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Single session email consultation for parents: an evaluation of its effect on empowerment

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This study evaluated the effect of single session email consultation (SSEC) on empowerment of parents. Practitioners in a control group ($n = 19$) received no training and practitioners in an experimental group ($n = 21$) were trained to use empowerment-oriented techniques in online consultation. Parental empowerment was measured ($n = 96$) through a questionnaire based on the Family Empowerment Scale before and after receiving advice from a trained or a non-trained practitioner. Parents showed a significant increase in the subscale of self-confidence (Cohen's $d = 0.33$). Study findings lend support to the feasibility of SSEC as a brief intervention to improve self-confidence of parents. A training for practitioners did not influence the outcomes.

Keywords: email consultation; parenting support; empowerment; experiment

Introduction

Email consultation is increasingly employed as an instrument to provide guidance and counselling (Chester & Glass, 2006; Nieuwboer, Fukkink, & Hermanns, 2013; Rochlen, Beretvas, & Zack, 2004), and over the last few years, this service has become widely available to parents in the Netherlands (Nieuwboer, Fukkink, & Hermanns, 2014a). Due to the recent Dutch policy on youth care, all (just over 400) municipalities in the Netherlands are obliged to offer families easily accessible parenting support (RMO, 2012), and most provide a website with interactive features. Single session email consultation (SSEC) is a service in which parents can submit a parenting question through an online web form or an email address and receive a professional response via email within a few days. It is not clear whether such a brief consultation is a suitable medium to enhance parental empowerment.

Online and single session

Empirical studies on SSEC are scarce (Chardon, Bagraith, & King, 2011; Cornwall, Moore, & Plant, 2008; Richards, 2009) and not situated in a parenting support context. In order to distinguish its functions, it is useful to investigate the related body of scholarly literature on both online counselling and single-session treatment, which has developed over the last decades.

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The areas of interest in scholarly literature on online counselling include, mainly, technological literacy (Rochlen, Zack, & Speyer, 2004), the therapeutic relationship (Reynolds, Stiles, Bailer, & Hughes, 2013) and the development of ethical standards and protocols (Kluge, 2011; Mattison, 2012). Empirical studies have compared the outcomes of online and face-to-face therapy, finding evidence for similar effectiveness in terms of treatment outcomes (Barak, Hen, Boniel-Nissim, & Shapira, 2008; Murphy et al., 2009), session impact and therapeutic alliance (Reynolds et al., 2013). Both the benefits and limitations of email in counselling, which can be employed as a stand-alone service or as an adjunct to face-to-face services, have been well documented (e.g., Mallen, Vogel, Rochlen, & Day, 2005; Mattison, 2012; Richards, 2009; Ye, Rust, Fry-Johnson, & Strothers, 2010).

Notably, the focus of studies in the field of online counselling lies in delivering a therapeutic intervention by registered clinicians (e.g., Chester & Glass, 2006; Richards and Viganó, 2013; Wright & Chung, 2001), rather than in providing a brief supportive intervention such as SSEC, which may have different goals and ambitions, such as advice, psycho-education or guidance. This consultative service for parents in the Netherlands is provided by all kinds of professional practitioners, rather than by certified counsellors with specific qualifications or training in the process of counselling. Interestingly, parenthood is not often identified as a main topic or characteristic in the field of studies on online counselling, but according to two descriptive studies on such services (Chester & Glass, 2006; Maheu & Gordon, 2000), users of online counselling are predominantly female and concentrated in the age group of 25–44 years.

Thus, although there is a growing body of scholarly literature and evidence to suggest that online counselling is beneficial for clients in the parenting target group, little is known about the aims of SSEC on parenting, provided by a wide range of practitioners.

Empowerment as a goal of intervention

Similar to counselling in general (see, for instance, the definition of counselling of the National Board for Certified Counselors, 2012), parenting support programmes stress the importance of parental empowerment as a goal of intervention, meaning that a parent experiences an increase in influence, rather than helplessness (e.g., Cattaneo & Chapman, 2010). In their recent review on online counselling, Richards and Viganó (2013) state that the aims to alleviate a client's concerns and to build on a client's strengths are the same in email counselling as in other forms of counselling.

Empowered parents feel confident, are able to make well-informed choices and can find supportive resources (e.g., August, Realmuto, Winters, & Hektner, 2001). Further, parents who are empowered are capable of influencing their children's behaviour in a positive way (e.g., Graves & Shelton, 2007; MacLeod & Nelson, 2000); they experience less stress (e.g., Dempsey & Keen, 2008; Thompson et al., 1997) and report higher levels of well-being (e.g., Van Riper, 1999). Parenting support interventions which are aimed at the development of personal and family strengths and competencies and access to helpful resources may support the process towards more empowerment (e.g., Cochran, 1992; Dempsey & Dunst, 2004; MacLeod & Nelson, 2000; Turnbull, Turbiville, & Turnbull, 2000).

It is not clear whether SSEC can contribute to this goal, and it seems to differ in a number of ways from the practice of parenting support programmes, the practice of online counselling and the practice of single session therapy. As in online counselling, the supportive partnership between parents and practitioners is mostly described as a

relationship of some duration (see, for instance, Baumann, Kolko, Collins, & Herschell, 2006; Harwood & Eyberg, 2004; Trivette & Dunst, 2005). However, in SSEC, with a sequence of only one question and one response, the relationship between parent and practitioner is brief and restricted to textual communication only. The amount of information about the family situation the parent offers is mostly limited, and there may be no response to further in-depth inquiries. Opposed to multiple session therapeutic email consultation or a face-to-face conversation or treatment, the first response through email may be the only opportunity to communicate with the parent (Zelvin & Speyer, 2004).

Thus, since the evidence for the effectiveness of online counselling is mostly based on multiple sessions (Murphy et al., 2009), and the evidence for the effectiveness of single-session therapy is experiential only and not situated in an online context (Campbell, 2012), we know little about the effectiveness of the practice of single session online consultation. In light of the previous scholarly literature, the feasibility of SSEC to have a positive impact on parental empowerment is questionable because of a lack of therapeutic alliance, the brief interaction between practitioner and client, and a low level of specific training for professionals. Further, positive effects have not yet been demonstrated.

Competence in online counselling

Training for online services is in some countries recommended or even required by several professional associations for social workers and psychologists (e.g., American Counseling Association [ACA], American Psychological Association [APA], British Association for Counselling & Psychotherapy [BACP], National Association of Social Workers [NASW] and National Board of Certified Counselors [NBCC]). However, such training is not standard in the context of neither online counselling nor the provision of SSEC in the Netherlands. Many different disciplines are involved in providing parenting support, like developmental psychologists, nurses, psychotherapists, social workers, coaches/counsellors and paediatricians (Nieuwboer et al., 2013; Ritterband & Palermo, 2009), each complying to different codes of conduct, in which distance counselling is often not explicitly mentioned.

Training in the field of online counselling offers very useful and relevant information and guidelines regarding practical solutions (e.g., use of technology and interruption of services), counselling skills (e.g., warmth and pacing), ethical issues (e.g., confidentiality, privacy and duty of care) and legal implications (potential misuse of services, confidentiality of records and informed consent; e.g., Goss & Anthony, 2009; Kraus, Stricker, & Speyer, 2010; Mallen, Vogel, & Rochlen, 2005; Murphy, MacFadden, & Mitchell, 2008). Also, training may stimulate practitioners to become proficient in providing emotional support and conveying empathy in text-based communication (Bambling, King, Reid, & Wegner, 2008; Murphy et al., 2008; Oravec, 2000). Interestingly, although empowerment is a commonly mentioned goal for counselling, detailed text-based techniques to guide clients towards more empowerment through SSEC seem not to be specified in the current training programmes for online counselling.

Thus, in addition to a training in email consultation for practitioners, in general, there seems to be a need for a training in specific techniques, applicable in SSEC, in order to achieve empowerment-oriented goals.

A focused approach to empowerment

It is suggested that a more focused approach to achieve empowerment improvements in parents can contribute to the effectiveness of parenting support (Dunst, Boyd, Trivette, & Hamby, 2002; Dunst, Trivette, & Hamby, 2007; Teti, O'Connell, & Reiner, 1996). Cattaneo and Chapman (2010), in an attempt to clarify the concept and provide a cohesive model for research and practice purposes, described the process of empowerment as an iterative process with four components: *goal setting*, *action taking* and *reflecting on impact*, within the *social context*. A successful transition through the process components results in the experience of more influence, particularly in social relations (like families). This model combines both individual and social aspects of empowerment in families, consistent with an ecological approach (Bronfenbrenner, 1979), which describes the influence of micro-, meso-, exo- and macro-systems on families.

Building on this literature, we developed the Guiding the Empowerment Process (GEP) model, which was validated in an online setting (see Nieuwboer, Fukkink, & Hermanns, 2014b). The GEP model distinguishes between 10 text-based empowerment-oriented techniques, facilitating clarification on each of the earlier-mentioned four components of the empowerment process model, which can be applied in online communication. Thus, based on extant literature, we expect that the use of specific empowerment-oriented techniques in advice will lead to empowerment improvements.

In sum, the effect on the level of parental empowerment of a very brief single session email interaction between a parent and a practitioner was not evaluated before, and practitioners were not trained to use specific, empowerment-oriented, techniques in online consultation.

The goal of this study is to evaluate the effect of SSEC on parental empowerment and to assess the added value of (i) a training for parenting practitioners and (ii) the use of empowerment-oriented techniques.

Method

Participants

In 2011, Dutch organisations which offered SSEC on parenting were identified using Google Search and were also approached through social media. Organisations were eligible when they offered the service of SSEC to parents without commercial goals and free of charge. Working in 13 community-based practices and 9 private practices, 45 parenting practitioners throughout the Netherlands, all educated on a bachelor or master level, showed interest in the study. After receiving additional information about the research procedures, 40 professionals (89%) gave their final consent to participate by completing an online questionnaire with questions about their previous experience in providing email consultations (see Results section) and their profession. Amongst the 40 professionals who agreed to participate, different disciplines were represented, like developmental psychologists (42.6%), nurses (15.5%), psychotherapists (11.6%), social workers (10.1%), coach/counsellors (4.7%), paediatricians (0.8%) and other professionals (14.7%). Their experience with writing email advice varied: 31% had no experience at all, 22.5% had written 1–5 advisory emails prior to the research, 14.7% had written 6–10 advisory emails and 5.4% had written 10–25 such emails. A quarter of the practitioners had more experience (≥ 26 emails, 26.4%).

Two hundred and eight parents submitted a parenting question to the participating practitioners during the three-month experiment. Of the parents, 135 completed the first

questionnaire and consented to participation (65%). We retrieved 129 email communications (both question and advice) for content analysis (96% of all participants). Approximately, three quarters of the participating parents completed the second questionnaire ($n = 98$, 72.5%). However, in two cases, the text of either question or advice could not be retrieved. Thus, the sample included 96 complete data-sets (71% of consenting parents and 98% of parents with complete data).

Recruitment of parents

During the research period, 1 March 2012 to 1 June 2012, participating professionals offered SSEC to parents as part of their regular services. Additionally, we launched a website which provided direct hyperlinks to all participating professionals. Parents were enabled to choose any participating professional and submit any question concerning parenting. Directly after submitting their question, parents received an email via the parenting practitioner, containing information about the research project and its aims, a consent form and a hyperlink to an online questionnaire (pretest, see Measures section). Before the pretest was started, participants had to confirm that they were 18 years of age or older. Parents consented to participate by completing the first questionnaire, and only parents who completed the pretest received a hyperlink to the second online questionnaire (post-test, see Measures section). As an incentive to participate in the study, parents were informed that four tickets to a renowned Dutch family theme park were to be allotted to one participant after the research period. All questions were answered within two to five days. After a minimum of five days, allowing the advice to be delivered to the parent, we requested the parenting practitioner to send us both question and advice for content analysis and evaluation purposes, but of consenting parents only.

This study adheres to the legal requirements of the study country, and all data are available in Dutch and accounted for (first author). The research procedure was approved by the Ethical Committee of the Faculty of Social and Behavioural Sciences, University of Amsterdam (reg. no. 2013-EXT-2811).

Experimental design

In a controlled experimental design with a pretest and post-test, participating practitioners were randomly assigned to the experimental or control group. Before the assignment, we decided to cluster participating practitioners into small groups when they were employed by the same organisation to prevent diffusion of treatment. Education level and previous experience with email consultation were similar between groups. The experimental group ($N_{\text{exp}} = 21$) received a training in email consultation, consisting of five online practice sessions, self-instruction on the basis of information, a discussion board for trainees and one group chat session with the instructor (first author) to discuss training content. The control group ($N_{\text{ctrl}} = 19$) received no training or any other intervention.

Training

The aim of the training was to enable practitioners to use empowerment-oriented techniques in SSEC.

The instructor (first author) provided individual feedback on email responses with a maximum of two 30-minute sessions per trainee. In total, practitioners needed 20–30 hours to complete the training programme. We provided the trainees with a final test case

parenting question, which was an anonymised real-life question, drawn from a parent support agency which was not involved in this research, and collected and scored the email advice before the research period with parents started. Results for the final test case parenting question showed, on a scale from 0–10, scores ranging from 5.75 to 9.25 (mean: 7.75).

After the training was completed, we identified one good example of every single technique in the emails of all trainees during the training sessions and in the final test case; we listed these ‘good practices’ in a one-time email reminder for the trained practitioners, halfway through the research period of three months.

Masking

Practitioners were not aware if a parent participated in the study or not, and parents were not aware whether they received advice from a trained or a non-trained professional. Furthermore, before content analysis, we removed all elements with which parents, families or practitioners could be identified (e.g., email addresses, letter heads/logos, names of family members, people involved and referrals to local organisations) from the records. Also, layout was converted to a basic format, so that no question or advice could be traced back to specific persons.

Measures

Empowerment

The Family Empowerment Scale (Koren, DeChillo, & Friesen, 1992) was slightly adapted to the context of everyday parenting. Independent back-translation of the items was used to prevent misinterpretation of the original scale. Exploratory factor analysis resulted in three subscale factors for this study: self-confidence as a parent ($\alpha = .85$; e.g., ‘When problems arise with my child, I know how to handle them’), confidence in network support ($\alpha = .88$; e.g., ‘My friends and family are supportive to me’) and ability to obtain informational support ($\alpha = .73$; e.g., ‘I am able to get information to help me better understand my child’), totalling 14 items. Responses are indicated on a 5-point Likert scale ranging from ‘very untrue’ (1) to ‘very true’ (5), with higher scores representing more empowerment in positive items and less empowerment in negative items.

Satisfaction

Satisfaction with email consultation was measured using a 5-point Likert scale with 1 representing ‘very unsatisfied’ and 5 ‘very satisfied’.

Content analysis of advice

We developed a coding system to determine the number of empowerment-oriented techniques in the emails of practitioners. We distinguished 10 techniques of the GEP model. The GEP model comprises 10 techniques describing parenting supporting behaviours of professionals, with the specific aim to empower parents (see Cattaneo & Chapman, 2010; Nieuwboer et al., 2014b). With regard to *goal setting*, the practitioner may (i) rephrase the parent’s or family’s goals and (ii) acknowledge the parent’s perspective. Related to *action taking*, the practitioner may (iii) provide a variety of

options and (iv) encourage decision-making related to the described goals. Concerning *reflecting on impact*, the practitioner may (v) describe the needs of involved family members and (vi) identify and encourage the use of (new) knowledge or skills. Specifically, the developmental needs of children are a framework through which the impact of actions and goals can be reflected upon. Finally, in order to mobilise the *social context*, the practitioner may (vii) show opportunities for all family members to participate in problem-solving, (viii) refer to resources in the informal network, (ix) refer to resources in the professional context and (x) identify opportunities on multiple community levels. Although parenting practitioners were not explicitly trained to understand and employ this model, they were familiarised with the 10 techniques, belonging to the model, as an integrated part of the training.

We determined a GEP score for each email advice: if a technique was observed (either once or more), we assigned one point, and, hence, GEP scores range, theoretically, from 0 to a maximum score of 10; we followed this procedure because the length of the emails showed significant variation which was strongly related to the raw frequencies of the various techniques. Of all sentences (5997 in total), 39.1% were assigned a GEP technique code (2349 sentences).

All sets of questions and advice were randomly assigned to three members of the research team, i.e. two master students and the first author. Parenting questions were analysed for topic and length. Email advice were all sentence coded by independent coders. Inter-rater reliability was good (ICC, two-way random, absolute agreement, mean score: .84). Finally, the realisation factor of the GEP model was calculated by dividing the total model outcome by 10 techniques (total GEP/10), indicating the mean number of techniques applied in the sample of email advice. Reliability of the total GEP score proved to be acceptable (Cronbach's $\alpha = .62$). In a previous study (Nieuwboer et al., 2014b), the GEP scores showed convergent validity with the model of social support, as defined by Braithwaite, Waldron, and Finn (1999).

Results

Description of email consultations

Parenting practitioners confirmed that no previous contact or relationship between parent and practitioner preceded the email consultation. Average time spent on writing an email advice was 31–60 minutes; 12 advice responses were written in less than 15 minutes, and 11 responses took more than 90 minutes. Advice responses varied widely in length from 115 words to 1993 words (mean: 698, $SD = 344$).

A dominant theme in the parenting questions was parental competence, including issues like punishment, rules and arguments (40.6%). Most other questions were related to aspects of child development, in which questions about emotional development prevailed (tantrums, insolence, temperament and claiming behaviour; 21.1%). Examples of themes in questions about physical development were sleeping and nutrition (18.8%). Most questions on social development involved bullying (12.5%). The other questions concerned the cognitive development of children and several other issues (7%). The age of children concerned varied from 0 to 21 years (mean: 8.2 years, $SD = 5.1$). Questions also showed great differences in length from 9 to 1227 words (mean: 232, $SD = 206$). Parents were satisfied with the single session email advice offered to them (mean: 4.2, $SD = .71$).

Table 1. Pretest and post-test differences in empowerment.

	Pretest <i>M (SD)*</i>	Post-test <i>M (SD)*</i>
<i>Self-confidence</i>		
Experimental group	3.68 (0.55)	3.85 (0.44)
Control group	3.64 (0.57)	3.80 (0.50)
Total sample	3.66 (0.56)	3.83 (0.47)**
<i>Ability to obtain informational support</i>		
Experimental group	4.17 (0.34)	4.14 (0.32)
Control group	4.06 (0.47)	4.18 (0.41)
Total sample	4.11 (0.41)	4.16 (0.37)
<i>Confidence in network support</i>		
Experimental group	3.48 (0.58)	3.48 (0.63)
Control group	3.48 (0.59)	3.57 (0.54)
Total sample	3.48 (0.59)	3.53 (0.59)

Note: Experimental group, $N = 47$; control group, $N = 49$; total sample, $N = 96$.

*Scale 0–5; ** $p < .001$.

The effect of SSEC on parental empowerment

Parents showed a significant increase in the subscale of ‘self-confidence’ over time, $F(1, 95) = 19.6$, $p < .001$, partial $\eta^2 = .17$, $d = 0.33$, corresponding to a small-to-medium effect. No significant changes were found for the subscales ‘confidence in network support’ ($p = .19$) and ‘ability to obtain informational support’ ($p = .27$, see Table 1 for details).

The effect of training

We examined the effect of the training of practitioners and found no significant effects for ‘self-confidence’ ($p = .89$) and ‘confidence in network support’ ($p = .26$). The subscale ‘ability to obtain informational support’ showed a difference. However, this outcome is the result of a difference at the pretest in favour of the experimental group ($d = 0.28$) and a difference in the post-test in favour of the control group ($d = 0.12$), resulting in a small reverse interaction effect, $F(1, 94) = 4.89$, $p = .03$, partial $\eta^2 = .05$.

The use of empowerment-oriented techniques

The realisation factor of the GEP model, indicated by the GEP score, was found to be modest (4.36 on a scale of 0–10). The experimental group used, on average, slightly more GEP techniques (realisation factor: 4.66) than the control group (realisation factor: 4.03), $F(1, 128) = 3.09$, $p = .08$, partial $\eta^2 = .02$. The fourth component of the GEP model, guiding the parent towards resources in the context, was significantly more applied by the experimental group ($p = .01$). The trained practitioners more often referred to resources in the informal network, like relatives and neighbours ($p = .03$). They also showed a more ecological approach to parenting questions, referring to resources in at least two different ecosystems (micro-, meso-, exo- or macro-systems; $p = .02$). Finally, we found no relation between the use of GEP techniques in advice responses and the changes in parental self-report on empowerment, $F(3, 92) = .96$, $p = .42$, partial $\eta^2 = .03$.

Discussion

SSEC is a relatively new service which provides new opportunities for parents to obtain support. This study shows that, after receiving the advice, parents showed an increase in self-confidence, which is an important aspect of empowerment, and were satisfied with this service offered to them. This result indicates that even a short web-based service to parents may be helpful in gaining confidence in how to deal with parenting questions. We found no changes in the ability of parents to obtain informational support and their confidence to rely on network support. The specific factors that contribute to the improvement in self-confidence through SSEC in the context of general parenting questions need further investigation.

Trained practitioners took a more ecological approach to the parenting questions than non-trained practitioners. However, the two groups of practitioners were not distinctive enough to reach firm conclusions about the effectiveness of their typical approach.

This study suggests that the results of a training were too modest to show a general transfer effect on parental empowerment. Practitioners of many disciplines are involved in undertaking consultative activities for parents, and familiarity with the specific characteristics of online guidance and counselling seems to be low (Callahan & Inckle, 2012; Nieuwboer et al., 2013). Furthermore, even when adequate training is provided, low adherence to a training or manual to ensure treatment integrity is a well-known problem in counselling, in general, and can also be an important factor hindering full implementation (see, for instance, Bagraith, Chardon, & King, 2010; Finn & Barak, 2010). Increasingly, professional associations adjust their codes of ethics, in order to incorporate the obligation to actively understand and train for distance counselling (ACA, 2014; APA, 2013; BACP, 2013; NASW, 2008; NBCC, 2012; Reamer, 2013), raising awareness and accountability for this type of practice.

A relationship between the application of empowerment-oriented techniques and its effects on empowerment could not be confirmed in this study. Content analysis of the emails showed that the techniques were not applied to their full potential, and the realisation factor of the GEP model, comprising 10 empowerment-oriented techniques, was modest in both groups. Similarly, Chardon et al. (2011) found a low level of realisation of counselling components in single session online consultation with adolescents, specifically in the guidance towards setting goals and planning actions. This raises the question whether it is feasible to apply a rich, but rather complex model for consultative practice in a brief textual advice. In fact, there is no consensus between counsellors whether the limited time and means of single session online consultation allow the provision of adequate counselling (Bambling et al., 2008). Further experimental study, for instance in the work of experienced online counsellors in contrast to general parenting practitioners, should clarify whether relatively complex models like the GEP model can be realised with more success.

This study investigated the effect of SSEC on the level of empowerment in parents with everyday parenting questions. Research literature on single-session therapy (Cameron, 2007; Campbell, 2012) suggests that a meaningful first meeting is sufficient for clients with an identifiable and solvable problem, the active will to change, the ability to identify previous success and access to social support resources, but this claim is based on experiential evidence only. According to Talmon (2012), the open attitude in both practitioners and clients to consider that one session may be enough to solve problems optimises the clients' readiness to change and brings focus to the therapeutic interaction. In the somewhat distinctive setting of consultation (as opposed to therapy or counselling),

we have conducted a controlled trial and found an interesting improvement in self-confidence in parents, after only a brief kind of intervention in the setting of daily parenting. Parents may be more confident in their parenting role if practitioners are focused to provide tailored information and tools to explore goals, actions, impact and context. Thus, the restriction of a single response may be not its weakness, but, applied skilfully, its strength. As such, the potential of this particular consultative service for parents is promising.

Limitations

The procedure we followed may have led to self-selection and a stronger representation of participants who preferred online communication over face-to-face contact or no contact at all, which may have affected the empowerment measure in an unpredictable way. Also, because of their expectations of the usefulness of email consultation, the participants do not represent all parenting practitioners and all parents, who may be more reluctant to use this medium. Therefore, findings are to be interpreted with this limitation in mind.

Notes on contributors

Christa C. Nieuwboer (1964) is a lecturer and researcher at Fontys School of Pedagogical Studies. She has published (inter)nationally on the issue of online parenting support, which is also the theme of her dissertation (2014), and an ongoing research and education theme in her department.

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