

The Effectiveness of Evidence-based Attachment-focused Parenting for Families with Young Children: Using *Circle of Security* in the Child Welfare System

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BACKGROUND

Young children who are 0 to 5 years of age are over-represented in child welfare systems nationally and in Florida. Research clearly has documented the ill effects of having experienced childhood maltreatment. Although new research examining the neurobiology of parenting appears to suggest that attachment-based parenting programs may offer added benefit to high-risk families (particularly those who are substance-involved), few studies have examined attachment-based parenting programs in child welfare populations. Nonetheless, research has suggested that attachment-based parenting programs, such as the Circle of Security (CoS) Parenting Intervention, can promote beneficial outcomes for other types of high-risk parents. For example, mothers who participated in a 20-week CoS program via a 15-month jail diversion residential program demonstrated higher levels of sensitivity and had infants who exhibited more secure attachment following intervention. Additionally, mothers who participated in the eight-week CoS program while receiving intervention in residential drug treatment facilities exhibited improved parenting locus of control, parenting attributions, discipline practices, and emotion regulation. Such outcomes would be highly beneficial to high-risk families with young children in child welfare systems. Given these research findings, this project examined the feasibility and effectiveness of using the eight-week Circle of Security (CoS) Parenting Intervention in Orange County, Florida.

RESEARCH METHODOLOGY

As part of this project, culturally diverse mothers and fathers were recruited by case managers for participation because these parents were in particular need of parenting intervention services. Parents were referred to our research team if they met the following criteria: 1) they had young children who ranged in age from 0 to 5 years; 2) they proficiently spoke and understood English; 3) they were 18 years of age or older themselves; 4) they had access to their young children (e.g., through visitation); 5) they were not using substances to intoxication at times that would prevent their participation; and 6) they did not have significant mental or physical health issues that would prevent their participation.

All parents who participated in this project completed a series of measures at the start of their participation. These measures included:

- 1) Adverse Childhood Experiences Study Questionnaire
- 2) Adult Self Report
- 3) Difficulties in Emotion Regulation Scale
- 4) Coping with Toddlers' Negative Emotions Scale
- 5) Parenting Stress Index - Short Form
- 6) Child Abuse Potential Inventory
- 7) Parent Attribution Test
- 8) Parental Locus of Control Scale - Short Form

With the completion of this initial packet, 38 parents were assigned randomly to participate in CoS groups held at the CBC lead agency, and 27 parents were assigned randomly to a comparison group. Thus, 38 parents who participated in this project received CoS over the course of a subsequent eight-week period and continued to receive their usual case management services, while 27 parents just received their usual case management services. Following this eight-week period, we attempted to contact all parents (in both the comparison and CoS groups) to complete the same set of measures (listed above) a second time so that changes in their ratings on each measure could be monitored at this follow-up period. Those parents who participated in the CoS group were much more likely to return for this second data collection relative to those parents in the comparison group.

KEY FINDINGS

Differences Between CoS Group Parents and Comparison Group Parents at the Start of their Participation

To examine the similarities across those parents who had been assigned to participate in the CoS group ($n = 38$) versus those parents who were assigned to the comparison group ($n = 27$), a series of independent sample t-tests was conducted. Generally, parents across these two groups were not significantly different in: 1) their ratings of their externalizing and total behavior problems; 2) most of their difficulties in emotion regulation; 3) most of their parenting behaviors when endorsing how they would deal with young children's negative emotions; and 4) their attributions for their parenting behaviors. These findings suggested that these groups could be compared meaningfully.

Differences in the Comparison Group at the Start of their Participation versus at the Close of their Participation

So that the comparison group parents could be monitored for changes in their ratings across time as they proceeded from the point when they first participated in this project through the eight-week follow up period, paired samples t-tests were conducted. Comparing the comparison group parents' ratings at the start of their participation to their ratings at the close of their participation (approximately eight-weeks later), parents in the comparison group demonstrated a decrease in their lack of awareness regarding their emotion regulation difficulties and decreases in their punitive parenting strategies (generally positive findings). They also showed decreases in their endorsements of emotion-focused and wish granting parenting strategies (generally problematic findings).

KEY FINDINGS (CONTINUED)

Differences in the CoS Group at the Start of their Participation versus at the Close of their Participation

So that the CoS group parents could be monitored for changes in their endorsements across time as they proceeded from the point when they first participated in this project through their eight-week CoS participation, paired samples t-tests were conducted. Comparing the CoS group parents' endorsements at the start of their participation (pre-group) to their ratings at the close of their participation (post-group), parents in the CoS group demonstrated significant increases in their impulse control difficulties and their lack of emotional clarity, as well as a marginal increase in their limitations in accessing emotion regulation strategies (all on the Difficulties in Emotion Regulation Scale). Although these increases may seem contradictory to the achievements that parents need to make as they work toward reunification with their young children, it may actually be the case that parents became much more aware of their emotion regulation difficulties because of their CoS participation. They also demonstrated decreases in their endorsement of punitive reactions and minimization parenting strategies as well as an increase in their endorsement of encouragement as a parenting strategy (generally positive findings). These findings highlighted that evidence-based attachment-focused parenting interventions, such as CoS, can promote improvements in parenting beyond decreases in punitive parenting strategies.

Differences between Those Parents Who Participated at Both Data Collection Periods (i.e., at the Start of their Participation and at the Close of Their Participation) Versus Those Who Did Not

Those parents who were assigned randomly to the comparison group had a higher attrition rate (56%) relative to those parents who were assigned randomly to the CoS group (31.4%). The only (marginal) difference between those parents assigned to the comparison group who completed their follow up participation and those parents who did not complete their follow-up participation occurred in their endorsements for the adult control for failure scale on the Parent Attribution Test at the initial data collection for this project. In other words, those parents in the comparison group who attributed failures in the parent-child relationship to parents rather than to children were less likely to complete their follow-up participation.

There was a significant difference between those parents assigned to the CoS group who completed their follow-up participation and those parents who did not complete their participation in their ratings of their own externalizing behavior problems on the Adult Self-Report at the initial data collection for this project. In addition, there were marginal differences in their endorsements of their own total behavior problems on the Adult Self-Report, of their impulse control difficulties on the Difficulties in Emotion Regulation Scale, of their distress reactions toward young children's negative emotions on the Coping with Toddlers' Negative Emotions Scale, and of their parenting stress on the Parenting Stress Index-Short Form. In other words, those parents in the CoS group who endorsed higher levels of externalizing behavior problems, total behavior problems, impulse control difficulties, distress reactions in response to young children's negative emotions, and parenting stress were less likely to complete their follow up participation.

POLICY RECOMMENDATIONS

The findings of this project suggested that the Circle of Security Parenting Intervention can be a feasible and effective evidence-based, attachment-focused intervention in child welfare systems. CoS can be key in laying a foundation for beginning the promotion of change for high-risk parents who are child welfare involved and then referring these parents on to other evidence-based intervention services that can address their more complex and individual difficulties.

Case managers should be trained in the tenants of Circle of Security in order to better engage parents and maintain that engagement through whatever services are provided to them. For example, as part of CoS, parents learn about being "bigger, stronger, wiser, and kind." These parents would likely benefit from being treated in such a fashion by their case managers as well. Such an approach would help parents to feel more connected to their case managers and more invested in their change process.

Evidence-based attachment-focused parenting interventions, such as CoS, can promote added recognition of emotion regulation needs as well as improvements in parenting beyond decreases in punitive parenting strategies. Incorporating such interventions into the service array, CBC lead agencies can better help parents build a foundation for initial change. Given the eight-week group format of CoS, parents could be helped to move in a beneficial direction in a short period of time to begin to address their parenting difficulties and their own issues to the benefit of everyone in their families.