Better Together:

Lessons Learned from a Community-Engaged Research Study



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#### ASHA and AAA Disclosures

#### **Jacob Holzman**

- Salaried faculty at University of Colorado
- Grant-supported researcher (NIH)
- Unpaid ad hoc reviewer for academic journals

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- Salaried Director of Programs, Hands & Voices Headquarters
- Grant-supported program (HRSA)

#### **Sarah Roof**

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- University of Colorado subaward to KY H&V

#### **Christina Studts**

- Salaried faculty at University of Colorado
- ASHA mentor and consultant
- Grant-supported researcher (NIH)
- Grant reviewer (NIH)
- Member of Editorial Board, Perspectives of the ASHA Special Interest Groups
- Unpaid ad hoc reviewer for academic journals

#### **Lori Travis**

- Salaried Audiology Services Administrator and audiologist, Kentucky Office for Children with Special Health Care Needs (OCSHCN)
- University of Colorado, University of Arkansas for Medical Services, and University of Kentucky subawards to OCSHCN

# Learning Objectives

- 1. Describe the gap in previous research that this study addresses.
- 2. Describe how community and academic partners collaborated to develop this study.
- 3. List basic aims and principles of the field of implementation science.

To view a copy of these slides and a poster presented at the conference:



# The Project:

# Behavioral Parent Training for Families with Deaf and Hard of Hearing (DHH) Preschoolers

- Preschool-aged DHH children have at least the same prevalence of challenging behaviors as their hearing peers
- Behavioral Parent Training (BPT) has 40+ years of evidence that it improves child behaviors and parenting behaviors
- BPT is not part of the array of services typically offered to caregivers of DHH children
- DHH children have been excluded from the studies providing the evidence base for BPT



### Adapted Behavioral Parent Training: FCU-DHH

#### The Family Check-Up Model

- Positive behavior support
- Limit-setting and consequences
- Relationship building



PLUS...

Family Management Training: Everyday Parenting Curriculum

Brief & Tailored Family Management

Family Management Weekly Meetings

Family Management Parent Groups

Community Resources & Support

- Delivered by another parent of a DHH child
- Session content, role-plays, and homework tailored to situations described by caregivers of DHH children
- 3 additional sets of resources:

Child Development Toolbox Communication Toolbox Advocacy Toolbox

(Dishion et al., 2008)

# Our questions

#### Does it work?

- Inclusion and exclusion criteria
- Randomization
- Standardized data collection
- Standardized time line
- Research-y "rules"



Zamurovic Brothers, thenounproject.com

#### Our questions

- Do caregivers like it?
- Do parent coaches like it?
- What kind of coach training and supervision are needed?
- Will caregivers sign up? Come to sessions?
- What parts of the intervention are used most? Least?
- What does it cost to deliver?
- Is it feasible to deliver outside of a research project?
- Could it fit into services already offered? Which ones?
- What would be needed for an agency or organization to take this on?

### Being part of the "real world"!



Communities Harnessing and eMpowering Parenting Strengths



### Being part of the "real world"!



Communities Harnessing and eMpowering Parenting Strengths



Which brings us to....

# Implementation Science

#### Different outcomes than traditional health-related research:

- Acceptability
- Feasibility
- Appropriateness
- Adoption
- Reach
- Fidelity
- Adaptations
- Cost
- Sustainment

...and Effectiveness!

### Implementation Science

#### Some principles of implementation research:

- Engage with stakeholders in a meaningful way
- Understand the context
- Adapt to make the intervention "fit"
- As much as possible, reflect the real world in who is involved and how the intervention is delivered
- Think about sustainment from the beginning

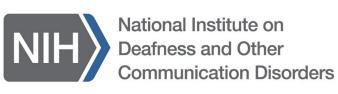
# Community-Academic Partnerships!











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# Hearing & Behavior Community Advisory Board

Parents of DHH children

KY Office for Children with Special Health Care Needs

KY Department for Behavioral Health, Developmental, & Intellectual Disabilities

KY Commission for the Deaf and Hard of Hearing

Kentucky School for the Deaf

First Steps

The Hearing and Speech Center

Kentucky Hands & Voices

Centerstone Behavioral Health Services

Southeast Audiology

**UK Healthcare** 



Lessons learned



# **Lori Travis**

**Audiology Services Administrator**Office for Children with Special Health Care Needs
Kentucky Cabinet for Health and Family Services

#### **Study roles:**

- Community Advisory Board member
- Identification of eligible children
- Encouraged audiologists to refer parents to the study
- Reaching families: When services are limited or not accessed, research can offer another option for families
- Unique resource: Families are less likely to initiate contact from study flyers, advertisements; EHDI can facilitate direct contact with families and audiologists/other providers
- Red tape: Persistence and patience needed
- Relationships: Partnering on one project leads to another, collaboration over time to expand and improve services

# **Sarah Roof**

**Executive Director Kentucky Hands & Voices** 

#### **Study roles:**

- Community Advisory Board member
- Collaborated in FCU adaptation process
- Coordinates H&V parent coaches' employment, pay, logistics
- Matches coaches to families

- Challenges: Coordination is complicated, study activities are part-time and sometimes sporadic, competing demands
- Research requirements: Rigidity in some study aspects that is different than usual H&V practices (e.g., time limits, dual relationships, confidentiality)
- Rewarding experiences: Family feedback, connecting to resources
- Surprises: Willingness of many families to attend FCU sessions that they are not compensated for

### Jacob Holzman

**Assistant Professor**Division of Child & Adolescent Mental Health
University of Colorado School of Medicine

#### **Study roles:**

- Family Check-Up training and clinical supervision with parent coaches
- Contacts and assesses participants flagged for possible elevated risk
- Data analysis and manuscript writing

- Training and supervision: Experiences supporting parent coaches versus clinical trainees in academic medicine setting
- Positionality: Learning about families of DHH children from parent coaches and participants who are all parents/caregivers of DHH children
- Gaps in care: Heightened appreciation of limitations in current system in which mental health service providers lack training and experience with DHH individuals

# **Lisa Kovacs**

Director of Programs
Director, FL3 Center
Hands & Voices Headquarters

#### **Roles:**

- Advocacy training for parent coaches
- Recommended and shared H&V parent resources for toolboxes
- Facilitated study's national expansion
- H&V Guide By Your Side contact

- Connections between the study and practice:
   The MCHB CYSHCN Blueprint for Change
- Two-way learning: Families enrolled in the study vs. families typically engaged with H&V, Guide By Your Side
- Benefits of community-academic partnerships



#### **Tina Studts**

Principal Investigator (PI)
Associate Professor, Pediatrics
University of Colorado School of Medicine

### Julie Jacobs

Site PI
Project Director
University of Kentucky College of Medicine

- Things rarely work the way you thought they would learn from mistakes and failures
- Transparency, humility, and flexibility
- Learn from criticism and do better
- Learn to recognize meaningful engagement vs. tokenism
- Relationships take work and are the best part of community-academic partnerships

Your thoughts, ideas, questions?



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# Thank you!

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To learn more about the CHAMPS-DHH study:



https://medicine.uky.edu/departments/ent/champs-dhh