



Effects of an Intensive Outpatient Program for Adolescents with Mental Illness on Parent- and Child-Perception of the Parent-Child Relationship

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The authors have no conflicts of interest to disclose

Objective

This study investigates changes in parent- and child-perception of their relationship during an intensive outpatient program (IOP) for adolescents (11-18 years old) with anxiety and/ or depression.

Background

Living with a mental illness can put significant stress on relationships, especially within family units. Current research shows that parent involvement in group therapy improves the emotional and behavioral health of children with mental illness and parent-child interactions (Barlow et al., 2016). However, little attention has been paid to parent- and child-perception of their relationship following therapeutic intervention. A preliminary analysis at two California Bay Area mental health clinics demonstrated that child-perception of the parent-child relationship improved significantly over the course of an IOP ($p < 0.01$) (Rivera et al., 2016). This study aims to further analyze this question by examining a larger data set and expanding the analysis to include parent-perception of the parent-child relationship, to identify whether an adolescent IOP can improve the parent-child relationship from maternal, paternal, and child perspectives, and to identify differences in perception.

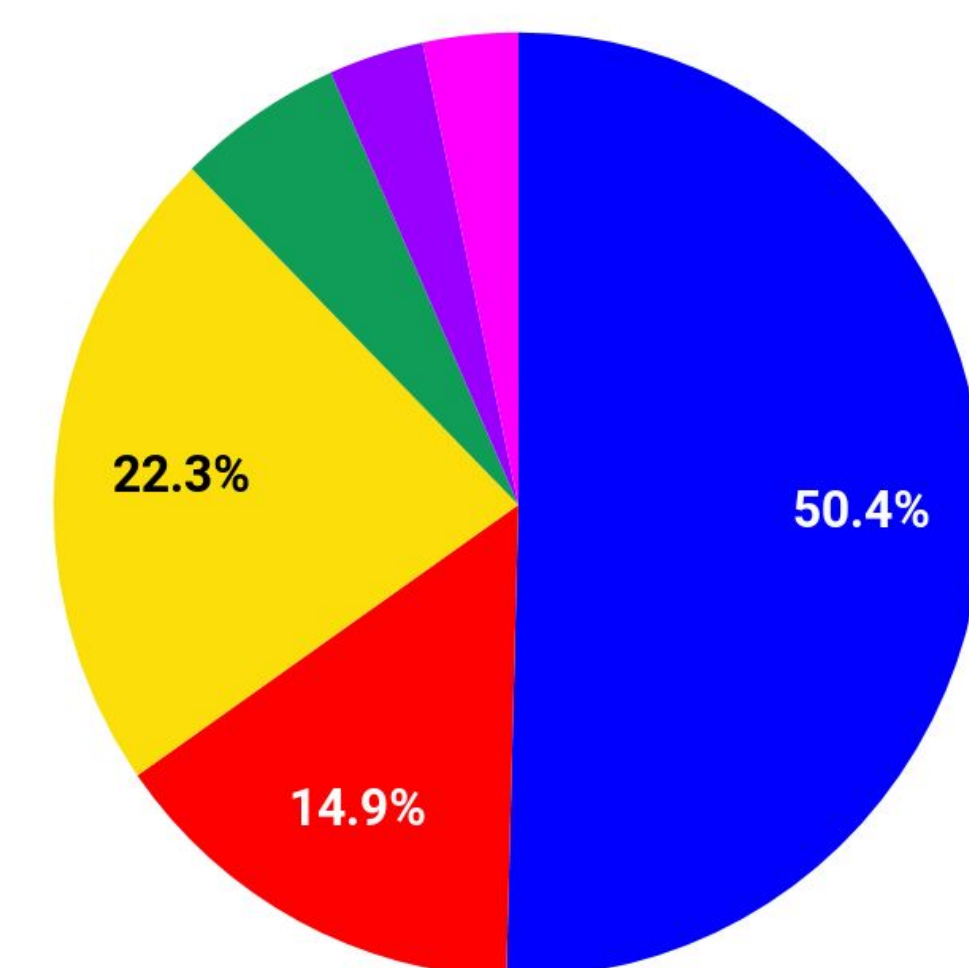
Methods

Data was collected from 121 IOP patients, ages 11-18 (mean=15.28 ± 1.71), and their parents (n=218) at two clinics in California, Oakland and San Jose. The IOP studied is manualized and evidence-based, including parent and family therapy, lasting eight weeks or longer if clinically necessary. Parents and children rated their relationship on a self-report Likert Scale question, "I have gotten along well with my parents (or child)" several times a week. Non-traditional families were included in maternal and paternal groups based on self-identified gender and referred to as parents based on legal guardianship. Mean scores from weeks one and two (baseline) were compared to weeks seven and eight, and final two weeks. Data was analyzed with paired, dependent t-tests. If weeks seven and eight were also the final two weeks, scores were included in both analyses.

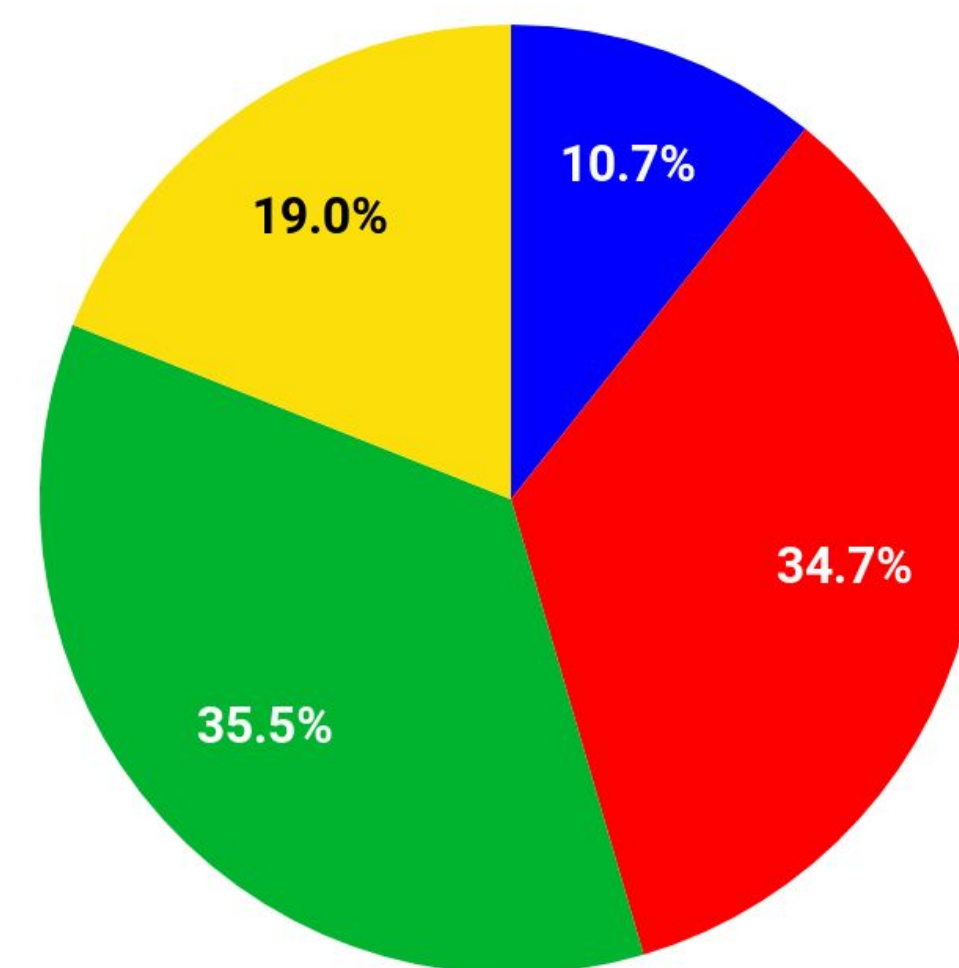
Results

Analysis showed significant improvement in parent-perception of the parent-child relationship from baseline to final weeks ($t=2.17$, $p < 0.05$) but not from baseline to weeks seven and eight. Fathers reported significant improvement over both eight weeks ($t=2.04$, $p < 0.05$) and entire length of stay ($t=2.10$, $p < 0.05$). Maternal-perception did not change significantly. Child-perception improved significantly over entire length of stay ($t=2.06$, $p < 0.05$) but not over eight weeks. Sixty percent of families stayed beyond eight weeks. Baseline scores for all groups did not differ significantly.

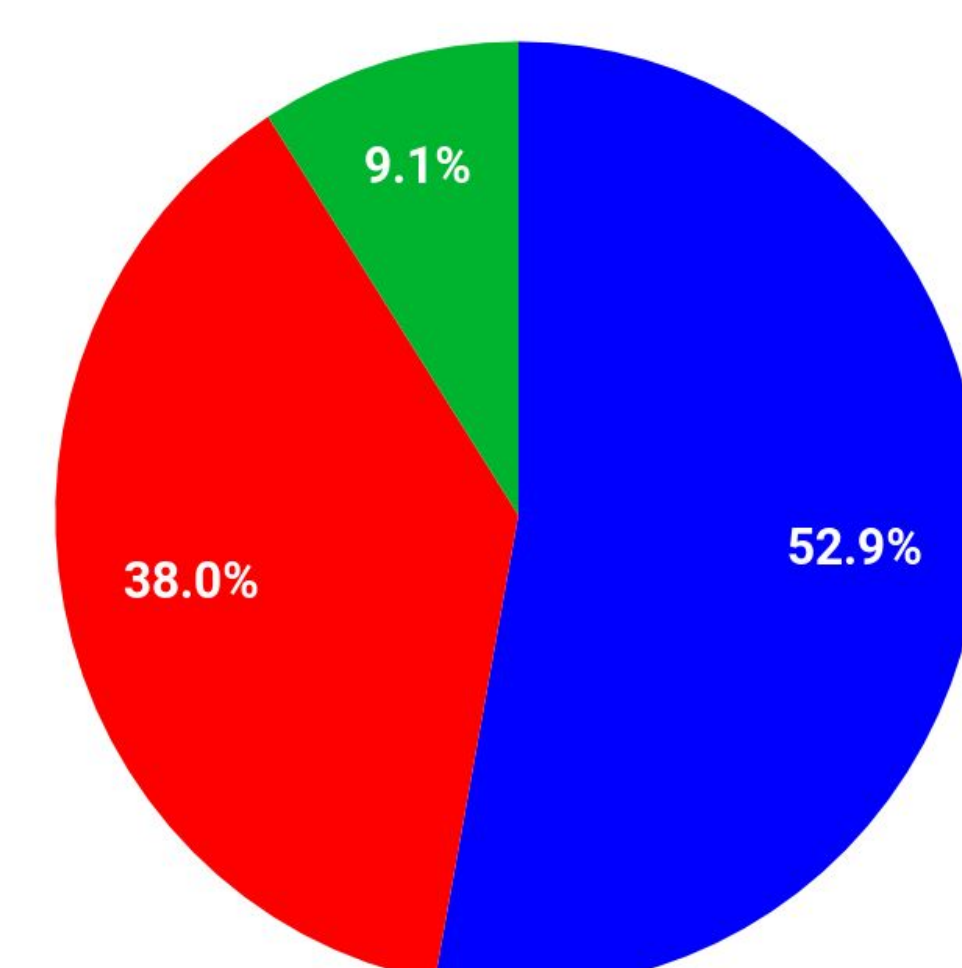
Ethnicity of IOP Participants



Age of IOP Participants



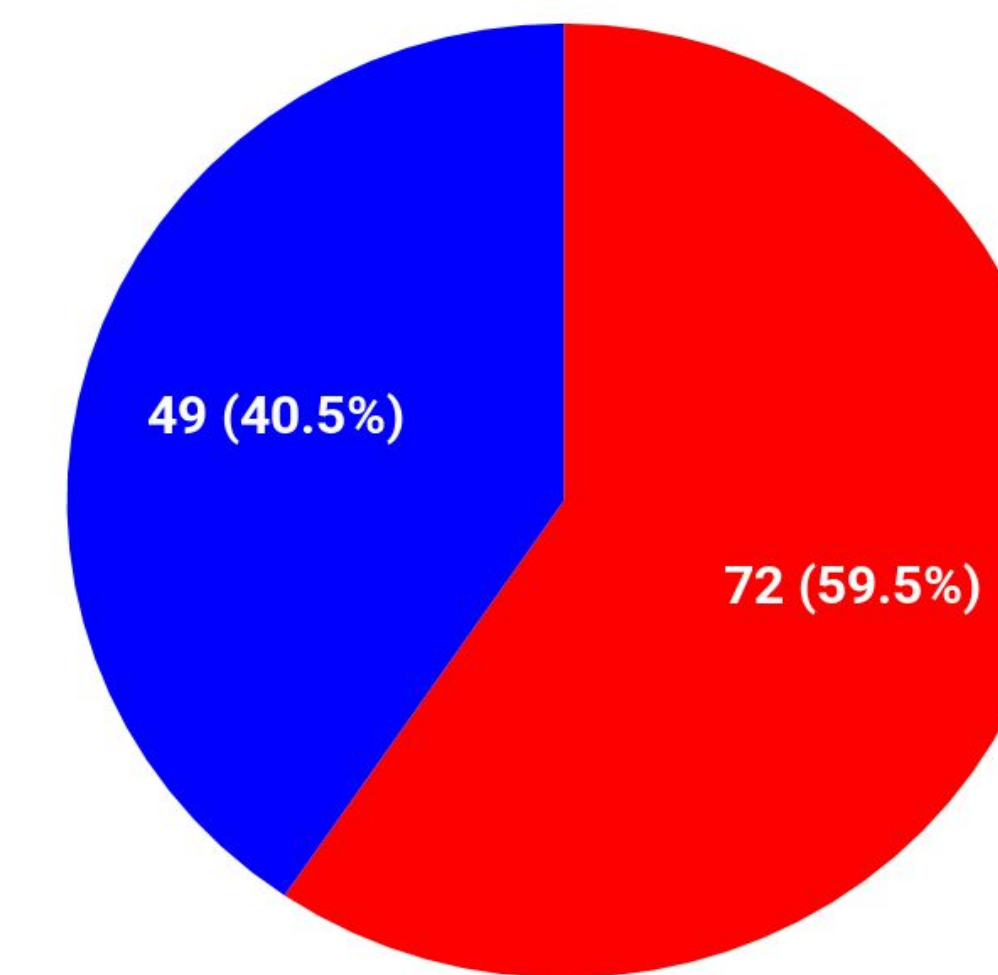
Child Self-Identified Gender



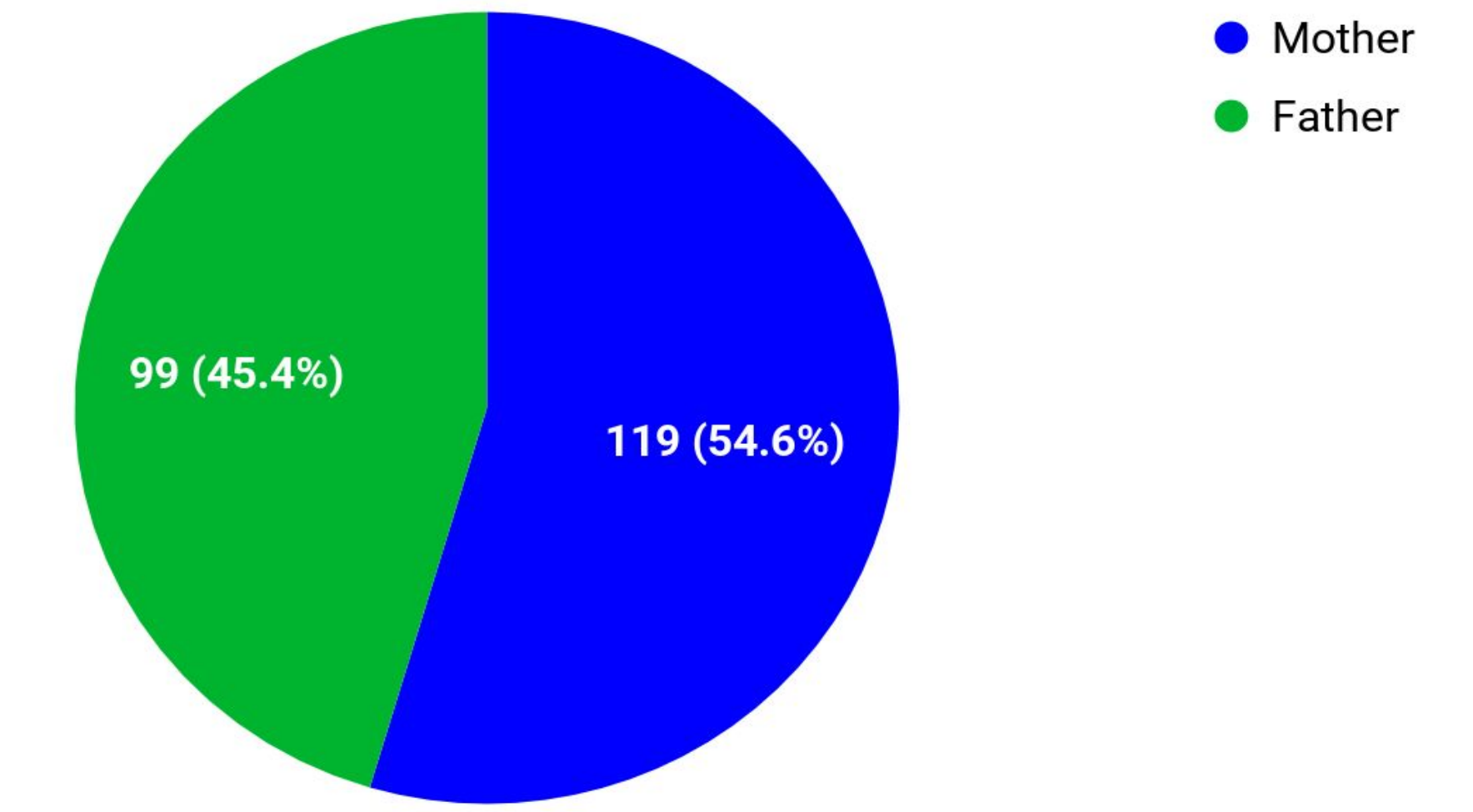
● White (n=61) ● Asian (n=18) ● Mixed (n=27) ● 11-12 Years Old (n=13) ● 13-14 Years Old (n=42)
 ● Hispanic (n=7) ● Black (n=4) ● Not Disclosed (n=4) ● 15-16 Years Old (n=43) ● 17-18 Years Old (n=23)
 ● Female (n=64) ● Male (n=46)
 ● Gender-Questioning (n=11)

Results - Continued

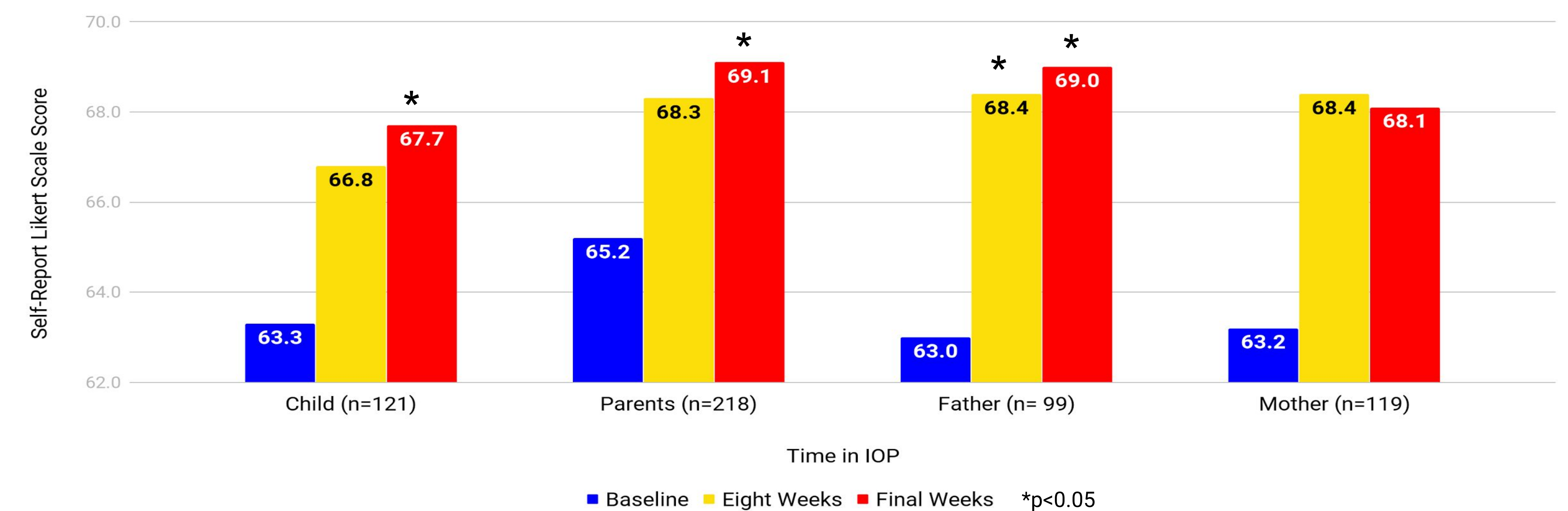
Length of Stay in IOP



Parent Self-Identified Role



Mean Scores in Perception of Parent-Child Relationship Over Time



Conclusion

Results indicate that an adolescent IOP with parent involvement significantly improves the parent-child relationship from baseline to end of treatment. Although the program runs on an eight-week curriculum, results suggest that eight weeks may not sufficiently influence the parent-child relationship for many families. Significant improvement in paternal-perception compared to non-significant change in maternal-perception suggests that fathers may drive the improvement. This merits further investigation into influences on maternal and paternal parent-child relationships during treatment. Effects of different caregiver structures (e.g. single parents, same sex parents, divorced parents, grandparents, etc.) also merit future consideration.

References

Barlow, J., Bergman, H., Kornør, H., Wei, Y., & Bennett, C. (2016). Group-based parent training programmes for improving emotional and behavioural adjustment in young children. *The Cochrane Library*.

Rivera, Y., Medbery, N., Coburn, K., Lin, Y., Tarshis, T., & Crisostomo, P. (2016). *Initial Effectiveness of a Community-Based Intensive Outpatient Program for Adolescents*. Poster presented at the annual convention of the American Psychological Association, Denver, CO.