



## *Improving the Lives of Children Through Healthy Couple Relationships and Stable Homes*

**University of Missouri Graduate Course  
Summary Report 2010-2012<sup>1</sup>**

### **Overview of HRMET and Evaluation**

The goal of the Healthy Relationship and Marriage Education Training (HRMET) Project is to meet the safety, permanency, and well-being needs of vulnerable children and reduce racial disproportionality in the child welfare system. HRMET's approach is to increase child welfare workers' access to relationship and marriage education (RME) by creating a cost-effective and sustainable multi-state, five-tier delivery saturation model. This model brings together Cooperative Extension's existing resources and experiences, lessons learned from recent federally funded Healthy Marriage projects, social work's experience developing curricula and training child welfare workers, and an eight-state team of the nation's leading Extension Specialists in Human Development and Family Studies (HDFS).

This report represents a brief summary of the feedback shared by the students who completed the graduate course, "Couple and Marital Relationships in Child Welfare" offered at the University of Missouri<sup>2</sup>. This 14-week course was cross-listed through the Department of Human Development and Family Studies (HDFS 7001-03) and the Department of Social Work (Soc Wk 7001 -04, 05, 06) and offered during the fall semesters of 2010, 2011, and 2012. Data was collected at the start of the course (pre-survey), immediately following the conclusion of the course (post-test), as well as one-week, two-months and six-months after the course. As summarized below, 30 students participated in the graduate course, 28 (93.3%) responded to the first three surveys, and 28(93.3%) responded to at least one (N=7) or both (N=21) follow-up surveys administered 2 and 6 months after the graduate course.

Course Year	Number of Students	Pre-Test	Post-Test	1-Week Post-Test	2 Month Post-Test	6 Month Post-Test
Fall 2010	10	9	9	8	7	7
Fall 2011	12	12	12	12	11	9
Fall 2012	9	9	9	8	8	7
<b>Totals</b>	<b>31</b>	<b>30</b>	<b>30</b>	<b>28</b>	<b>26</b>	<b>23</b>

### **Demographic Information**

Of the 30 students who completed the course, 5 (17.9%) self-identified as currently working in the child welfare field. Below is a general profile of the participants:

- Age: 22 to 46 (M=29.29)
- Gender: Female (96.4%)
- Race: Caucasian (89.3%); American Indian (3.6%); other (7.1%)
- Marital status: Single in a relationship (50.0%); Married (28.6%); Single not in a relationship (21.4%)

Most learned about the course from a faculty member or instructor (57.1%), a listerv (14.3%), email (10.1%), or from their supervisor (3.6%). As well, reasons for taking the course included professional growth (64.3%), required (35.7%), and/or continuing education (3.6%).

### **General Attitudes**

Because the course was developed with the intent to facilitate the formation and stability of healthy marriages, students were asked a series of questions to gauge their *views on marriage in general*. Overall, their attitudes

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<sup>2</sup> The graduate course instructor was Dr. Dave Schramm (Principle Investigator). For more information about the project and graduate course, and for a complete evaluation report, visit <http://www.nermen.org/HRMET/projeval.php>

were relatively positive and consistent over time. On average, 75.0% and 78.6% of students tended to agree about the importance of marital preparation, intentionality, and strong couple/marital relationships on successful parenting on their pre-test (M=3.89) and one-week post-test (M=4.07) survey, respectively.

Next, given the focus of the course, questions were asked of students to determine how they viewed the *potential helpfulness and relevance* of healthy relationship and marriage education (RME) in the child welfare field. Overall, students shared positive feedback:

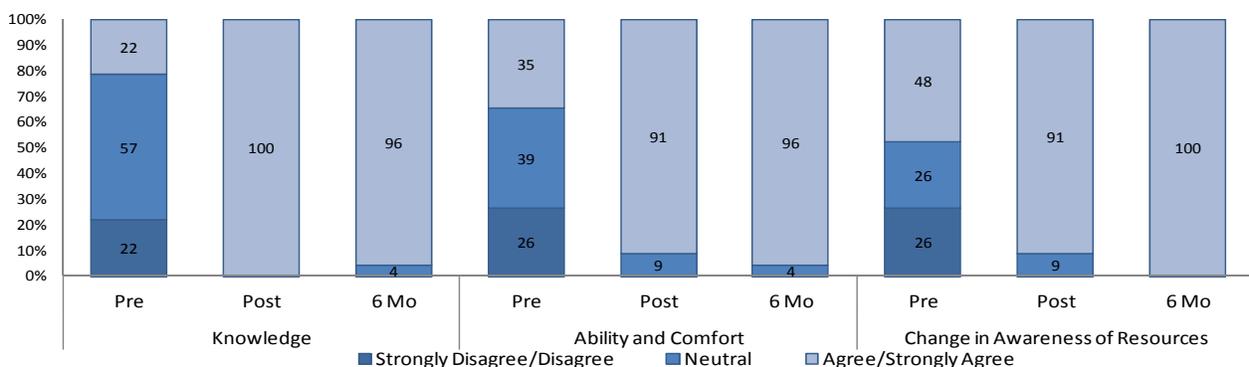
- The vast majority of students ( $\geq 96\%$ ), on average, agreed or strongly agreed that RME was relevant to Child Welfare clients (Pre: M=4.11; Post: M=4.25) and professionals (Pre: M=4.36; Post: M=4.46).
- Nearly all students (Pre: 93.3%; Post: 100%) thought it would be ‘helpful’ or ‘very helpful’ for child welfare professionals to attend courses and trainings like HRMET designed to address education on healthy couple and marital relationships.
- As well, the majority of students (Pre: 93.3%; Post: 100%) felt that it would be ‘appropriate’ or ‘very appropriate’ for child welfare professionals to help their clientele develop skills needed to have healthy couple and marital relationships.

### Course Impact

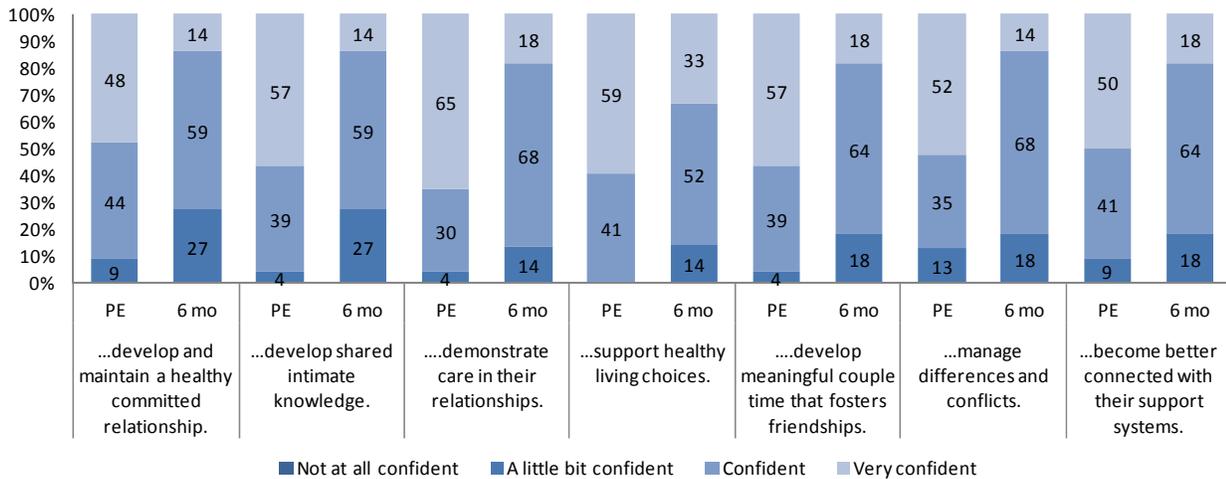
The students were asked in the pre-test, and again at the one-week follow-up, about their knowledge, abilities, comfort, and resource awareness related to incorporating healthy RME and information into case planning, assessment, and practice.

- Significant improvements were observed in students’ *knowledge of ways to incorporate healthy RME and information* into case planning, assessment, and practice: whereas only 21.4% of students agreed or strongly agreed on having knowledge in this area at pre-test (M=2.94), 92.8% of students agreed or strongly agreed (M=4.29) at one-week follow-up.
- Students’ *ability and comfort with incorporating healthy RME and information* into case planning, assessment, and practice also significantly improved: compared to pre-test when only 25.0% of students agreed or strongly agreed on having the ability and comfort with offering RME (M=2.88), 96.3% did so at post-test (M=4.29).
- Students became more *aware of resources and local educational and counseling services* that can assist healthy couple relationship formation: 85.7% of students agreed or strongly agreed that they were aware of such resources after the course (M=4.12) compared to only 46.5% at the start of the course (M=3.16).
- When directly asked how much they felt they improved in each of the areas, nearly all of the students ( $\geq 85.7\%$ ) reported they improved ‘somewhat’ or ‘a lot’ in knowledge, ability/comfort and their awareness of resources.

Six months following the course, students were re-evaluated in order to identify levels of stability and change in course impact. For uniformity in comparisons, results presented below are only for those individuals that completed all three surveys (n = 23). Overall, *six-months following the course participants continued to report an elevated knowledge of, as well as ability and comfort with, incorporating healthy relationship and marriage education and information into aspects of their job, and a heightened awareness of resources that can assist healthy couple relationships.*



During the course, participants learned about seven empirically supported practices and skills associated with healthy relationship development based on the National Extension Relationship and Marriage Education Model (NERMEM). Participants were engaged in opportunities to process tools and strategies to apply and teach these skills. Levels of confidence in helping individuals and couples apply the seven core NERMEM concepts were reported at the conclusion of the course (post-test) and again six-months following the course. Immediately following the conclusion of the course, all of the participants felt *confident in helping individuals and couples apply these seven core concepts*. Compared to responses at post-test, a majority of the 23 participants who completed both surveys, still felt confident or very confident at the six-month follow-up (see figure below).

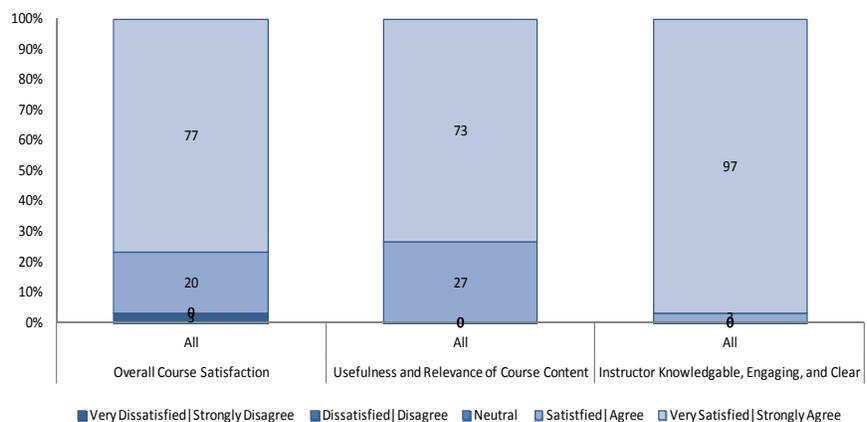


When asked what they will do differently now as a result of the course, sample comments included:

- *I can now provide clients relevant information and offer resources for those that want to have stronger relationships that I did not have access to prior to this class. (Fall 2010)*
- *I can use the 7 principles now with clients. I can recognize these more with couples. I am more equipped with tools I can use to help struggling couples. (Fall 2010)*
- *I will look at more than just the child’s welfare in a situation because the parent’s relationship impacts the child so much. (Fall 2011)*
- *[I will be] more conscious of ‘red flags’ in relationships (and) more aware of ‘red flags’ in children’s behavior. (Fall 2011)*
- *Manage conflict, implement tools, change thinking, improve relationships, [and] recommend resources. (Fall 2012)*
- *Continue to work on building a healthy relationship and begin reaching out to family/friends for support. (Fall 2012)*

### Course Satisfaction

As seen in the figure, almost all of the participants indicated they were satisfied or very satisfied with the course (96.7%). Also, all of the students tended to agree that the course provided useful and relevant content (100%). Specifically, the majority of participants tended to agree that the course was useful and relevant for the work they do (86.2%), provided them with knowledge



and skills for assessing and working with individuals and couples within the child welfare system (96.7%), and was compatible with the needs of the individuals/families they work with (83.3%). Overall, students found the course to be highly useful and applicable for working in the child welfare field.

When asked about what they thought was most useful about the course, respondents mentioned resource tools, information disseminated, and the practical skills and strategies learned as most useful:

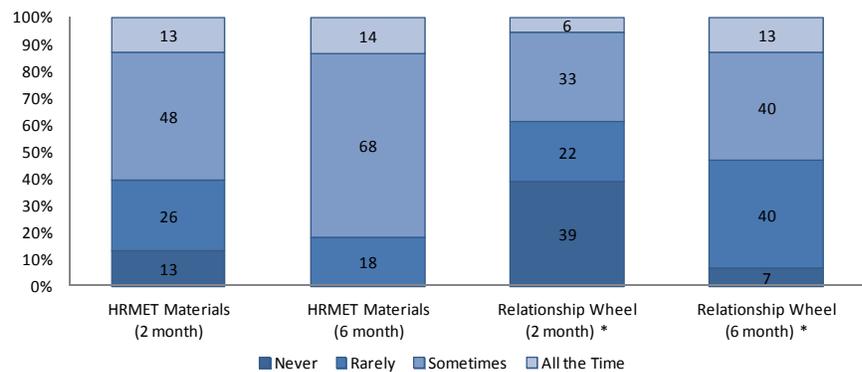
- *Learning more about what factors influence relationship cohesion and success and learning about and having access to tools that can serve to support and enhance relationships.* (Fall 2010)
- *Practical skills to use with actual clients in practice in the future.* (Fall 2010)
- *The practical tools and concepts. I really liked the books we read and feel confident recommending them to clients.* (Fall 2011)
- *The ability to directly apply the course materials to everyday life & work.* (Fall 2012)

With regards to instructor ratings, all participants (100%) ‘agreed’ or ‘strongly agreed’ that the instructor was knowledgeable and presented material well. Lastly, all of the participants (100.0%) indicated that they would recommend this course to others.

## Application

Approximately two- and six-months after completing the course, students were asked how they have used the information from the course in their work. Out of the 28 students who responded to at least one or both surveys, 27 (96.4%) reported using the materials at either the two-month and/or six-month follow-up. As illustrated, a

majority of the students at two-month (60.8%) and six-month (81.1%) follow-up had utilized the HRMET materials either sometimes or all the time. When it came to using the Relationship Wheel with the individuals and families they serve, 38.9% of the students who responded at the two-month follow-up reported using the wheel sometimes or all of the time and at six-month follow-up the percentage increased to 53.3%.



\* The relationship wheel was not introduced until 2011, so data only represents responses from 2011 and 2012

Students were also asked to provide feedback regarding their application of the six core NERMEM concepts since completing the course. Nearly all of the respondents (n=27, 96.3%) reported that they discussed or taught at least one or more of the concepts when working with their clients. The table below lists the key concepts presented during course, the number of students who reported applying each of the concepts at two- and six-month follow-up, and examples of ways they did so. Various individuals also reported utilization of the concepts in their own personal lives, illustrating retention and application of the course concepts and improving likelihood of later utilization with their clients. As one student commented regarding the ‘Care’ concept, “I referred to one of the handouts with a friend of mine in an informal setting. I have also applied these principles to my own relationship and my own life. It has not come up in a professional setting, but I do anticipate it being useful with a different population” (Fall 2011).

Concept	Total (N=28)	2-mth (n=26)	6-mth (n=23)	Example
Choose - The central importance of intentionality and commitment	18 (64.2%)	14 (53.8%)	11 (47.8%)	<ul style="list-style-type: none"> <li>“I discussed finding qualities important to an individual to make a life-long commitment to another person, and finding those qualities before choosing their partner.” (Fall 2010)</li> <li>“I use choose the most when working with clients who have left an abusive relationship and are entering a new one. I talk with these women about being intentional of who they choose to date and how they would like the relationship to progress.” (Fall 2011)</li> </ul>
Care for Self - Maintaining physical, psychological, and sexual health and wellness as an individual	20 (71.4%)	15 (57.6%)	12 (52.1%)	<ul style="list-style-type: none"> <li>“We hosted an oatmeal day to start a conversation on the importance of eating healthy for your heart.” (Fall 2010)</li> <li>“I have discussed the importance of maintaining good, positive self-care strategies and how it will in turn benefit loved ones. You cannot be there for others if you are not first in first tune with your own needs.”(Fall 2012)</li> </ul>
Know - The development of intimate knowledge of partner	17 (60.7%)	13 (50.0%)	10 (43.4%)	<ul style="list-style-type: none"> <li>“I have used this element when discussing the above tendency to move quickly into living together (getting to know their partner prior to putting that kind of strain on the relationship) but primarily with clients in a current relationship when they are wanting to enhance their relationship.” (Fall 2010)</li> <li>“My department held an event for Valentine’s Day. We invited families and their children to come and participate. The evening included food and we separated children from their parents. Parents took part in a version of the newlywed game for fun and were given a lesson on love languages. The kids played Wii and other games in the room next door.” (Fall 2011)</li> </ul>
Care - Demonstrating kindness, affection, understanding, respect, and caring support	20 (71.4%)	14 (53.8%)	13 (56.6%)	<ul style="list-style-type: none"> <li>“I have made this an important tool to use to help them see the difference in their attitudes with one another when they demonstrate care with one another.” (Fall 2011)</li> <li>“I have discussed different strategies with bickering parents about how they can openly and more importantly KINDLY communicate with one another before an argument blows out of proportion.”(Fall 2012)</li> </ul>
Share - Developing and maintaining friendship and sense of “we”; spending meaningful time together	14 (50.0%)	10 (38.4%)	7 (30.4%)	<ul style="list-style-type: none"> <li>“I brainstorm with clients ways to spend time together as a couple that are low-cost and quick connections.” .(Fall 2010)</li> <li>“Encourage clients to find ways to spend time with friends, family and significant others through similar interests or taking turns doing one person’s activity and their own.” (Fall 2011)</li> </ul>
Manage - Strategies of engagement and interaction around differences, stresses and issues of safety	14 (50.0%)	9 (34.6%)	7 (30.4%)	<ul style="list-style-type: none"> <li>“We talk a lot about issues of safety. We safety plan and discuss the importance of asking for help and managing stress within themselves. In so many cases these women are really starting from scratch in learning the basics of relationships and self care.” .(Fall 2010)</li> <li>“I apply principles from manage to many of my clients. With some clients it is to help them address differences with significant others, but it has also been useful for addressing difference/conflict with other family members, friends, and roommates. (Fall 2011)</li> </ul>
Connect - Engaging social support, community ties, and sources of meaning	18 (64.2%)	16 (61.5%)	9 (39.1%)	<ul style="list-style-type: none"> <li>“I have planned community activities, forums, and health fairs for residents of public housing. These were developed to build social support and awareness of resources.” (Fall 2011)</li> <li>“I have discussed the importance of social support in the community and have connected my clients to resources that would benefit them, particularly community resources that they had not accessed or heard of. I mention the importance of using these resources to better their social situation and gain access to more support.”(Fall 2012)</li> </ul>

## Conclusion

Overall, based on responses from students who completed the 14-week graduate course at the University of Missouri, it is evident that the HRMET curriculum could be useful to social work graduate students and child welfare professionals. Evaluation data indicates that there were changes in the knowledge and attitudes of the students over time and that they have applied the information learned.

The overall impact of the training was summarized well by this participant’s comment:

*“It brought a lot of assistance to me in my own life and in my career. I feel that I can approach couple relationships in a wider outlook. The HRMET training can benefit every couple and should be implemented everywhere. I plan to implement it more in my field of mental health services.” (Fall 2011)*