

# Does Kin Caregiver Training Delivered to Different Groups and Through Different Methods Yield the Same Results?

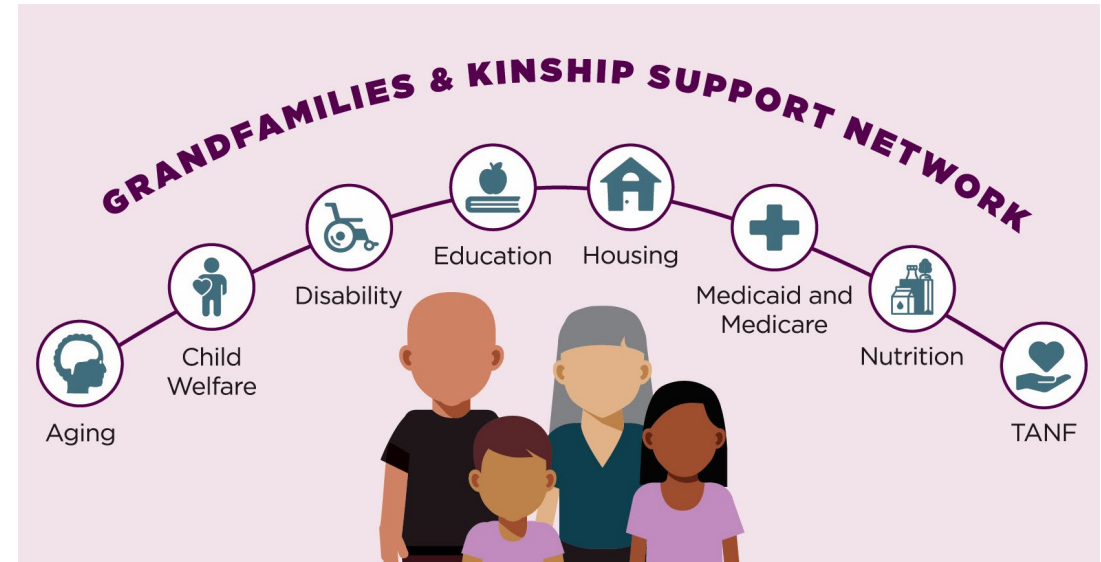
September 11, 2024

- We will begin at the top of the hour
- Please type in the **chat** box - your name, state, tribe (if applicable), and role
- Type questions in the **chat** box at any point during our time together
- All participants will receive a link to the slides and recording in the next day or two

# GRANDFAMILIES & KINSHIP SUPPORT NETWORK

A National Technical Assistance Center

- 5-year (2021-2026) cooperative agreement with Administration for Community Living
- Purpose is to provide technical assistance to the array of tribal, state, and territorial government agencies, as well as non-profit organizations that serve kinship families
- Not designed to serve the families directly – working to improve systems for families



# How We Help



## Learning Collaboratives and Information Dissemination

The Network hosts [webinars](#) and facilitates learning collaboratives.



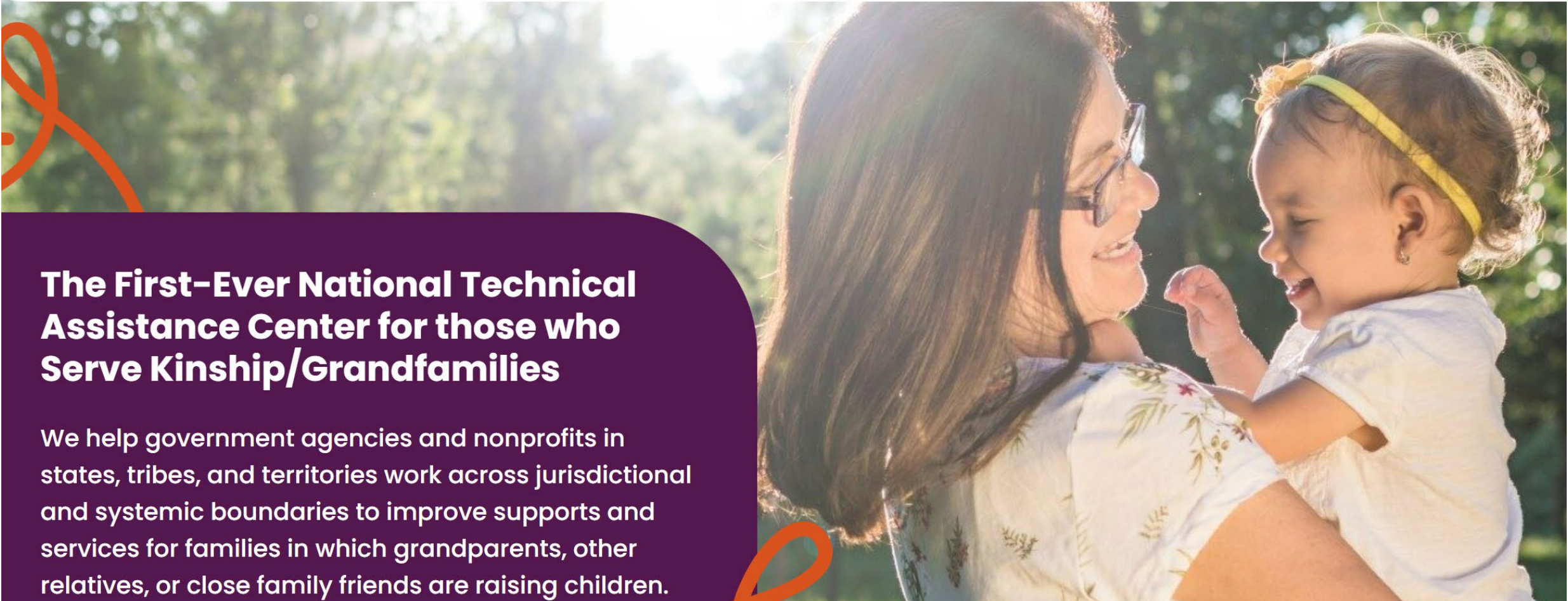
## Individual Assistance

We respond to [individual requests for help](#) from government agencies, kinship navigators, and community-based nonprofits.



## A Centralized Hub

The Network is elevating exemplary kinship/grandfamily practices and programs from around the country on its accessible website, [www.GKSNetwork.org](http://www.GKSNetwork.org).



## The First-Ever National Technical Assistance Center for those who Serve Kinship/Grandfamilies

We help government agencies and nonprofits in states, tribes, and territories work across jurisdictional and systemic boundaries to improve supports and services for families in which grandparents, other relatives, or close family friends are raising children.



# Stay Connected & Access Support

Sign up for our monthly newsletter, which will provide you with updates on new Network resources.



For the latest updates, follow the Network on LinkedIn!





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# Meet our Presenters

- **Dr. Joseph Crumbley**, Family Therapist, Trainer & Consultant, and Grandfamilies & Kinship Support Network Subject Matter Expert
- **Dr. Angelique Day**, Associate Professor, University of Washington-Seattle, School of Social Work, and Grandfamilies & Kinship Support Network Subject Matter Expert



# THE INHERENT STRENGTHS IN KINSHIP FAMILIES

**DR. JOSEPH CRUMBLEY**



## PURPOSE OF THE TRAINING

This training is for both ***Kinship Caregivers and Service Providers***. The purpose of this training for ***Kinship Caregivers*** is:

- To identify their strengths and the unique experiences they provide children being raised in kinship families.
- How to utilize their strengths and the benefits of kinship care to provide stability, safety, and permanency for the children in their care.



## PURPOSE OF THE TRAINING (CONT'D)

The purpose of this training for ***Professionals and Service Providers*** is:

- To utilize a model of kinship specific training for caregivers that enhances and emphasizes their strengths, resourcefulness, and skills as kinship care providers.
- How to engage, recognize, and support caregivers in developing and utilizing their strengths.
- How to incorporate the support and development of caregivers' strengths, into care management plans (i.e. tasks, approaches).



# TRAINING MODULES

- MODULE 1: ATTACHMENT
- MODULE 2: IDENTITY
- MODULE 3: LEGACIES
- MODULE 4: HEALING
- MODULE 5: ADAPTABILITY
- MODULE 6: CO-PARENTING





## DESCRIPTION OF TRAINING MODULES:

THIS TRAINING CONSISTS OF SIX (6) MODULES.

- I. EACH MODULE HIGHLIGHTS A PARTICULAR STRENGTH SPECIFIC TO KINSHIP FAMILIES. THE MODULES ARE DIVIDED INTO TWO (2) PARTS.
  - PART ONE (WHY A STRENGTH) DESCRIBES HOW AND WHY EACH ATTRIBUTE IS A STRENGTH.
  - PART TWO (HOW TO USE) PROVIDES CAREGIVERS APPROACHES AND SCRIPTS (DIALOGUES) THEY CAN USE WITH FAMILY MEMBERS WHEN IMPLEMENTING THEIR STRENGTHS.



# TRAINING MATERIALS

## TRAINING MATERIALS WILL CONSIST OF:

- I. SIX (6) ZOOM RECORDED MODULES WITH TWO (2) VIDEOS IN EACH MODULE, FOR A TOTAL OF TWELVE (12) VIDEOS.
  - EACH VIDEO IS APPROXIMATELY THIRTY (30) MINUTES LONG.
  - EACH MODULE REQUIRES APPROXIMATELY TWO (2) HOURS TO COMPLETE.
  - THE TOTAL LENGTH OF TRAINING, UTILIZING ALL SIX (6) MODULES, IS APPROXIMATELY TWELVE (12) HOURS.



## TRAINING MATERIALS (CONT'D)

2. A FACILITATOR'S GUIDE ACCOMPANYING EACH MODULE, FOR A TOTAL OF SIX (6) GUIDES. EACH FACILITATOR GUIDE INCLUDES:

- INSTRUCTIONS, OUTLINES, AND SCRIPTS FOR FACILITATORS WHEN USING THE VIDEOS
- TIME-STAMPED OUTLINES FOR PAUSES AND TOPICS FOR INTERACTIVE DISCUSSIONS
- ACTIVITIES (INDIVIDUAL/GROUP) TO IMPLEMENT DURING THE VIDEOS
- WORKSHEETS FOR ACTIVITIES AND GROUP DISCUSSION
- TAKEAWAYS AND SUMMARIES OF EACH VIDEO





THANK YOU

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# INHERENT STRENGTHS OF KINSHIP CAREGIVERS PILOT TRAINING: AN EVALUATION OF IMPACT USING MULTIPLE TRAINING METHODOLOGIES

Dr. Joseph Crumbley  
Dr. Angelique Day  
9/11/2024

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# Overview of Inherent Strengths Training

- Audience: Kinship caregivers
- Six two-hour modules:
  - Attachment
  - Legacies
  - Identity
  - Healing
  - Adaptability
  - Co-parenting
- Each module includes:
  - Video(s)
  - Discussion prompts
  - Activities

# Pilot Timeline

- October 2023: Conducted Train the Trainer sessions
  - Organized by WA DSHS- Aging and Long-Term Support Administration (administers the state's kinship navigator program) in partnership with the Alliance, the training arm of WA DCYF for formal kinship care training
  - Train the trainer led by Dr. Joseph Crumbley
  - January-June 2024: Training piloted with caregivers
  - Formal trainings led by the Alliance for Child Welfare Excellence (The Alliance) and Family Education and Support Services (FESS)
  - Other TTT participants were kinship navigators and/or others who lead support groups for kinship caregivers
  - June 2024: Conducted a Focus group with the 3 Train the Trainer participants who piloted the training informally in support groups

# Train the Trainer Overview

- 10 facilitators trained
- 27 hours of training
- Facilitators
  - Piloted the knowledge questions developed for the curriculum with caregivers
  - Caregivers Completed satisfaction surveys
  - Trainers documented fidelity adherence to the curriculum & provided open-ended feedback about what additional guidance they needed in order to teach the material better in the future

# Train the Trainer results

- Demographics
  - Trainers were mostly White (80%) and women (90%)
  - Of 10 total trainers: 4 Alliance trainers, 3 Kinship Navigators, 2 support group facilitators, 2 state employees, 1 kinship caregiver\*
- Knowledge
  - High at pre- (84%) and post-test (90%)
- Satisfaction scales
  - Very high: 5.7 out of 6
- Open-ended feedback
  - Requested more ongoing practice opportunities and adaptations for different populations and work contexts



# Pilot Training Overview

- 63 training participants completed at least one module pre- and post-test
- Modules were two hours each
- Facilitators completed fidelity forms after each training
- Participants in formal kinship care signed up on the Alliance training website
- For support groups, anyone who attended the support group on a training night were invited to participate
- If they consented, participants completed...
  - Demographics
  - Pre- and post-tests (five knowledge questions per module)
  - Satisfaction scales
  - Open-ended feedback

# Pilot Training Facilitator Results

- Demographics (From the fidelity forms):
  - Four facilitators (3 Alliance trainers, 1 Kinship Navigator)
  - Half had experience as adoptive and/or foster parents
  - Average 17 years of experience in child welfare and 16 as trainers
  - Overall trainer confidence rating of 4.1 out of 5, ranging from 3.7 (Legacies) to 4.5 (Attachment)
- Session details:
  - 16 total fidelity forms completed (one per module trained)
  - Three-quarters of sessions trained virtually
  - Average 10 participants per session

# Pilot Training Facilitator Results con't

- Activity completion:
  - 82% of all activities were completed
    - 57% of completed activities were done as suggested
    - 43% done with changes/adaptations
    - 96% of completed activities worked well
  - 18% of activities were not completed
    - Attachment module (first in the series) had highest rate of noncompletion (39%)
    - Needed more time for introductions and evaluation surveys

# Pilot Training Facilitator Results cont.

- What worked well:
  - Videos (especially when they were sliced into shorter segments)
  - Many activities
  - Module flow
  - Certain discussion prompts
  - Caregivers made connections with each other during the trainings
- What could be improved:
  - Surveys & videos took time away from discussion and activities
  - Difficulties with the “scripts” activities
  - Some discussion questions did not land well

# Pilot Training Facilitator Results con't

- Focus group:
  - Included 3 TTT facilitators who did not pilot the full training
  - Facilitators were still using training content with caregivers, including:
    - One on one
    - As part of support groups
    - As lunch and learn sessions
  - Facilitators suggested adaptations to make it easier to use the training in their contexts, including:
    - Flyers to summarize module takeaways
    - Streamline the videos more
    - Change the title of the training series to resonate more with caregivers

**THE VIDEOS WERE SHORTER, SO THERE WAS TIME  
AT THE END TO JUST ALLOW PARTICIPANTS TO  
REFLECT AND SHARE IN AN UNSTRUCTURED WAY.  
THIS WAS VERY WELL RECEIVED.**

-Pilot Training Facilitator, Legacies Module



# Pilot Training Caregiver Participant Results

- Demographics:
  - 63 total; 45 who attended at least one Alliance training and 18 who attended the FESS training
  - 86% kinship caregivers (61% informal); rest service providers
  - Large variation in number of years providing care for child
  - 86% women
  - 71% White; 22% African American/Black; 13% AIAN; 10% Latinx; 5% Asian; 3% Middle Eastern
  - 60% between age 45-64; 24% 44 or younger; 16% 65 or older
  - Representation from all regions across WA State

# Pilot Training Caregiver Participant Results cont.

- Knowledge gains:
  - Range of 19-34 caregivers included in each module analysis
  - Statistically significant improvement across all modules on average from pre-test (64%) to post-test (80%).
  - No significant gains in Adaptability or Attachment modules
  - Modules with the most statistically significant gains (in order of effect size):
    - Legacies
    - Healing
    - Co-parenting

# Pilot Training Caregiver Participant Results cont.

- Satisfaction scales:
  - Module satisfaction ranged from 4.7 (Legacies) to 5.1 (Adaptability) out of 6
  - Overall satisfaction post-training was 5.5 out of 6
  - Highest rated items:
    - “The training content was easy to understand”
    - “I was able to participate in conversations during the training”
    - “The presenter(s) was/were effective at training the subject matter”
  - Lowest rated item:
    - “The length of each training day was optimal”

# Participants suggested...



More opportunities to practice/connect:

*"Just having support and talking to people that understand or going through the same thing to bounce ideas off of them and get their experience."*



Offer more trainings or content:

*"Offer it often enough that people can attend"*  
*"It needs to be longer"*



Shorten or remove content:

*"The videos were a bit long to follow and could be updated but I thought they were essentially great."*  
*"Spend more time answering specific questions."*  
*Condense content to remove fluff"*

# Participants most appreciated...



Reflecting on  
learning:

*"How to have open and honest conversations with the kid in my care as soon as he is ready to have them. That it's okay for me to have feelings about the situation; he will learn how to process his feelings by observing me!"*



Discussion and  
community:

*"I appreciated the open discussion, and sense of community with others in attendance."  
"That you could ask questions and get them answered without judgment"*



Facilitator:

*"The doctor's knowledge and ability to inform caregivers of issues I have not been able to resolve independently."*

**“I APPRECIATE THAT IT WAS OFFERED AT ALL. THAT ALONE SHOWS CARE FOR CAREGIVERS. WITHOUT SAYING WE MIGHT NEED SUPPORT TO KEEP OUR PARENTING FRESH, IT'S OFFERING A SAFE PLACE TO EXPAND ON OUR PERSONAL GROWTH, WE TAKE WHAT WE NEED AND LEAVE WHAT WE DON'T NEED... I NEEDED A FRESHEN UP AND IT WAS APPRECIATED, I DO NOT KNOW IT ALL OR THINK OF IT ALL.”**

-Pilot training caregiver participant



# Field Generated

## Participant Feedback for Evaluation Next Steps

- **“THINK ABOUT PLANNING A FOLLOW-UP DATE TO CONNECT WITH THE TRAINING PARTICIPANTS WHO COMPLETED THE TRAIN THE TRAINER [AFTER THEY HAVE HAD MORE TIME TO IMPLEMENT].”**

- **DO A CHECK IN TO SEE HOW PEOPLE ARE UTILIZING THE TRAININGS AND IF THERE ARE ANY BARRIERS OR SUPPORTS NEEDED.”**

-Train the Trainer participant