



# ★ Star View Community Services ★

## Incredible Years™ Program

**BRIEF REPORT** from the Department of Research and Program Practices

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Star View Community Services (aka Star View) began offering Incredible Years™ parenting program and child treatment program in early 2008 as a group service for parents/caregivers and their children ages 4 to 12 years enrolled in Star View's varied therapy practices. Star View's IY program is funded by multiple sources through contracts with the Los Angeles County Department of Mental Health. Incredible Years™ (IY) is an established, evidence-based parenting skills and childhood socialization training program that involves twenty weekly evening sessions for caregivers and children, seen in separate groups. Parents gain concrete skills in social, emotional and persistence coaching of their children, along with an understanding of child development and positive behavior management. Children have an opportunity to learn, grow and share in social-emotional development and self-regulation. Star View supports the program with IY credentialed multi-culturally trained facilitators, cultural attunements including Spanish-speaking groups, transportation, child care, dinner and an array of community-building activities that bring all enrolled families and children together. This **BRIEF REPORT** highlights program results, complementing prior externally reported findings from the California Institute of Behavioral Healthcare Services (CiBHS).<sup>i</sup>

### **Participants:**

From Oct 2010 thru April 2016, Star View's IY program served 434 children/youth and their caregivers. The children/youth were 65% male, 35% female. Their average age at enrollment was 8.8 yrs. They were Latino/Hispanic (82%) or African American (17%), and a few others (1%). The children/youth were prior diagnosed with externalizing (58%) and/or internalizing (45%) conditions. Common among the former were disruptive and oppositional behaviors, attention deficit with hyperactivity, and adjustment with mixed features including problems of conduct. Common among internalizing conditions were varied types of anxiety disorders, dysthymia and post-traumatic stress.

In all circumstances, SV's referring clinicians' determined the combined focus of IY -- bolstering parenting skills while also addressing the child's development and self-management -- was important for the overall family and child's wellness and would contribute meaningfully to the results of therapy. Referrals came from our following practice teams:

- |   |     |
|---|-----|
| 1. General outpatient or PEI unspecified <sup>ii</sup>                      | 47% |
| 2. Field capable clinical services  | 26% |
| 3. Family or trauma therapy (e.g., AF-CBT, CPP, FFT, TF-CBT) <sup>iii</sup> | 15% |
| 4. Managing and Adapting Practice (MAP)                                     | 7%  |
| 5. Full Service Partnerships  | 5%  |

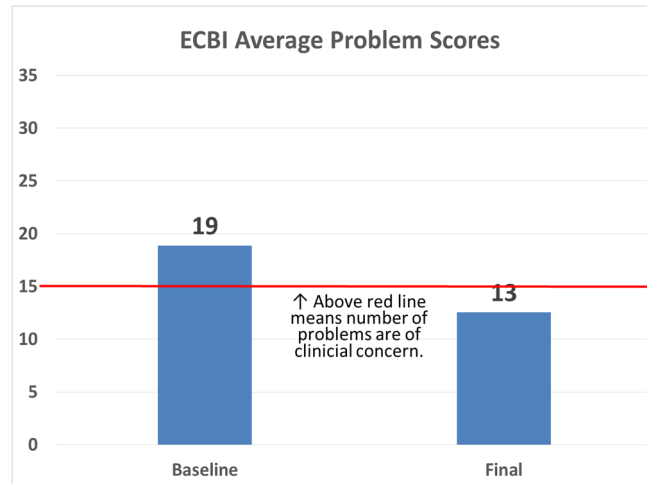
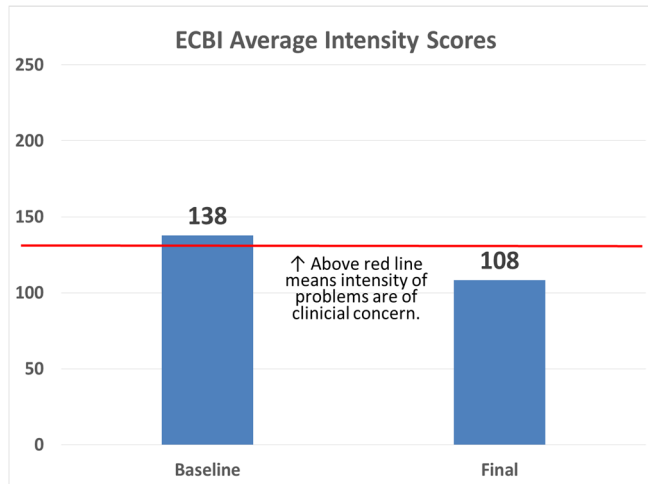
### **FIDELITY AND QUALITY**

One of the greatest challenges of offering group services in community settings is achieving and sustaining participation through a sufficient number of sessions that the key deliverables of the program are received and practiced. This is especially challenging when potential participants may experience stigma or wariness about obtaining help or (in this case), they may not perceive a need for improving parenting skills. Star View's team performs well in this regard, with both a strong initial implementation and sustained good results over time on indicators below:

- ★ **Engagement soon after referral**, with 75% of caregivers showing up for their first group within a week to two of being referred. The team coordinates the referral process to boost engagement.
- ★ **Comparatively low early drop-out rates**: Star View's ranged from 15% to 30% across distinct cohorts represented in CiBHS historical reports, compared to 33% to 40% among statewide IY providers.
- ★ **Good completion rates**: overall, 68% of caregivers and youth complete Star View's IY. CiBHS statewide range was 58% to 67%.
- ★ **The average number of sessions attended for those completing IY is 17 for both caregivers and youth** (CiBHS range 13 to 19). Services occur over a period of 130 days, on average.
- ★ Surveys based on sampling across different sessions, reveal **95% to 99% caregiver endorsements** (helpful/very helpful responses) of contents, videos, facilitator skills, and group discussions.

## RESULTS

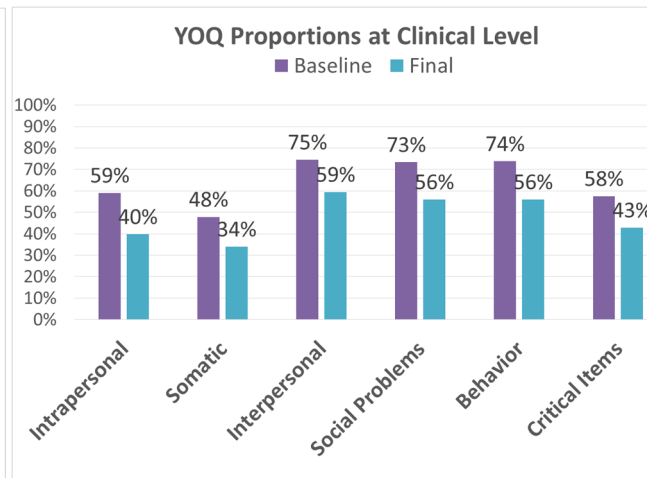
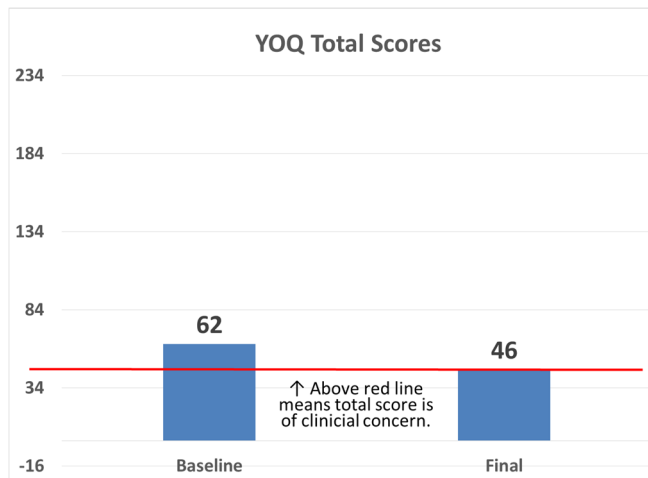
The *Eyberg Child Behavior Inventory* (ECBI) measures parent's perceptions about their children's behavior problems, both **intensity** (frequency) and number of **problems**. The graphs below show average scores on these two scales at the start and end of IY. The sample is good with 269/284 matched records or 94% of those completing IY during this period. Lower scores and dropping below clinical levels of concern (red lines) are desirable.



Additional ECBI results are as follows. Please contact the author for further details:

- ★ The average amount of change is **statistically significant** ( $p < .000$ , both indices) and of a **solid effect size** (Cohen's  $d = .75$  intensity,  $.61$  problems).
- ★ Most caregivers perceive their **children experience meaningful reliable change** (MRC = 72% intensity, 70% problems) which will persist beyond their enrollment in IY classes.
- ★ In the matched sample, the **proportions at/above clinical cut-points shift downward** from 57% to 35% intensity; 70% to 44% problems (ChiSq's  $< .000$ ).

The *Youth Outcome Questionnaire* (YOQ) assesses parent's perception regarding their children's mental health functioning over the prior week. The scale includes a total score and ratings on six subscales: intrapersonal, somatic, interpersonal, social problems, behaviors, and critical (high risk). The graphs below show the average total scores and percentages falling below clinical cut-offs by subscale, from start to end of IY. The sample is good with 259/284 (91%) matched records. Lower scores, dropping below the cut-off (red line) and fewer with clinical levels of concern are desirable.



Additional IY results are as follows. Please contact the author for further details:

- ★ The average amount of change is **statistically significant** ( $p < .000$ ) and of a **solid effect size** (Cohen's  $d = .62$ ) regarding the YOQ total score.
- ★ Most caregivers perceive their **children experience meaningful reliable change** (MRC = 68%), YOQ total score.
- ★ In the matched sample, the **proportions at/above clinical cut-points shift downward** from 67% to 44% on the total score (ChiSq  $< .000$ ). Subscale shifts in graph are all significant (ChiSq's  $< .000$ ).

i Please see CiBHS *Program Performance Dashboard Reports* provided through contact listed at: <http://www.cibhs.org/evaluation-ebps>.

ii Includes foster youth and caregivers funded by Specialized Foster Care funding, the original funding source for IY.

iii The acronyms are: AF-CBT = Alternatives for Families, Cognitive Behavioral Therapy; CPP = Child Parent Psychotherapy; FFT = Functional Family Therapy; TF-CBT, Trauma-Focused Cognitive Behavioral Therapy. Practitioners from these and a few other Star View EBPs currently refer into IY. For more information about Star View, please visit SBHG's website (<http://www.starsinc.com/>).