



Evaluating the Effectiveness of the multifamily group component for parent/guardians participating in the DBT-A programme

<u>Presenter</u>

Mr. Conall Gillespie, National DBT Project – Research Officer

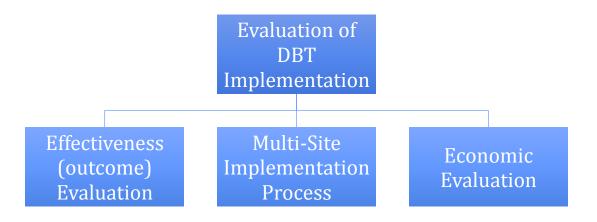
Co-Authors

Mr. Daniel Flynn, Principal Psychology Manager, Cork Mental Health Services Dr. Mary Kells, Senior Clinical Psychologist, North Lee Adult Mental Health Service Dr. Mary Joyce, National DBT Project, Project Co-Ordinator Ms. Mareike Weihrauch, National DBT Project, Research Officer

The National DBT Project: Joint collaboration between Health Service Executive, Ireland and the National Suicide Research Foundation, Ireland Funding for this project is provided by the National Office for Suicide Prevention (NOSP), Ireland

The National DBT Project, Ireland

- Funding provided by the National Office for Suicide Prevention, Ireland for a coordinated national implementation of DBT programmes in Ireland over a period of 3 years (2013-2016)
- Current funding for 23 community mental health teams (13 AMHS and 10 CAMHS) to be trained to deliver DBT
- Comprehensive evaluation of the coordinated implementation of DBT to be completed:

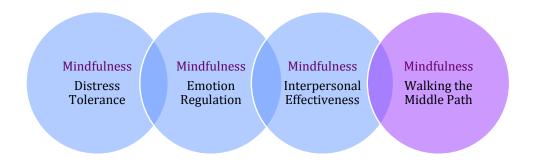


DBT with Adolescents (Miller, Rathus & Linehan, 2007)

 Adaptation of DBT for adolescents presenting with borderline personality features (emotion dysregulation and suicidal behaviours)

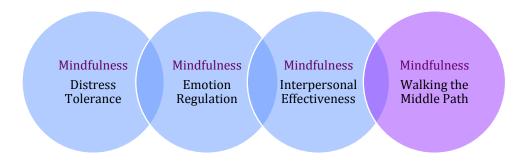


- 16 week programme with a multifamily group skills element
- Evidence base in support of efficacy of DBT with adolescents (DBT-A)
 RCT study (Mehlum et al., 2014)



Parent/guardians in DBT-A (Miller, Rathus & Linehan, 2007)

- Allows parent to learn skills simultaneously with the adolescent
- Enables parent to not only serve as a coach, but to acquire skills themselves that are essential to productive interactions with their child



Method

- Selected CAMHS DBT year 1 (first implementation) multidisciplinary teams:
- Specific criteria for participation in the programme:
 borderline personality features; commitment to DBT
- DBT programmes- February 2014 to August 2014
- 31 parent/guardians (26 females, 5 males)
 - -22 mothers
 - 5 fathers
 - 2 guardians
 - 1 grandmother
 - 1 aunt
- Evaluation: 3 timepoints (pre-intervention, post-intervention, 16 week follow-up)

Measures

Burden

- Burden Assessment Scale (Reinhard et al., 1994)

Grief

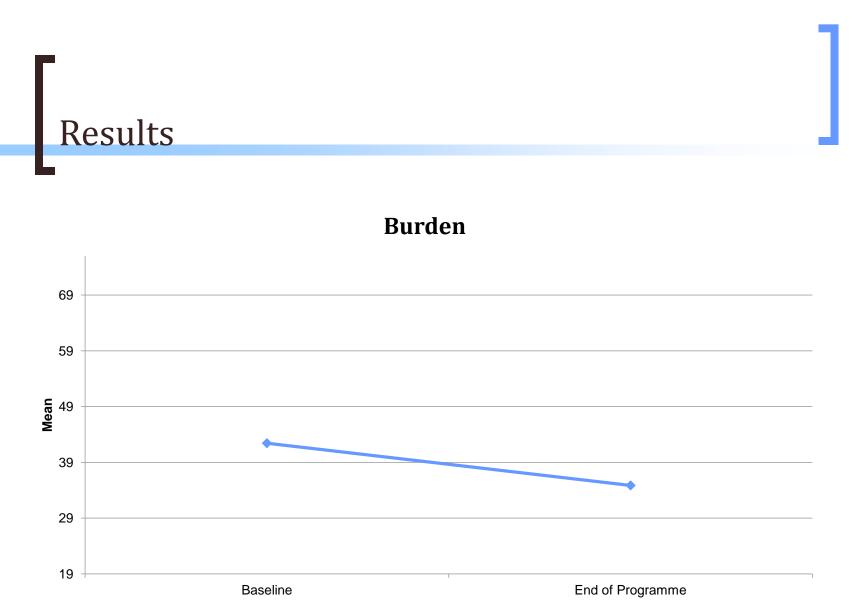
- Grief Assessment Scale (Struening et al., 1995)

Stress

- Parental Stress Scale (Berry & Jones, 1995)

Results

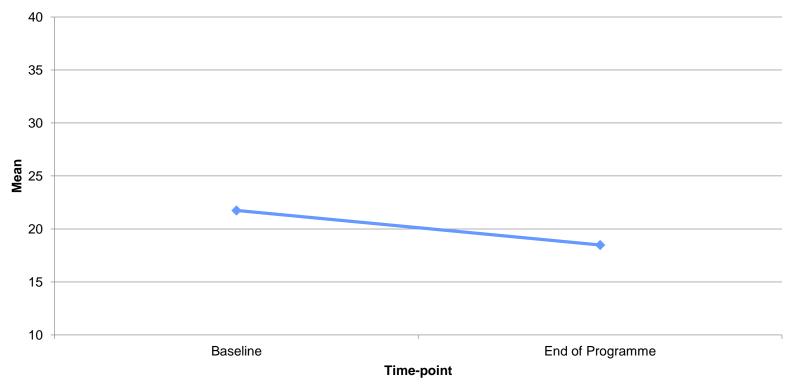
 Paired-samples T Test to explore statistical significance on pre to post intervention measures



Time-point

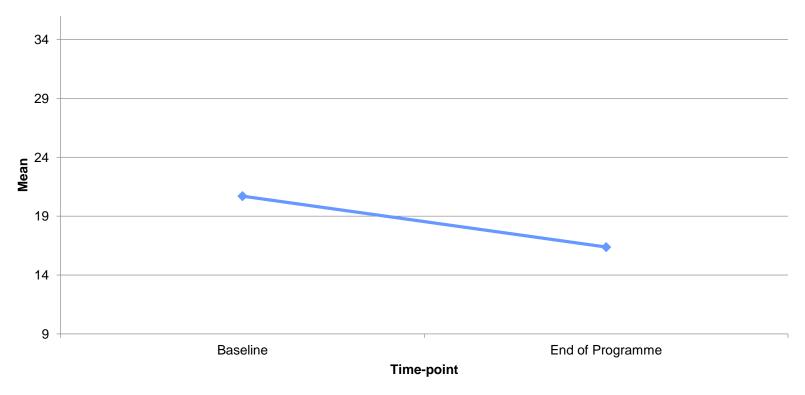


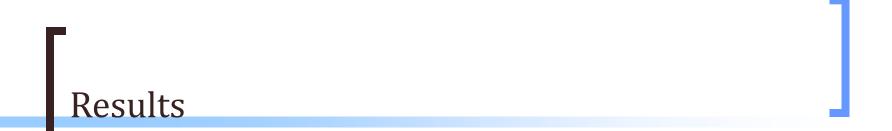
Objective Burden

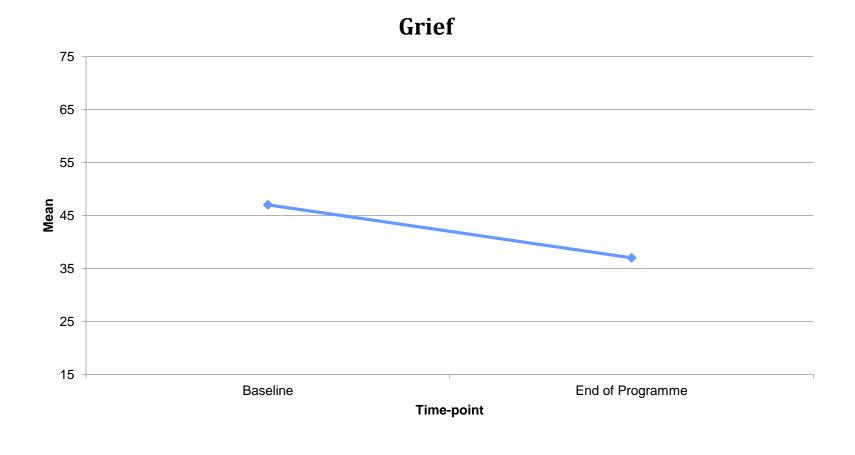




Subjective Burden

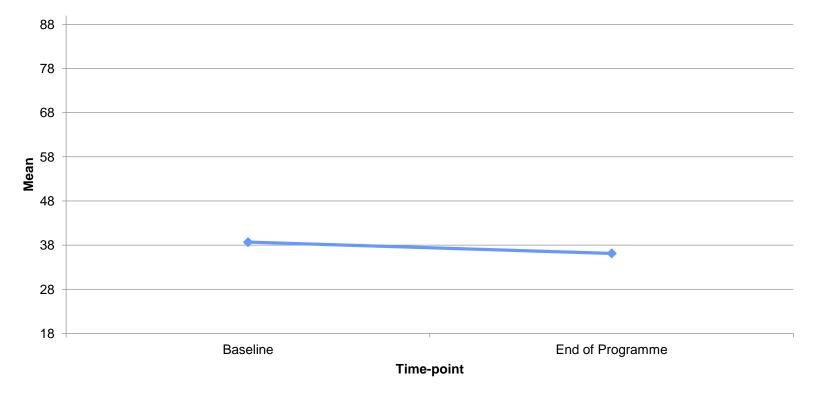








Parental Stress



Not significant at p = .068

Impact on Family members

- The programme showed us skills which were basically common sense skills to deal with situations, but we hadn't been using them. It has brought us closer and has given me insights into the way my child was feeling and how to try preventing this occurring again. I find my daughter and I reinforce what we learned to each other in various situations. Delighted to have participated.'
- I was not sure what to expect with this programme, but it has exceeded my wildest expectations. My son is on the path to finding his way in the world. His mental health is much improved, but the benefit to me as a parent is beyond measure. It has given me practical skills to cope with life in general and our home is a happier place. I was not sure how the programme would help but was prepared to try anything. The changes in our lives are positive and the skills will help us both cope well with whatever life has in store for us. Thank you.'

Constructive Feedback

- 'I know its only possible to have one parent at the group sessions but this puts a lot of pressure on the parent that goes to the DBT.'
- 'I found DBT a very worthwhile experience, it is something that should be rolled out in every secondary school in Ireland. I am very fearful of doing it on my own with my teenager.'
- 'I think it would have been helpful to have more parent interaction/workshop. Also maybe extend programme or shorten content as there are many concepts/skills.'
- Several parents suggested separate parent sessions in addition to the multifamily group

Next Steps

- Final 16 week parent/guardian sample
- Follow up analysis
- Evaluation of the 24 week DBT-A programme







THANK YOU

Acknowledgements

All of the young people and their parents/guardians' who participated CAMHS DBT therapists

Website: www.dbt.ie Email: conall.gillespie@hse.ie Tel: 00353 867871312

Joint collaboration between Health Service Executive, Ireland and the National Suicide Research Foundation, Ireland Funding for this project is provided by the National Office for Suicide Prevention (NOSP), Ireland