

## **Adding Value: Promoting Multi-disciplinary Dissemination of IY Parent Programs with Fidelity**

### **Abstract**

*Evidence-based treatments* (EBT) are techniques and interventions, when implemented with fidelity, yield reliable outcomes based on demonstrated research evidence. *Evidence-based practice* (EBP) is a broader term that includes clinical practice informed by research, clinical expertise, patient needs and decision-making (APA, 2006). Research and clinical practice form the knowledge base for evidence-based practice (Kazdin, 2008).

The Incredible Years® (IY) is an EBT with a well-established history of high-quality research and treatment outcomes. Examples of its implementation as an EBP with fidelity are the incorporation of adaptation for the cultural context of each family with sensitivity to the child's developmental, academic, and social-emotional needs; as well as the use of ongoing consultation following initial training (Webster-Stratton, 2015).

Children's Hospital Los Angeles (CHLA) has a long history of implementing IY parent training programs with fidelity within the context of multi-disciplinary training. This panel presentation will present the opportunity to explore with representatives of different health professions how participation in training and leadership of groups impacts their clinical practice.

The following presenters were given questions answered by panelists regarding their disciplines, training, IY Programs delivered, fidelity, perspective, culture, barriers, and the future to prepare in advance of the panel discussion at the Incredible Years Mentor Retreat to be held at CHLA in September 2025:

Each panelist was given the following questions to respond to in preparation for the panel presentation:

**Introductions** - Introduce yourself, your discipline, where you practice and with whom, and which IY parent program you implemented.

1. **Karen Camero** from AltaMed Children's Hospital Los Angeles. I practice in primary care with a very robust Spanish speaking population. I have implemented the IY baby and Toddler groups in primary care pediatrics.
2. **Jessica Y. Gonzalez**, MS, CCC-SLP. I am a Speech-Language Pathologist II at the Behavioral Health Institute at Children's Hospital Los Angeles. I am trained in Attentive Parenting, Preschool and School Age Parenting and Dinosaur School Programs.
3. **Aviril Sepulveda**, occupational therapist, I have worked for CHLA for over 12 years and currently run a group practice serving children in early intervention IDEA-C services. These are children who are at risk for developmental delays. I also work with the Filipino Family Health Initiative where run IY for Filipino families of pre-teen children.
4. **Vasni Briones** - I am part of the Child and Family program and I am part of the parent IY groups. In the past I have participated in the in-person child and parent groups. Currently I am running the virtual IY caregiver groups.

**Training** - What value did an evidence-based parent management training like the Incredible Years® Parent Program add to your training experience at CHLA and to your current clinical practice?

1. **Dr. Camero** - I am a big advocate of prevention, continuity and anticipatory guidance. During well child visits, we receive a lot of questions about parenting, behavior and discipline. Unfortunately, some studies show that many parents leave their well child checks with unmet needs in these domains. Participating in IY training has given me the tools to answer these questions in an evidence-based manner. Now, I don't wait until parents bring up questions, I start giving them advice that I have learned from IY since the newborn periods, or our first visit together. I definitely think IY training has helped me become a better primary care pediatrician.
2. **Jessica Gonzalez** - The training to become a speech-language pathologist did not include behavior management strategies. The IY program provided me with a guide and resources to support the behavior of my clients to meet their clinical goals, and tips for working with parents.

**Q:** What IY behavior management strategies have you used most frequently in your practice as an SLP?

3. **Dr. Sepulveda** - The program taught me practical ways to support parents during my training at CHLA, and I still use its tools in my work in EI to help families build stronger relationships and create positive changes at home.
4. **Vasni Briones** - Using the Incredible Years® Parent Program model has increased my clinical practice in many ways; including the ability to use such techniques in a group and individual setting, provide parents with concrete examples and visuals they can refer to and identify themselves with. In addition to being able to keep and continue to use tools such as the book or handouts even after their group participation.

**Q:** With what other groups have you used the IY parenting techniques and how did you integrate them?

**Fidelity** - Which items on the Fidelity Checklist were most helpful for you to flexibly engage parents in your group and in the practice of your discipline?

1. **Dr. Camero** - I like the outlines of the sessions because they keep me on track. Because I am a pediatrician, I inevitably receive medical questions throughout the session, so having an outline reminds me where we are in the agenda. If I deviate from a topic to answer a question, I can remind myself of where we left off and get back on track.
2. **Jessica Gonzalez** - The list of items needed for the class, and reminders of key concepts and activities to cover on each topic was helpful.
3. **Dr. Sepulveda** – no response. Dean: I think it is because I always use the fidelity checklist when leading groups with Dr. Sepulveda.
4. **Vasni Briones** - Supporting caregivers with identifying their goal in group, role playing techniques learned and providing a guided space has definitely contributed to parent engagement.

**Q: " Guided space"** is an interesting term ... does this refer to directing roleplays and if so, what are a few examples of practices you have directed in other groups?

**Perspective** - How did implementing an Incredible Years Parent group change your view of working with parents?

1. **Dr. Camero** - Implementing IY Parenting groups in primary care has allowed me to spend more time on prevention and anticipatory guidance outside of the clinical space. It has also allowed me to get to know the parents really well and get some context into things that are happening in the home environment, that I don't always learn about during our clinic visits, due to time constraints, other medical priorities, etc.
2. **Jessica Gonzalez** - It increased my confidence and comfort when working with parents. It helped to learn from and observe seasoned co-leaders on how to implement the group and manage/troubleshoot situations as they occurred.
3. **Dr. Sepulveda** - Facilitating an Incredible Years Parent group showed me that while parents face unique challenges, many of their struggles are shared. The program normalizes these experiences and empowers parents to tap into strategies they already know. As a clinician, it reminded me that parents are the true experts on their children, and shifting the focus to their strengths is deeply empowering. It also reinforced how impactful it is to partner with parents, rather than focusing solely on the child.
4. **Vasni Briones** - Implementing the Incredible Years Parent group has contributed to my expertise and being able to provide parent's other options of educating themselves to better relationship with their children and while being able to manage their behavior in healthy ways.

**Q:** Please tell us more about "other options of educating themselves" to improve their relationship with their children.

**Culture** - How did you culturally tailor your implementation of the Incredible Years® when co-leading parent group(s) with fidelity and in the professional practice of your discipline?

1. **Dr. Camero** - It helps that I am a Latinx provider, leading groups in Spanish. I think the parents feel confident sharing their experiences with me. I sometimes comment on my experiences growing up and raising kids in a bilingual household, when we talk about language development. Or I talk about the role of extended family in the care of infants and toddlers and how it's hard to implement principles such as "ignoring tantrums" when you have a family member criticizing you for doing it.
2. **Jessica Gonzalez** - I led groups in English and Spanish. If a family spoke another primary language, we incorporated interpretation support as needed. When I worked with families of children with autism or a language delay, I incorporated communication strategies such as augmentative and alternative communication (AAC) to aid in the implementation of parenting strategies.
3. **Dr. Sepulveda** - I run groups for Filipino families, and as a Filipino immigrant, I can relate to and validate the cultural values, traditions, and parenting styles they share. I make sure the examples, language, and discussions fit their real-life experiences, encourage them to share their own strengths, and create space for problem-solving together. We also ask if the video examples feel meaningful or have cultural significance, so parents feel the program speaks to them while keeping true to the main components of the Incredible Years model.

**Q:** What are some common Filipino cultural values that are brought up by parents in their groups?

4. **Vasni Briones** - During my implementation of Incredible Years, I have embraced other cultures which is grounded in a framework of collaborative. Co-leading prioritizes creating a culturally sensitive environment where parents feel empowered to share their perspectives.

**Q:** Can you share with us examples of how co-leaders work together to create a culturally sensitive environment?

**Barriers** - What family barriers were encountered? How were some of these barriers removed?

1. **Dr. Camero** - Attending these parenting workshops is a huge time commitment for the parents. The virtual format has helped, because it eliminates commute time, parking, etc.

Scheduling is not always easy. Some parents prefer morning groups, while others prefer evening or weekend groups. I find myself cycling between schedules to better meet the parents' needs.

Sometimes it's hard for parents to see the value of these programs and they don't return. Some want a "quick fix" for behavioral problems. So, I don't push them. I tell them that when/if they are ready, they can join another cohort. It helps that I have continuity with them in other settings. I also try to discuss and model some IY principles during our medical visits.

2. **Jessica Gonzalez** - Building parking cost, difficulties finding low cost/free parking near the clinic, travel distance to the clinic, child care for siblings, needing to miss work consistently to attend group.

3. **Dr. Sepulveda** - We used to run the groups in-person and attendance was a barrier. Now that we run groups virtually, our attendance rates are better.

Another barrier is time. In El, I serve clients who have developmental disabilities in the underserved area in LA. A lot of the times, these parents are experiencing multiple social issues and could not make it consistently to scheduled sessions.

4. **Vasni Briones** - Barriers at times could be lack of attendance of parents having their camera off during their participation. Following up individually with each parent and problem solving around such barriers has been crucial to group success.

**Looking Ahead** - How can IY programs be embedded within the existing systems for long-term impact and continuous improvement?

1. **Dr. Camero** - My dream is to have enough trained IY providers in primary care, that workshops are offered to all our patients as a prevention strategy. I have heard of other clinics implementing group well-child checks, which would be a good space where we could provide these groups. I think billing is always the barrier. I am currently able to bill the individual telephone visits with the parents on a weekly basis, to justify some of my time, but don't bill for my time leading the groups. This has worked well for the past year, but it does get exhausting sometimes.
2. **Jessica Gonzalez** - Short-term follow-up groups to refresh parents of skills learned. Social media groups/forums with posts facilitated/monitored by moderators. IY parent navigator who connects with other parents who have completed the group and provides social support.
3. **Dr. Sepulveda** - To make a long lasting-impact, it needs to be built into places families already use, churches, community centers, and schools.
4. **Vasni Briones** - In order to continue having long-term impact, it is important to continue integrating IY programs; including high quality training, coaching and monitoring progress.

**Q:** This is an interesting point ... is this a reference to skills from your work as a PCIT trainer in the past? If so, how have you incorporated your PCIT coaching skills into the delivery of IY?



### Reference List

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