

Parenting interventions in shelter settings: a qualitative systematic review of the literature

Mary E. Haskett*, Jessica Loehman† and Kimberly Burkhart‡

*Professor, †Doctoral Student in Psychology, North Carolina State University, Raleigh, NC, ‡Postdoctoral Fellow, Nationwide Children's Hospital, Columbus, OH, USA

Correspondence:

Mary Haskett,
Department of Psychology,
NC State University,
Campus Box 7650,
Raleigh, NC 27695,
USA
E-mail: mary_haskett@ncsu.edu

Keywords: Evaluation studies,
homelessness, mothering,
parenting/parenthood

Accepted for publication: February
2014

ABSTRACT

The aim of this literature review was to critique the state of the research on the effects of implementing parenting programmes in shelters for homeless families. A comprehensive search of multiple databases yielded 12 studies for inclusion. The methodological sophistication of the studies varied, with most investigations based on very small samples and one-group pre-post designs. Results indicated that parents generally viewed the interventions as enjoyable and informative, and attendance was good. Incentives were often used to encourage attendance. Evidence was limited in terms of effectiveness of the interventions, but the few studies of evidence-based parenting programmes showed changes in parenting and child functioning. Suggestions are provided for future investigations in this important yet challenging field of study.

INTRODUCTION

The number of US families experiencing homelessness has risen sharply in recent years with families constituting approximately 35% of the homeless population (US Department of Housing and Urban Development 2010). More than 1.5 million US children are homeless each year (National Center on Family Homelessness 2009). Although there is variability among children who are homeless, they are at risk for illness, low academic achievement, and a host of adjustment problems (Buckner *et al.* 1999; Park *et al.* 2011). Parents can play a central role in promoting resilience among children who experience stressful events (Masten & Coatsworth 1998) and there is some evidence that positive parenting buffers children from negative outcomes associated with homelessness (Miliotis *et al.* 1999). Homeless parents who are more positive, less coercive and better problem-solvers have children with fewer adjustment problems (Danseco & Holden 1998; Gewirtz *et al.* 2009). Herbers *et al.* (2011) found that the quality of homeless mothers' parenting moderated the link between cumulative risks and children's academic functioning. Unfortunately, many homeless parents struggle to provide sen-

sitive and warm parenting associated with resilience (e.g. Koblinsky *et al.* 1997).

For many years, recommended practices to support parents in shelters have been available (e.g. Lindsey 2000; Swick 2009). Although recommendations are based on best practice models of service delivery, implementing programmes with empirical support is optimal. The literature on effectiveness of parenting interventions is well-developed, and literature reviews on parenting programmes delivered in homes and clinics are available (e.g. Coren *et al.* 2011; Anilena *et al.* 2012). However, implementing these interventions with parents in shelters introduces unique challenges, and the degree to which interventions are effective for these families has not been examined systematically. We aimed to review studies on parenting interventions in shelters to inform practitioners about programmes to consider for implementation and to suggest directions for future studies. It is important to note that parenting support should be one component of a system that ensures stable housing, social connectedness and adequate trauma-informed mental health services for families. Well-trained culturally competent shelter staff and a community empowered to advocate for vulnerable

families are also crucial (Kilmer *et al.* 2012). Thus, the purpose of this review was to examine literature related to a single aspect of an integrated system.

METHOD

This area of investigation is in its infancy, so we did not expect to locate a sufficient number of papers to conduct a quantitative review or meta-analysis. Instead, this is a qualitative narrative review (Mays *et al.* 2005), appropriate for emerging and/or small areas of literature (e.g. Maxwell *et al.* 2012). Our goal was to conduct a rigorous unbiased review of studies in which qualitative and/or quantitative data were collected to examine the process and/or outcome of parenting programmes conducted in shelters or programmes conducted for families experiencing homelessness. The methods described later are based on recommended practices for conducting narrative reviews (e.g. Pope *et al.* 2007).

We defined 'parenting programmes' broadly to include programmes designed to improve parents' childrearing skills, reduce parenting stress and/or enhance the parent/child relationship. The three authors searched the literature using PsycINFO; Google Scholar; PubMed; Psychological, Behavioral Sciences Collection; and Social Work Abstracts to identify relevant papers published prior to and including December, 2012. Searches were conducted by the authors independently using combinations of *homeless*, *parenting*, *temporary housing*, *shelter*, *domestic violence*, *parent intervention* and *parent support* as search terms. To be as inclusive as possible, peer reviewed papers as well as non-peer reviewed products (i.e. dissertations, newsletter articles, chapters) were accepted. Reference lists for each paper were scanned to identify additional papers. No publications were omitted on the basis of methodological rigor. We did omit three methodologically strong studies by Jouriles and colleagues (Jouriles *et al.* 2001, 2009; McDonald *et al.* 2006) because, although parents were recruited for the parenting intervention while they were living in shelters, the intervention was delivered after families left the shelter (thus these studies did not meet our inclusionary criteria). The searches yielded 12 publications. With one exception, studies were conducted in the USA; this was not surprising because our search focused on English-language publications and investigators in other countries began to conduct research on family homelessness relatively recently (Toro 2007). Each publication was read by all three authors and key features were summarized in a shared document using a standard format.

Key features included the study purpose, participants, intervention aims and strategies, measures of process and/or outcomes, findings, and strengths and limitations. Table 1 provides a summary of the main features of each study. This review was conducted as an activity of a professional organization's task force on family homelessness (see Acknowledgements). Authors were members of the task force and feedback on the paper was sought from all members.

CRITIQUE OF INDIVIDUAL STUDIES

Most extant studies on parenting interventions in shelters were investigations of programmes to enhance parents' child management skills or improve the parent/child relationship. In the earliest study, Kissman (1999) conducted a qualitative evaluation of a brief (2–5 days) camp for 42 homeless mothers and their children. The camp was meant to provide respite for the mothers and an opportunity to address challenges of parenting while homeless. Six of 14 camp sessions were randomly selected for the author to observe and conduct parent interviews. The author provided an account of mothers' parenting concerns and personal issues (e.g. substance relapse, housing problems), but little information was provided about the impact of the camp experience itself. The author concluded that mothers' satisfaction with the experience was dependent on the camp counsellors' flexibility and ability to balance leisure time with structured activities. According to Kissman, camp counsellors who were comfortable sharing power with parents were most successful ('success' was not defined). In addition, parents' ability to participate in daily plans helped promote their feelings of competence. Although this paper described an intriguing approach to enhancing parenting of homeless mothers, the many methodological limitations (e.g. small sample size, lack of control group, a single data source, failure to define success) make it difficult to draw firm conclusions regarding effects of the camp experience.

Davey (2004) also examined the impact of a weekend retreat to improve family functioning and decrease children's behaviour problems for 39 families. The intervention was based on a systems approach in which parents and children participated in discussions and activities to strengthen family functioning. Limited information was provided about the activities, but the authors reported that role playing allowed families to practice skills. On a survey administered at the end of the camp, parents reported being

Table 1 Summary of characteristics of the studies included in the review

Study	Sample characteristics	Objective	Design	Outcome measures	Results
Beharie <i>et al.</i> (2011)	102 caregivers of 122 youth ages 11–14	Evaluate the effects of the HOPE family curriculum on preventing teen HIV and substance use, strengthening family communication, and improving family mental health.	Pre-post intervention design with a control group; 6 and 12 month follow-up data were collected.	Interview with youth about shelter experiences and sexual behaviour; family assessment measure; parenting skills questionnaire; family stress scale; monitoring the future survey; child depression inventory; brief symptom inventory	Significant increases in frequency of discussing difficult topics for the treatment group through the 6 month follow-up. Treatment group reported declines in teen suicidal ideation. Increased knowledge of HIV for treatment and control groups. Many parents in both the treatment and control groups reported declines in their adolescents' needs. No significant findings on most measures.
Davey (2004)	39 families; 57% African-American; 77% single mothers; mean child age 7.95	Evaluate effects of weekend retreat for families on parents' stress management and decision-making and family trust and communication skills	One-group design; no pre-post assessment	Parents' reports on a 'brief survey' at the end of the retreats	Parents expressed satisfaction with the retreat and appreciated being together as a family; parents indicated they learned how to recognize and deal with stress; their children enjoyed the weekend and wanted to return
Ferguson & Morley (2011)	7 fathers with children under the age of 5; predominately African-American.	Evaluate fathers' perceptions of the outcomes of the Parents as Teachers programme.	One-group design; focus group was conducted with 4 of the 7 fathers who participated in the intervention.	Parent report during focus group. Content analysed using content analysis method.	Fathers reported improved relationships with their children and the children's mother. Fathers reported new ways of engaging with their children and managing their anger. Fathers enjoyed the support group and individual counselling sessions.
Gewirtz & Taylor (2009)	10 mothers of young children.	Describe the implementation of an evidence-based intervention, parenting through change, in a community setting. Examine parent perceptions of impact	One-group design; focus groups were conducted with four mothers.	Parents report during focus groups and attendance records.	80% of mothers attended 85% of the sessions. Mothers reported enjoying the intervention in addition to other positive outcomes (i.e. empowerment, better parenting skills, feeling supported).
Glazemakers & Deboutte (2012)	10 mothers with children under the age of 12. Mothers had intellectual disabilities.	Evaluate engagement of mothers with intellectual disabilities in an evidence-based intervention (Triple P).	One-group design; descriptive analyses were used to evaluate level of engagement.	Attendance records, homework completion, active involvement during sessions.	Results suggested high attendance; 60% homework completion of all participants, and a mean score of 72 (max score 80) on active participation.
Jones (2003)	Eight parents (n = 6 females; predominately African-American) in treatment group and six parents (n = 3 female; Caucasian) in control group.	Examine effects of a brief parenting education programme on perceived stress in the parenting role.	Two studies were conducted: the first used only a treatment group (n = 3); the second included treatment (n = 5) and control group (n = 6). Non-random assignment to groups.	PSI and a parent interview.	No significant changes between pre- and post-PSI scores. Results from interviews suggested parents enjoyed the groups and gained information about child needs; parenting practices, and anger management; however, they were not incorporating these practices into their daily parenting.
Kelly <i>et al.</i> (2000)	Four parent-child advocates and six mother-child dyads. Children aged 6–26 months.	Determine if parent-child advocates could be successfully trained to provide one-on-one interventions to mother-child dyads to improve the quality of mother-child interactions.	One-group pre-post design.	Parent-child advocate measure, nursing child assessment teaching scale, NICHD study of early child care global rating scales of parent-child interactions.	Qualitative data indicated advocates' verbal interactions with parents became more instructive, positive, and contingent on parent-child interactions. Advocates reported increased knowledge and competence in providing support and positive feedback to parents. Parent positive behaviours increased significantly in teaching tasks, but only cognitive stimulation behaviours increased significantly during play.

Table 1 Continued

Study	Sample characteristics	Objective	Design	Outcome measures	Results
Kissman (1999)	42 mothers and 4 camp facilitators	Evaluate a brief camp for mothers and their children to reduce stress and address challenges of parenting while homeless.	Qualitative design with one group	Interviews; observations of camp sessions	Mothers' satisfaction with camp was dependent on facilitators' flexibility and a balance between leisure and structured activities. Successful camp counsellors shared power with parents. Parents' competence increased with participation in daily plans. Mothers with low NCAST scores pre-intervention had significantly higher scores post-intervention. Mothers with high pre-intervention NCAST scores did not change. Significant correlation between NCAST change scores and number of hours engaged in intervention. Parent-child therapy sessions and parent group meetings were the most significant contributors to change. Increases in NCAST scores from the first to the last session of the programme, but no statistical analyses were reported.
Melley <i>et al.</i> (2010)	87 mother-child dyads; predominantly African-American.	Determine if the number of hours mothers participated in a therapeutic nursery programme affected the programme outcomes.	One-group pre-post design.	NCAST; number of hours engaged in intervention	Mothers with low NCAST scores pre-intervention had significantly higher scores post-intervention. Mothers with high pre-intervention NCAST scores did not change. Significant correlation between NCAST change scores and number of hours engaged in intervention. Parent-child therapy sessions and parent group meetings were the most significant contributors to change. Increases in NCAST scores from the first to the last session of the programme, but no statistical analyses were reported.
Norris-Shorle <i>et al.</i> (2006)	Mothers ($n = 99$) who completed at least three sessions of Wee Cuddle and Grow; predominantly African-American.	Evaluate the effectiveness of a therapeutic nursery programme.	One-group design with records reviews	NCAST	Attendance was high and 79% of between-session activities were completed. The treatment group used significantly more facilitating language utterances at post-intervention. However, treatment group parents with low receptive vocabulary did not, as a group, benefit from training. Paired sample <i>t</i> -tests indicated significant decrease in problem behaviours on ECBI and in SIPA Moodiness/Emotional Lability and Incompetence/Guilt subscales.
O'Neil-Pirozzi (2009)	16 single parents ($n = 15$ female) of children age 5 or younger; predominantly African-American.	Examine the feasibility of parents' participation in an intervention designed to increase use of facilitating language strategies during parent-child interactions.	Randomized control design.	Peabody picture vocabulary test; parent attendance and completion of session activities; observations of facilitating language utterances during a parent-child reading activity. ECBI, SIPA.	Attendance was high and 79% of between-session activities were completed. The treatment group used significantly more facilitating language utterances at post-intervention. However, treatment group parents with low receptive vocabulary did not, as a group, benefit from training. Paired sample <i>t</i> -tests indicated significant decrease in problem behaviours on ECBI and in SIPA Moodiness/Emotional Lability and Incompetence/Guilt subscales.
Puterbaugh (2009)	Five African-American and four Caucasian single mothers.	Evaluate the adolescent transition parent management curriculum to impact risk factors for delinquency.	One-group pre-post design. Follow-up data collected for 1.5 months post-intervention.		

ECBI, Eyberg Child Behavior Inventory; HOPE, HIV/AIDS Outreach Prevention Education; NCAST, Nursing Child Assessment Satellite Training tool; NICHD, National Institute of Child Health and Human Development (US National Institutes of Health); PSI, Parenting Stress Inventory; SIPA, Stress Index for Parents of Adolescents.

satisfied with the retreats and felt retreats were 'extremely effective' in helping them feel positive about themselves and deal with stress. No information was provided about the impact of retreats on improving family functioning or decreasing children's behaviour problems. Offering retreats would require creative use of facilities and staff, and might be prohibitive for some shelters.

Another unique setting for delivery of a parenting programme for homeless parents is a therapeutic nursery, which was the setting for two studies. The setting was considered therapeutic because it provided child care in addition to services to enhance well-being of a high-risk group of children. Norris-Shortle *et al.* (2006) investigated a therapeutic nursery programme that provided a range of services to parents of young children residing in shelters. Services to improve the quality of parenting and reduce separation anxiety included the Wee Cuddle and Grow intervention, which involved the use of videotaped parent-child interaction to provide insight and feedback to parents. Additional interventions were individual parent-child therapy, structured parent-child activities, separation practice, attachment-based circle time, family breakfasts and parent support groups. Through these activities, parents were coached to be responsive to children's communication attempts, teach their children new skills, establish family routines and engage in child-centred play. The authors reported that interventions were tailored to individual families' needs, but the basis for tailoring was not described.

Researchers reviewed the charts of 99 mothers who completed at least three sessions ($M = 5.5$) of Wee Cuddle and Grow. The researchers asserted that the records review showed a significant improvement in all parenting domains assessed from the parents' first to last session, but it is not clear whether statistical tests were used to examine pre-post changes in scores. Given the wide range of services offered within the nursery and the lack of a control group, it is impossible to determine whether the effects could be attributed to Wee Cuddle and Grow, other services, family experiences outside the programme, or simply passage of time.

The same investigators conducted a second study of 87 mothers to determine whether the number of hours mothers participated in the programme predicted outcomes and whether mothers with the most problematic parenting at the initial assessment improved more than those with less problematic parenting (Melley *et al.* 2010). Results showed the percentage of mothers with significant parenting

problems dropped from 40% at pre-test to 9% at post-test, suggesting improvements for many of the mothers. Mothers who obtained low scores on the measure of parenting at the beginning of the intervention showed significant improvement in all scales following intervention. In contrast, mothers with initial high scores showed almost no change at post-test; this is not surprising because scores of those mothers were already near the ceiling of the measure at pre-test. As the authors hypothesized, pre-post change scores and number of documented hours of intervention were significantly correlated. Regression analyses indicated that participation in parent-child therapy sessions and parent group meetings were the most significant contributors to change. This study included a large number of mothers and a psychometrically strong measure of impact. In terms of limitations, findings were based on retrospective reviews of records and there was no control group.

Most parenting programmes offered to homeless parents are delivered to mothers. In contrast, Ferguson & Morley (2011) evaluated the impact of a programme designed to increase fathers' engagement with their children. To obtain supportive housing lasting 2 years, fathers were required to participate in Parents as Teachers (PAT; Pfannenstiel & Zigler 2007), an evidence-based programme (EBP) designed to teach fathers how to engage in activities to advance child development and increase confidence in parenting. Fathers also participated in weekly individual therapy and peer support groups. A focus group was conducted with four of the seven fathers enrolled in the programme to identify fathers' perceptions of outcomes of the programme. Fathers reported several positive changes in parenting and family relationships (see Table 1), but they spoke only tangentially about their children's outcomes. Limitations of the study included the small sample size, reliance on focus groups to elicit fathers' self-reports of outcomes and lack of a control group. No information was provided about fidelity of delivery of PAT and details about the multiple intervention components are too limited to allow replication.

Two studies were designed to examine feasibility of implementing evidence-based behavioural parent training programmes in shelters. Gewirtz & Taylor (2009) described the use of Parenting Through Change in a shelter for women who had experienced domestic violence. The intervention was a structured parent management training curriculum delivered over 14 weekly group sessions, with homework and weekly check-in phone calls. Sessions were videotaped

to conduct fidelity checks on implementation. Incentives for attendance included childcare, dinner, \$15 per session and drawings for prizes. Data on attendance and retention indicated that 80% of parents attended 85% of sessions and only one mother dropped out. A focus group with 4 of the 10 mothers who completed the intervention indicated mothers enjoyed the groups and reported positive outcomes (see Table 1). Although confidence in these outcomes is limited given the low participation rate in the focus group, the pilot study did suggest behavioural parent training can be implemented with fidelity and excellent participation by mothers. Implementation required extensive resources and collaboration with a university; this might not be possible for shelters in small communities.

The second feasibility study of an evidence-based behavioural parent programme was conducted by Glazemakers & Deboutte (2012) in Belgium. The intervention was Triple P – Positive Parenting Programme (Sanders 2008) a manualized programme involving group and individual sessions conducted in 10 mothers' own living quarters within the shelter. Behavioural teaching strategies were used to enhance parenting knowledge and skills. All mothers had intellectual disabilities (IQ scores 59–83). Results indicated excellent attendance, a high rate of homework completion (60% of mothers completed all assignments) and active participation during sessions (four mothers obtained a maximum engagement score of 80 and the sample mean was 72). Although Triple P was considered feasible in a shelter setting, even with lower functioning mothers, only 10 of 16 eligible mothers were willing to participate.

Puterbaugh (2009) evaluated the Adolescent Transitions Programme in terms of impact on risk factors for delinquency; specifically, the programme addressed parents' use of limit setting, monitoring, problem solving, positive reinforcement and the quality of the parent-child relationship. This curriculum was delivered in 12 individual sessions completed in a long-term shelter over 10 weeks. Paired-samples *t*-tests to contrast pre- and post-test scores showed a reduction in the intensity of parent-reported adolescent problem behaviours and a reduction in emotional lability. There was also an increase in perceived parenting efficacy. Although results were promising, there was no control group, participants were few in number ($n = 9$), and all four Hispanic families dropped out of the intervention. Furthermore, the single source of data was mothers' reports, which could have been biased by participation in the intervention.

Two studies were designed to address interventions that focused on specific areas of functioning, including children's language development (O'Neil-Pirozzi 2009) and teens' substance use (Beharie *et al.* 2011). O'Neil-Pirozzi (2009) sought to examine feasibility of homeless parents' participation in an intervention to increase use of facilitating language strategies during parent/child interactions. Sixteen parents attended four weekly 90-minute group sessions that emphasized parents' use of facilitating language utterances with their preschool children. Facilitating utterances are caregiver verbalizations that enrich children's linguistic environment and contextual language-based interactions between parents and children. Sessions included dialogic reading (Zevenbergen & Whitehurst 2003) and content from Enhanced Milieu Teaching (Hancock & Kaiser 2006) and the Hanen Programme for Parents (Girolametto & Weitzman 2006) to maximize children's opportunities to communicate in natural contexts. Participants were given children's books for between-session practice of skills. Four parents randomly assigned to the control group completed four weekly 15-minute sessions that were social in nature and parents were given books to read with their children. A measure of parent receptive vocabulary was used to place parents into 'average' and 'poor' receptive vocabulary groups. Participation at sessions and parent-documented practice of targeted skills were high. Impact was measured by observations of facilitating language utterances during book reading at pre and post-intervention. Percentage of these utterances observed in both groups indicated no differences at week 1, but significant differences at week 8. However, parents with poor receptive vocabulary did not, as a group, benefit from the programme. In terms of methodological limitations, the study consisted of a small sample size and neither parents nor personnel were blind to study conditions.

The HIV/AIDS Outreach Prevention Education (HOPE) Family Project (Beharie *et al.* 2011) was a family focused intervention to prevent HIV/AIDS and substance abuse, strengthen family communication, and improve mental health among families residing in homeless shelters. The eight-session curriculum adapted for shelters from three EBPs, including Strengthening Families Programme, the SISTA Project and the CHAMP Programme. It was delivered to families (102 parents; 122 youth) in shelters in a large urban area in the USA. Control group families participated in a three-session group discussion of HIV and drug abuse. Outcomes were assessed at baseline, post-test, and 6 and 12 months post-treatment in 10

areas of functioning (e.g. parent mental health, violence exposure, sexual behaviour). Many measures were psychometrically strong tools (e.g. the Child Depression Inventory [Finch *et al.* 1987]). There were some positive outcomes following the intervention (see Table 1), but the authors did not report any outcomes for most measures and there were no findings reported for the 1-year follow-up. Although the positive outcomes should not be disregarded, we must conclude on the basis of the few results reported that the intervention was only minimally effective in meeting goals. The authors are to be commended for using EBPs; however, adapting three programmes for an eight-session curriculum might have negated the effectiveness of those individual programmes.

Jones's (2003) dissertation was an examination of the impact of a three-session programme to lower stress among 14 sheltered parents by increasing knowledge of child development and discussing the importance of parents' health and appropriate ways to respond to children's needs. Content from 'existing programmes' was used (e.g. 1-2-3 Magic), but it is not known exactly what was selected from each programme and no rationale was provided for the selections. Assignment to treatment and no-treatment comparison groups was not random. Participants were paid and childcare was provided. Self-reported stress and competence in handling crises were measured by the Parenting Stress Inventory (PSI; Abidin 1995) and an interview with the parents, respectively. Comparison of pre- and post-PSI scores of treatment and no-treatment groups was not significant. Content of interviews suggested parents enjoyed the group and learned about developmental milestones and children's needs, managing anger, and parenting practices to avoid. However, parents reported they were not incorporating the new information into their parenting practices. A brief intervention to reduce parenting stress is appealing given demands of a shelter environment, but results suggested that the intervention was not effective. Given methodological limitations, it is not surprising that no differences emerged between the groups. There was very low power because of the small sample size. Further, although parents' scores on the PSI were highly variable, most parents did not report clinically significant levels of stress prior to treatment so there was limited opportunity to show reductions in stress for those parents.

In the final study in this review, Kelly *et al.* (2000) sought to determine whether four parent-child advocates could be trained to provide one-on-one intervention to six parents in a shelter setting and whether

the intervention led to improved quality of mother/child interactions. Advocates observed a trainer conducting parenting sessions and then conducted sessions with mothers under supervision of the trainer. Parent training occurred during 10 weekly individual sessions using videotaped parent-child interactions as the basis for discussions about sensitive caregiving, contingent feedback to children, and developmentally relevant parenting. As an incentive for participation, parents received \$100 at the last session. Observational and advocate-report data indicated that advocates' interactions with parents improved during training; however, statistical significance was not examined. Quality of parent-child interaction was measured through videotapes of teaching and playing episodes at the first and last parenting session. Videotapes were coded using published coding systems but inter-rater agreement of coding was not assessed. Analyses indicated mothers' positive teaching behaviours increased significantly. However, of the seven parenting dimensions examined during play, only mothers' cognitive stimulation increased significantly. Given the lack of a control group, interpretation of findings is tenuous. According to self-reports, it appears that shelter staff can learn skills designed to promote positive parenting practices. Further, parents can improve some aspects of the quality of their interaction with their child, albeit most parenting dimensions measured in this study did not change following intervention with newly trained advocates. In terms of sustainability, the use of existing staff could be a benefit for shelters with low staff turnover, but advocate training required 20 weeks, which might be prohibitive.

SUMMARY OF FINDINGS

In spite of wide variability in aims, samples, settings and methods across studies, there are some conclusions – albeit tentative – that can be drawn. Most studies indicated at least some parents in shelters were receptive to parenting interventions, enjoyed the intervention activities, and gained information about parenting and family relationships (e.g. Davey 2004; Ferguson & Morley 2011). Few investigators reported the proportion of eligible parents that participated in the interventions and the evaluations were sometimes conducted with a non-random selection of parents. It is possible that only highly motivated parents enrolled, which could account for the positive views. Nonetheless, at least the motivated parents were receptive to attending parenting groups and reported positive

outcomes. This should encourage shelter staff to implement and researchers to evaluate parenting programmes. Future research could identify which parents are most receptive to involvement in parenting programmes and contribute to the development of strategies to increase engagement among less receptive parents. Retention was excellent for programmes that included incentives (e.g. payment, dinner, childcare) to promote attendance (e.g. Gewirtz & Taylor 2009). Further research is needed to determine whether incentives are necessary for retention and what types of incentives are effective.

In several studies, parents gained *knowledge* of parenting strategies and child development, but there is limited evidence that new knowledge translated to improved parenting skills or positive child outcomes (Jones 2003; Gewirtz & Taylor 2009; Ferguson & Morley 2011). There were mixed findings across studies that included control groups and statistical analyses of pre-post changes, and some expected benefits were not realized. Most studies did not include control or comparison groups, so we do not know whether effects can be attributed to the programme or simply to passage of time, provision of support for the parenting role, and/or other confounding factors. Perhaps the most important conclusion is that studies designed to examine manualized interventions known to be effective with other populations of parents found positive results in terms of attendance (Gewirtz & Taylor 2009; Glazemakers & Deboutte 2012) and child adjustment (Puterbaugh 2009). When EBPs were significantly modified (Beharie *et al.* 2011) or there was no assessment of fidelity of implementation (Ferguson & Morley 2011), results were less promising.

STATE OF THE LITERATURE AND RECOMMENDATIONS FOR FUTURE STUDIES

Empirical research on the impact of parenting programmes in shelters lags behind the larger literature on parenting interventions in terms of methodological sophistication and use of evidence-based programmes. The central role of high-quality parenting for children experiencing homelessness has been emphasized for many years (e.g. Miliotis *et al.* 1999), as has the importance of supporting parents to provide stable and nurturing parenting in the context of shelter life (Hausman & Hammen 1993). Based on our comprehensive search, only 12 studies have been published on parenting interventions implemented in

shelters. We suspect the many barriers to programme implementation and data collection in shelter settings might impede progress in this field. Some of those barriers are structural and include brief length of residence for many shelters, crowded conditions, high staff turnover and insufficient training and support for staff (Oliver *et al.* 2010), and a focus on 'three hots and a cot' over support for parenting. Other barriers are related to the challenges faced by parents without homes, including poverty, substance abuse, domestic violence and mental health disorders (Bassuk *et al.* 1998; Zlotnick *et al.* 2003). These stressors can hinder parents' ability to participate in and benefit from parenting interventions.

Researchers who have conducted intervention studies in shelters should be commended for investigating parenting programmes in such a challenging context. As first-generation studies, they are groundbreaking. Most of the studies, however, are limited by small sample sizes, lack of experimental control and failure to use sound measures of programme impact. Samples generally have been restricted to mothers, at the exclusion of fathers and dual-parent families. This is likely because most shelters in the USA house single mothers with young children (Schiff 2007). Investigators who have found positive effects of interventions generally have not followed parents to determine whether those improvements are sustained. Future studies should be designed to avoid these methodological limitations, common in first-generation studies.

Multi-method, multi-informant measurement strategies using psychometrically sound instruments are strongly encouraged in future studies. Measurement of parenting behaviour is critical to determining whether interventions are effective because changes in knowledge, beliefs and attitudes are not always associated with behaviour change. Novel assessment strategies might be required to accommodate the needs of transient parents in crisis with limited time to participate in assessment. For example, a 5-minute speech sample of expressed emotion was recently used as a proxy measure of parenting of homeless parents (Narayan *et al.* 2012). Finally, it is important to measure the impact of the parenting programme on children's adjustment and well-being as the purpose of improving parenting practices is, ultimately, to impact children's well-being.

Several studies have shown wide variability in needs of parents residing in shelters (e.g. Cosgrove & Flynn 2005), but most programmes did not appear to be flexible to meet individual needs (Melley *et al.* 2010 is an exception). Expecting a single parenting

programme to be relevant and effective for all parents might be unrealistic. Research is necessary to identify types of families best suited to particular interventions. Although it might be difficult to implement multiple interventions in a single shelter, larger communities could share resources to offer a range of parenting services across shelters. Most extant research has been conducted in the USA with African-American mothers; it should not be assumed that findings will generalize to other cultures or nations.

Because of complex needs of homeless families, most shelter programmes offered parenting interventions as one of many services. Unfortunately, there was no effort to examine the unique effects of parenting interventions. Although not easily accomplished, the next generation of studies, with larger samples, could include a components analysis to identify the most effective combinations of services or a comparison of treatment-as-usual to treatment-as-usual plus a parenting intervention.

We echo the appeal from organizations dedicated to concerns of family homelessness to implement and evaluate EBPs (Seibel 2011). The state of research in this area is similar to the status of research on parenting programmes for child welfare-involved parents about 10 years ago, when professionals in that field called for investigations of evidence-based practices (see Barth *et al.* 2005). A first step might be to simply determine which EBPs can be implemented with fidelity in shelter settings (e.g. Gewirtz & Taylor 2009). There are online guidelines for use of EBPs through the National Center on Family Homelessness and the Center of Excellence in Culturally Competent Mental Health. The field also could benefit from the relatively new body of research on implementation science (Fixsen *et al.* 2005).

In the future, collaborations among investigators who implement the same intervention at their individual sites and combine data sets could promote acceleration of research through larger sample sizes. This would increase statistical power and allow examination of mediators and moderators of treatment outcome. Potential mediators include the impact of treatment on the level of perceived social support, quality of parenting and level of parental stress. Possible moderators include pre-treatment mental health status of parents, family cohesiveness, shelter staff support of parents and demographic characteristics.

In closing, we acknowledge conducting intervention research in shelters is incredibly challenging because of the complexities of shelter life and characteristics of families experiencing homelessness. Potential benefits

of enhancing parenting provided to these vulnerable children, however, should encourage researchers to enter this arena. We trust this review of first-generation studies will provide direction for future investigations to move the field forward.

ACKNOWLEDGEMENTS

This paper is based on a work product of the Society for Child and Family Policy and Practice (Division 37 of the American Psychological Association), Section on Child Maltreatment's Task Force on Promoting Positive Parenting in the Context of Family Homelessness. The Society and Section acknowledge with appreciation the time and expertise contributed by the Section on Child Maltreatment's Task Force members towards advancing knowledge on this important issue. The findings and conclusions presented here are those of the authors. The paper has not been considered by the American Psychological Association Council of Representatives and does not necessarily reflect the official position of the organization. The paper authors thank members of the Task Force for their valuable input on drafts of the literature review, with special appreciation to Janette Herbers and Tasha R. Howe.

REFERENCES

- Abidin, R.R. (1995) *Parenting Stress Index*, 3rd edn. Pediatric Press, Charlottesville, VA.
- Anilena, M., Calam, R. & Sanders, M.R. (2012) A review of parenting programs in developing countries: opportunities and challenges for preventing emotional and behavioral difficulties in children. *Clinical Child and Family Psychology Review*, 15 (2), 163–175.
- Barth, R.P., Landsverk, J., Chamberlain, P., Reid, J.B., Rolls, J.A., Hurlburt, M.S. *et al.* (2005) Parent-training programs in child welfare services: planning for a more evidence-based approach to serving biological parents. *Research on Social Work Practice*, 15 (5), 353–371.
- Bassuk, E.L., Buckner, J.C., Perloff, J.N. & Bassuk, S.S. (1998) Prevalence of mental health and substance use disorders among homeless and low-income women. *American Journal of Psychiatry*, 155 (11), 1561–1564.
- Beharie, N., Kalogerogiannis, K., McKay, M.M., Paulino, A., Miranda, A., Rivera-Rodriguez, A. *et al.* (2011) The HOPE Family Project: a family-based group intervention to reduce the impact of homelessness on HIV/STI and drug risk behaviors. *Social Work With Groups*, 34 (1), 61–78.
- Buckner, J.C., Bassuk, E.L., Weinreb, L.F. & Brookes, M.G. (1999) Homelessness and its relation to the mental health and behavior of low-income school-age children. *Developmental Psychology*, 35 (1), 246–257.

- Coren, E., Thomae, M. & Hutchfield, J. (2011) Parenting training for intellectually disabled parents: a Cochrane Systematic Review. *Research on Social Work Practice*, 21 (4), 432–441.
- Cosgrove, L. & Flynn, C. (2005) Marginalized mothers: parenting without a home. *Analyses of Social Issues and Public Policy*, 5 (1), 127–143.
- Dansec, E.R. & Holden, E.W. (1998) Are there different types of homeless families? A typology of homeless families based on cluster analysis. *Family Relations*, 47 (2), 159–165.
- Davey, T.L. (2004) A multiple-family group intervention for homeless families: the weekend retreat. *Health & Social Work*, 29 (4), 326–329.
- Ferguson, S. & Morley, P. (2011) Improving engagement in the role of father for homeless, noncustodial fathers: a program evaluation. *Journal of Poverty*, 15, 206–225.
- Finch, A.J. Jr., Saylor, C.F., Edwards, G.L. & McIntosh, J.A. (1987) Children's depression inventory: reliability over repeated administrations. *Journal of Clinical Child Psychology*, 16, 339–341.
- Fixsen, D.L., Naoom, S.F., Blasé, K.A., Friedman, R.M. & Wallace, F. (2005) *Implementation Research: A Synthesis of the Literature*. University of South Florida, Louis de la Parte Florida Mental Health Institute, The National Implementation Research Network, Tampa, FL.
- Gewirtz, A. & Taylor, T. (2009) Participation of homeless and abused women in a parent training program: science and practice converge in a battered women's shelter. In: *Community Participation and Empowerment* (eds M.F. Hindsworth & T.B. Lang), pp. 97–114. Nova Science Publishers, Hauppauge, NY.
- Gewirtz, A.H., DeGarmo, D.S., Plowman, E.J., August, G. & Realmuto, G. (2009) Parenting, parental mental health, and child functioning in families residing in supportive housing. *American Journal of Orthopsychiatry*, 79 (3), 336–347.
- Girolametto, L. & Weitzman, E. (2006) It takes two to talk – the Hanen program for parents: early language intervention through caregiver training. In: *Treatment of Language Disorders in Children* (eds R.J. McCauley & M.E. Fey), pp. 77–103. Brookes, Baltimore, MD.
- Glazemakers, I. & Deboutte, D. (2012) Modifying the 'Positive Parenting Program' for parents with intellectual disabilities. *Journal of Intellectual Disability Research*, 56, 1–11.
- Hancock, T.B. & Kaiser, A.P. (2006) Enhanced milieu teaching. In: *Treatment of Language Disorders in Children* (eds R.J. McCauley & M.E. Fey), pp. 203–236. Brookes, Baltimore, MD.
- Hausman, B. & Hammen, C. (1993) Parenting in homeless families: the double crisis. *American Journal of Orthopsychiatry*, 63 (3), 358–369.
- Herbers, J.E., Cutuli, J.J., Lafavor, T.L., Vrieze, D., Leibel, C., Obradovic, J. et al. (2011) Direct and indirect effects of parenting on the academic functioning of young homeless children. *Early Education and Development*, 22 (1), 77–104.
- Jones, S.L. (2003) *Homeless families: a crisis management program for parents*. Unpublished doctoral dissertation, James Madison University, Harrisonburg, VA.
- Jouriles, E.N., McDonald, R., Spiller, L., Norwood, W.D., Swank, P.R., Stephens, N. et al. (2001) Reducing conduct problems among children of battered women. *Journal of Consulting and Clinical Psychology*, 69 (5), 774–785.
- Jouriles, E.N., McDonald, R., Rosenfield, D., Stephens, N., Corbitt-Shindler, D. & Miller, P.C. (2009) Reducing conduct problems among children exposed to intimate partner violence: a randomized clinical trial examining effects of Project Support. *Journal of Consulting and Clinical Psychology*, 77 (4), 705–717.
- Kelly, J.F., Buehlman, K. & Caldwell, K. (2000) Training personnel to promote quality parent-child interaction in families who are homeless. *Topics in Early Childhood Special Education*, 20 (3), 174–185.
- Kilmer, R.P., Cook, J.R., Crusto, C., Strater, K.P. & Haber, M.G. (2012) Implications for practice, supportive services, and policy. *American Journal of Orthopsychiatry*, 82, 389–401.
- Kissman, K. (1999) Time out from stress: camp program and parenting groups for homeless mothers. *Contemporary Family Therapy*, 21 (3), 373–384.
- Koblinsky, S.A., Morgan, K.M. & Anderson, E.A. (1997) African-American homeless and low-income mothers: comparison of parenting practices. *American Journal of Orthopsychiatry*, 67 (1), 37–47.
- Lindsey, E. (2000) Social work with homeless mothers: a strength-based solution-focused model. *Journal of Family Social Work*, 4, 59–78.
- McDonald, R., Jouriles, E.N. & Skopp, N.A. (2006) Reducing conduct problems among children brought to women's shelters: intervention effects 24 months following termination of services. *Journal of Family Psychology*, 20 (1), 127–136.
- Masten, A.S. & Coatsworth, J.D. (1998) The development of competence in favorable and unfavorable environments. *American Psychologist*, 53 (2), 205–220.
- Maxwell, N., Scourfield, J., Featherstone, B., Holland, S. & Tolman, R. (2012) Engaging fathers in child welfare services: a narrative review of recent research evidence. *Child & Family Social Work*, 17 (2), 160–169.
- Mays, N., Pope, C. & Popay, J. (2005) Systematically reviewing qualitative and quantitative evidence to inform management and policy-making in the health field. *Journal of Health Services Research Policy*, 10, 6–20.
- Melley, A.H., Cosgrove, K., Norris-Shortle, C., Kiser, L.J., Levey, E.B., Coble, C.A. et al. (2010) Supporting positive parenting for young children experiencing homelessness: the PACT therapeutic nursery. *Zero to Three*, January, 39–45.
- Miliotis, D., Sesna, A. & Masten, A.S. (1999) Parenting as a protective process for school success in children from homeless families. *Early Education and Development*, 10 (2), 111–133.
- Narayan, A.J., Herbers, J.E., Plowman, E.J., Gewirtz, A.H. & Masten, A.S. (2012) Expressed emotion in homeless families: a methodological study of the five-minute speech sample. *Journal of Family Psychology*, 26 (4), 648–653.
- National Center on Family Homelessness (2009) *Working to End Family Homelessness: Annual Report*. NCFH, Newton, MA.

- Norris-Shortle, C., Melley, A.H., Kiser, L.J., Levey, E., Cosgrove, K. & Leviton, A. (2006) Targeted interventions for homeless children at a therapeutic nursery. *Zero to Three*, **26**, 49–55.
- Olivet, J., McGraw, S., Grandin, M. & Bassuk, E. (2010) Staffing challenges and strategies for organizations serving individuals who have experienced chronic homelessness. *The Journal of Behavioral Health Services & Research*, **37** (2), 226–238.
- O'Neil-Pirozzi, T.M. (2009) Feasibility of and benefit of parent participation in a program emphasizing preschool child language development while homeless. *American Journal of Speech-language Pathology*, **18** (3), 252–263.
- Park, J.M., Fertig, A.R. & Allison, P.D. (2011) Physical and mental health, cognitive development, and health care use by housing status of low-income young children in 20 American cities: a prospective cohort study. *American Journal of Public Health*, **101** (S1), S255–S261.
- Pfannenstiel, J. & Zigler, E. (2007) *The Parents as Teachers Program: Its Impact on School Readiness and Later School Achievement*. Unpublished report prepared for Parents as Teachers National Center. Available at: http://www.parentsasteachers.org/images/stories/documents/Executive20Summary_of_K_Readiness.pdf (accessed October 2012).
- Pope, C., Mays, N. & Popay, J. (2007) *Synthesizing Qualitative and Quantitative Health Evidence: A Guide to Methods*. Open University Press, Maidenhead.
- Puterbaugh, F.G. (2009) *The impact of the Adolescent Transition Program's parent management curriculum on risk factors for delinquency and perceived parenting efficacy*. Unpublished doctoral dissertation, Alliant International University, Alhambra, CA.
- Sanders, M.R. (2008) Triple P-Positive Parenting Program as a public health approach to strengthening parenting. *Journal of Family Psychology*, **22**, 506–517.
- Schiff, J.W. (2007) Homeless families in Canada: discovering total families. *Families in Society: The Journal of Contemporary Social Services*, **88** (1), 131–140.
- Seibel, N.L. (2011) Using evidence-based program support children and families experiencing homelessness. *This Brief is a product of Zero to Three*. Available at: http://www.zerotothree.org/about-us/funded-projects/strengthening-at-risk-and-homeless-young-mothers-and-families/strength_ebp122111.pdf (accessed August 2012).
- Swick, K. (2009) Strengthening homeless parents with young children through meaningful parent education and support. *Early Childhood Education Journal*, **36** (4), 327–332.
- Toro, P.A. (2007) Toward an international understanding of homelessness. *Journal of Social Issues*, **63**, 461–481.
- US Department of Housing and Urban Development (2010) *The 2009 Annual Homeless Assessment Report*.
- Zevenbergen, A.A. & Whitehurst, G. (2003) Dialogic research: a shared picture book reading intervention for preschoolers. In: *On Reading Books to Children: Parents and Teachers* (eds A. van Kleeck, S.A. Stahl & E.B. Bauer), pp. 177–200. Erlbaum, Mahwah, NJ.
- Zlotnick, C., Robertson, M.J. & Tam, T. (2003) Substance use and separation of homeless mothers from their children. *Addictive Behaviors*, **28** (8), 1373–1384.