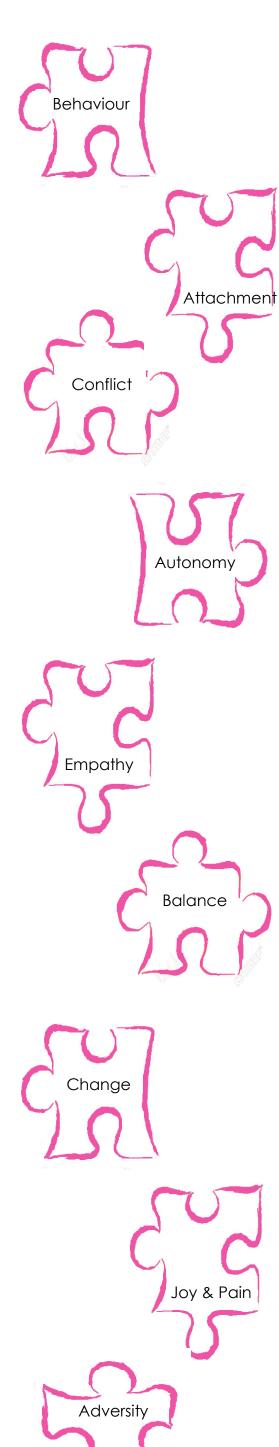
Transforming Connections:

Preliminary Findings from and Attachment-Based Intervention for Caregivers of Trans and Gender Nonconforming Youth

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Introduction

Gender nonconforming youth and trans youth experience bullying and victimization resulting in significantly greater mental health concerns¹. In a large Canadian sample, 2/3 of youth engaged in self-harm and 1/3 had attempted suicide in the last year².

Caregiver support is linked to positive mental health and reductions in depression³. Interventions that support parents in understanding the challenges that their teens face and increase parental sensitivity are needed to support the well-being of teens and their families⁴. However, there is a gap in literature regarding the efficacy of parent groups, which could be a cost effective way to deliver service.

This study examined the acceptance, uptake and caregiver satisfaction of an adapted version of The Connect Parenting Program⁵ that addresses the unique challenges and concerns of caregivers of trans and gender nonconforming youth.

Methods

Participants were 7 caregivers (5 mothers, 2 fathers) of 6 gender nonconforming youth (ages 14-17). Revisions of the Connect Parenting Program were completed in consultation with a panel of mental health professionals in order to address relevant themes expressed in these families and modify experiential learning content. Pre and post treatment, caregivers completed interviews to assess clinical needs, and the acceptance, relevance, and the perceived helpfulness of the program.

- parent-teen relationships⁶.

Results

All parents attended at least 80% of sessions and reported feeling safe and welcomed in the group and respected.

All parents reported learning about attachment was very helpful. Parents also rated the group as helpful (43%) or very helpful (57%) in enhancing their understanding of their teen, and helpful (57%) or very helpful (43%) in enhancing their understanding of themselves as parents. Similarly, most parents felt the group was helpful (71%) or very helpful (29%) in helping them understand their teen's gender identity and transition.

The majority of parents (71%) also indicated that they frequently applied ideas discussed in the group to parenting their teen, and that their relationship with their teen had changed at least somewhat, while 29% reported major changes in their relationship. All parents anticipated more change in the future. Perceived efficacy of parenting was also rated by parents to have improved somewhat (29%) or greatly (71%) as a function of the group.

> • Nine principles based on the building blocks of attachment.

Connect Parenting Program

• Ten week manualized group attachment-based intervention for parents of youth at risk. • Strength focused approach helps parents understand teens and build security in their relationship. • Produces long term reductions in teen's emotional problems and parenting stress and improvements in

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> Parents reported being able to empathize with their teen more easily and feeling more confident in parenting:

> "Helped me understand that when my child is upset/angry/appears selfish/inconsiderate, etc. she is really expressing a connection need."

"I was pretty freaked out about what my child is going through, but I realized that he is actually the same, pretty well adjusted kid. It was reassuring. If there are issues in the future, I think I can handle them."

Limitations

Many caregivers in the group reported that their teen had complex mental health needs and engaged in self-harm. They wanted additional support regarding handling these challenges.

Caregivers face ongoing challenges as their teens transition and they asked for more time to discuss these issues.

Future Directions

Feedback from this pilot group will inform further revisions of the program with the goal of co-creating a culturally adapted, safe, and helpful intervention. Two subsequent groups will be facilitated. Changes in the attachment relationship and youths' levels of depression, self-harm, and suicidality will be assessed pre and post intervention.

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