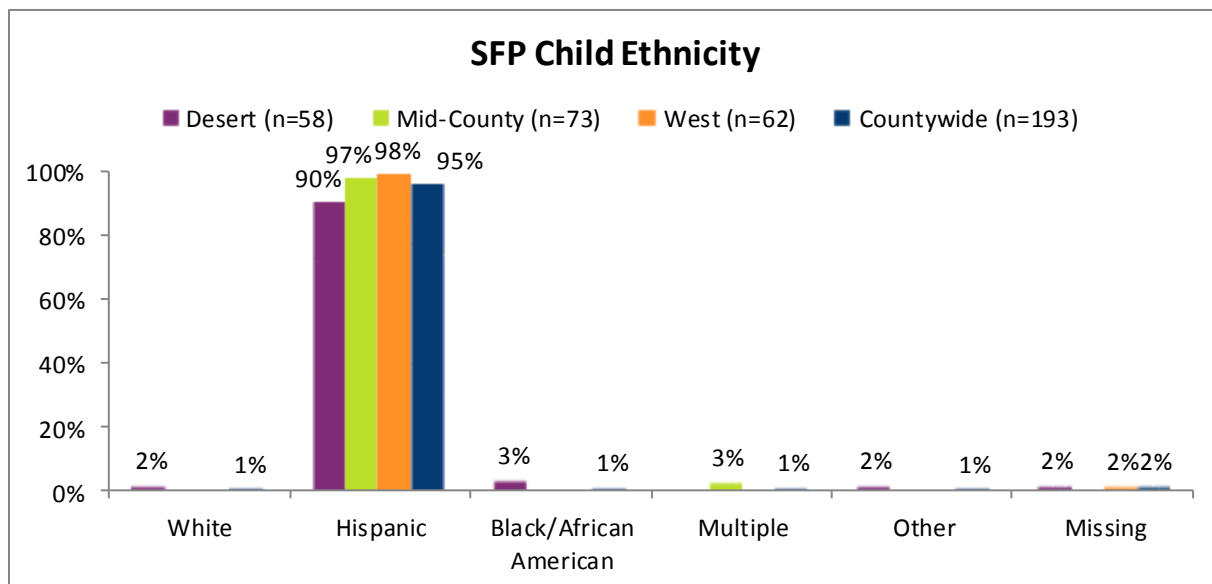


Table 5. SFP Child Hispanic/Latino

Region	Central American	Mexican/American	Multiple Hispanic/Latino	Not Specified
Desert (n=53)	2%	27%	2%	2%
Mid-County (n=71)	1%	34%	-	65%
West (n=61)	-	57%	-	43%
Countywide (n=185)	1%	59%	1%	39%

Countywide, the majority of SFP children were Hispanic/Latino (95%, n=184). Specifically, the majority of SFP children identified as Mexican/American (59%, n=109).

## MHSA Prevention and Early Intervention Strengthening Families Program—Risk Factors

During screening, the Site Coordinators have a conversation with families wanting to participate in the program to assess eligibility for the program. Throughout the conversation, Site Coordinators indicate any risk factors the families display or discuss. The following tables show the breakdown of risk factors reported by the Site Coordinators as a result of the conversations with family participants.

Table 6. Family Risk Factors

Family Risk Factors	Desert (n=58)	Mid (n=73)	West (n=62)	Countywide (n=193)
Underserved or low income community	79% (46)	97% (71)	89% (55)	89% (172)
Poor communication	71% (41)	96% (70)	84% (52)	85% (163)
Conflict or neglect	45% (26)	93% (68)	2% (1)	49% (95)
Low expectations for children's school success	7% (4)	69% (50)	36% (22)	39% (76)
Lack of supervision/discipline or parental involvement	29% (17)	52% (38)	27% (17)	37% (72)
Parental or sibling substance abuse	10% (6)	7% (5)	2% (1)	6% (12)
Sexual, emotional or physical abuse	10% (6)	4% (1)	-	5% (9)

Of the 177 families enrolled in SFP, the majority of families (92%) lived in an underserved or low income community, and reported having poor family communication (80%). (See Table 6).

Table 7. Child Risk Factors

Child Risk Factors	Desert (n=58)	Mid (n=73)	West (n=62)	Countywide (n=193)
Low academic motivation	45% (26)	84% (61)	94% (58)	75% (145)
Behavior problems	78% (45)	85% (62)	48% (30)	71% (137)
Low self-esteem	47% (68)	93% (68)	7% (4)	51% (99)
Skill deficits	64% (37)	81% (59)	-	50% (96)
Lack of peer refusal skills	9% (5)	29% (21)	-	14% (26)
Pro-drug attitudes	2% (1)	3% (2)	-	2% (3)

Of the 193 families enrolled in SFP, the majority (75%) of families reported their child had low academic motivation, and 71% had behavior problems. (See Table 7).

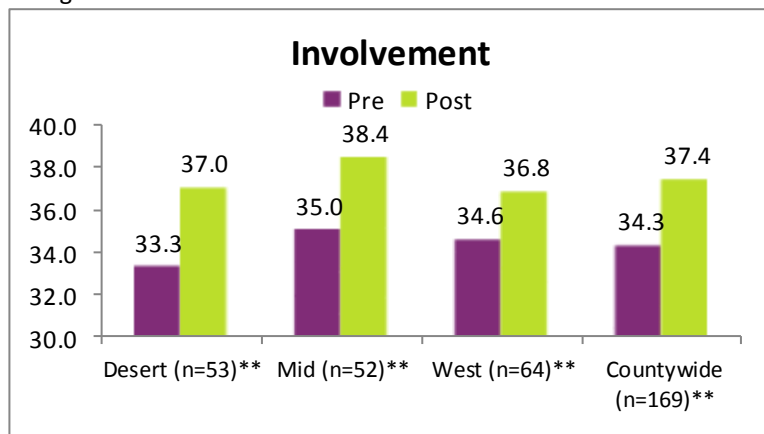
## MHSA Prevention and Early Intervention Strengthening Families Program—Outcomes Alabama Parenting Questionnaire

Each adult family member was asked to complete a pre measure packet at the beginning of the program, and post measures at the end of the program. The packet included an abbreviated version of the Alabama Parenting Questionnaire, the Strength and Difficulties Questionnaire, and the Family Relationship Index. Participants were instructed to answer the items based on the identified SFP child. Only participants who completed at least half of the program with pre to post matched pairs were included in the analysis.

### Outcomes Data: Alabama Parenting Questionnaire (APQ)

The APQ measures three dimensions of parenting. The three dimensions include parental involvement, positive parenting, and inconsistent discipline. Each item has a scale of 1 to 5 (1=Never, 2=Almost Never, 3=Sometimes, 4=Often, 5=Always).

Figure 11. Involvement

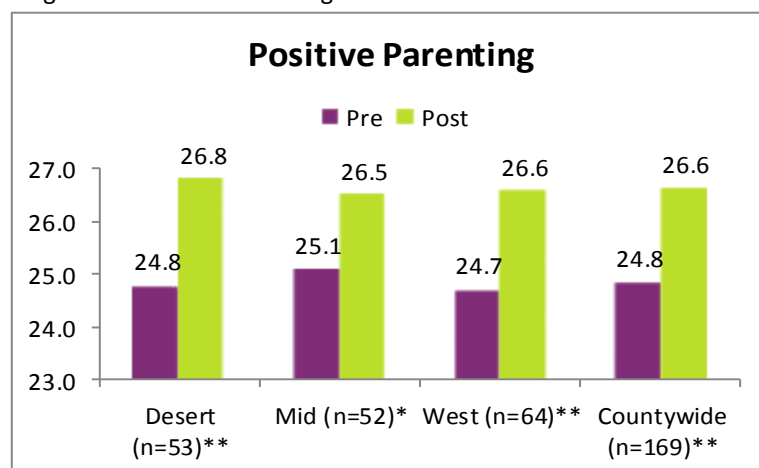


The Involvement scale included items such as “You play games or do other fun things with your child” and “You ask your child about his/her day in school”.

Countywide, and in each region, **Parental Involvement increased significantly** from the beginning of the program to the end of the program.

\*Significant at .05 \*\*Significant at .01

Figure 12. Positive Parenting

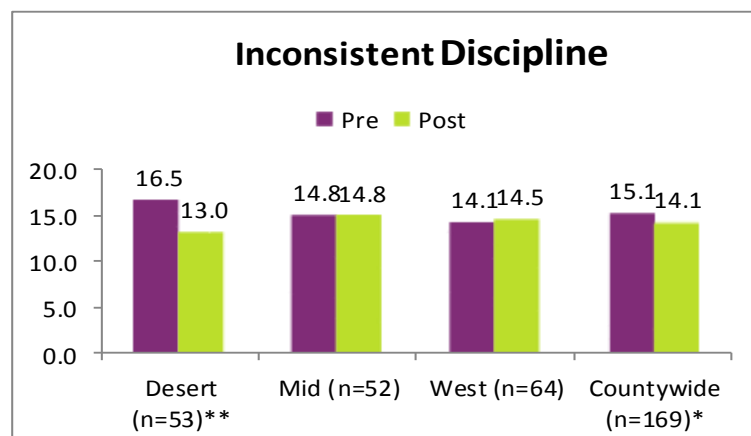


The Positive Parenting scale included items such as “You praise your child when s/he does something well” and “You let your child know when s/he is doing a good job with something”.

Countywide, and in each region, **Positive Parenting increased significantly** from the beginning of the program to the end of the program.

\*Significant at .05 \*\*Significant at .01

Figure 13. Inconsistent Discipline



The Inconsistent Discipline scale included items such as “You threaten to punish your child and then do not actually punish her/him” and “You feel that getting your child to obey you is more trouble than it’s worth”.

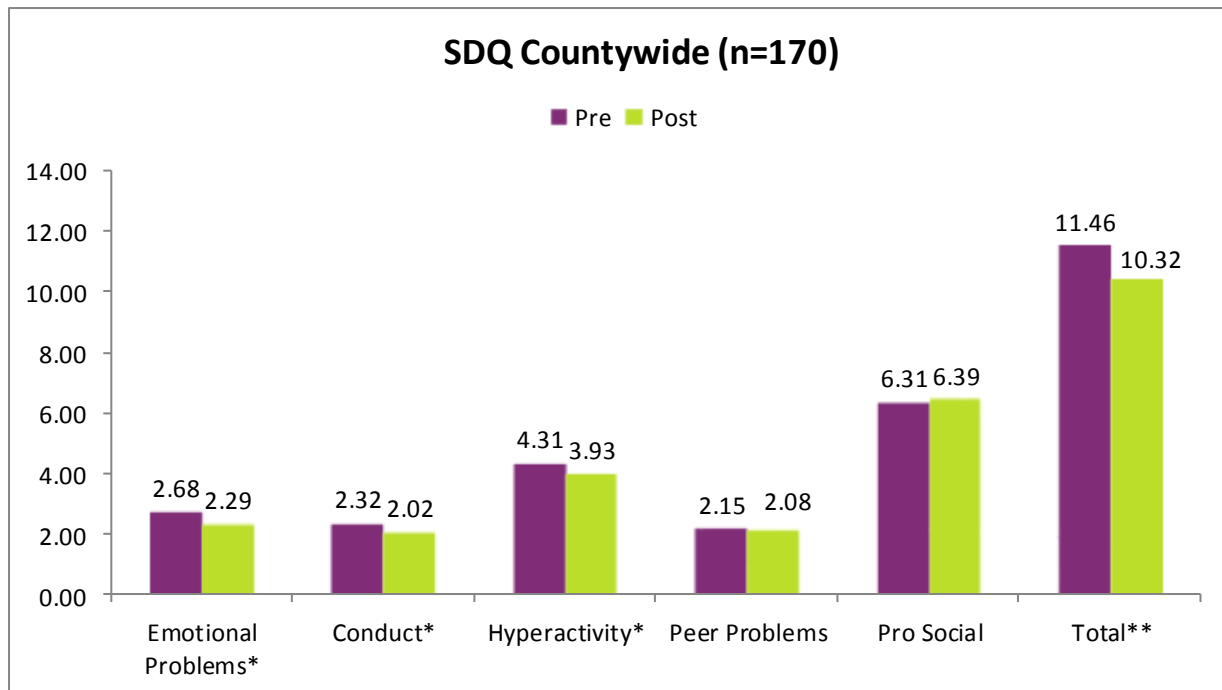
Countywide, and in the Desert, **Inconsistent Discipline decreased significantly** from the beginning of the program to the end of the program.

\*Significant at .05 \*\*Significant at .01

**Outcomes Data: Strength and Difficulties Questionnaire**

The Strength and Difficulties Questionnaire (SDQ) is used to screen for both positive and negative psychological attributes among program participants. There are multiple versions of the SDQ measure. This program used the SDQ Parent Version. The SDQ emphasizes both strengths (pro-social behavior) as well as behavioral difficulties, and it can be used both as an assessment and as a program evaluation tool. The SDQ is completed by parents at the beginning and at the conclusion of the program, in order to measure change in participants behavior problems over time. This 25 question measure has a total score with four scale scores for behavioral difficulties including: emotional symptoms, conduct issues, hyperactivity/inattention, and peer relationship problems. Higher scores on behavioral difficulties suggest higher incidence of negative psychological attributes. There is also a Pro-Social scale which is independent and higher scores suggest greater pro-social behaviors; this scale is not used to calculate the total score.

Figure 14. SDQ Countywide

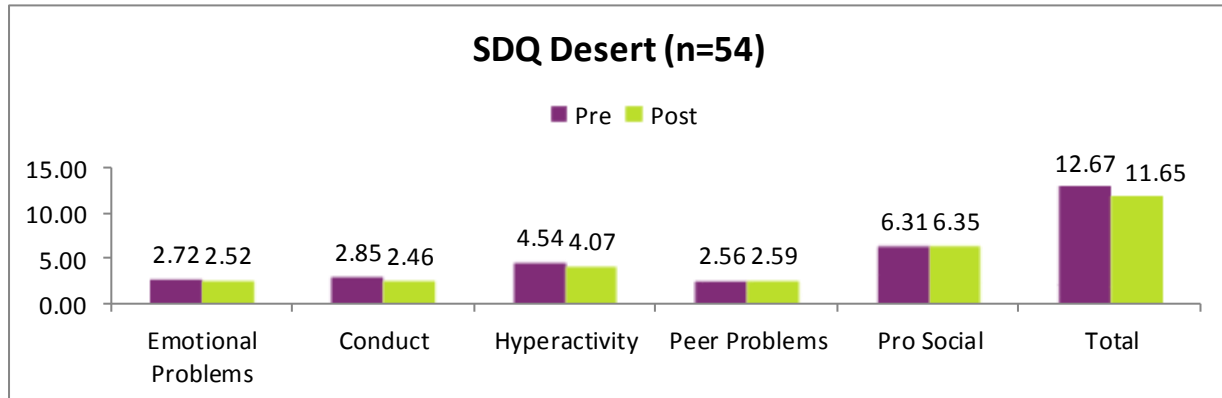


\*Significant at .05 \*\*Significant at .01

Analysis was done for parents who completed both a pre and post SDQ measure and attended at least 7 sessions. On average, parents reported overall decreases in their child's behavioral difficulties. Across individual subscales, parent reports suggest their youth's **Emotional Problems, Conduct, Hyperactivity, and Total scores statistically significantly improved.**

**MHSA Prevention and Early Intervention  
Strengthening Families Program—Outcomes, Strength and Difficulties Questionnaire  
by Region**

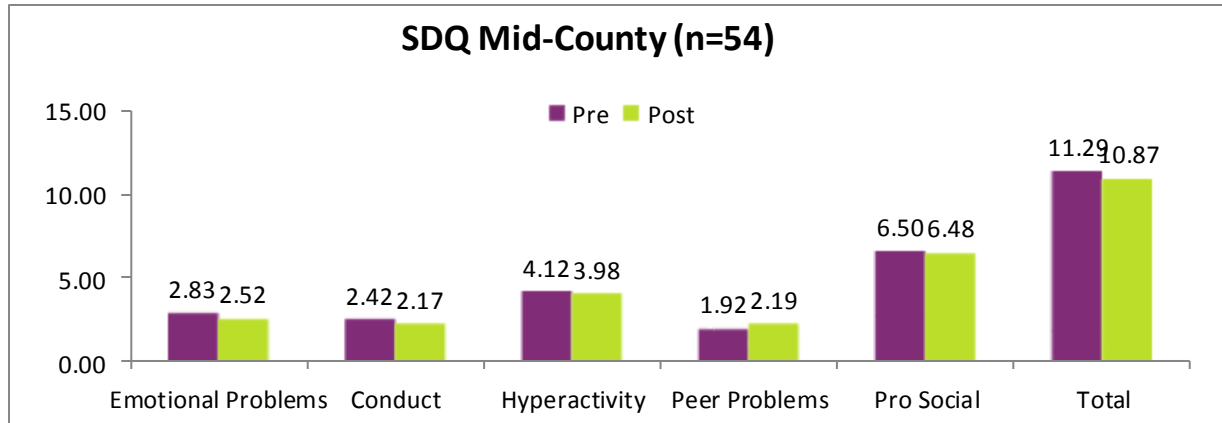
Figure 15. SDQ Desert



\*Significant at .05 \*\*Significant at .01

On average, parents in the Desert did not report significant improvements in their child's strengths and difficulties.

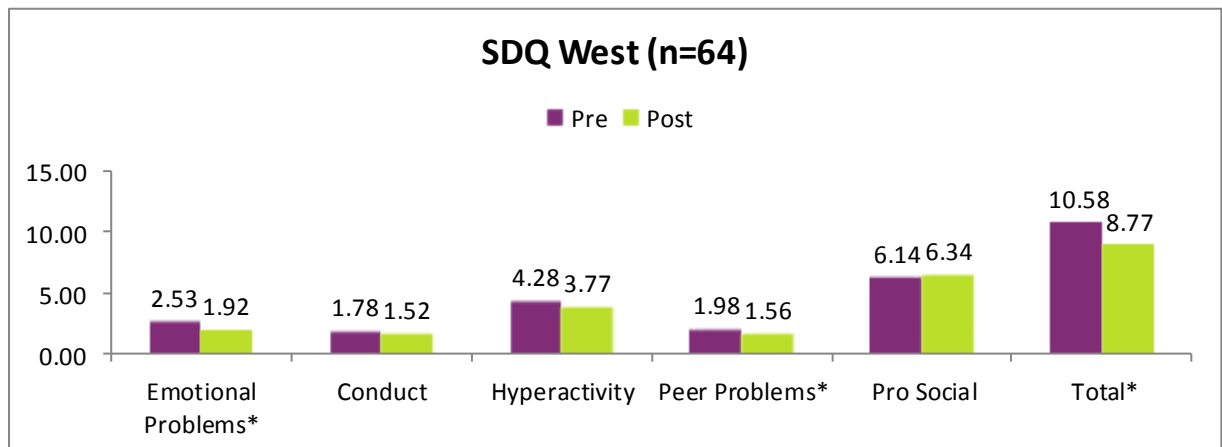
Figure 16. SDQ Mid-County



\*Significant at .05 \*\*Significant at .01

On average, parents in Mid-County reported **no significant improvements** in their child's strength and difficulties.

Figure 17. SDQ West



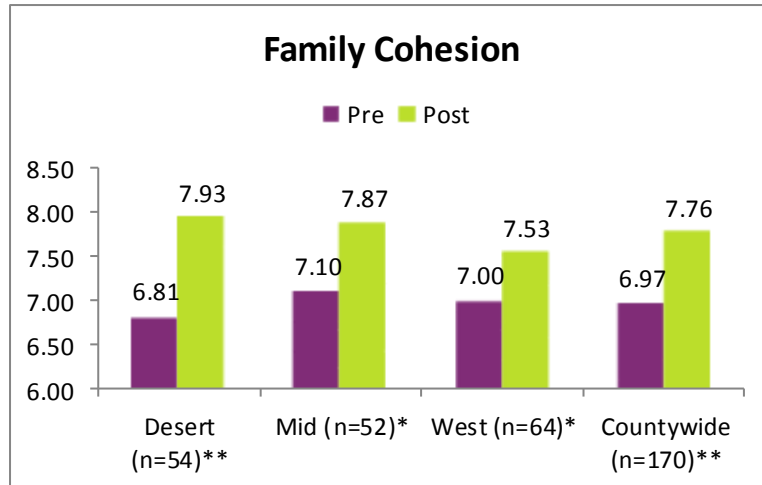
\*Significant at .05 \*\*Significant at .01

On average, parents in the Western region reported **significant improvements in their child's Emotional Problems, Peer Problems, and Total Problems.**

### Outcomes Data: Family Relationship Index

The Family Relationship Index (FRI) is a self-report measure that uses True/False items that provides an index of the quality of the family environment with three scales: Family Cohesion where higher scores indicate high family cohesion, Expressiveness where higher scores indicate high levels of expressiveness within the family, and Conflict where higher scores indicate high levels of family conflict.

Figure 18. Family Cohesion

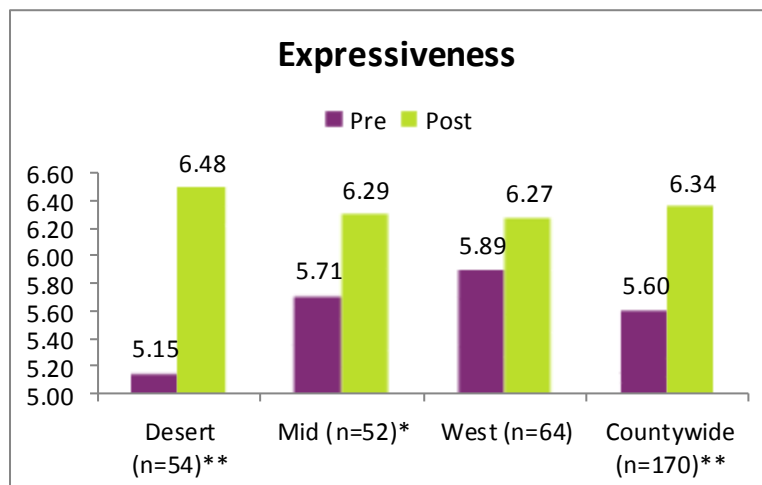


The Family Cohesion scale included items such as “Family members really back each other up” and “There is a feeling of togetherness in our family”.

Countywide, families reported **significantly higher Family Cohesion** at the end of the program compared to the beginning of the program.

\*Significant at .05 \*\*Significant at .01

Figure 19. Expressiveness

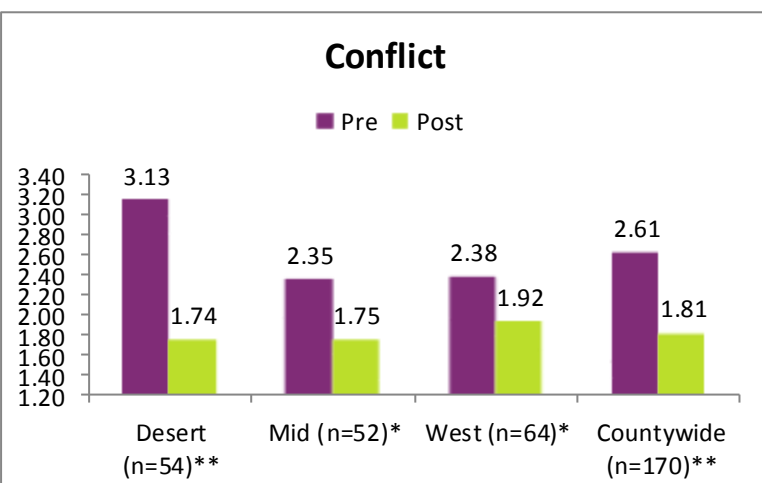


The Expressiveness scale included items such as “We tell each other about our personal problems” and “There are a lot of spontaneous discussions in our family”.

Countywide, and all regions, families reported **significantly higher Expressiveness** at the end of the program compared to the beginning of the program.

\*Significant at .05 \*\*Significant at .01

Figure 20. Conflict



The Conflict scale included items such as “We fight a lot in our family” and “Family members often criticize each other”.

Countywide, and in the Desert and Western regions, families reported **significantly lower amounts of family Conflict** at the end of the program compared to the beginning of the program.

\*Significant at .05 \*\*Significant at .01

**MHSA Prevention and Early Intervention  
Strengthening Families Program—Satisfaction**

***Satisfaction***

A total of 170 parents/guardians completed a satisfaction survey at the end of the program, and 98% of participants reported being satisfied or very satisfied with the program and 97% with their group leaders. Almost all of the participants (98%) reported that the class helped their families, and 100% of participants said they would recommend the course to other families.

Table 8. Satisfaction

	<b>Very Dissatisfied</b>	<b>Dissatisfied</b>	<b>Neutral</b>	<b>Satisfied</b>	<b>Very Satisfied</b>
How satisfied were you with this program?	1%	1%	-	7%	91%
How satisfied were you with your group leaders?	1%	1%	1%	7%	90%
	<b>Not At All</b>	<b>Very Little</b>	<b>Not Sure</b>	<b>Somewhat</b>	<b>Very Much</b>
How much has this class helped your family?	1%	1%	-	10%	88%
	<b>Yes</b>	<b>No</b>			
Would you recommend this course to other families?	100%	-			

***Comments:***

“This course was very helpful to me. I have better communication with my children and spouse. They have opened more dialogue, they understand me more and we have more fun together as a family.”

“Thank you to our leader. She helped us a lot in taking back control. I didn’t know how to be a parent, but this program has taught me to guide my children in their lives.”

“I would like to let everyone know how grateful I am for being able to join the program. The program has been very helpful to me and the kids. When we started the program we were struggling with a lot of family issues at home. Thanks to the program, we have been working on these issues and are getting things under control again. “

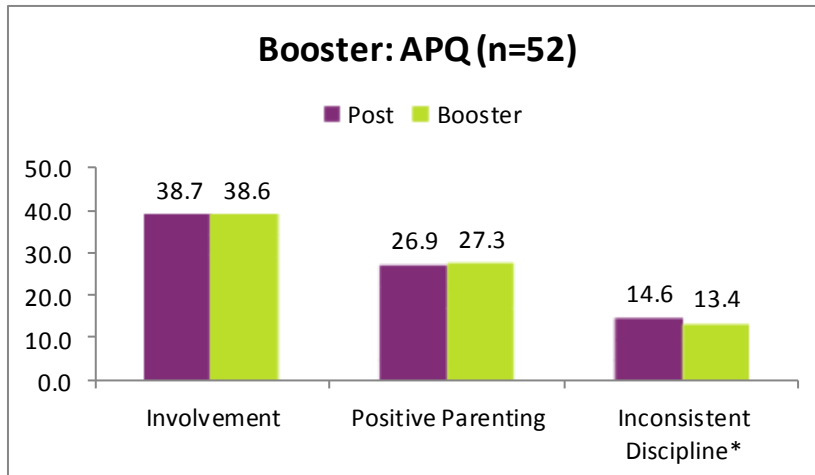
“I feel this class was very informative. I was able to practice many things at home with my children. This course should be offered to more families who are of English primary language, personal sessions with families and instructors would be beneficial to children so that parents can make sure we are all on the same page.”



## MHSA Prevention and Early Intervention Strengthening Families Program—BOOSTER Outcomes Alabama Parenting Questionnaire

Each region held booster sessions for families 3 months after the end of the program, 52 individuals attended. Each adult family member in attendance was asked to complete a booster measure packet. The packet included an abbreviated version of the Alabama Parenting Questionnaire, the Strength and Difficulties Questionnaire, and the Family Relationship Index. Analysis was done for post measures and booster measures matched pairs.

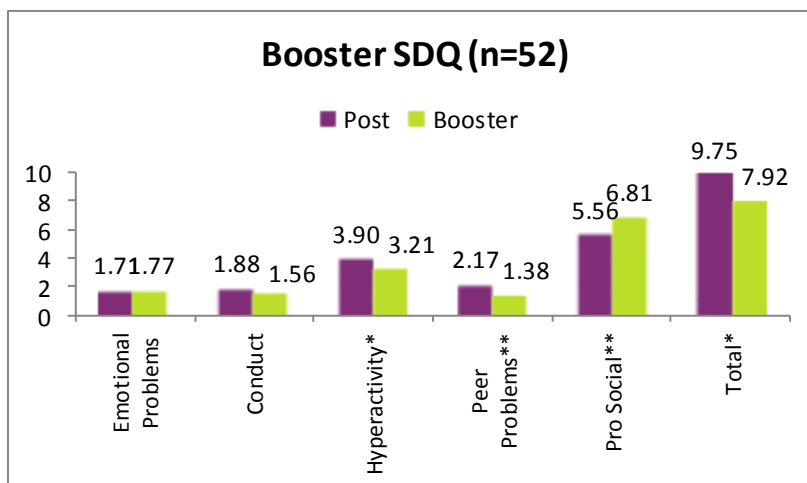
Figure 21. Post to Booster APQ Countywide



Analysis was done for parents who completed both a post and booster session APQ measure.

The parents/guardians that completed a booster measure reported improvement in inconsistent discipline from after the program ended to the booster session.

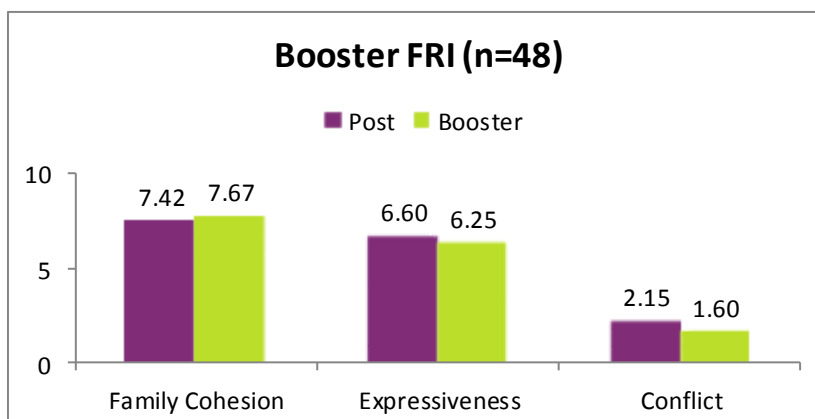
Figure 23. Post to Booster SDQ Countywide



Analysis was done for parents who completed both a post and booster session SDQ measure.

The parents/guardians that completed the booster reported new improvements in their child's behavior in regards to Hyperactivity, Peer Problems, Pro-Social Behaviors, and Total difficulties.

Figure 22. Post to Booster FRI Countywide



Analysis was done for parents who completed both a post and booster session FRI measure.

The parents/guardians that completed the booster did not report any further improvements on the Family Relationship Index.

**MHSA Prevention and Early Intervention  
Strengthening Families Program— BOOSTER Satisfaction**

***Booster Satisfaction***

A total of 49 parents/guardians completed a satisfaction survey at the end of the booster session, and 98% of participants reported being satisfied or very satisfied with the booster and 98% were satisfied with their group leaders. 98% of parents/guardians reported that the booster class helped their families, and 100% of participants said they would recommend the booster to other families.

Table 9. Booster Satisfaction

	<b>Very Dissatisfied</b>	<b>Dissatisfied</b>	<b>Neutral</b>	<b>Satisfied</b>	<b>Very Satisfied</b>
How satisfied were you with this booster class?	2%	-	-	12%	86%
How satisfied were you with your group leaders?	2%	-	-	4%	94%
	<b>Not At All</b>	<b>Very Little</b>	<b>Not Sure</b>	<b>Somewhat</b>	<b>Very Much</b>
How much has this booster class helped your family?	2%	-	-	8%	90%
	<b>Yes</b>	<b>No</b>			
Would you recommend this booster to other families?	100%	-			

***Comments:***

Thank you for this group and the help for our families. It really helped me a lot and to understand my family. Thank you

This program helped me look at what I need to better in my parenting skills, especially because I am a single mom. I learned to listen to my daughters' and their feelings and how to react to the situations.