



How Can the KPICD Improve Hope Connection 2.0 Camp?

Samantha Peña, Department of Psychology
Dr. Casey Call, Department of Psychology, KPICD
College of Science and Engineering



ABSTRACT

This research investigates the effectiveness of Hope Connection 2.0, a revised version of the therapeutic summer camp developed by The Karyn Purvis Institute of Child Development (KPICD) at Texas Christian University (TCU). Focused on Trust-Based Relational Intervention (TBRI), the camp aims to address the needs of vulnerable children and their families. Through a self-report survey administered to participating caregivers, the study evaluates lasting behavioral and relational developments in the family following their camp experience. The research explores if the camp adequately meets the needs of participating families and how it can be enhanced. Objectives include identifying the most beneficial aspects of the camp, suggesting design improvements, and assessing the reception of TBRI teachings by caregivers and children. The findings aim to inform future iterations of the camp, facilitating continuous improvement and adaptation to better serve the community.

BACKGROUND

The Karyn Purvis Institute of Child Development (KPICD) at Texas Christian University (TCU) developed Trust-Based Relational Intervention (TBRI), an attachment-based, trauma-informed approach for vulnerable children (Purvis, 2009; Purvis, 2013). TBRI aims to understand developmental trauma complexities, identify survival behaviors, and support at-risk children. Globally utilized, TBRI addresses diverse trauma forms.

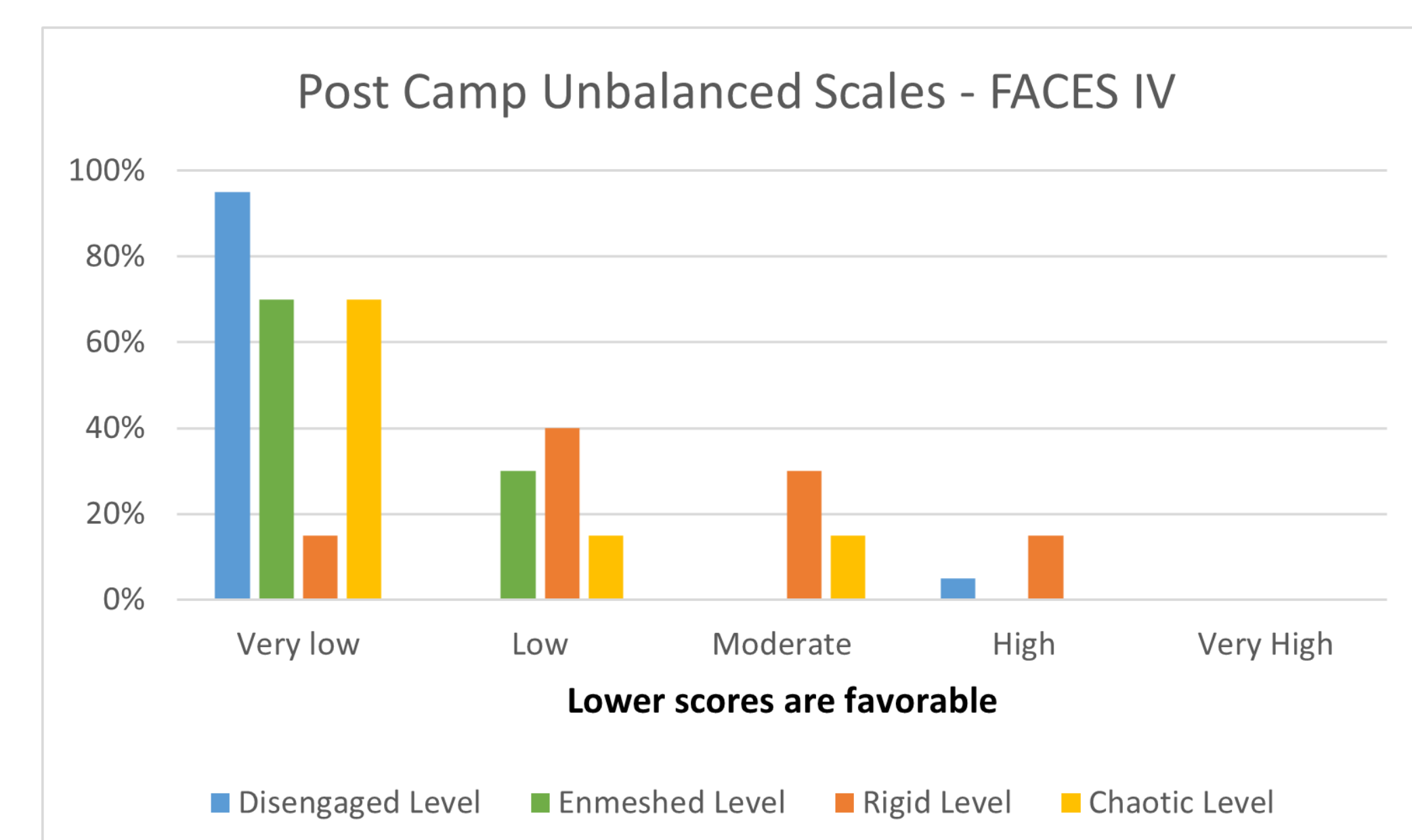
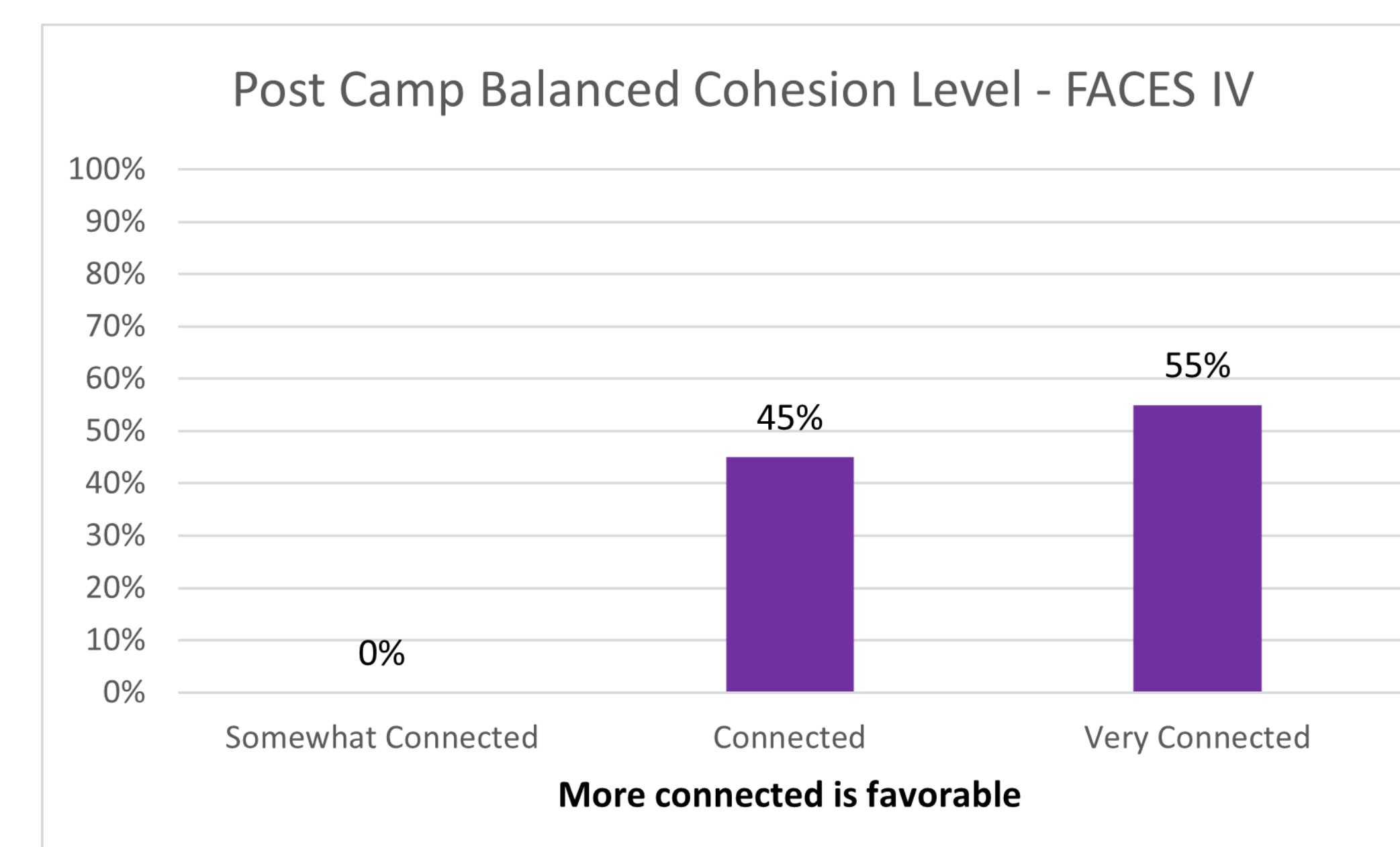
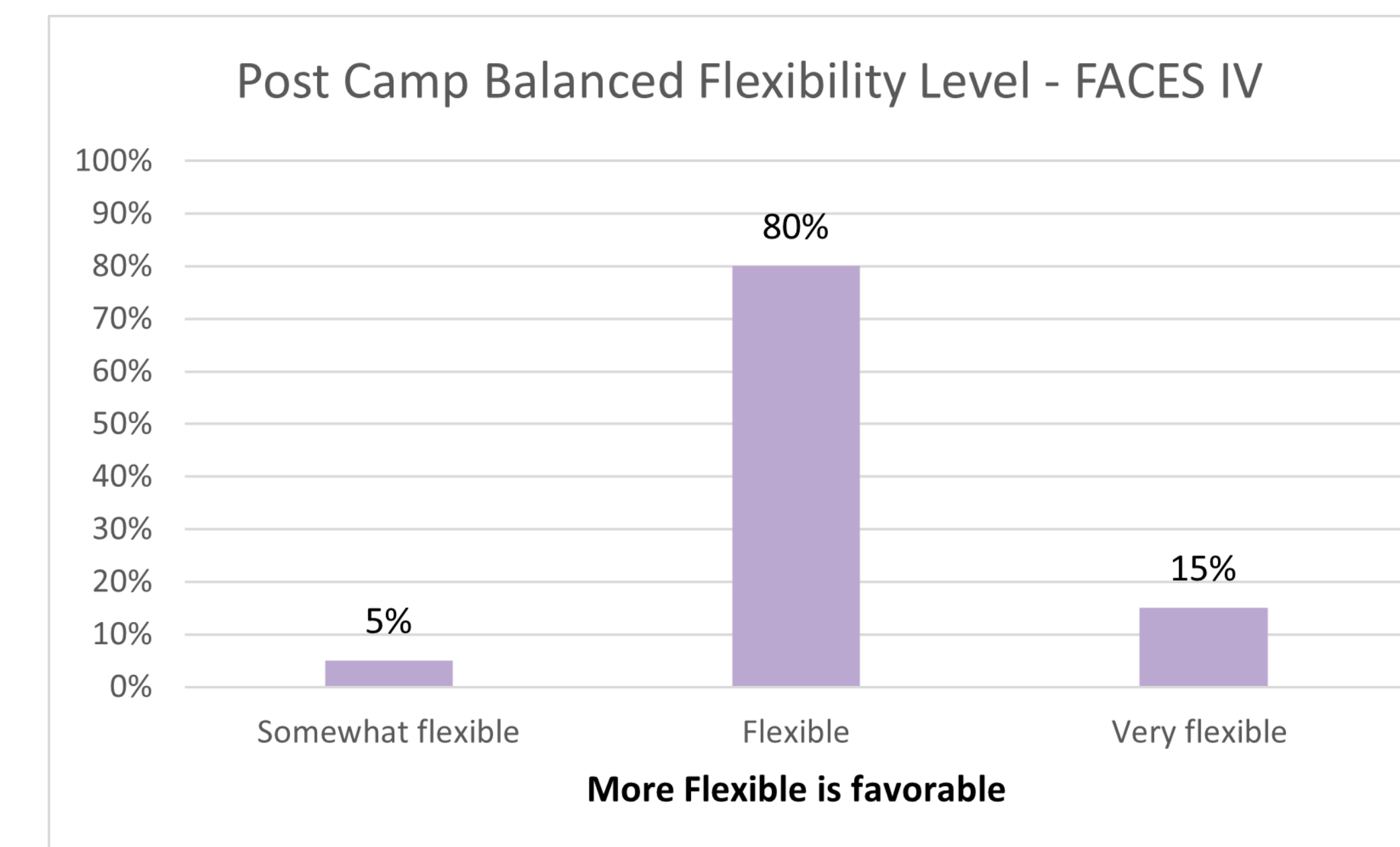
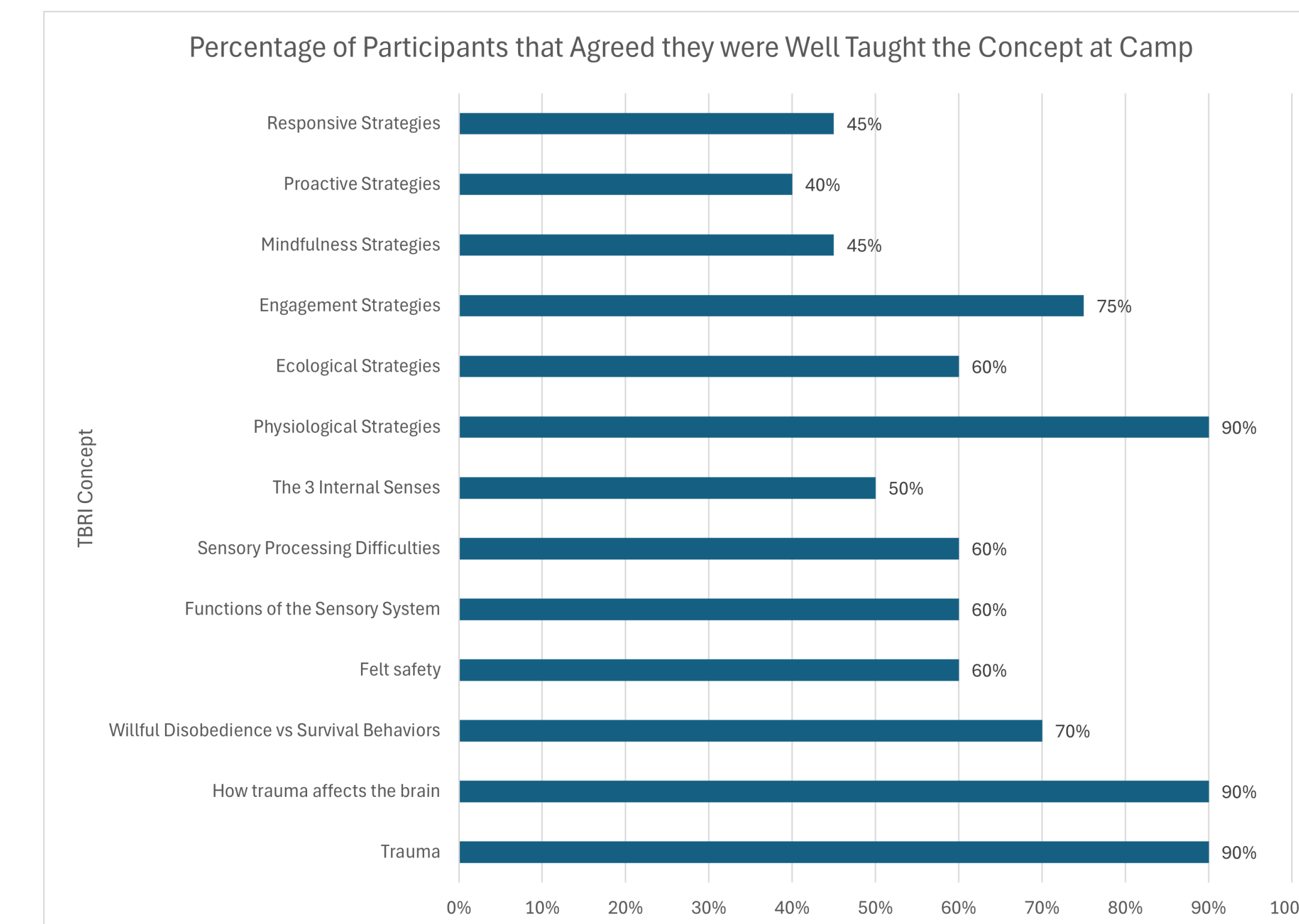
Initially focused on adopted children, The HOPE Connection camp evolved into a family-centered program, HOPE Connection 2.0, in 2018 (Hunsley, 2021). This research aims to enhance camp alignment with family needs, using the Family Adaptability and Cohesion Scale IV - Short Form (FACES-IV-SF) and Likert scales to evaluate cohesion, flexibility, communication, and camp effectiveness. Qualitative data will also inform improvement suggestions.

METHODS

This study employed a mixed-method research design utilizing Qualtrics surveys for both qualitative and quantitative data collection. Caregivers of families who attended HOPE Connection 2.0 in the past seven years were targeted. Of the participants, 45% were female, 25% male, and 30% did not specify their sex. Ages ranged from 39 to 57, with 60% identifying as white, 5% as African American, and 35% not indicating their race.

Recruitment involved individual emails utilizing contact information from HOPE Connection 2.0 applications, ensuring confidentiality with identification numbers. Informed consent was secured at the survey onset, along with withdrawal rights and researcher contact information for queries.

The FACES-IV-SF scale utilized measures the following: Balanced Scales (Cohesion & Flexibility) and Unbalanced Scales (Disengaged, Enmeshed, Rigid, and Chaotic). Cohesion refers to the state of being closely linked and flexibility refers to the family's ability to adapt. Disengaged means a lack of active involvement, enmeshed means boundaries are weak or blurred, rigid means a lack of adaptability, and chaotic means disorder. Higher balanced scales are considered healthy and high unbalanced scales are considered problematic.



RESULTS

The FACES-IV-SF Scale results showed that families who attended camp exhibited improved cohesion, flexibility, and connection at home afterward. The survey also revealed consistently low scores on unbalanced scales, indicating an engaged, independent, fluid, and orderly home environment. These findings suggest a potential influence of TBRI on the balanced scale results, highlighting the need for pre-tests and tailored surveys for clearer data analysis.

Participants reported on various scales assessing their camp experiences, including their own and their children's feelings, the effectiveness of camp elements for their family, and the comprehension of TBRI concepts. While concepts like trauma and its effects received high marks for being "strongly taught," mindfulness strategies, ecological strategies, and sensory processing concepts garnered less confident responses.

Qualitative feedback varied, emphasizing the need for follow-up support, social support during and after camp, and improved time management. Enhancements to housing and travel accommodations were frequently suggested to improve camp accessibility.

CONCLUSIONS

Future application of this study's findings could significantly enhance the design of HOPE Connection 2.0 camp to better cater to attending families. While the current curriculum effectively educates parents on trauma concepts and brain development, technical aspects like mindfulness strategies, ecological strategies, and sensory processing received less emphasis. Addressing these areas could better equip parents to understand and manage their children's behaviors, especially considering the impact of trauma on sensory processing. Incorporating hands-on activities simulating a child's experience may enhance learning.

Qualitative feedback indicated mixed sentiments toward camp. Challenges in time management and post-camp support were mentioned, as were many expressions of gratitude for the social support and safe space cultivated at camp. Some participants expressed confusion about camp expectations, suggesting the need for clearer communication, which could possibly be met through a promotional video outlining the camp's design.

When asked what was the most memorable part of camp, some participants shared the following:

- "Seeing our children learn and grow in their understanding of things"
- "I felt so loved and cared for and inspired."
- "The boys feeling safe and comfortable at camp."
- "Having that compassionate understanding was really a great place to find help"

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