

The Parents Under Pressure program at Logan House Therapeutic Community

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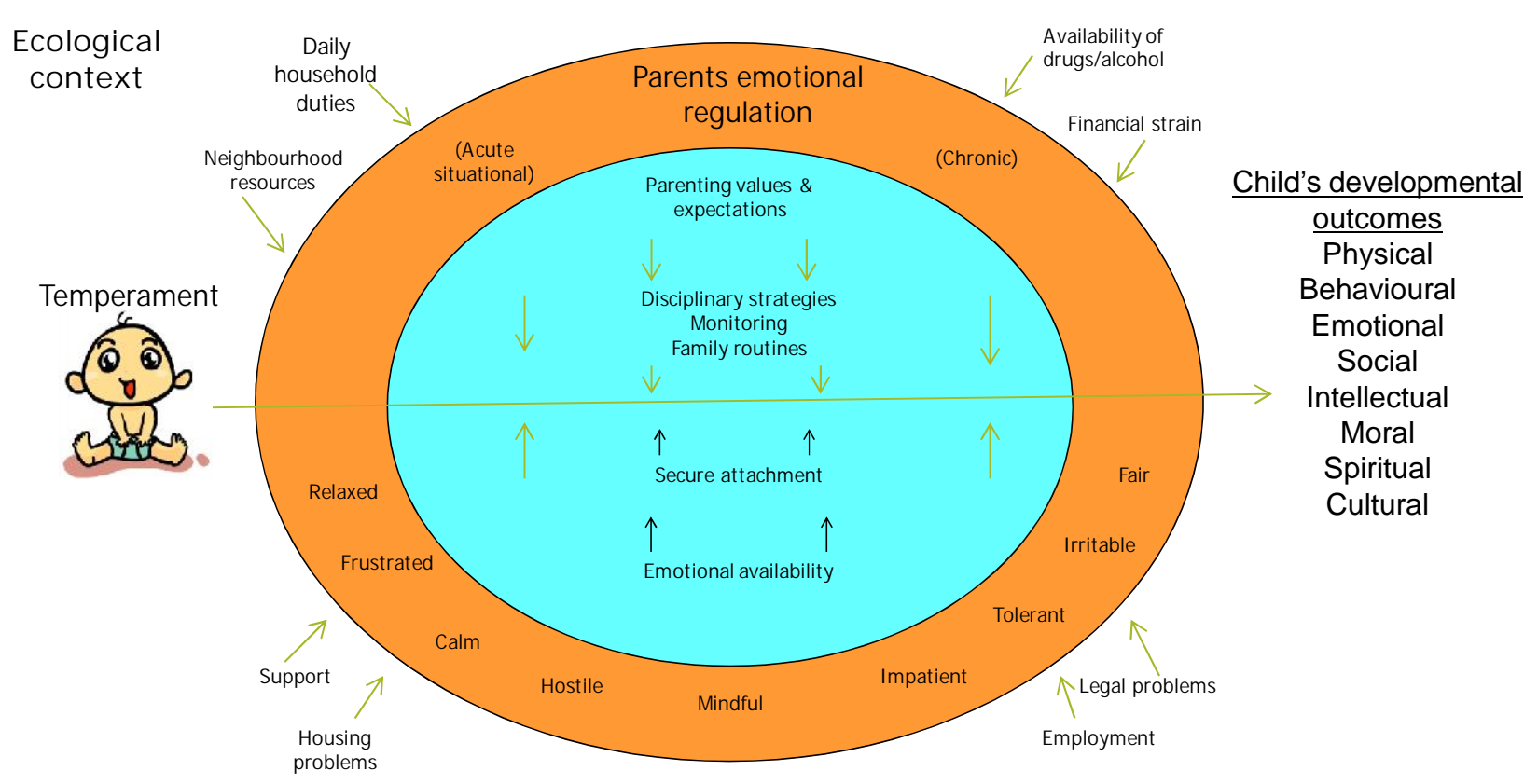


Overview

- Why PUP in a drug and alcohol TC
- The PUP program framework
- Delivery of PUP program at Logan House
- Content of PUP program
- Evaluation – feedback from clients
- Case study
- Strengths and Challenges



The PUP program framework





There is no single effort more radical in its potential for saving the world than a transformation of the way we raise our children.

(Marianne Williamson)

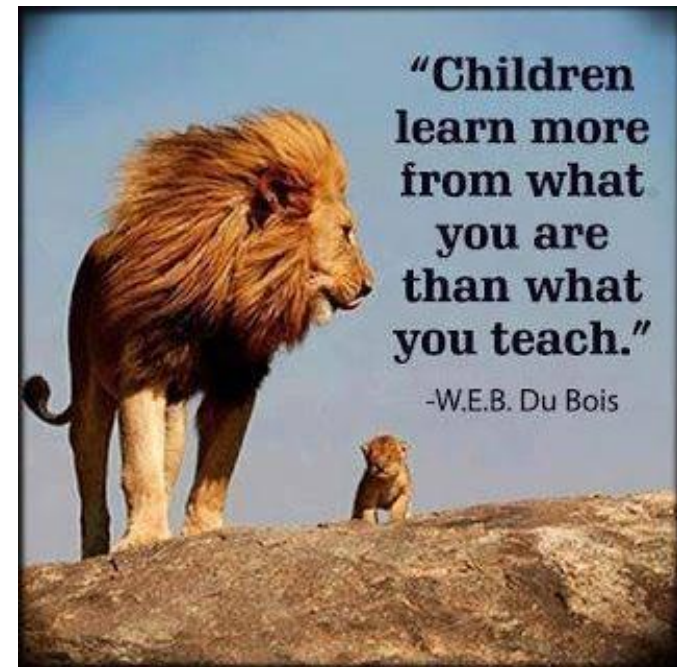
PuP Program aim and theoretical background

to help families build solid relationships to make a firm foundation from which the family can thrive

assists parents who experience out of control emotions and thoughts, relationship conflict with family and others and ongoing life crises

Combines psychological principles relating to parenting, child behaviour and emotional regulation within a case management model.

Utilises Attachment theory, CBT and DBT



Delivery of PUP program

Individual in-house, group and individual aftercare

- Individual in-house program – consists of 12 structured modules, delivered non sequentially
- Group program– consists of 8-9 structured modules
- Individual aftercare program – from 6-12 months follow up

*Though no one can
go back and make
a brand new start,*

*anyone can start
from now and make
a brand new ending.*

Carl Bard

Module Topic

Purpose and aims

Module 1: Assessment

To obtain quantitative and qualitative information to provide content for the development of a treatment plan.

Module 2: Assessment feedback

To develop a shared understanding of the major areas of strengths and areas of difficulties, which lead to a treatment plan and shared goals to work towards.

Module 3: Challenging the notion of an ideal parent and ideal child

To help bring about change in the view of self as an inadequate or hopeless parent and focus on strengths.

Module 4: How to parent under pressure

To help parents to become aware of the relationship between their own emotional state and their parenting practices, and learn how to regulate emotions and tolerate distress.

Module 5: Health check your kids

To open up discussions and provide education on health, hygiene and nutrition.

Module 6: Connecting with your child: Mindful play

To develop a positive parent-child relationship that enhances a secure attachment. The use of positive attention, praise, rewards, and child centered play, mindfulness, mindful play.

Module 7: Mindful child management

To help parents manage their child's difficult behaviour. Focus on non-punitive child management techniques. Being in the right state of mind to be effective.

Module : Managing substance use

To ensure that clients have skills and confidence to minimise lapses to the use of drugs and alcohol and avoid relapse.

Module 9: Extending support networks

To help parents extend their support networks by modelling social interactions and helping prepare for social events that may have been avoided in the past.

Module 10: Life skills

To develop practical life skills including budgeting, nutrition, health care, obtaining housing etc.

Module 11: Relationships

To help improve effective communication with current partner and to identify past unproductive relationship patterns. Conflict management, DV, child safety

Support

- Counselling/case management including;
 - Assist with finding suitable accommodation
 - Assist with sourcing furniture/appliances for a new home (eg. givit list)
 - Advocacy
 - Liaising with child safety and carers
 - Referral to other agencies
 - Court liaison
 - Crisis support
 - Providing support to access welfare assistance and financial aid
- After care program
 - Transition into the family home
 - Home visits
 - Phone calls
 - Facilitation of child contact
 - Family support



Case Study of Bob in the PUP program



Case study – PUP Assessment

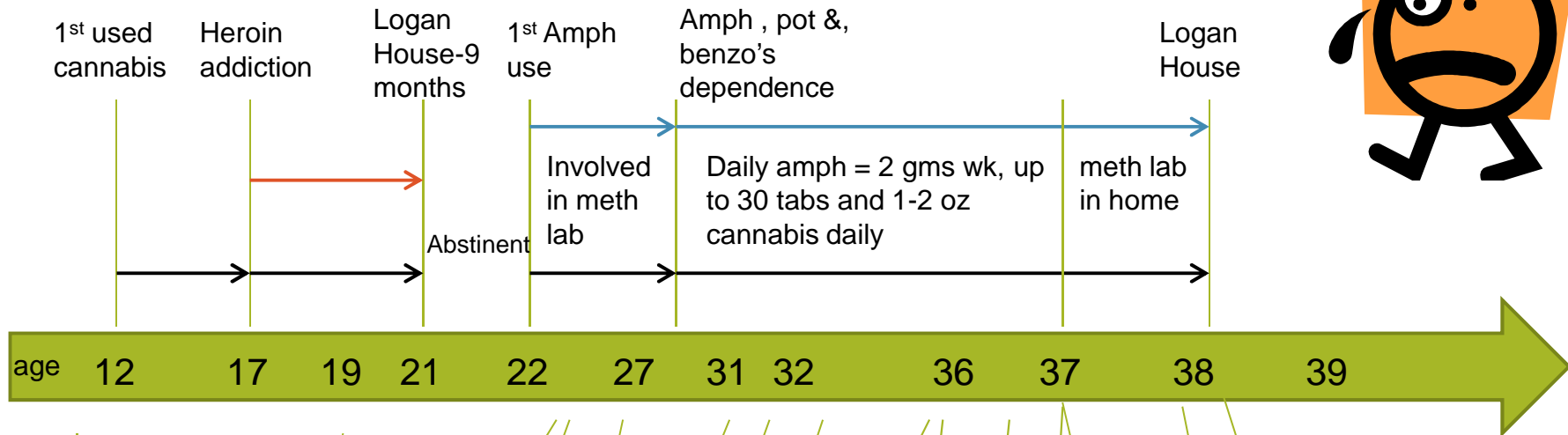
Demographic information

- ❖ 38 year old male/now 39 bday in rehab
- ❖ Single father/ 5 children (female 19, male 14, male 13, male 11 and female 7 years)
- ❖ no fixed address and unemployed
- ❖ Drugs of concern are amphetamine, valium and cannabis

Referred by Mental Health ward of Hospital

- ❖ in mental health ward for 2 weeks due to suicide ideation, no current ideation

Timeline of drug use history & sig life events



1st used cannabis Heroin addiction Logan House-9 months 1st Amph use Amph, pot &, benzo's dependence Logan House

Involved in meth lab Daily amph = 2 gms wk, up to 30 tabs and 1-2 oz cannabis daily meth lab in home

Abstinent

age 12 17 19 21 22 27 31 32 36 37 38 39

Happy childhood, drug using friends and neighbourhood culture of drug use

Married young high conflict relationship birth of 1st child

Birth of 2nd child

Birth of 3rd child

Birth of 4th child

Birth of 5th child

Wife left

3 suicide attempts

3 good friends died

17 yr old daughter left home

2 suicide attempts

Child safety removed children

Destruction of CS property

Lost family home job

MH ward 2 wks for SI

Case study - PUP Assessment

- ❖ **DASS** - *Depression = moderate range, Anxiety and Stress = normal range*
- ❖ **SDQ** – target child (eldest child): *Conduct problems = normal range, Emotional problems = clinical range, Hyperactivity/attention = normal range, Peer problems and prosocial beh. = normal range*
- ❖ **Daily Hassles Scale** – as a parent: Results in the normal range - Bob does not feel that the daily demands of parenting are a problem, however reports mild difficulty with mealtimes, arguments and fighting
- ❖ **Life Events Scale** – major problems in relationship (family) but not causing distress, father suffered a serious health problem
- ❖ **Support Rating Scale** – feels supported by friends, family and special person

Case Study – PUP Assessment

Strengths

- ❖ Bob has been seeing a psychologist long term
- ❖ Bob is a caring father
- ❖ Good work ethic
- ❖ Adventurous
- ❖ Intelligent
- ❖ Supportive family

Case Study – Goals

Presenting problems and targets for treatment, agreed collaboratively

- ❖ Drug use
- ❖ Depression
- ❖ Relationship with children (reunification, concerns about eldest child)
- ❖ Housing

PUP group and individual counselling

Case Study – PUP Treatment

Drug use treatment: module 8 & 11

- ❖ Identify reasons for drug use
- ❖ pro's and con's of drug use
- ❖ identify and plan for high risk situations
- ❖ dealing with cravings and urges
- ❖ boundaries with friendships



Case Study – PUP Treatment

Relationship with children: modules 4, 6, 7, 9, 11

- ❖ Liaise with Child Safety, Family Group Meetings
 - ❖ establish regular contact
 - ❖ Moved younger children from foster care into kinship care
- ❖ child centred play, mindful play
- ❖ praise and rewards
- ❖ mindful child management
- ❖ communication skills with CSO's
- ❖ Counselling initiated for eldest son



Case Study – PUP Treatment

Depression treatment: modules 3, 4, 6 & 9

- ❖ Psycho-education re depression, pleasurable activities scheduling, behavioural activation (child centred activities),
- ❖ Identifying and monitoring emotions, relaxation techniques, mindfulness, view of self as a parent, cognitive restructuring, core beliefs
- ❖ Changes in mood throughout treatment
 - Session 2: “I’ve let the kids down, I’d be better off dead”.
 - Session 5: “every time I take a step forward I get pushed back”
 - Session 7: “things are going well for me, its been a long time since I've said that”.

Case Study – PUP Treatment

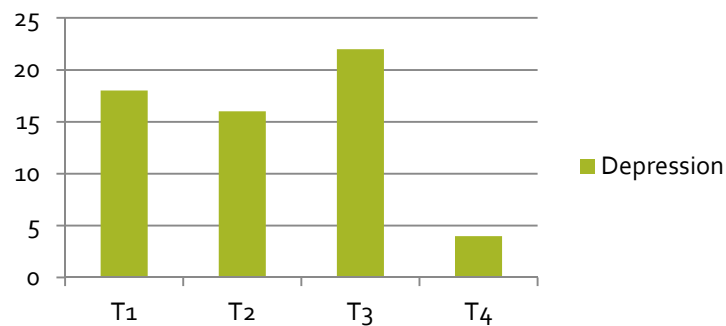
Housing: module 2, 10

- ❖ Action plan, setting goals
- ❖ Referral and application to Department of Housing and other providers
- ❖ Problem solving regarding location
- ❖ Recently approved for social housing through Mangrove Housing
- ❖ Reunification of children can begin

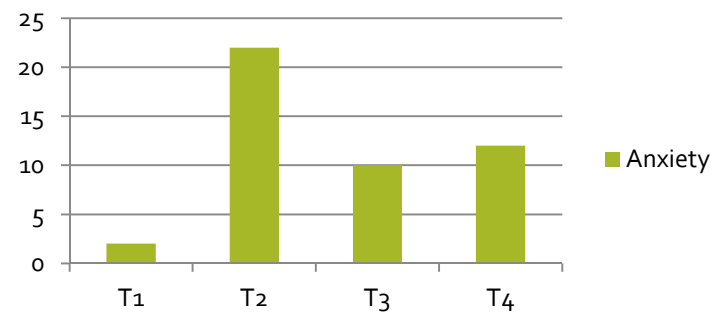


Changes over course of treatment - DASS

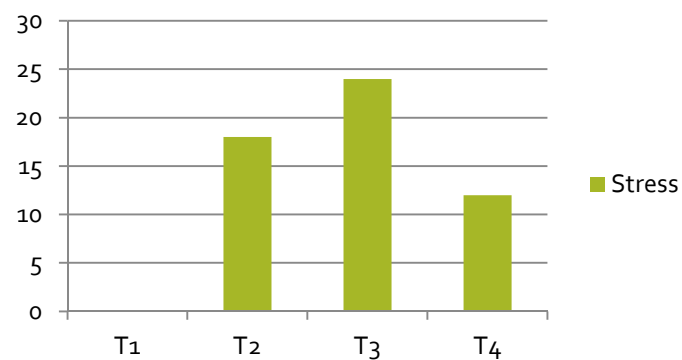
Depression



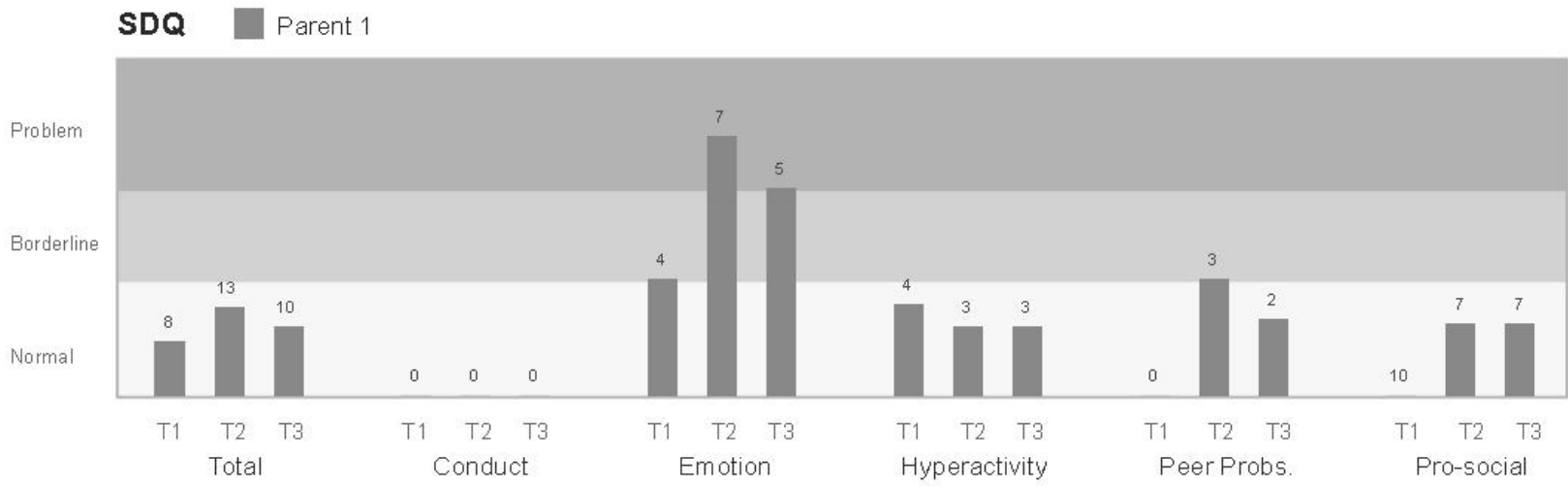
Anxiety



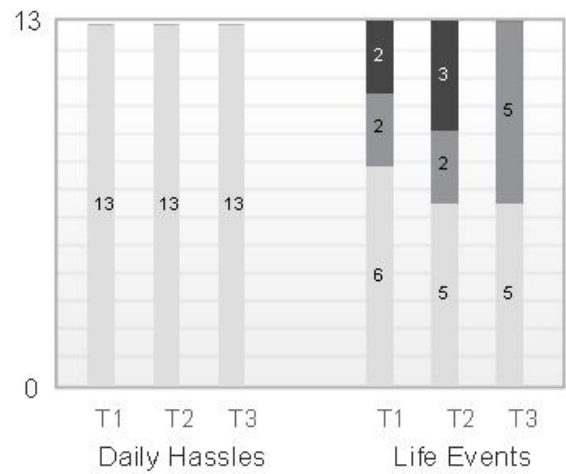
Stress



Time 1 March
Time 2 May
Time 3 June
Time 4 October

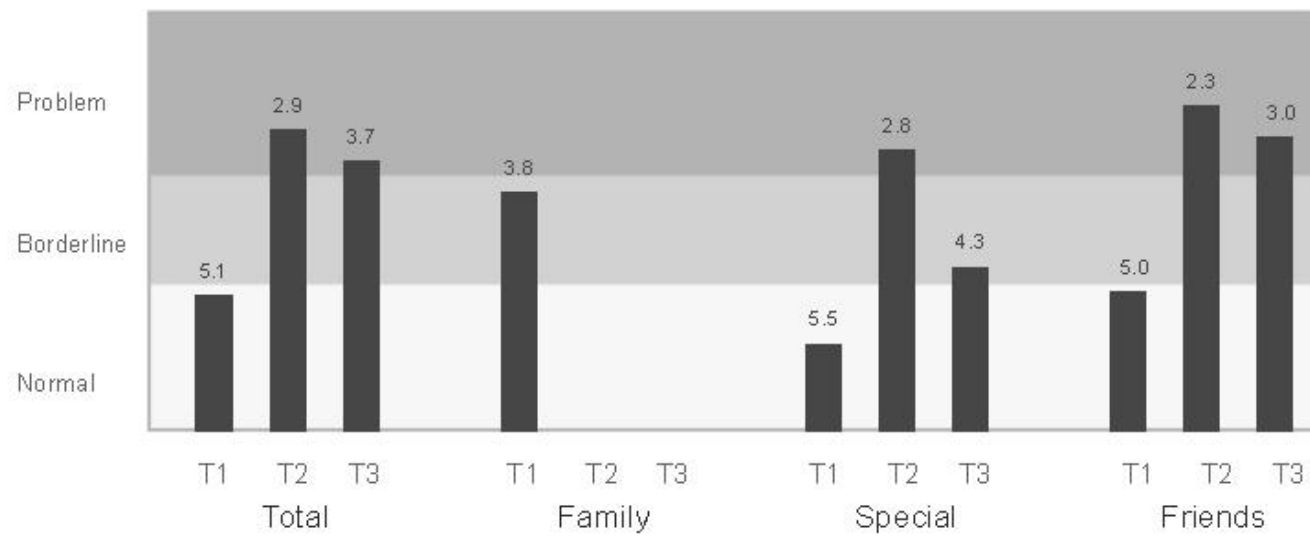


Daily Hassles & Life Events

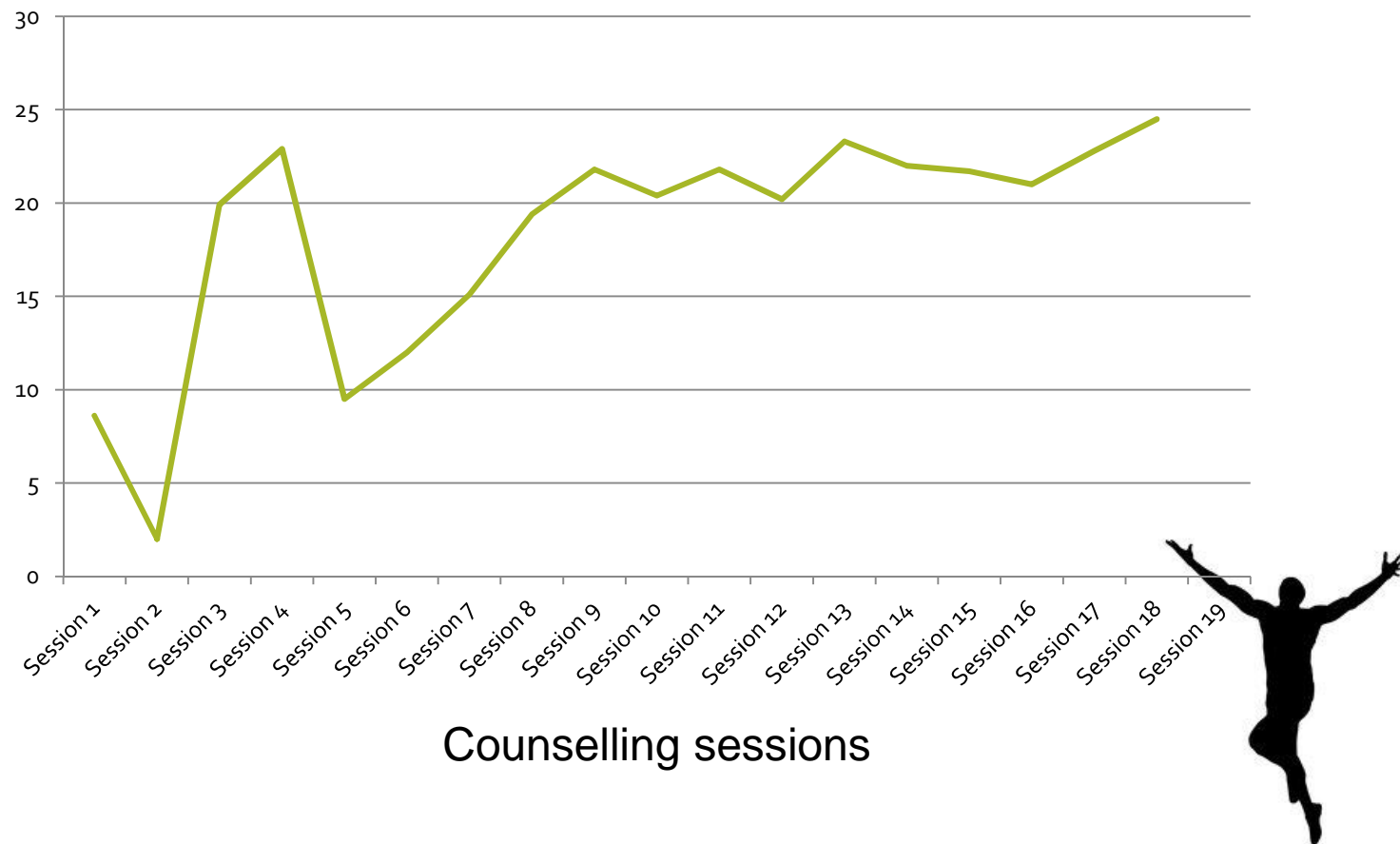


- Problem
- Borderline
- Normal

Support



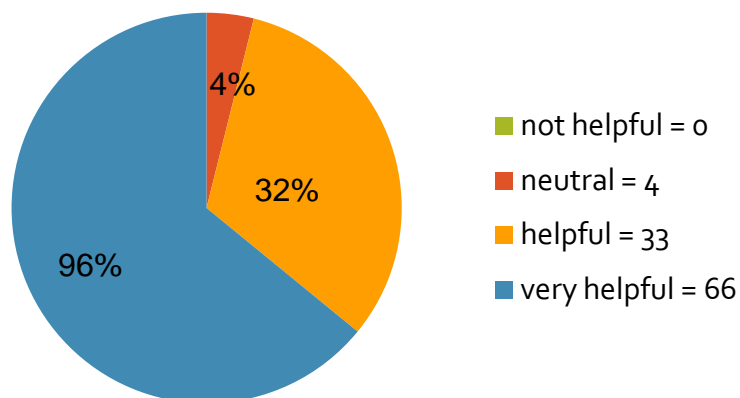
Changes over therapy sessions – Outcome rating scale (ORS)



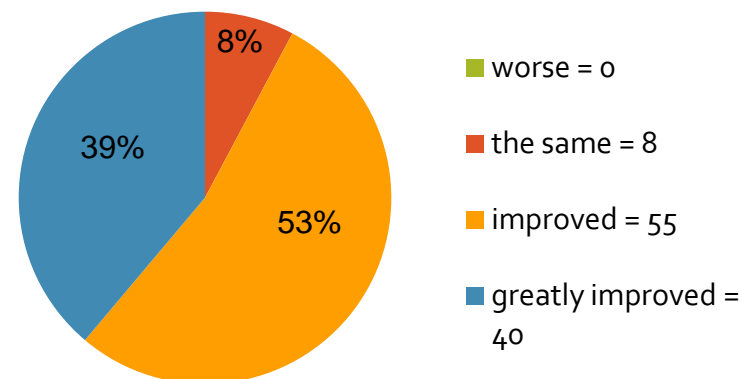
Evaluation – feedback from clients

N= 103

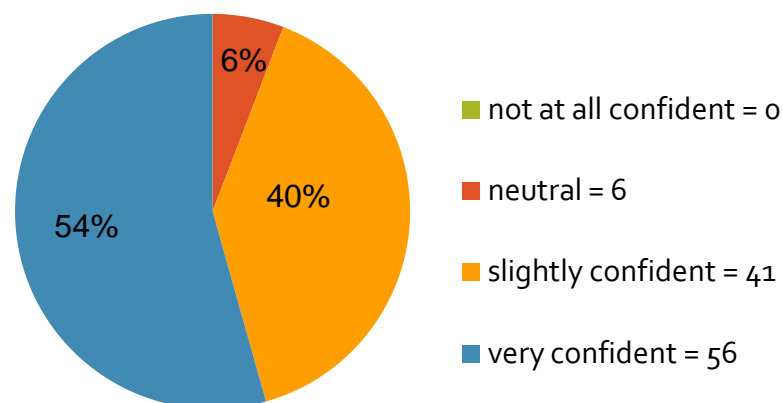
The content of the PUP program was



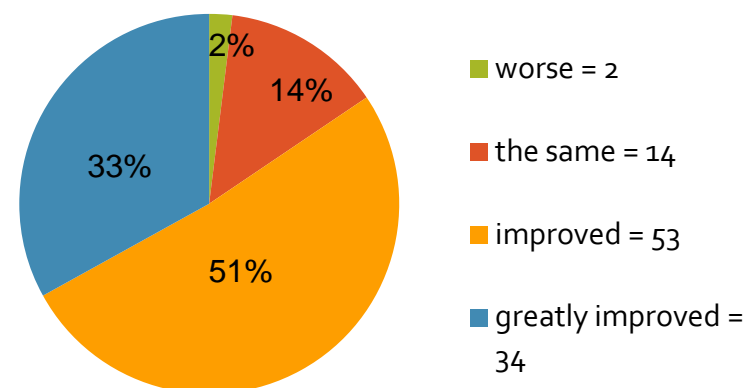
The problem(s) that led to me being referred to the PUP program are...



How confident are you in your ability to manage future child behaviour problems in the home?



Is your relationship with your child or children...



Strengths



Group	Individual
Group cohesion formed quicker due to setting	Ease of access for counselling
Relationship between clients and facilitator already established	Provide advocacy for residents with Child Safety, carers, family or other organisations (eg QMERIT)
Group members support each other outside the group	Flexibility in the role: special family visits e.g. birthdays, extra leave from the program, celebrating Mothers Day and Fathers Day
Form positive support network after graduating Logan House program	

Challenges



Unable to include children due to the type of setting

Working with one parent only

Residents may leave Logan House and therefore also the PuP program

Few residents return to the family home or have care of their children immediately after graduating Logan House

Transferring the skills learnt in PuP to parenting due to limited contact with children

For more information

Parents under Pressure website:

<http://www.puppprogram.net.au>

Developed by: Prof Sharon Dawe and Dr Paul Harnett