ABSTRACT

UNDERSTANDING FACTORS THAT INFLUENCE BLACK CAREGIVERS’ ONGOING ENGAGEMENT IN BEHAVIORAL PARENT TRAINING PROGRAMS

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Despite the efficacy of behavioral parent training programs (BPTs) in reducing young children’s challenging behaviors, ongoing caregiver engagement in these skill-based programs is poor, particularly in low-income Black populations. The existing literature relied heavily on associating client demographic variables with treatment attendance and focused almost exclusively on BPTs with older children. Contemporary conceptualizations of engagement view it as a multidimensional construct comprised of cognitive, attitudinal, and behavioral components, and prior research has called for continued investigation into the caregiver-therapist alliance and cultural relevance of these treatment programs when looking at ways to increase Black caregiver engagement. The purpose of the present study was to qualitatively explore ways cognitive (e.g., expectations for treatment), attitudinal (e.g., readiness to change), relational (e.g., alliance), and cultural (e.g., mistrust, relevance) factors may have influenced Black caregivers’ experience and ongoing engagement at an urban Midwestern nonprofit agency focused on treating trauma in young children (i.e., ages 6 years and younger). Twelve Black caregivers who recently completed a home-based BPT for their child with a White therapist were interviewed regarding their expectations and feelings about treatment, their working alliance with and the cultural understanding of the therapist, and their within- and between-session engagement with the treatment strategies. Findings suggested most caregivers entered therapy expecting to learn more effective ways of managing their child’s behavior but were involved in the therapy to a greater degree than they originally expected. Most participants also described at least some degree of ambivalence when speaking about their hesitations about engagement in treatment. At the same time, participants described a positive working relationship with their therapist and reported they felt their therapist was able to understand the caregiver’s experience, particularly in helping the caregiver better manage behavioral concerns. Most participants described multiple ways they engaged with the therapist and their child during sessions and reported consistent use of strategies between sessions. Study findings also include meaningful suggestions from participants for improving Black caregiver engagement in this type of early childhood BPT therapy in the future. Limitations of this study and implications for both future research and clinical engagement interventions are also discussed.