

# Evaluation of the Partnership **with** Parents™ Programme





# Evaluation of the Partnership with Parents™ Programme

**November, 2019**

*The*  
**A T L A N T I C**  
*Philanthropies*

  
**Barnardos**

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### **How to cite this report:**

Connolly, N., Adams, K., & Fleming, P. (2019). Evaluation of the Partnership with Parents™ Programme. Dublin: Barnardos.

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Published by: Barnardos, Christchurch Square, Dublin 8.

ISBN: 978-1-906004-55-2

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### **Acknowledgments**

The authors would like to thank all parents, children, staff and stakeholders for their invaluable contribution. The authors would also like to thank Dr. Crispin Day, Head of the Centre for Parent and Child Support, NHS Foundation Trust, for his support in developing the Partnership with Parents™ programme and for acting as an external advisor on this study. The authors would like to thank Dr. Paula Mayock, Assistant Professor at the School of Social Work and Social Policy, TCD, for acting as an external advisor on this study. Finally, this evaluation would not have been possible without funding from Atlantic Philanthropies, for which Barnardos is extremely grateful.

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# Executive Summary

## BACKGROUND AND POLICY CONTEXT

Ireland's population has undergone significant change in recent years, with the number of families increasing by 3.3% to 1,218,370, over the five years to April 2016. Of those families, 218,817 were headed by one parent, mainly mothers (86%) (Central Statistics Office, 2016). Deprivation rates remain high, with enforced deprivation experienced by 19% of the entire population in 2017, with the rate rising to 23% for those aged 0-17 years (Central Statistics Office, 2018). Notably, those living in households with one adult and one or more children aged under 18 had the highest deprivation rate in 2017, at 45% (Central Statistics Office, 2018). While families across every strata of society experience need, parents living in disadvantaged communities can face multiple and additional challenges concurrently, including the need for food and stable housing (Odgers, et al., 2012).

Following the establishment of the Department of Children and Youth Affairs (DCYA) in 2011, a range of policy publications have repeatedly outlined the Government's commitment to children and young people up to the age of 24, a vision where all children's rights are respected, protected and fulfilled. The need to support parents, along with an emphasis on earlier intervention and prevention, are among the six transformational goals identified in the national policy framework: Better Outcomes, Brighter Futures (Dept. of Children & Youth Affairs, 2014). The framework recommends this is achieved, in part, 'through universal access to good-quality parenting advice and programmes, and access to affordable quality childcare, as well as targeted, evidence-based supports to those parents with greatest needs' (Dept. of Children & Youth Affairs, 2014, p. vi). The more recent departmental strategy, *First 5, a Whole-of-Government Strategy for Babies, Young Children and their Families 2019-2028* (Government of Ireland, 2018) commits to supporting parents as a central goal. Coupled with the recent creation of a discrete parenting unit in the DCYA, a key action planned includes developing a tiered model of parenting services (Government of Ireland, 2018).

In line with policy recommendations, a growing body of literature emphasises the importance of investing in supports for families in disadvantaged communities through the provision of parenting and family support services, emphasising the transformative potential of prevention and early intervention in improving outcomes for children and families. The idea that parenting skills can be learned has become commonplace, and there has been a surge in the provision and evaluation of parenting support programmes (Centre for Effective Services, 2012). To this end, there are numerous parenting programmes commonly used within professional and academic settings across Ireland, including: Incredible Years, Triple P, Parents Plus!, Parents under Pressure and Circle of Security; all of which have been evaluated and proven to be effective (Leijten, Raaijmakers, Orobio de Castro, van den Ban, & Matthys, 2017; Sanders, Kirby, Tellegen, & Day, 2014; Carr, Hartnett, Brosnan, & Sharry, 2016; Dawe & Harnett, 2007; Huber, McMahon, & Sweller, 2015).

The types of supports provided to parents vary from ‘universal support in informal settings for self-referring parents’ through to ‘specialist services to support families in particular situations, dealing with specific problems that may present at different times in the life-course of the child’ (Devaney & Dolan, 2015, p. 5). The majority of the aforementioned parenting programmes are delivered within a group setting, however group-based parenting programmes are not always suitable or effective for families with complex and multi-faceted needs; these families benefit more from tailored and flexible one-to-one programmes (Moran, Ghate, & Van Der Merwe, 2004; Fives, Canavan, & Dolan, 2014). A consultation process with those delivering, receiving and referring to Barnardos services (2005–2006) indicated that families referred to Barnardos for parenting support tend to have higher levels of need than those typically expected to attend a group-based parenting support intervention. As a result of this consultation process, an intensive programme design process commenced, resulting in Barnardos’ Partnership with Parents™ programme.

## PARTNERSHIP WITH PARENTS™

Partnership with Parents™ (PwP) is an intensive, home-based, one-to-one parenting support programme for parents with multiple and complex needs, developed by Barnardos Ireland. The design of PwP commenced in 2009 with a systematic process of translating evidence about what works in parenting support into the design of a new home-based parenting support programme (Prendiville, 2009a; 2009b; 2009c; 2009d). A service design team was tasked with developing a programme that offered parents<sup>2</sup> and their children the best chance to succeed and make a real difference across a range of common needs. To this end, PwP aims to:

- Improve parent-child communication
- Increase parental understanding of, and ability to manage, their child’s behaviour
- Improve social development of the child
- Introduce consistent routines
- Increase parental involvement in the child’s education
- Ensure the child’s physical needs are met
- Increase parental ability to manage crises effectively

With PwP aiming to help parents make changes to their parenting, the programme draws significantly on Social Learning Theory, a fundamental theory of behaviour change (Bandura, 1986). To illustrate the resources, activities and expected outcomes associated with the programme, a logic model (Hayes, Parchman, & Howard, 2011) was developed consisting of three interconnected areas: situation, outcomes and services (Figure 1). The first circle of the logic model identifies the situation in which families using the PwP programme may be living. They may have needs in relation to the core tasks of parenting: care, control and development. The second circle relates to the outcomes that the programme aims to achieve. The third circle identifies the different service programme components of PwP – six plug-ins and two optional programme components (crisis management and practical support). The three circles of the logic model are underpinned by a band, which signifies the importance of the relationship between the worker and parent in PwP.

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2 PwP is designed to work with one or both parents, or whoever is fulfilling the parenting role.

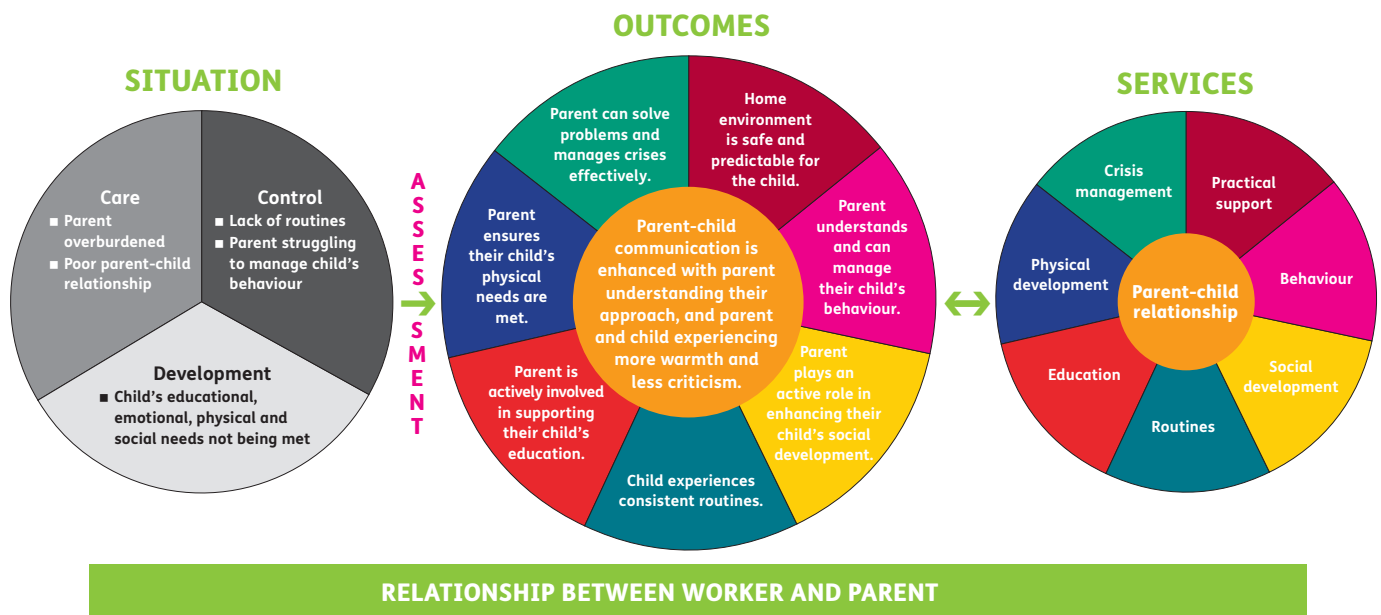


Figure 1 PwP logic model (Barnardos, 2013)

PwP consists of suite of 'plug-ins' – programme components that are used flexibly to individualise and tailor the programme to address the needs of different families. In order to identify which components of the programme will be offered, a formal needs assessment is undertaken with the parents to: 1) increase the practitioner's understanding of the needs and context of the children and family; and 2) provide parents with an opportunity to engage in a guided conversation regarding their needs and the needs of their children. Two assessment tools are used to facilitate this process: the Parent and Child Relationship Inventory (PCRI)<sup>3</sup> (Gerard, 1994) and the PwP assessment wheel<sup>4</sup> (Barnardos, 2013). Together, a parent and their project worker choose the appropriate plug-in following this initial needs assessment.

The programme contains a central plug-in that focuses on the parent-child relationship, which is offered as the starting point to the programme for the majority of parents. The other plug-ins focus on behaviour, social development, routines, education and physical development. As needed, parents are also offered crisis management support and practical support. Parents can receive one or more plug-in depending on their individual needs.

In line with the participatory and reflective approach of the programme, each plug-in is delivered in the form of a parent's activity booklet containing exercises that the practitioner and parent

3 The Parent-Child Relationship Inventory (PCRI) is a standardised and valid measure of the quality of relationships between parents and their children across seven domains Support, Satisfaction, Involvement, Communication, Limits, Autonomy and Role.

4 The assessment wheel is a user-friendly self-assessment tool for parents. The assessment wheel consists of a scale rating across the plug-in domains of Parent-child Relationship, Behaviour, Routines, Social Development, Education and Physical Development.

complete together over a number of sessions. An accompanying staff guidance booklet was developed to help staff understand the purpose, focus of and evidence behind each session. To further promote reflective practice, parents are provided with a notebook to use as a parenting log to increase parents' awareness of what is happening in their world, their role and the role of others.

The programme was designed to be delivered to parents of children between the ages of 3 and 18 years<sup>5</sup>. Generally, the programme is deemed unsuitable for parents who have limited capacity to 1) retain information, 2) be reflective or 3) implement changes due to complex contextual factors. A phased approach was utilised in the development and piloting of the PwP programme. After the initial development of the programme content and guidance for staff, piloting of the various plug-ins took place over two sequential phases (2011–2012), in which learning was iteratively incorporated in subsequent development and testing (Barnardos, 2014). Following the design and piloting of the programme, PwP was implemented across Barnardos services, leading to this formal evaluation of the programme.

## THE EVALUATION

The evaluation sought to answer the following questions:

1. Does the PwP programme result in positive outcomes for children and families?
2. What influences the impact of the programme within the Irish context?

### Design and Methods

A mixed method cohort evaluation of PwP took place over a two-year period, from September 2016 to September 2018, with data spanning a six-year period (2012–2018). Data were sourced from two cohorts, 1) the PwP cohort and 2) the study cohort. The PwP cohort relates to all service users who received the PwP programme from 2012 to 2017, while the study cohort relates to a sub-group of those who received PwP and completed pre-post outcome measures. A small sample was also selected from this sub-group for in-depth qualitative interviews. As such, the mixed methods approach combined both primary and secondary data, utilising quantitative and qualitative methods within a planned design (Robson, 2002). There were three discrete, but interconnected, components to the evaluation design:

#### Quantitative (data from 2012–2017)

- a secondary data analysis of anonymised demographic and participation information collected from the Barnardos children's services database (n=1,471);
- pre-post test data analysis of Parent-Child Relationship Inventories (PCRIs) administered to parents from 2012 to 2017 (n=200); and
- pre-post test data analysis of assessment wheel scores, collected between 2012 and 2017 (n=114).

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<sup>5</sup> 'Birth to 2 years' version of the PwP programme has also been developed to meet the needs of parents with babies and infants but is outside of the scope of this evaluation.

### Mixed methods survey (data from November 2017–January 2018)

- an online survey of staff (n=64) that consisted of a series of closed or multiple choice questions concerning staff experience and programme delivery, in addition to open-ended qualitative questions relating to programme delivery and working with families.

### Qualitative (data from 2018)

- a series of interviews and focus groups in 2018 – with parents, children, staff and other stakeholders (n=79) – in order to gain their perspectives on parental needs, outcomes of the PwP programme, challenges of the programme, and what aspects influence programme impact.

### Evaluation Ethics

The evaluation of PwP was undertaken internally by a team of experienced and vetted researchers who were not involved in the design or piloting of the programme. The study was guided by 1) Barnardos' Principles for Conducting Research (Barnardos, 2018); 2) the British Sociological Association's (BSA) Statement of Ethical Practice (British Sociological Association, 2017); and 3) a steering group, including the evaluation team, director of children's services and two external advisors.

## FINDINGS

### Secondary Data

#### Referrals

The majority of referrals came from Tusla and social work (53%, n=574), while self-referral was the second most common type at 23% (n=250). Other referrals came from community-based services, mental health services, health services, other Barnardos services and disability services.

In total, 44 reasons for referral were captured in the Barnardos children's services database, often with multiple reasons for referral provided for each service delivery. On average there were 2.75 reasons recorded for each referral, ranging from one reason to 15 reasons. The main reasons for referral included:

- Parenting skills (17%, n=437)
- Behaviour needs (13%, n=329)
- Children with emotional difficulties (8%, n=207)
- Parental separation (8%, n=203)
- Child welfare concerns (7%, n=183)

### Programme delivery

The majority of total PwP service users were lone mothers (51%, n=679), followed by married couples (19%, n=246), cohabiting couples (19%, n=245), and lone fathers (5%, n=70). Female participants accounted for 76% of PwP participants and 77% of the study cohort. On average, the PwP programme lasted nine months for the study cohort, in comparison with 7.5 months for the overall PwP cohort. The average number of sessions attended was 14.8 for the study cohort and 11.6 for the PwP cohort.

### Plug-in usage

Over two-thirds of participants used one plug-in only, with very few using three or more. The usage of the plug-ins was similar for both the overall programme recipients and study participants. Parent-child relationship plug-in was by far the most popular (52% for study cohort and 54% for PwP cohort), followed by behaviour (34% and 33% respectively). The breakdown of remaining plug-ins included: routines (9% and 10%), physical development (3% and 2%), social development (2% and 1%) and education (1% each).

### Outcome measures

Paired samples ranged from 197 pairs to 200 pairs<sup>6</sup> for each domain of the PCRI, representing 33% pre-post completion rate. Validity indicators, captured pre and post intervention, indicated a robust dataset. There were statistically significant improvements across all six domains, ranging from a small to medium effect size (Table 1). Using Cohen's d measure of effect size Support scores showed a medium improvement post intervention. Limit Setting and Communication also experienced a medium improvement, while Involvement scores demonstrated a small to medium improvement. Satisfaction and Autonomy domains recorded small changes, although both were still statistically significant.

Table 1: PCRI t-test results

	Pre mean score	Post mean score	95% confidence interval	Sig (two-tailed)	Cohen's d effect size
Support	43.82	50.43	(-8.05, -5.19)	.00	0.6
Satisfaction	47.14	48.73	(-2.87, -0.3)	.016	0.2
Involvement	44.93	49.27	(-6.02, -2.67)	.00	0.4
Communication	43.14	48.61	(-6.93, -4.01)	.00	0.5
Limit Setting	42.62	48.33	(-6.97, -4.45)	.00	0.6
Autonomy	42.86	45.13	(-3.26, -1.28)	.00	0.3

<sup>6</sup> In a number of cases, there is missing data due to incomplete PCRIs. During the scoring of the completed PCRIs by the research team, a domain with missing data were excluded but the other completed domains were included as each parenting domain is independent within the PCRI. Due to the domains not being inter-related during scoring, the range of total paired samples for the respective domains varied between 197 pairs and 200 pairs.

In terms of the PwP assessment wheel, paired samples ranged from 104 pairs to 114 pairs<sup>7</sup> for each domain, representing 19% pre-post completion rate. All domains (with the exception of Social Development) saw a statistically significant improvement (Table 2). Behaviour scores improved to a large degree, with Parent-child Relationship and Routines recording a medium improvement. Physical Development and Education both recorded statistically significant improvements, although these were small in size.

Table 2: PwP assessment wheel t-test results

	Pre mean score	Post mean score	95% confidence interval	Sig (two-tailed)	Cohen's d effect size
Parent-child Relationship	6.54	7.96	(-1.93, -0.91)	.00	0.5
Behaviour	5.31	7.19	(-2.34, -1.41)	.00	0.8
Routines	6.73	8.11	(-1.83, -0.93 )	.00	0.6
Social Development	7.19	7.45	(-0.82, 0.3)	.36	NA
Physical Development	7.82	8.47	(-1.07, -0.23)	.003	0.4
Education	7.46	8.43	(-1.46, -0.46)	.00	0.3

### Interview Series and Survey

A total of 79 people participated in the series of in-depth interviews / focus groups and a further 64 staff completed the online survey. Interviews took place across six sites, three of which were Dublin based, however the majority were based in Limerick (39%). Interviews and focus groups were conducted with parents and children (59%), as well as staff members (27%) and stakeholders (14%).

### Views of parent

#### Presenting needs

The presenting needs of the parents interviewed varied widely ranging from child-specific issues, such as behaviour and poor school attendance, to more parent-specific issues, such as poor routines, lack of confidence and a sense of being overwhelmed.

*To be honest with you, before when I was so stressed with him, when he was having his tempers and stuff in the mornings I just wouldn't bring him to school.*

*Parent interview 002 (Mother)*

<sup>7</sup> In a number of cases, there was missing data due to incomplete assessment wheels. As each domain was independently scored by the participant, a missing score in a single domain did not affect the score in the other domains so the range of total paired samples varied between 104 pairs and 114 pairs.

### *Relationship with project worker*

Parents reported that, in the main, they had a very positive relationship with their project worker based on trust and openness. Working collaboratively and flexibly emerged as key aspects of the relationship, as did the continuity and consistency in the personnel involved.

*[Project worker] would make suggestions, they wouldn't be orders, she would make suggestions, we would try them out, if they worked, they worked, fine, and if they didn't, they didn't.*

### *Parent interview 007 (Father)*

### *Content of PwP programme*

Parents frequently recalled using the assessment wheel as a method of choosing the appropriate plug-in. Parents often felt that the chosen plug-in was the right approach for them at that particular time. Some parents also found the PCRI questionnaire to be helpful as a tool to evaluate their parental relationship prior to starting a plug-in:

*It is a nice tool. I mean rating yourself to say do you not have a relationship with your child, do you think your child can trust you? Do you think you can trust that child? We were being truthful.*

### *Parent interview 008 (Mother)*

Parents provided feedback specific to the individual plug-ins. Parents reported that they had successfully integrated strategies from the routines plug-in to their child's daily life. One parent, whose child had a diagnosis of Autism Spectrum Disorder (ASD), noted how successful the behaviour plug-in had been with helping them to manage their child's behaviour and establish boundaries and expectations. Parents noted that the scenario-based exercises within the behaviour plug-in was the component that allowed the greatest point of learning.

In terms of support materials, some parents found the parenting log helpful, as they were able to write down and organise their thoughts and reflections. The parent's activity booklets associated with the plug-ins were deemed easy to follow and understand, providing parents with a reference point or grounding in the material.

### *Changes for families*

The majority of changes reported related to the parent-child relationship. Changes for children were reflected in reduced levels of conflict, improved social interaction, improved routines and school attendance, increased ability to cope with change (particularly for separated parents) and an overall sense of increased maturity.



*It [PwP] changed the way we approached, completely changed the way we approached our parenting.*

*Parent interview 010 (Father)*

For parents, there was a sense of mutual trust and respect in the parent-child relationship. With these improvements came opportunities to spend more quality time participating in fun activities, which had the knock-on effect of parents perceiving themselves as empowered, more confident and less anxious. They also reported a sense of having more control as a parent, notably by relying on strategies that replaced punitive actions. One parent did caution against the idea that parenting programmes can solve all of a family's needs, however certain aspects of the programme had increased the parent's capacity to deal with the complex challenges.

Parents identified a number of programme strengths that contributed to the improvements experienced, notably the home-based approach, which facilitated the integration of the wider family into the sessions when appropriate. This flexibility and ability to adapt the programme was a sentiment repeated by many parents. Another strength was the non-judgemental relationship with the project worker, who reportedly listened and understood the family's needs, acting as an advocate for the family during difficult times.

In terms of challenges, parents who struggled with housing insecurity voiced concerns with maintaining the positive changes resulting from PwP, for example, sticking to the agreed plan regarding routines. Time constraints also emerged as an issue, with some parents struggling to balance the programme schedule with work or the competing demands of multiple children.

### **Views of children**

#### *Changes for family*

There was a general sense from the older children that PwP had benefitted their family and, by and large, they did not mind working through the programme or having the project worker in the home. On this latter point, some younger children noted apprehension about a person they were not familiar with coming to their home, however this subsided once the relationship was established. Older children reported more interaction among family members, which led to improved relationships with fewer arguments. One teenager felt they were better equipped to express their feelings because their parents demonstrated a new ability to respond in a more predictable manner. Related to this were the children's improved understanding regarding expectations of parents. Older children also noted an improved engagement with school due to a more stable home environment.

### Views of staff

Views of staff were captured through the interview series (n=21) and the online survey (n=64). Most respondents had been working in Barnardos for eight years or more, with the majority (39%) delivering PwP for three to four years and a further 31% for five or more years.

### Training

Staff indicated the benefit of training in order to successfully implement the programme. This prerequisite enhanced a project worker's ability to implement the programme as intended, and staff expressed a desire for continuous refresher training, although it was also noted that there was no substitute for experience in the field.

### Engagement

When discussing engagement, most staff indicated that parents needed to be willing and able to reflect on their situation and life experiences, which seemed to be dependent on stability. With this in mind, multiple complex needs were not necessarily a barrier to engagement. Ultimately, parents who wanted to make positive changes were more likely to engage, regardless of other contextual factors. Aspects that did have a negative impact on engagement included a sense of being overwhelmed, experiencing a period of crisis such as homelessness, mental health issues or limited learning capacity. Where parents were separated or when basic parenting skills were absent, more input was reportedly required from staff.

### Strengths of PwP

In line with parents' feedback, staff emphasised the benefits of the home-based approach, which facilitated a tailored and flexible service delivery within the family's own living environment. It also allowed for observation of parent-child interaction. Openness, transparency and a non-judgemental attitude was identified by project workers as the cornerstone of a positive relationship with parents undertaking the programme. The majority of project workers deemed PwP suitable for families with a higher level of need – level 3 or 4 on the Hardiker level of need (Hardiker, Exton, & Barker, 1991) – as it is delivered on a one-to-one basis. Project workers valued their ability to deliver the programme at a pace suitable to the parent or to pause the programme for a number of weeks to address other emerging needs for the parents and children.

### Challenges of PwP

Project workers identified a number of challenges to successful implementation of the programme, ranging from initial apprehension and challenging relationships with parents, through to literacy and language issues. Many of the challenges reported by staff confirmed the views raised by parents. When parents had difficulties with literacy, project workers allowed extra time for the PwP sessions, with project workers estimating the programme taking two-to-three times longer. Similarly, the PCRI tool was reportedly more challenging to administer when literacy and comprehension issues were present. When working with

a separated father, a project worker described how challenging it was to implement the programme as he did not have access to the children.

### Views of stakeholders

Eleven stakeholders, primarily duty social workers and social work team leaders from Tusla, participated in the interview series, reiterating several key findings from the parent, child and staff interviews. Stakeholders emphasised the value of the home-based element of the programme; the importance of the collaborative relationship between the Barnardos worker and the parent; and the impact on parental capacity and self-efficacy more broadly. Stakeholders also placed great value on the ability of the programme to be flexible and tailored to a parent's individual needs, notably highlighting the added value of the practical support and crisis management modules.

## DISCUSSION

### Reflections on Evaluation Design

The mixed method, cohort design of this evaluation was appropriate given the aims of the study and the complex nature of the intervention. Ultimately, the evaluation has shown major successes in the development and implementation of PwP within real world settings, and across a diverse group of practitioners and service users with complex needs. As with many evaluations of complex social interventions, there are inherent limitations due to the uncontrolled, non-randomised nature of the methodology adopted. Therefore, the findings may not be generalisable and should be interpreted with caution.

Despite these limitations, the evaluation shows that PwP is a very promising intervention with evidence of positive impact on key outcomes for the target population, with important lessons for implementation and across the policy landscape.

### Strengths of PwP

- Parents participating in PwP had positive outcomes, as measured through the PCRI and PwP assessment wheel. Statistically significant increases were recorded for scores across the following domains of the PCRI: Support, Satisfaction, Involvement, Communication and Limit Setting. Statistically significant improvements over time were recorded for all but one of the self-identified needs within the assessment wheel, including Parent-child Relationship, Behaviour, Routines, Physical Development and Education. The interview series and online survey corroborated these statistical findings, suggesting: positive outcomes; improved parent-child communication; establishment of routines; enjoyment of being a parent; increased self-efficacy and confidence in their role; reduced anxiety; and feeling supported in their role as a parent.
- The home-based approach to service delivery was key to the success of PwP, potentially allowing the project workers to observe parent-child interactions in the environment in

which they were parenting, while also providing a familiar environment for parents where learning carries the potential to be extended to other children.

- The relationship between the Barnardos project workers and parents was central to the success of the programme, notably the collaborative and participatory way of working, and the establishment of a trusting relationship over time.
- The focus on the parent-child relationship and the reflective way of working was perceived positively by staff and parents, contributing to improved confidence in parental capacity and self-efficacy, along with a sense of being better able to cope.
- Where a parent had received treatment for substance misuse or was in active rehabilitation, the programme generally worked well. These parents had experience of working in reflective ways and were open to engagement with the Barnardos project workers.
- The tailored, flexible manualised approach was perceived as working well, and was particularly impactful when working with parents with more complex reasons for referral.
- The inclusion of children in elements of the programme (where possible) was perceived as very important to parents, children and staff. Children in particular were able to reflect on the positive impact of the programme on their family function and overall social and emotional well-being.
- The variety of plug-ins, along with the crisis management and practical support approaches, provided staff with a range of options to meet the needs of parents. While some plug-ins were less frequently used, staff reported a preference to keep all existing materials.
- The level of experience, training and skill of staff reportedly led to a high level of professional autonomy and judgement in implementation, and in tailoring the programme to families at a local level.
- The programme was highly regarded among external stakeholders, who emphasised the value of the home-based element, worker-parent relationship and the capacity of the programme to complement other work, including where parents were open to social work.

### Challenges of PwP

While the majority of findings were markedly positive, a number of challenges and opportunities for learning emerged from the programme.

- Parents may present with multiple and complex needs. Where a family is in chaos or crisis, PwP may be less impactful. The tailored and flexible nature of the programme allows for breaks in such instances, and the additional crisis management approaches can support practitioners to work with parents through crises. Nevertheless, PwP will not work for all parents at all times.
- Some staff expressed dissatisfaction with the PCRI, describing the tool as inappropriate and outdated. However, this view was different to those expressed by parents.

- Maintaining engagement and commitment was a challenge faced by some staff, although this was more likely where the family presented with more complex issues.
- Fathers were less likely to be the main participant in PwP, although the representation of fathers (24%) was above average when compared to the international literature; for example, an average of 17% was found in a systematic review conducted by Davison et al. (2016). Where parents were separated, it was more challenging to engage fathers in programme delivery; however, this is not unusual in a family support context.

### Recommendations for Policy and Practice

Overall, the findings of this evaluation offer a valuable contribution to policy and practice development in the area of parenting supports, particularly on the benefits for children of targeted parenting interventions.

- PwP is an example of a successful targeted programme for parents with complex needs who benefit from receiving input and support on a one-to-one basis in the home. PwP has been shown to work well with parents who have been referred from statutory bodies with multiple referring needs, where, in some cases, group-based programmes were previously deemed unsuitable. In essence, these parents with high levels of support needs appear to do well within the PwP programme.
- PwP should be incorporated as part of the audit of parenting programmes being undertaken by the Department of Children and Youth Affairs under the First 5 strategy. Once complete, this audit will help shape the tiered model of publically funded parenting services to be delivered on the basis of universal provision, with extra support available for parents in line with their level of need on a progressive basis.
- Drawing on the strengths identified in the PwP programme (that is, it worked well with parents with substance misuse issues, or those open to social work involvement) there is plenty of scope to promote the impact of the programme among key agencies and professionals such as Drug Treatment Centres, Drug and Alcohol Taskforce agencies.
- PwP proved beneficial to parents experiencing mental health difficulties, including those experiencing isolation due to parenting alone and issues caused by environmental factors. Adding home-based parenting supports to the suite of non-medicinal, community-based services available to parents with mild-to-moderate mental health difficulties available by referral through primary care should be explored.
- A high proportion of parents cited separation as the primary reason for undertaking PwP and a significant proportion of parents (64%) were lone parents. The availability of home-based parenting supports, such as PwP, to lone parents and parents going through separation should be increased. Given fathers make up just 5% of the lone parent cohort and around a quarter of (PwP) parents overall, there should be specific emphasis on promoting to fathers the benefits of such programmes for both parents and children.

### **Concluding Remarks**

This mixed method evaluation of the PwP programme, spanning an implementation period of five years, supports the need for a tailored, individualised, home-based parenting programme in Ireland – one that is delivered holistically, on a case-by-case basis, empowering parents in partnership with a trusted family worker. The evidence presented in this report demonstrates how the unique design and implementation of PwP works well within the complex, real world, everyday lives of parents. Furthermore, the programme works well across a wide range of presenting needs, and the design allows flexibility to navigate changing or evolving needs over time. The evidence provided in this report demonstrates, not only the need for such a programme, but the successes of PwP for parents, children and professionals providing the programme.

# Chapter 1

## Introduction



## 1.1 BACKGROUND AND POLICY CONTEXT

In Ireland, child and family welfare is the responsibility of various ministerial bodies. From the late 1990s onwards, child and family welfare has been considered a policy imperative and is covered by a broad range of strategies, action plans and policies. The *Strengthening Families for Life Report* (Commission on the Family, 1998) recommends a focus on preventative and support measures for families, including provisions for parents; the *National Children's Strategy: Our Children – Their Lives* (Dept. of Health & Children, 2000) has a focus on the 'whole child' perspective, underlining the need for parenting supports within family support; and, finally, the *Family Support in Ireland: Definition and Strategic Intent* paper (Pinkerton, Dolan, & Canavan, 2004) focuses on the strategic implementation of family support as a policy choice. Pinkerton et al. (2004) write that family support promotes 'the welfare of children but does so in a manner that enhances parental capacity and responsibility within the context of the family' (p. 6), also emphasising the need for 'partnership with parents' in both decision-making and service delivery (p. 13).

In 2005, as a commitment in the *National Children's Strategy*, the Office of the Minister for Children (OMC) was established within the then Department of Health and Children, further strengthening the position of children's services and family support in the strategic direction of the Government. Another significant development was the publication of the *Agenda for Children's Services: A Policy Handbook* (Dept. of Health & Children, 2007). The national policy document locates children in their ecological context of families and communities, aiming to build on existing policies, while placing them in a framework to support policy-makers, service managers and front-line staff in meeting the needs of children and their families. The recommended approach again emphasises the prevention model, rather than a treatment model.

A key development for children and families in Ireland was the appointment of the Minister for Children and Youth Affairs in 2011, along with the establishment of the Department of Children and Youth Affairs (DCYA), consolidating a range of functions that had been discharged by other Government Ministers. The work of the department focuses on policy and provision for children, young people and families, and the department is tasked with implementing a reform agenda for child and family services. The remit of DCYA includes Tusla, the Child and Family Agency; the Adoption Authority of Ireland; and the Office of the Ombudsman for Children. The DCYA commits to a range of activities, including:

*the provision of universal and targeted services for children and families; high-quality arrangements enabling focused interventions to deal with child welfare and protection, family support, adoption, school attendance and the reduction of youth crime; and the harmonisation of policy and provision across government and with related providers.*

(Connolly, Devaney, & Crosse, 2017, p. 10)



*Better Outcomes, Brighter Futures: The National Policy Framework for Children and Young People* was published in 2014 (Dept. of Children & Youth Affairs, 2014). This key policy document sets out the Government's commitment to children and young people up to the age of 24, a vision where all children's rights are respected, protected and fulfilled. Among the six transformational goals identified in the framework is the need to support parents, along with an emphasis on 'earlier intervention and prevention' (Dept. of Children & Youth Affairs, 2014, p. 3). Among the priorities identified are better supports for parents and families, seeking to ensure that parents are 'equipped and supported to raise their families, to play their roles as children's primary carers, to promote the best possible outcomes for their children and to meet all challenges that may arise' (Dept. of Children & Youth Affairs, 2014, p. x). These priorities are to be delivered through commitments made to increase the provision of supports to all parents 'through universal access to good-quality parenting advice and programmes, and access to affordable quality childcare, as well as targeted, evidence-based supports to those parents with greatest needs' (Dept. of Children & Youth Affairs, 2014, p. vi).

Subsequent to *The National Policy Framework*, the DCYA issued a *High-Level Policy Statement on Parenting Support* (Dept. of Children & Youth Affairs, 2015) further advancing the agenda in the Irish context. The statement was formulated to realise the vision set out in the framework and it envisages the development of a system of supporting parents and families, seeking to build on family strengths, wherever possible. It also values informal support networks that can readily deliver supports to children and their families based on interagency, cross-organisational and interdisciplinary working. The purpose of the statement is set out as promoting the availability of a coherent continuum of local supports to all parents and families that could be accessed easily and in a timely way (2015, p. 2). The statement also sets out a purpose for other agencies, departments and service-providers. Notably, it recommends that 'Parenting and Family Support' take greatest prominence in Tusla's discharge of its statutory child welfare and protection responsibilities (2015, p. 2). Among the policy messages identified is the need for parenting support and family support to align with the evolving range of family forms, along with an acknowledgement that some families need more help than others. Within the policy implementation messages, great importance is attached to working in partnership with community and voluntary providers within the overall framework.

In addition to supporting parents with different needs in different contexts, the State has a duty to protect the welfare of children. The *Children First Act 2015* places statutory obligations on those providing services to children. The implementation guidance acknowledges that many parents require support from time to time, with some families requiring more intensive assessment, support and direct intervention. The guidance explicitly states that parents and children need to be consulted and involved in matters concerning their families. The more recent departmental strategy, *First 5, a Whole-of-Government Strategy for Babies, Young*

*Children and their Families 2019-2028* (Government of Ireland, 2018) commits to supporting parents as a central goal. Coupled with the recent creation of a discrete parenting unit in the DCYA, a key action planned includes developing a tiered model of parenting services (Government of Ireland, 2018). Specific actions for the delivery of the latter are further detailed in the *First 5 Implementation Plan 2019-2021* (Government of Ireland, 2019).

## 1.2 PARENTING SUPPORT: WHAT WORKS?

### 1.2.1 Irish Families in 2019

Ireland's population has undergone significant change in recent years, as evidenced by data from the 2016 Census. The total number of families increased by 3.3 per cent, to 1,218,370, over the five years to April 2016. Of those families, 218,817 were headed by one parent, the vast majority of whom (86%) were mothers (Central Statistics Office, 2016). Deprivation rates remain high, with the Survey on Income and Living Conditions (Central Statistics Office, 2018) indicating that enforced deprivation was experienced by 19% of the entire population in 2017, with the rate rising to 23% for those aged 0-17 years. Notably, those living in households with one adult and one or more children aged under 18 had the highest deprivation rate in 2017, at 45% (Central Statistics Office, 2018). While families across every strata of society experience need, parents living in disadvantaged communities can face multiple and additional challenges concurrently, including the need for food and stable housing (Odgers, et al., 2012). In addition, official homelessness data indicates a deepening homeless crisis in Ireland, with over 10,000 people homeless in July 2019, almost 4,000 of these being children (Dept. of Housing, Planning & Local Government, 2019). In the past five years child homelessness has increased by 400% (Focus Ireland, 2019). At the time of writing this report, the number of families who had become homeless was over 1,700, with almost 60% of these families headed by a lone parent (Dept. of Housing, Planning & Local Government, 2019).

### 1.2.2 Investing in Families

A growing body of literature emphasises the importance of investing in supports for families in disadvantaged communities through the provision of parenting and family support services, emphasising the transformative potential of prevention and early intervention in improving outcomes for children and families. The idea that parenting skills can be learned has become commonplace, and there has been a surge in the provision and evaluation of parenting support programmes (Centre for Effective Services, 2012). While there are a variety of effective programmes and approaches, a recurring theme asserts that children's outcomes improve when families are provided with programmes that support parents in their parenting role (Field, 2010). Parenting support sits within family support with a more dedicated focus on aspects of parenting. Family support is more broadly defined by Pinkerton et al. (2004) as:

*both a style of work and a set of activities which reinforce positive informal social networks through integrated programmes. These programmes combine statutory, voluntary and community and private services and are generally provided to families in their own homes and communities. The primary focus is on early intervention aiming to promote and protect the health, well-being and rights of all children, young people and their families, paying particular attention to those who are vulnerable or at risk. (p.22)*

In the provision of parenting support services, the literature points to the progressive universalist approach, with programmes targeted to particular populations but also tailored to the needs of individual families at different points in time. This is in line with the ecological approach favoured in the family support context (Shulruf, O'Loughlin, & Tolley, 2009).

### 1.2.3 Supporting Parents

Supports for parents are diverse in design and delivery across the life course, including 'population approaches, home visit programmes, group-based programmes, one-to-one support and family-based interventions' (Connolly, Devaney, & Crosse, 2017, p. 6). The types of supports provided to parents vary from 'universal support in informal settings for self-referring parents' through to 'specialist services to support families in particular situations, dealing with specific problems that may present at different times in the life-course of the child' (Devaney & Dolan, 2015, p. 5). Moran, Ghate and Van Der Merwe (2004) describe parenting support as 'any intervention for parents or carers aimed at reducing risks and/or promoting protective factors for their children, in relation to their social, physical and emotional wellbeing' (p. 6). It is recognised that differentiated supports are necessary to take account of additional contexts such as cultural diversity, parenting alone or parents living in poverty (Devaney & Kearns, 2010; Miller, Cahn, Anderson-Nathe, Cause, & Bender, 2013; Rochford, Doherty, & Owens, 2014). The types of supports provided to parents include direct supports aimed exclusively at improving parental skills and capacities, and indirect supports aimed at individual parents or families (Connolly, Devaney, & Crosse, 2017). Types of supports in this context can range from the provision of advice and support, to individual home-based support, to group-based and parent education programmes and courses. Considered in the context of Hardiker's model (Hardiker, Exton, & Barker, 1991) this can range from universal supports provided to all parents to higher-end child protection work and supervised parenting.

Parenting support can be enhanced by employing and incorporating other elements of successful practice. For example, Moran et al. (2004) highlight the importance of individual work and relationship-based practice for families who are not in the position to undertake a group intervention or have more complex needs. This approach is advantageous as it allows the practitioner to provide tailored one-to-one interventions for families whose needs cannot be met by group-based programmes (Fives, Canavan, & Dolan, 2014). It also provides the opportunity to work with parents as active and collaborative partners in the process of

planning and delivering a service, acknowledged in the literature as an important way of working. It is acknowledged by Riordan (2001) that parents want to be part of the process of defining their agenda and fare better where they feel that they have some control over their participation and are working towards meeting a set of self-defined needs. The centrality of the relationship-based practice approach in this context is frequently highlighted in the literature (Dolan, Canavan, & Pinkerton, 2006).

In addition, home-based services are acknowledged as helpful for a variety of reasons (McKeown, 2000):

- they can reduce barriers to services that arise due to lack of transport, childcare or motivation;
- they can provide a source of support to the family and help in building its social network;
- they can facilitate greater insight into the needs of parents and children, particularly around the issues of parenting and child-rearing; and
- they can help in detecting early signs of parental distress or child neglect / abuse.

It has also been suggested that intensive practical help in the family's own home may be the most valuable form of assistance (Gilligan, 1991). In the home, the family support worker may help the family with a variety of practical tasks from making appointments to providing information, advice and support. In addition, the family support worker can undertake more intensive therapeutic work with the family (McKeown, 2000). Much like other interventions aimed at parents, the level of effectiveness of home-based parenting support is dependent on the characteristics of the families, with successful outcomes likely to take longer where families have multiple or long-standing problems (Tusla, 2013a).

Successful parenting support must be flexible, and carry the potential to be tailored to the different needs of parents in different contexts (McKeown, 2000). However, programmatic approaches can yield positive outcomes, especially where they are evidence-informed and underpinned by effective ways of working. Working in partnership with parents contributes to their empowerment and self-efficacy, while providing individual support in a home-based setting may also prove beneficial.

### 1.3 EVIDENCE-BASED PARENTING PROGRAMMES

In order to provide the aforementioned supports and investment required by parents and families, various parenting programmes have been developed internationally. While many of these programmes are transferrable between countries, some have been adapted to account for local contextual factors. As such, many evaluations have been conducted to determine what works well, for whom and under what circumstances. This section will briefly explore different approaches to delivering parenting programmes in addition to the evidence base for commonly used parenting programmes in Ireland.

#### 1.3.1 Approaches to Delivering Parenting Programmes

A systematic review of international evidence, examining ten trials and representing almost 1,100 study participants, found that group-based approaches that employ behavioural management and cognitive behavioural therapy (CBT) techniques to support parents in managing difficulties experienced by children aged 3-12 years were cost-effective and successful in improving child behavioural issues, parental mental health and parenting skills in the short-term (Furlong, et al., 2012). Other systematic reviews of group-based parenting programmes examining: 1) emotional and behavioural adjustment for children aged 0-3 (Barlow & Parsons, 2005); and 2) psychosocial outcomes for teenage parents and their children (Barlow et al., 2011) were inconclusive, although there were early indications of success for intervention groups. A common thread in these reviews, as articulated by Piquero, Farrington, Welsh, Tremblay and Jennings (2008), was that more stringent, experimental evaluations of early family/parent training need to be carried out and that the outcomes of interest are assessed over the long term.

While early evidence did not suggest differences in effectiveness between group-based and individual one-to-one parenting programmes (Webster-Stratton, 1984), more recent research has shown that parenting programmes need to be cognisant of the family and parental context, for example, ethnicity (McCurdy, Gannon, & Daro, 2003). As previously stated, parents experiencing complex problems, or where they are not ready or able to work in a group, benefit more from tailored and flexible one-to-one programmes (Moran et al., 2004; Fives et al., 2014). A review of evidence within the Irish context, in addition to recommending universal supports, supports the argument that tailored parenting supports and specialist services (in different contexts and parents in different parenting relationships) are effective in increasing parental capacity (Connolly & Devaney, 2018).

#### 1.3.2 National and International Evidence of Existing Parenting Programmes

There are several parenting programmes that are recognised and commonly used within professional and academic settings across Ireland. An overview of key evidence is provided below.

### 1.3.2.1 Incredible Years

The Incredible Years BASIC Preschool/Early School Years Parent Training (IYP) programme consists of group-based training sessions that focus on behavioural and social learning principles and are conducted over a 14-week period. The programme utilises a collaborative approach between parents/guardians and the practitioner, and has been found to be effective across varied socio-economic backgrounds (Leijten, Raaijmakers, Orobio de Castro, van den Ban, & Matthys, 2017). However, Furlong and McGilloway (2012) found that Irish parents did experience some cultural, social and personal challenges while completing the programme. Despite this, McGilloway et al., (2012) found significant improvements in children's behaviour and parental well-being in those who had completed the Incredible Years programme at a 12-month follow up.

### 1.3.2.2 Triple P

Triple P Positive Parenting Programme was developed by Prof. Matthew Sanders in the University of Queensland (Sanders, 1999). Primarily it is an intervention for parents of children aged 0-12 offering techniques for managing behaviour (Sanders, Cann, & Markie-Dadds, 2003). Triple P differs from other parenting programmes as it is grouped into five levels, each reflecting a different and increasing level of need and complexity (Lindsay, Strand, & Davis, 2011). Furthermore, it has been adapted for disability services, indigenous families and for parents of teenagers. A systematic review of 101 Triple P studies found evidence of significant short- and long-term effects for child well-being outcomes, as well as parenting practices and satisfaction, and parental relationships (Sanders, Kirby, Tellegen, & Day, 2014).

### 1.3.2.3 Parents Plus!

Parents Plus! is an Irish programme that was developed by Dr. John Sharry and Prof. Carol Fitzpatrick in 1998 (Coughlin, Sharry, Fitzpatrick, Guerin, & Drumm, 2009). The programme consists of eight weekly group-based sessions and places emphasis on a constructive approach to behavioural management (Carr, Hartnett, Brosnan, & Sharry, 2016). There are five Parents Plus! programmes that have been tailored for parents of children across different ages and stages in both community and clinical settings. Carr et al. (2016) conducted a meta-analysis of 17 studies involving over 1,000 families and results indicated positive effects of the programme on behavioural issues, parental well-being and goal attainment. A subsequent evaluation conducted by Wynne, Doyle, Kenny, Brosnan and Sharry (2016) noted improvements for both parents (satisfaction with parenting skills) and their adolescent children (emotional difficulties) attending Child and Adolescent Mental Health Services (CAMHS). Both adolescents and their parents reported significant improvements in overall family functioning from pre to post intervention (Wynne et al., 2016).

### 1.3.2.4 Parents under Pressure

The Parents under Pressure (PuP) programme is an intensive, highly individualised, home-based parenting programme that aims to help parents facing adversity develop positive, secure relationships with their children. It is intended for parents experiencing difficult life circumstances, such as substance misuse, depression or family conflict. A randomised controlled trial, focusing on families experiencing substance misuse, found significant reductions in problems related to family functioning including child abuse potential, rigid parenting attitudes and child behaviour problems (Dawe & Harnett, 2007). Additional studies also found improvements for: 1) methadone-maintained parents (Dalziel, Dawe, Harnett, & Segal, 2015); 2) mothers who had spent time in prison – in terms of maternal mental health, the quality of the parent-child relationship, child abuse potential and problem child behaviours (Frye & Dawe, 2008); and 3) families that had been identified by social services – in terms of parent functioning, child functioning, parent-child relationships, and social contextual measures (Harnett & Dawe, 2008).

### 1.3.2.5 Circle of Security

The Circle of Security intervention is a 20-week, group-based, attachment-theory-based parenting intervention designed to shift patterns of attachment-caregiving interactions in high-risk caregiver-child dyads to a more appropriate developmental pathway. Early studies showed positive outcomes, indicating reduction in disorganised and insecure attachment among 65 toddler/preschool and caregiver dyads (Hoffman, Marvin, Cooper, & Powell, 2006). These findings have been strengthened by more recent evidence of 83 clinically referred dyads, whereby improvements were found in caregiver reflective functioning, caregiving representations, with increased levels of child attachment security and a decrease in the level of attachment disorganisation (Huber, McMahon, & Sweller, 2015).

## 1.4 RATIONALE FOR DEVELOPING A NEW PARENTING PROGRAMME

As the international literature suggests, group-based parenting programmes are not always suitable or effective for families with complex and multi-faceted needs. The families referred to Barnardos for parenting support tend to have higher levels of need than those that might typically be expected to attend a group-based parenting support intervention. Issues that can be present in families include: prior experience of trauma by the parent or child; behavioural issues; challenged parent-child relationships; domestic violence; aggressive behaviour from the child toward the parent; alcohol/substance misuse; school refusal or poor school attendance; housing insecurity; low parenting skills; homelessness; financial stress; and mental health issues. Anecdotal evidence from within the organisation indicated that other parenting programmes commonly used in Ireland did not meet the needs of parents referred to Barnardos, for reasons commonly identified in the international literature (Moran, Ghatge, & Van Der Merwe, 2004). In fact, many parents who were referred to Barnardos had already attempted other structured group-based parenting programmes, which were ultimately unsuccessful due to the need for a more flexible, individualised wrap-around programme.

In line with the Barnardos 12-year strategy Valuing Childhood – Cherishing Children, a consultation process with those delivering, receiving and referring to Barnardos services was undertaken between 2005 and 2006. Among others, a recommendation from this process was to consider the development of a formal partnership with parents’ intervention. Once a decision was reached to adopt this recommendation, the Service Design and Development Team in Barnardos commissioned a series of four briefing papers to inform the future direction of parenting programmes in Barnardos (Prendiville, 2009a; 2009b; 2009c; 2009d). The result of this process was the design and implementation of Partnership with Parents™, which is outlined fully in the next chapter.



# Chapter 2

## Programme Design and Implementation



## 2.1 PARTNERSHIP WITH PARENTS™

Partnership with Parents™ (PwP) is an intensive, home-based, one-to-one parenting support programme for parents with multiple and complex needs, developed by Barnardos Ireland. PwP has been implemented across all of Barnardos' family support and early years services. In 2018, there were 747 PwP interventions delivered across all Barnardos sites.

The design of PwP was evidence-based, offering parents<sup>8</sup> and their children the best chance to succeed and make a real difference across a range of common needs. PwP aims to achieve the following outcomes:

- Improved parent-child communication
- Increased parental understanding of, and ability to manage, their child's behaviour
- Improved social development of the child
- Introduction of consistent routines
- Increased parental involvement in the child's education
- Ensuring the child's physical needs are met
- Increased parental ability to manage crises effectively

The programme consists of a suite of six 'plug-ins' as outlined below:

1. Parent-child relationship: to support positive parent-child interactions through consideration of parenting and communication styles.
2. Behaviour: to help parents understand and manage their child's behaviour.
3. Social development: to help parents to understand the importance of their children's friendships and the role they, as parents, play in supporting them.
4. Routines: to help parents implement child-centred routines.
5. Education: to help parents recognise the importance of education to their child and support the parents to play an active role in this.
6. Physical development: to increase parents' awareness of, and ability to provide, a healthy diet, exercise and medical check-ups for their child.

Two optional programme components serve other functions:

- Crisis management: to support parents to deal effectively with daily difficulties and life events.
- Practical support: to help address any practical challenges that may be impacting on the child's development or the parents' ability to parent effectively.

Together, a parent and their project worker choose the appropriate plug-in. Each plug-in is delivered in the form of a parent's activity booklet containing a number of exercises that the practitioner and parent complete together. A staff guidance booklet was developed to help staff understand the purpose, focus of and evidence behind each session. The programme

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8 PwP is designed to work with one or both parents, or whoever is fulfilling the parenting role.

was designed to be delivered to parents of children between the ages of 3-18 years<sup>9</sup>. The programme is deemed unsuitable for parents who have limited capacity to: 1) retain information; 2) be reflective on their parenting approach; or 3) implement changes due to factors such as severe mental health, unstable/chaotic addiction or intellectual disability (Barnardos, 2013).

## 2.2 THEORETICAL FRAMEWORK

The goal of PwP is to help parents to make changes to their parenting, and the programme therefore draws significantly on Social Learning Theory, a fundamental theory of behaviour change. Social Learning Theory proposes that most behaviour is learned and involves: 1) self-efficacy: the belief that the desired behaviour change can be performed; 2) goals: the ability to establish internal standards against which the person measures their performance; and 3) outcome expectancies: the anticipation of a reward or punishment influences behaviour (Bandura, 1986).

The child is positioned at the centre of the PwP programme and all work completed with parents is focused on achieving outcomes for their children. To ensure the healthy development of children, there are three tasks of parenting that parents need to be able to provide – care, control and development.

- Care: concerns the activities aimed at meeting the survival needs of children – physical needs, emotional needs and social needs – across the different developmental stages (Hoghugh & Long, 2004).
- Control: includes the range of activities concerned with setting and enacting boundaries for children in an age-appropriate and culturally-appropriate manner. Parents who provide firm, consistent limits and rules teach their children what is socially acceptable and how to regulate their own behaviour (Hartup, 1989; Bornstein, 1995).
- Development: ‘development activities’ are driven by the parents’ wishes for their children to fulfil their potential in all areas of functioning. Development is implicit in every act of encouragement or creation of new opportunities (for instance, nurturing values and providing sports and education opportunities) by parents (Grusec, Goodnow, & Kuczynski, 2000).

For parents to be able to perform these core tasks of parenting, they need to have certain conditions in place, and PwP helps parents establish and develop these. The necessary conditions include knowledge and skills, motivation, self-belief and ability to problem-solve. To support the development of these conditions, PwP establishes a partnership between the parent and practitioner.

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<sup>9</sup> A ‘Birth to 2 years’ version of the PwP programme has also been developed to meet the needs of parents with babies and infants but is outside of the scope of this evaluation.

### 2.2.1 Participatory Approach

Ghate and Hazel (2004) found that parents want services that allow them to feel in control and meet their self-defined needs. Fahlberg (1993) notes that every effort must be made to treat parents and children as collaborative partners in the identification of problems, in planning and in treatment. It is widely accepted that if service users identify the issues and solutions, they are much more likely to perceive them as relevant and act upon them (Tones & Tilford, 1995). This approach was therefore adopted in PwP.

Certain skills and qualities of the worker are necessary to help create this collaborative partnership. In PwP, staff qualities (for example, warmth, respect, patience); interpersonal skills (for example, communication skills, awareness of self and others); and approach (for example, flexibility, reflection) are defined. These skills and qualities are consciously and actively demonstrated in order for the parents to experience them.

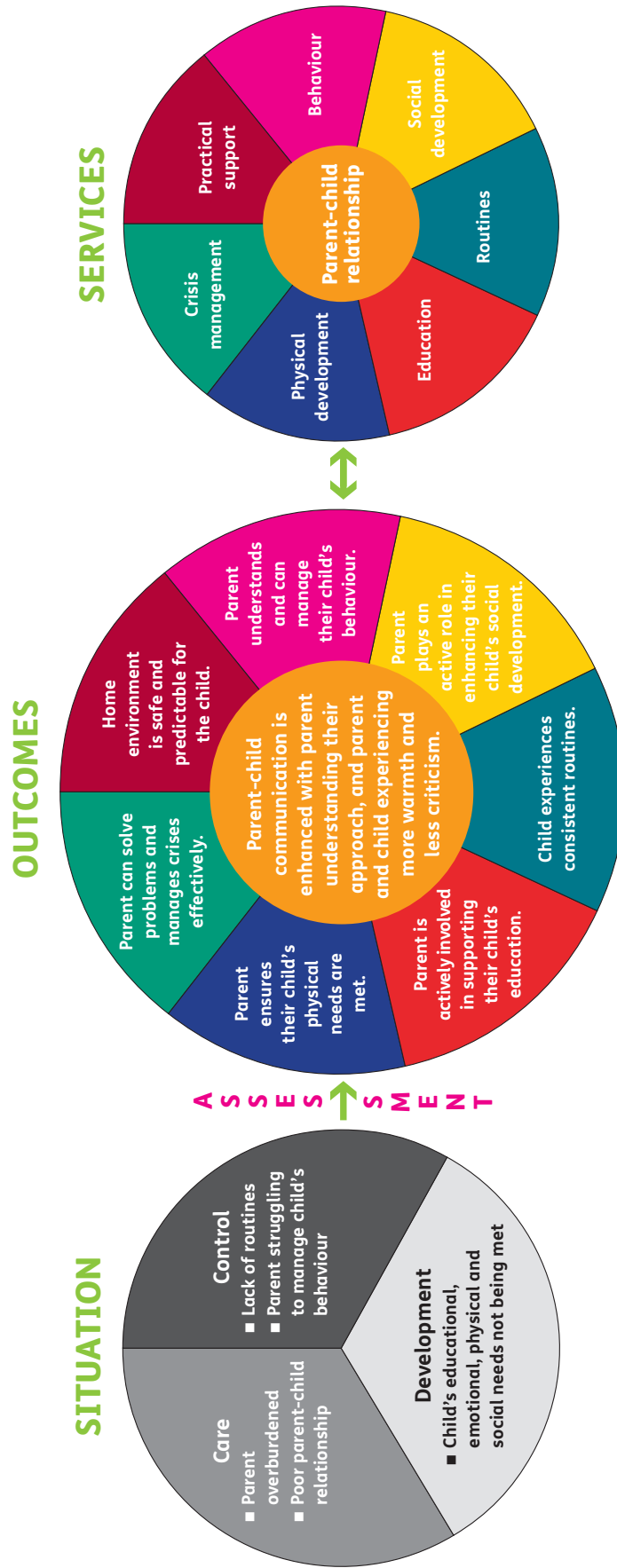
Just as parents require the right conditions to carry out the tasks of parenting, workers are supported by the right organisational conditions in order to work effectively with parents (for example, organisational commitment to the programme; resources; supervision; training) (Fixsen, Naoom, Blase, & Friedman, 2005).

The final aspect of PwP is interagency working as no single agency can address the broad range of issues that impact on parents (Reder & Duncan, 2003).

## 2.3 LOGIC MODEL

A logic model is a tool used during the planning, implementation and evaluation of an intervention or programme, visually illustrating the resources, activities and expected outcomes (Hayes, Parchman, & Howard, 2011).

The logic model developed for the PwP programme, illustrated in Figure 2.1, consists of three interconnected circles, illustrating situation, outcomes and service. The first circle of the logic model identifies the situation in which families using the PwP programme may be living. They may have needs in relation to the core tasks of parenting: care, control and development. The second circle relates to the outcomes that the programme aims to achieve. The third circle identifies the different service programme components of PwP – the six plug-ins and two optional programme components (crisis management and practical support). The three circles of the logic model are underpinned by a band, which signifies the importance of the relationship between the worker and parent in PwP.



**RELATIONSHIP BETWEEN WORKER AND PARENT**

Figure 2.1 PwP logic model (Barnardos, 2013)

## 2.4 SERVICE DESIGN

The development of PwP began in November 2009, with a comprehensive review of the research evidence relating to parenting support programmes to improve parenting capacity. A suite of briefing papers were produced including:

1. Good Enough Parenting
2. Change: Understanding, Motivating & Sustaining
3. Supporting Parents
4. Theories, Models & Approaches

(Prendiville, 2009a; 2009b; 2009c; 2009d)

The review focused on parent-child relationships and attachment. This included increasing parental skills, strengthening problem-solving and supporting parents to cope better. In addition, the focus was on understanding, motivating and sustaining change.

A service design group, led by the Service Design and Development Team, was established in January 2010. The group consisted of one member of staff with experience working directly with parents from each Barnardos region, thus ensuring that the design was informed by knowledge, skills and practical experience. The group also had the support of Dr. Crispin Day, Head of the Centre for Parent and Child Support, South London and Maudsley NHS Foundation Trust, as an external consultant who provided expert advice on the design and development of the programme throughout the service design process. Together, the service design group developed key components of the overall framework for the programme.

In addition, the service design group supported the real world testing and piloting of the service design.

## 2.5 PILOT AND PROGRAMME DEVELOPMENT

A phased approach was utilised in the development and piloting of the PwP programme. After the initial development of the programme content and guidance for staff, piloting of the various plug-ins took place over two sequential phases, in which learning was iteratively incorporated in subsequent development and testing (Table 2.1).

Phase one of the piloting of the PwP programme took place between March and November 2011, with staff who had participated in the PwP service design process testing three separate plug-ins. In phase two, all seven sites from phase one were selected to pilot the full programme. Staff and management were provided with a two-day training programme prior to the commencement of the full PwP pilot, which ran for nine months.

Table 2.1: Pilot phases and timeline

Pilot phase	Component tested	Start date	End date	Sites chosen
1	Parent-child relationship plug-in	March 2011	August 2011	Corduff (Dublin) Limerick North Tullamore (Offaly)
	Behaviour plug-in	May 2011	November 2011	Carlow Corduff
	Social development plug-in	June 2011	November 2011	Cherry Orchard (Dublin) Mullingar (Westmeath) Dun Laoghaire (Dublin)
2	Full PwP programme	January 2012	October 2012	Carlow Cherry Orchard Corduff Limerick North Mullingar Dun Laoghaire Tullamore

The Service Design and Development Team played an important role in supporting the pilot in each of the sites, providing introductory sessions for project leaders and assistant directors, in addition to technical assistance and formal monthly technical support meetings. Site teams involved in the pilot were also encouraged to engage in peer support by reflecting on the progress of each case with their managers. In addition, the Service Design and Development Team facilitated a review meeting (post-pilot) with managers to reflect on the programme. This reflection sought to consider the family profile of participants; programme content and ‘what worked’; challenges that arose; and the resources required to implement the programme. Parental experience of the programme was sought, either directly by the practitioner or through a meeting with members of the Service Design and Development Team. Findings from the pilot fed into the final PwP programme.

## 2.6 IMPLEMENTATION OF PARTNERSHIP WITH PARENTS™

### 2.6.1 Assessment

The work with the parent begins with assessment, which is an important aspect of developing an effective relationship. The purpose of assessment is two-fold, it increases the practitioner's understanding of the needs of the children and family, and it helps to clarify the context they are living in, as well as any potential risk and protective factors present in their lives. For parents, it provides an opportunity to engage in a guided conversation on the needs of their children which, when conducted in a sensitive and inquisitive manner, can help them identify and prioritise what they need most. The purpose of assessment in PwP is to gather enough information to establish needs and the parent's willingness and capacity to engage. The assessment supports the project staff to identify which plug-in(s) should be delivered, based on the assessment wheel.

Depending on their age and level of understanding, children should be included in this process and encouraged to express their views. The higher the level of the risk in the case, the more important it is to hear the child's voice. PwP also uses a standardised measure, the Parent-Child Relationship Inventory (PCRI) (Gerard, 1994), to assess parental attitudes, and parenting strengths and challenges. These are introduced during the assessment phase to inform the direction of the work. At a practical level, the PCRI scores are used to inform the plug-in selection for individuals. They are used again at the end of the programme to measure the impact of PwP in achieving programme outcomes.





Figure 2.2: Assessment tools for PwP

### 2.6.2 Parenting Log

The PwP programme has been designed to be reflective. Reflective practice is centred on thinking about and learning from past experiences in order to establish things that went well and things that may be improved on for the future (Koshy, Limb, Gundogan, Whitehurst, & Jafree, 2017). Therefore, each parent participating in PwP is given a notebook to use as a parenting log, which remains the property of the parent. The purpose of the parenting log is to increase parents' awareness of what is happening in their world, their role and the role of others. Parents are encouraged to fill in their log each day by noting things that went well and things that were challenging, but the use of this aid is optional. The parenting log provides the basis for reflecting on the material covered in the sessions and how they could implement the learning. The log also permits an opportunity to note progress and any challenges for further sessions. In the staff guidance, each activity contains homework, which offers specific guidance as to what the parent should be reflecting on and recording in their parenting log. Staff encourage reflection and praise parents, exploring the effectiveness of family interactions and how parents are progressing with making changes. If the parent prefers to keep their log private, they can instead discuss the main points. Where there are literacy issues, parents are encouraged to keep a log through another medium (for example, drawing or recording).

### 2.6.3 PwP Sessions

Ideally, sessions with parents take place once a week, follow a standard format and are delivered in approximately one hour. However, PwP sessions can be delivered more or less frequently as needed.

The programme length will vary according to the needs of the parents, and will be affected by the number of plug-ins they require, as well as whether they need practical support or crisis interventions.

Each session within a PwP plug-in should follow the standard format of:

- check-in (maximum 15 mins);
- review of what was completed in last session;
- the specified activity from the parent's activity booklet;
- recap and plan for following week (including home-based tasks for next week).

In addition, parent-child sessions are built into the PwP programme where appropriate, depending on age of child, stage of development and nature of presenting issues. These sessions are singular events that are focused, facilitative, purposeful and supportive, empowering the parent in their role. The sessions aim to gain a shared understanding of the family dynamic, presenting challenges, and to observe the interactions between parents and children. In addition to hearing the child's perspective, the sessions facilitate conversations between parents and children.

# Chapter 3

## Methods



### 3.1 INTRODUCTION

In 2013, shortly after the Partnership with Parents™ (PwP) programme was implemented nationally, Barnardos undertook an internal process evaluation of PwP, exploring programme delivery, participation, fidelity to the logic model, staff experiences of implementing the programme, and programme development needs. Preliminary findings were positive, particularly in regard to parental feedback in relation to the programme materials, the reflective nature of the programme and the flexibility of home-based service delivery. (Barnardos, 2014)

In tandem with this initial study, Barnardos staff continued to explore the potential for a larger-scale evaluation to determine the impact of PwP. Consideration was given to the feasibility of a number of evaluation designs in terms of ethical considerations, timeline, sample pool and available resources. These considerations and associated limitations are outlined further throughout this chapter. A mixed method cohort evaluation was deemed most appropriate, involving both primary and secondary data collection and analysis.

### 3.2 EVALUATION AIM AND KEY QUESTIONS

The study sought to evaluate the impact of the PwP programme in contributing to positive outcomes for children and families. The evaluation sought to answer the following questions:

1. Does the PwP programme result in positive outcomes for children and families?
2. What influences the impact of the programme within the Irish context?

### 3.3 EVALUATION DESIGN

A mixed method cohort evaluation of PwP was undertaken from September 2016 to September 2018, with data spanning a six-year period (2012–2018). Data were sourced from two cohorts, which will be referred to as 1) the PwP cohort and 2) the study cohort throughout this report. The PwP cohort relates to all service users who received the PwP programme from 2012 to 2017, while the study cohort relates to a sub-group of those who received PwP and completed pre-post outcome measures. A small sample was also selected from this sub-group for in-depth qualitative interviews. As such, the mixed methods approach combined both primary and secondary data, utilising quantitative and qualitative methods within a planned design (Robson, 2002). There are a number of benefits to the approach. Quantitative research offers robust data that utilises reliable and validated standardised measures that are easily comparable to international evidence. Interviews and focus groups, on the other hand, are a useful method to gain understanding of participants' experiences and the views of other stakeholders. They can elicit helpful feedback on programme expectations, implementation, and outcomes, and can shed light on what worked well and what could be done differently. Interviews are flexible and adaptable, and carry the potential to provide rich and highly illuminating data (Robson, 2002). In addition to mitigating the limitations of each individual approach, a mixed method design also produces a comprehensive picture of the phenomena under investigation – allowing the triangulation

of primary and secondary data from various stakeholders. There were three discrete, but interconnected components to the evaluation design:

*Quantitative (data from 2012–2017)*

- a secondary data analysis of anonymised demographic and participation data collected from the Barnardos children’s services database (see chapter 4);
- pre-post test data analysis of Parent-Child Relationship Inventories (PCRIs) administered to parents from 2012 to 2017; and
- pre-post test data analysis of assessment wheel scores, collected between 2012 and 2017.

*Mixed methods survey (data from November 2017–January 2018)*

- an online survey of staff (chapter 5) that consisted of a series of closed or multiple choice questions concerning staff experience and programme delivery, in addition to open-ended qualitative questions relating to programme delivery and working with families.

*Qualitative (data from 2018)*

- a series of interviews and focus groups in 2018 (chapter 5) – with parents, children, staff and other stakeholders – in order to gain their perspectives on parental needs, outcomes of the PwP programme, challenges of the programme, and what aspects influence programme impact.

Further detail of each component is outlined in sections 3.4 to 3.5 including sampling, data collection and analysis.

## **3.4 SECONDARY QUANTITATIVE DATA**

### **3.4.1 Demographic and Participation Data**

A range of anonymised demographic and participation data on parents undertaking the PwP programme was exported from the Barnardos children’s services database. The study targeted a cohort of parents within the overall PwP programme who completed at least one of the two available outcome measures.

A range of variables were extracted for both the study cohort and the overall programme participant pool. Variables included parenting and family type, in addition to referral information, services received, programme duration and plug-in usage. Both datasets were compared to facilitate an assessment of sample representativeness. In addition to testing for representativeness, the data supported additional analysis of the study cohort, allowing for the exploration of other variables that carried the potential to influence programme outcomes.

### 3.4.2 Outcome Measures

#### 3.4.2.1 Parent-Child Relationship Inventory (PCRIs)

Since commencing the PwP pilot in 2011, Barnardos has used the Parent-Child Relationship Inventory (PCRI) to provide a standardised and valid measure of the quality of relationships between participating parents and their children. The PCRI is self-report measure that provides insight into parents' perceptions of the task of parenting and their relationships with their children.

The PCRI identifies areas where issues or challenges may arise. Parents responded to 78 items, in a four-point Likert<sup>10</sup> scale response format (Likert, 1932). The items correspond to seven distinct scales that reflect major features of parenting and the parent-child relationship (Table 3.1).

Table 3.1: PCRI domains

Domain	Interpretation
Support	Assesses the level of emotional and social support a parent receives
Satisfaction	Measures the amount of pleasure and fulfilment an individual derives from being a parent
Involvement	Examines the level of a parent's interaction with and knowledge of their child
Communication	Assesses a parent's perception of how effectively he or she communicates with a child
Limits	Focuses on a parent's experience disciplining a child
Autonomy	Assesses the ability of a parent to promote a child's independence
Role	Examines parents' attitudes about gender roles in parenting

For the purpose of this study, six of the seven scales were used. The role orientation scale, which focuses on parents' attitudes about gender roles, is not calculated or analysed for the purpose of this study. It is common in evaluation studies to select the most relevant scales from questionnaires.

#### PCRI data collection

The PCRI is a short tool that can be completed in approximately 15 minutes (Gerard, 1994) but may require longer if literacy challenges are present or if English is a second language.

10 Likert is a widely used approach for providing rating scales in surveys.

As is standard practice in the delivery of PwP, study participants were invited to complete the PCRI before starting the programme activities, and again on completing the programme. Data were utilised for a five-year period (2012–2017). This gave Barnardos a reliable measure of the changes that occurred in parent-child relationships when parents participated in PwP. The PCRI also fits well with the mixed method design by putting qualitative impressions in perspective by making normative comparisons possible – by using standardised quantitative measures (Gerard, 2005).

#### *Analysis of PCRI data*

Scores can be calculated manually using the form. Scores with a T-score below 40 generally indicate difficulties in that area. In addition to the seven domain scores, the PCRI incorporates two validity indicators. The Social Desirability Indicator consists of five items that are rarely endorsed in the positive direction. A low Social Desirability score (9 or less) suggests that the parent is giving distorted responses intended to portray the parent-child relationship in an unrealistically positive light. The Inconsistency Indicator comprises ten pairs of highly correlated items. The response to one item in the pair, in effect, predicts the response to the other item. High scores (2 or higher) on this indicator suggest inattentive or random responding. Inconsistent responses can be removed from overall analysis.

SPSS statistical software was used for both descriptive and inferential analysis of the study cohort. The data were explored, cleaned and prepared for analysis. The study cohort consisted of 611 parents who completed the PCRI, from 2012-2017, with over 200 paired samples (33%) of complete pre-post test evaluations. Paired sample t-tests were run on each PCRI scale. The paired sample t-test is suitable for dependent samples, where the data are connected. Because the PCRI was administered to the same person before and after the PwP programme, the test is suitable in this context. Where the calculated p-value is less than the alpha level:  $p < .05$ , the change is considered statistically significant. In parallel with testing for statistical significance, Cohen's d was used to test for effect size. A guide for interpreting effect size is as follows: Small  $\approx 0.2$ ; Medium  $\approx 0.5$ , Large  $\approx 0.8$ .

#### **3.4.2.2 PwP assessment wheel**

Designed by Barnardos to complement the programme, the assessment wheel is an integral, user-friendly self-assessment tool for parents. The purpose of the assessment wheel is to help parents understand and reflect on the different aspects of their parenting, to identify the areas they believe they are doing well in, and those that they may need support around. Based on the outcome of the assessment wheel, the project worker and parent take a collaborative approach in deciding which plug-in to use at the start of the intervention. Additional plug-ins may be utilised as the course progresses and needs are identified. The PwP assessment wheel is used as a goal-attainment scale to track the progress parents make throughout the PwP journey. The assessment wheel consists of a scale rating across the plug-

in domains of Parent-child Relationship, Behaviour, Routines, Social Development, Education, and Physical Development. The scale moves from a score of 1 (difficult) to 10 (easy).

#### *PwP assessment wheel data collection*

Parents were invited to complete the assessment wheel before and after their engagement with the programme, thus providing an additional source of comparative data. Similar to the PCRI, data were utilised for a five-year period (2012–2017).

#### *Analysis of PwP assessment wheel data*

Mean scores were calculated and, once again, t-tests were used to test the significance of changes over time. Where the calculated p-value is less than the alpha level:  $p < .05$ , the change is considered statistically significant. In parallel with testing for statistical significance, Cohen's d was used to test for effect size. A guide for interpreting effect size is as follows: Small  $\approx 0.2$ ; Medium  $\approx 0.5$ , Large  $\approx 0.8$ .

### 3.5 PRIMARY DATA

#### 3.5.1 Interview Series

This component of the evaluation methodology included interviews with parents and children; interviews and focus groups with staff; and a series of stakeholder interviews. A case study approach was adopted, with six sites selected nationally. The selected projects were Athlone, Waterford, Dublin South, Limerick South, Tallaght (Dublin 24), and Mulhuddart (Dublin 15). The sites were purposefully chosen by the research team to provide a mix of urban and rural populations, and also a mix of presenting needs of parents.

##### 3.5.1.1 Interviews with parents/children

#### *Sample*

For each site, 10-15 parents were randomly selected from the Barnardos children's services database. Project workers and project leaders acted as gatekeepers<sup>11</sup> in recruiting the final sample of interviewees. While participants were interviewed on one occasion each, the random sampling allowed for selection of parents who were commencing, midway and finishing the PwP programme. Project workers coordinated access to parents who agreed to participate (n=30). Project workers and parents acted as gatekeepers to participating children (n=17), and interviews were undertaken in locations deemed appropriate by project workers and participants.

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11 After the participants were randomly selected, the project workers and project leaders made initial contact with the families. In a number of cases, the project leaders did advise against some families' participation in the evaluation (for reasons such as in crisis, etc.).



Prior to each parental interview, the parent was provided with an information sheet (Appendix A<sup>12</sup>) and a consent form (Appendix B<sup>12</sup>). Similarly, before each child interview, the child was provided with an information sheet (Appendix A<sup>12</sup>) and an assent form (Appendix B<sup>12</sup>). The assent form is necessary for children when conducting evaluations and must be coupled with a complementary parental consent form giving permission for their child's participation (Appendix B<sup>12</sup>) in the evaluation project.

### *Data collection*

Interviews were conducted using semi-structured interview guides, exploring participants' experiences of the programme. Individual guides were prepared for parents (Appendix C<sup>12</sup>), children aged 11 years and older (Appendix D<sup>12</sup>), with a workbook designed for younger children aged between five and ten years (Appendix E<sup>12</sup>). The parent interview guide captured family context, experience of the programme and plug-ins, as well as changes, outcomes and challenges associated with participation in the programme. It was acknowledged that children and young people may have limited knowledge of the programme and therefore materials were designed accordingly. Older children were asked about their context, their knowledge of the Barnardos project worker and their experience of having the project worker in the home. Younger children who participated completed a workbook exploring their awareness of the impact of the PwP programme on their relationship with their parent/s and how this may have changed over the duration of the input.

The fieldwork was conducted by five interviewers who were each assigned a specific site. Three interviewers were Barnardos employees; two were research staff from the Learning and Development Service in Barnardos and one interviewer worked in Better Finglas as a research assistant. The remaining two interviewers were contracted by Barnardos as external consultants to conduct interviews with children and parents. Both external consultants were affiliated with a university department, had doctoral qualifications and experience of child-based fieldwork. To ensure consistency of interview questions, each interviewer worked from an interview schedule and then completed a post-interview summary form to add any additional information which may not have been captured during the recording.

#### **3.5.1.2 Focus groups and interviews with staff**

Focus groups and semi-structured qualitative interviews (Appendix F – Interview Guide: Staff<sup>12</sup>) were conducted with staff (n=21). Project workers were interviewed separately from project leaders to allow project workers to speak freely about their experiences of both delivering PwP and receiving supervision from their project leader as part of this process. Staff were asked about: 1) their experience of parenting programmes more broadly; 2) their experience of PwP; 3) the lifecycle of the programme and their use of plug-ins; 4) overall programme design; 5) training received; and 6) opportunities for learning arising from programme delivery.

12 Online supplement - <http://bit.ly/Barnardos-Research-2019>

### 3.5.1.3 Stakeholder interviews

Stakeholder interviews were also conducted (n=11). Two separate guides were prepared: the first for frontline and direct work stakeholders (Appendix G<sup>13</sup>); the second for management and higher level stakeholders (Appendix H<sup>13</sup>). Stakeholder interviews were broader in focus, in acknowledgement of different levels of knowledge and awareness of the programme. Stakeholders were invited to reflect on parenting support and parenting programmes in a general sense, what works in parenting support, and, if appropriate, their perception of PwP.

### 3.5.1.4 Analysis of interviews and focus groups

Interviews and focus groups were transcribed verbatim. All potential identifiers (for example, names of people, places, etc.) were removed from the transcripts prior to analysis taking place in order to preserve the anonymity of the research participants. Pseudonyms were used to replace real names in the transcripts, however names are not used in the presentation of the findings.

A formal thematic content analysis was undertaken. Case charts were created for each interview or focus group to draw out all relevant and informative themes, regardless of how often they occurred. This process was guided by a grounded theory approach, commencing with inductive gathering of data and supplemented by the non-linear movement back and forth between data gathering and analysis (Charmaz, 2011). In this sense, interview schedules were adapted to explore emergent themes.

## 3.5.2 Mixed Method Survey of Staff

Barnardos staff from across Ireland were invited to take part in a survey detailing their experience with the PwP programme. Both qualitative and quantitative data were collected to gain a fuller understanding and insight into the delivery of the PwP programme. The survey (Appendix I – Schedule of Online Staff Survey<sup>13</sup>) was administered from November 2017 – January 2018 using Typeform online survey software. The survey focused on staff engagement with different aspects of PwP, as well as their perceptions of implementing the programme. The survey explored staff views on the suitability and efficacy of the programme, in addition to recommendations for programme development. Staff were also asked to rate aspects of the programme based on intended outcomes as per the logic model, in order to explore fidelity to the overall model and approach. Descriptive statistics were undertaken relating to the quantitative survey data. Thematic analysis was undertaken for the qualitative element of the survey to identify core themes and findings.

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13 Online supplement - <http://bit.ly/Barnardos-Research-2019>

### 3.6 EVALUATION ETHICS

The evaluation of PwP was undertaken internally by the evaluation team, which was part of the Barnardos Learning and Development Service. The Learning and Development Service had a role in the original design and implementation of the PwP programme, but those undertaking the evaluation were not involved in the design or piloting of the programme.

The study was guided by both Barnardos' Principles for Conducting Research (Barnardos, 2018) and the British Sociological Association's (BSA) Statement of Ethical Practice (British Sociological Association, 2017). Particular consideration was given to the inclusion of Barnardos' service users and children, with ethical rigour of paramount importance throughout.

The study was guided by a steering group, including the evaluation team, director of children's services and two external advisors – Dr. Crispin Day, Head of the Centre for Parent and Child Support, NHS Foundation Trust, and Dr. Paula Mayock, Assistant Professor at the School of Social Work and Social Policy, Trinity College Dublin (TCD).

For the interviews with service users, project workers made initial contact. Information sheets were provided and informed consent was obtained. Project workers and parents of participating children were consulted at each stage of the interview process in order to make joint decisions about their participation. Where a child was interviewed, parents could choose to be present. Project workers were also available to support all parents and children throughout the study. Interviews were undertaken in locations deemed appropriate by project workers and participants. Staff from selected projects were invited to a focus group or individual in-depth interview. Informed consent was obtained from all staff participating in the study. Project staff in each site were invited to identify relevant stakeholders, and made initial contact with all potential stakeholders.

All evaluation staff were Garda vetted, familiar with their obligations under data protection legislation and Children First: National Guidance for the Protection and Welfare of Children (Dept. of Children & Youth Affairs, 2011), and had experience of undertaking field research and semi-structured qualitative interviews.

All evaluation participants were made aware of their right to refuse participation whenever and for whatever reason they wished. Participants were also made aware that they had the right to withhold answering a specific question or element of a survey, and the right to withdraw from the study. Service users were advised that this would not impact on their relationship with the service. Participants were assured that their anonymity and privacy would be respected, and personal information would be kept confidential. All evaluation data were stored securely. Barnardos does not share any names, contact details or other personal details of any current or past service users without their permission and will at all times

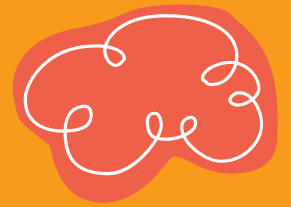
meet its obligations under data protection legislation and any guidance issued by the Data Protection Commission. Barnardos also has a duty of care to take steps to protect a child or children taking part in any of our research or evaluation studies if they are considered to be 'at risk of significant harm'. Participants were made aware of the relevant obligations under Children First.

### 3.7 LIMITATIONS AND LEARNING

A number of limitations were identified at the outset and throughout the evaluation study. Notably, there was no comparator or control group, with the analysis based on programme participants only. This presented particular difficulty in establishing causal relationships. The study design emerged from learning arising from a small-scale internal process evaluation in 2013. Consideration was given to a number of different designs. A number of factors informed the decision not to use a comparator group. Firstly, almost all Barnardos staff were trained in PwP by the end of 2013, so any Barnardos comparison group would be contaminated, insofar as it would be impossible to roll back the learning and skills development among any staff who would be intervening with the comparison group. Secondly, a Barnardos comparison group of parents would not be a zero intervention comparison group, as it is not ethical to withhold some type of parenting support in response to a referral, thus making the detection of programme effect more difficult. Furthermore, it would not be possible to control for a comparative sample accessing alternative support services, thus compromising the nature of a zero-intervention sample. At this point, it was agreed that undertaking a rigorous Randomised Controlled Trial (RCT) or quasi-experimental study would be unadvisable.

# Chapter 4

## Findings: Secondary Data



## 4.1 INTRODUCTION

This chapter presents demographic and participation information on the overall Partnership with Parents™ (PwP) cohort (parents who have undertaken the programme) and the study cohort (parents who have completed the PCRI), including referral data, a profile of study participants and service delivery data. The PwP cohort consists of 1,471 service deliveries, which were recorded in the Barnardos children’s services database over the collection period. The smaller study cohort consisted of 611 parents who completed PCRI over the course of their PwP service delivery (2012–2017). (Table 4.1)

Table 4.1: Summary of study respondents

Evaluation method	Timeframe	Respondents
Demographic data of all PwP participants	2012–2017	1,471
Demographic data of pre-post cohort	2012–2017	611
Parent-Child Relationship Inventory (paired data)	2012–2017	200*
Assessment wheel (paired data)	2012–2017	114*
Staff survey	Nov 2017–Jan 2018	64
Interviews with parents	2018	30
Interviews with children	2018	17
Interviews with staff	2018	21
Interviews with stakeholders	2018	11

\*see caveat in statistical analysis of PCRI and assessment wheel datasets (sections 4.3 and 4.4)

## 4.2 DEMOGRAPHIC AND PARTICIPATION DATA

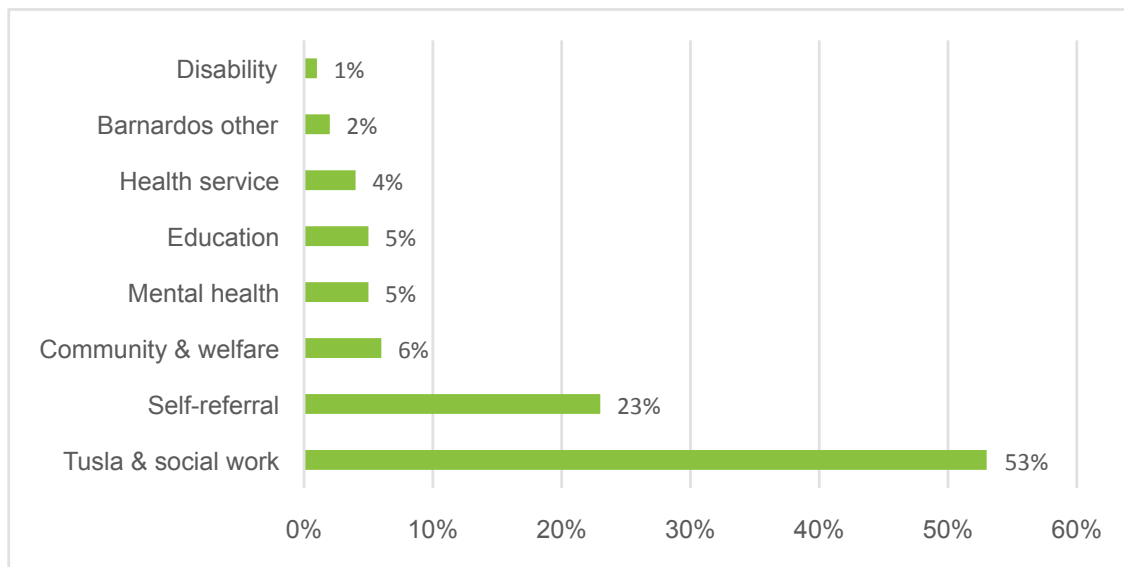
In the following descriptive statistics, the total number in the PwP and study cohorts may differ from the previously reported totals of 1,471 and 611 respectively. Where each cohort total differs, the number missing will be also provided with the descriptive statistics.

### 4.2.1 Referral to PwP

#### 4.2.1.1 Source of referral

Parents were referred to Barnardos from a variety of sources, ranging from self-referral to social work. Project workers inputting data into the Barnardos children’s services database were able to enter one source of referral when setting up a new referral. There are 30 discrete categories identified within the data related to sources of referral. Grouping the categories and merging some of the smaller categories provides insight into the sources of referral.

Looking at the broader categories for the PwP cohort in Figure 4.1, the majority of referrals came from Tusla and social work (53%, n=574), with self-referral the second most common type at 23% (n=250). Every other grouping of referral sources fell under 10% including community and welfare referral types (6%, n=67), mental health (5%, n=59) and education (5%, n=57). Below that are health services (4%, n=41), other Barnardos services (2%, n=20) and disability services (1%, n=12).

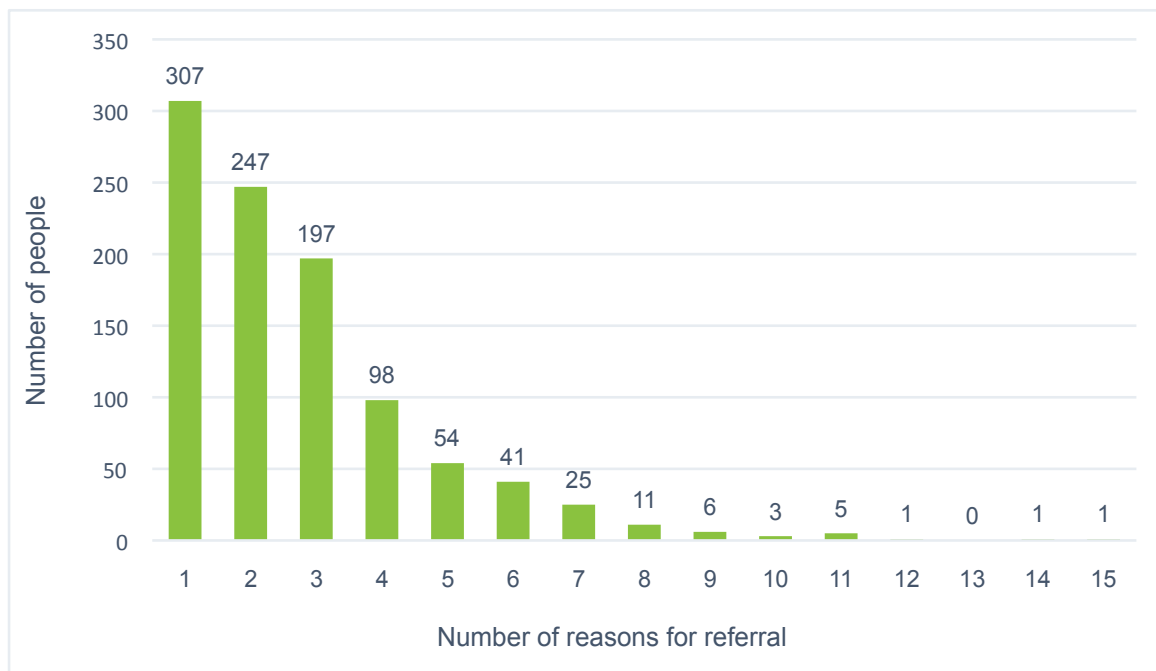


n=1,080 (missing = 391)

Figure 4.1: PwP referral sources

#### 4.2.1.2 Reasons for referral

Data for the PwP cohort over time provided insight into the most common reasons for referral. There were 997 people with a reason for referral recorded. In total, 44 reasons for referral were captured in the Barnardos database, often with multiple reasons for referral provided for each service delivery. On average there were 2.75 reasons recorded for referral, ranging from one reason to fifteen reasons. The highest number of people (n=307) were referred for one reason only (31%), with 247 referred for two reasons (25%) and 197 referred for three reasons (20%). (Figure 4.2)

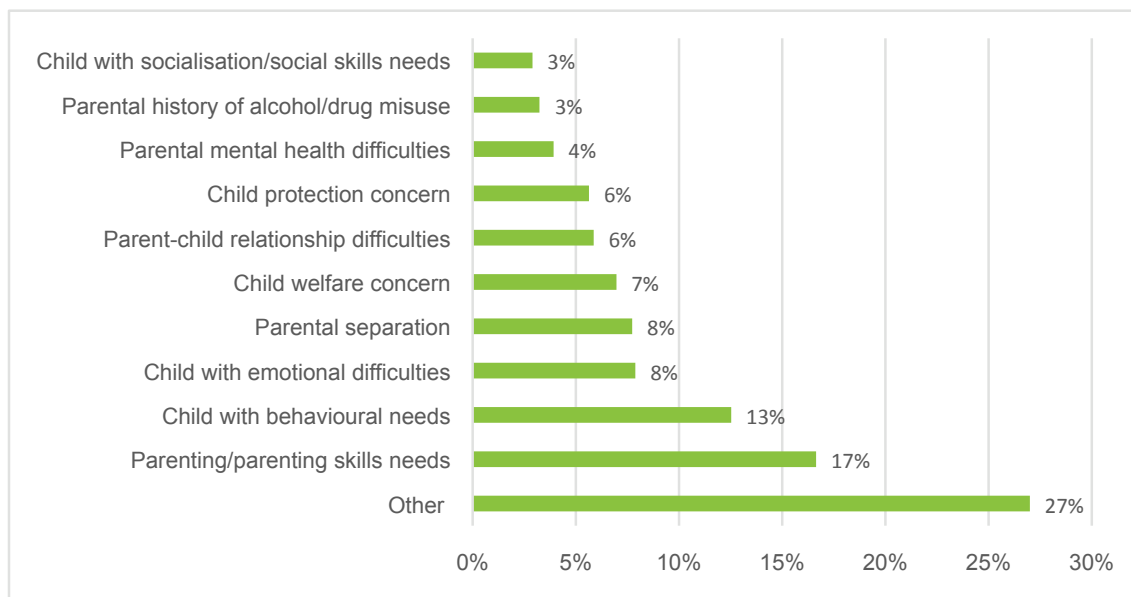


n=997 (missing = 341, no reason for referral recorded for 133 individuals)

Figure 4.2: Number of reasons for referral per person

The primary reasons for referral are presented in Figure 4.3. Exploring the primary reasons for referral, it can be seen that needs related to parenting skills was the most common reason for referral (17%, n=437). This was followed by children with behaviour needs (13%, n=329) and children with emotional difficulties (8%, n=207). This was followed by parental separation (8%, n=203), with parent-child relationship difficulties at 6% (n=154). Child welfare concerns accounted for 7% (n=183) of referrals, and can be grouped with child protection concerns (6%, n=148). Parental mental health difficulties accounted for 4% (n=103) of referrals, with a parental history of substance misuse accounting for 3% (n=85). Finally, children with socialisation/social skills needs accounted for 3% (n=77) of referrals. A further 34 reasons for referral were recorded, ranging from two referrals (0.1%) because the ‘child placement had broken down’ to 60 referrals (2%) for reasons related to ‘domestic abuse’.

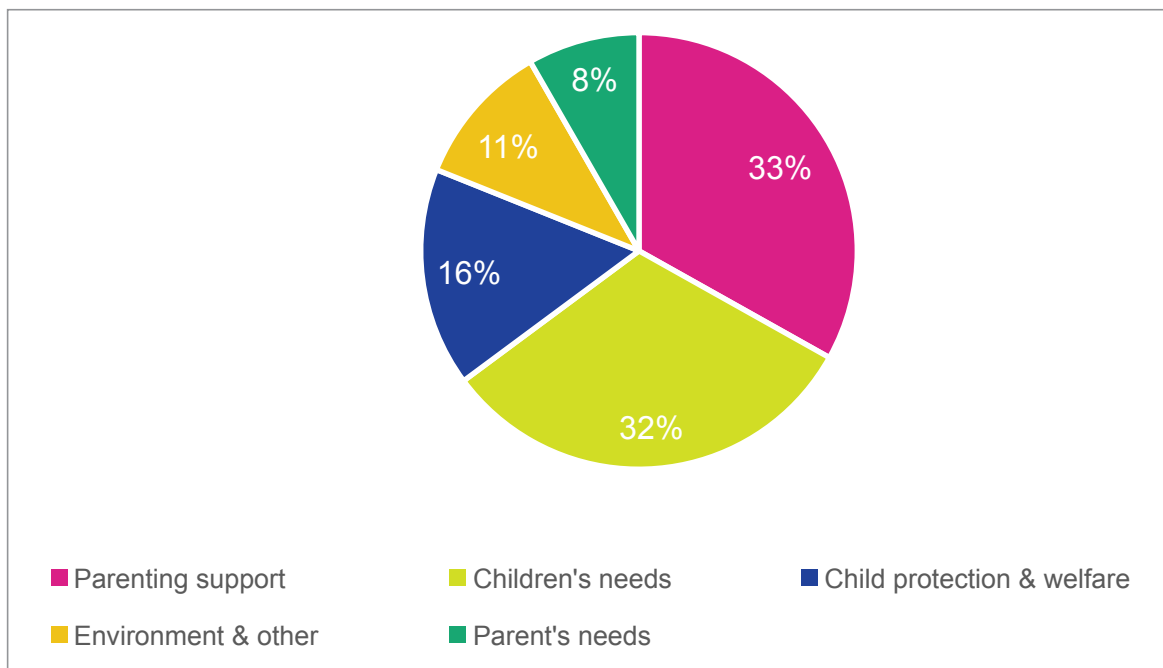




n=2,626 (within the Barnardos' children's services database, multiple reasons for referral are entered for each service delivery if they are provided by the primary referrer)

Figure 4.3: Common reasons for referral

In addition, all 44 reasons for referrals have been clustered and are presented in overarching groups (Figure 4.4). Grouping the data better reflects the full body of data, in addition to allowing for duplicate referral reasons to be merged (for example, child welfare and child protection). From the grouped referral data, it is evident that parenting support needs (33%, n=870) were the most common reasons for referral (see Figure 4.3). This group included needs related to parenting skills and parent-child relationship difficulties. The second most common grouped reason for referral were children's needs (32%, n=833), with this group including a broad range of needs including emotional needs, educational needs, communication needs and mental health needs. In these cases, work with parents carried the potential to contribute to positive outcomes and meet children's needs in addition to parenting support needs. Child protection and welfare needs account for the third most common reason for referral, amounting to 16% (n=426). Finally, parent needs account for 8% (n=218) of referrals in the PwP cohort. Parent needs include the needs of individual parents rather than needs in relation to parenting. This includes issues relating to mental health, addiction and crime.



n=2,626 (within the Barnardos children's services database, multiple reasons for referral are entered for each service delivery if these are provided by the primary referrer)

Figure 4.4: Grouped reasons for referral

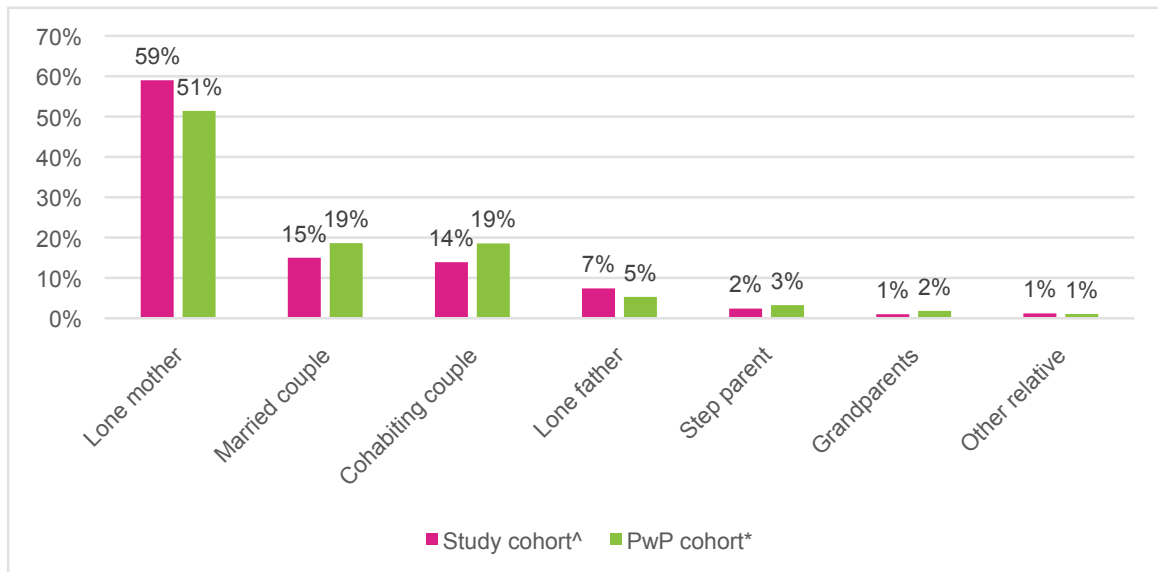
## 4.2.2 Profile of Participants

### 4.2.2.1 Family structure

Exploring the available data, and as demonstrated in Figure 4.5, the family structure of the study cohort was broadly in line with the overall PwP cohort.

The majority of total PwP service users were lone mothers (51%, n=679), followed by married couples (19%, n=246), cohabiting couples (19%, n=245), and lone fathers (5%, n=70). The remaining categories, all 3% or below, included step-parents, grandparents and other relatives.

There were similar findings in the smaller study cohort with the majority of participants being lone mothers (59%, n=201), followed by married couples (15%, n=51), cohabiting couples (14%, n=47) and lone fathers (7%, n=25). The remaining categories, all 2% or below, included step-parents, grandparents and other relatives. The data also provides insight into service users and study participants whose partners were also undertaking PwP. In total, 37% of the PwP cohort (n=416) had partners undertaking PwP. This was slightly lower for participants in the study cohort, at 31% (n=188).

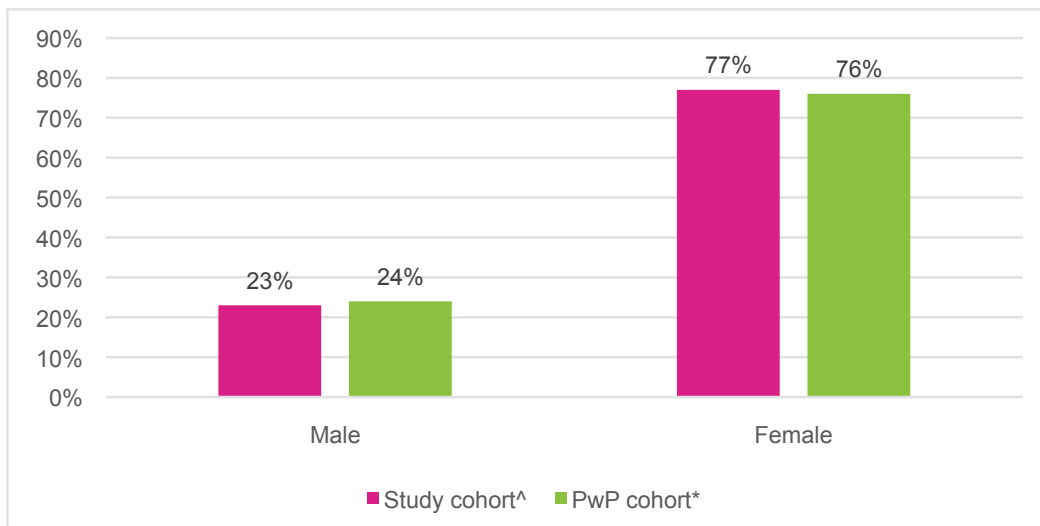


^n=339 (missing = 272) \*n=1,321 (missing = 150)

Figure 4.5: Family structure

#### 4.2.2.2 Gender profile of participants

Given the tendency for parenting support service users to be mothers, data on the gender of PwP service users and data on study participants was captured. The gender profile was consistent for data available across the PwP cohort (n=1,001) and smaller study cohort (n=541). For the overall PwP cohort, 76% (n=758) of parents were female, with 24% (n=243) male. For the study cohort, 77% (n=417) of parents were female, with 23% (n=124) male. (Figure 4.6)



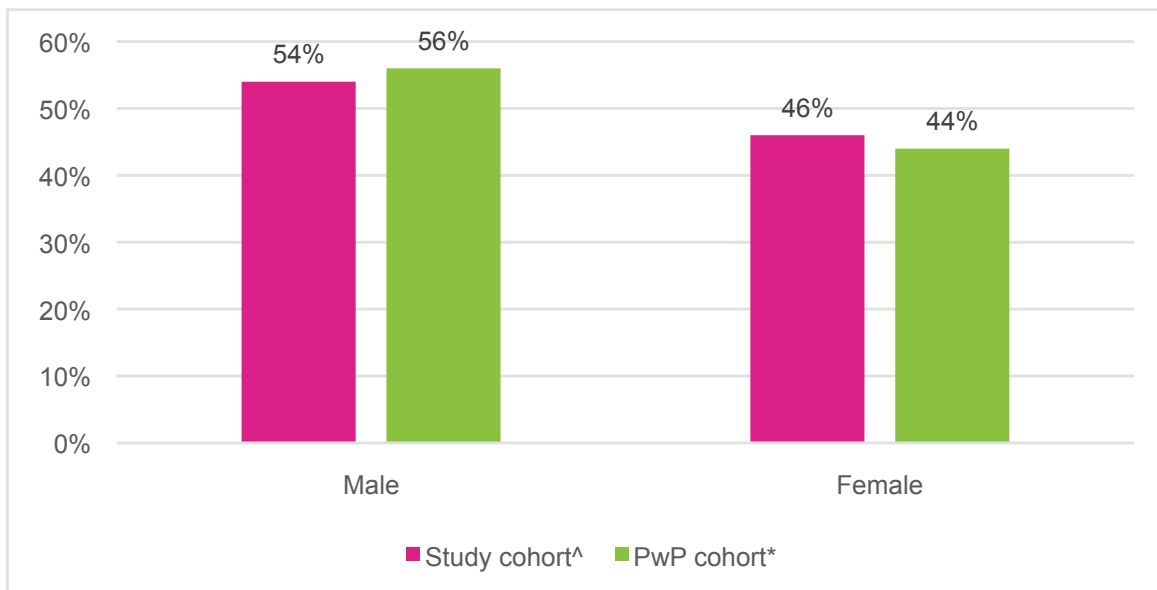
^n=541 (missing = 70) \*n=1,001 (missing = 470)

Figure 4.6: Parent's gender

#### 4.2.2.3 Children of PwP families

Available data were also explored for children of PwP service users<sup>14</sup>. Available data for the PwP cohort included age ranges and gender of children whose parents received PwP.

Looking at the gender of children whose parents received PwP, it can be reported that there were slightly more boys than girls in both the overall PwP cohort and the study cohort. Looking at available data for the overall PwP cohort (Figure 4.7), 56% of children were male (n=830), with the remaining 44% female (n=664).



^n=755 (families may have multiple children so number is higher than study parent cohort)

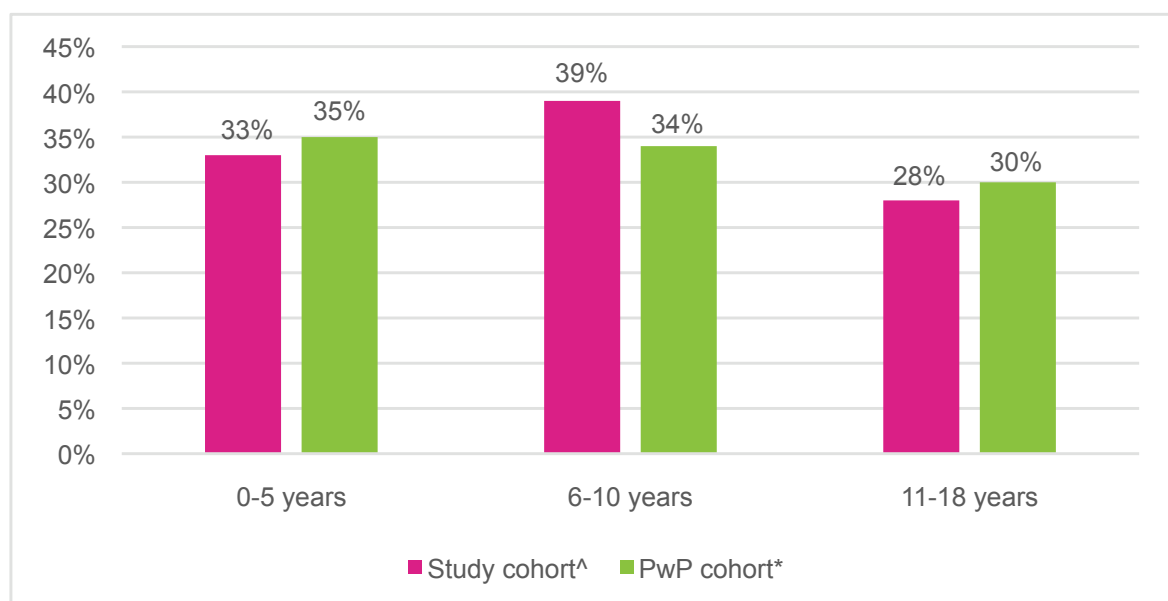
\*n=1,494 (families may have multiple children so number is higher than PwP parent cohort)

Figure 4.7: Children's gender

14 Duplicates were removed to avoid double-counting children whose parents both participated.

Looking at the age ranges of children of PwP parents, it can be reported that analysed data for the PwP cohort (n=340) broadly matched that of the study cohort (n=737). For the PwP cohort (Figure 4.8), 35% of children were aged 0-5 (n=120), 34% were aged 6-10 (n=116), and 30% were aged 11-18 (n=103). One participant was aged 19. The average for the PwP cohort was 7.7 years.

For the study cohort (Figure 4.8), 33% of children were aged 0-5 (n=241), 39% of children were aged 6-10 (n= 291) and 28% of children were aged 11-18 (n=205). No participant was over the age of 18.



^n=737

\*n=340

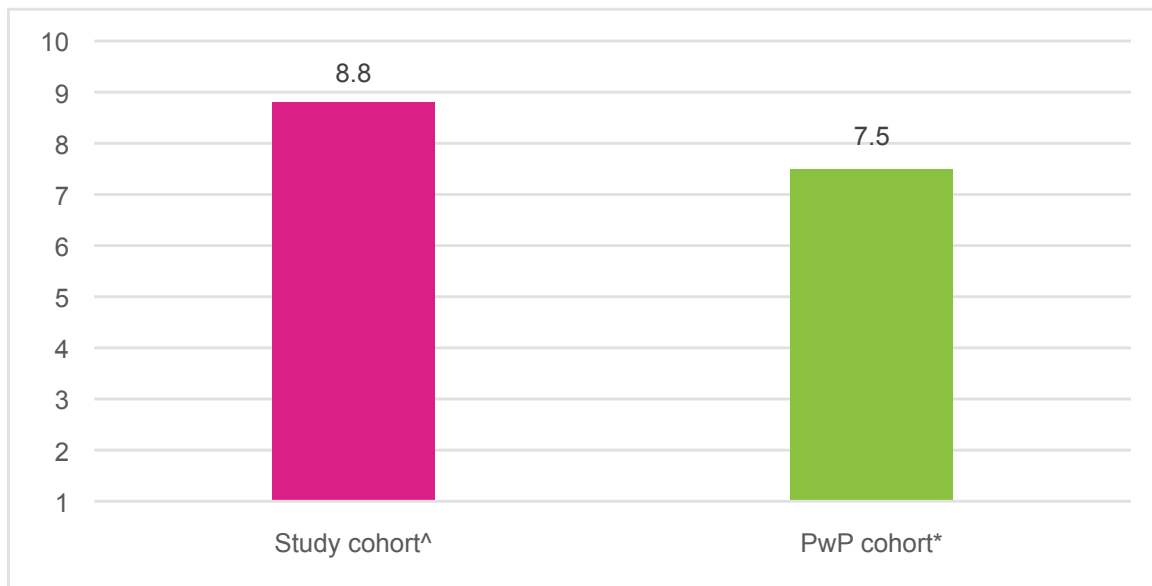
Figure 4.8: Ages of children

### 4.2.3 Programme Delivery

A range of programme delivery data is presented in this section, evidencing the mean experience of programme and study participants, in addition to highlighting fidelity to the model and approach.

#### 4.2.3.1 Service duration

After exploring the data available for service delivery duration, it can be reported that the average service delivery lasted almost nine months for the study cohort, compared to seven-and-a-half months for the overall PwP cohort (Figure 4.9).

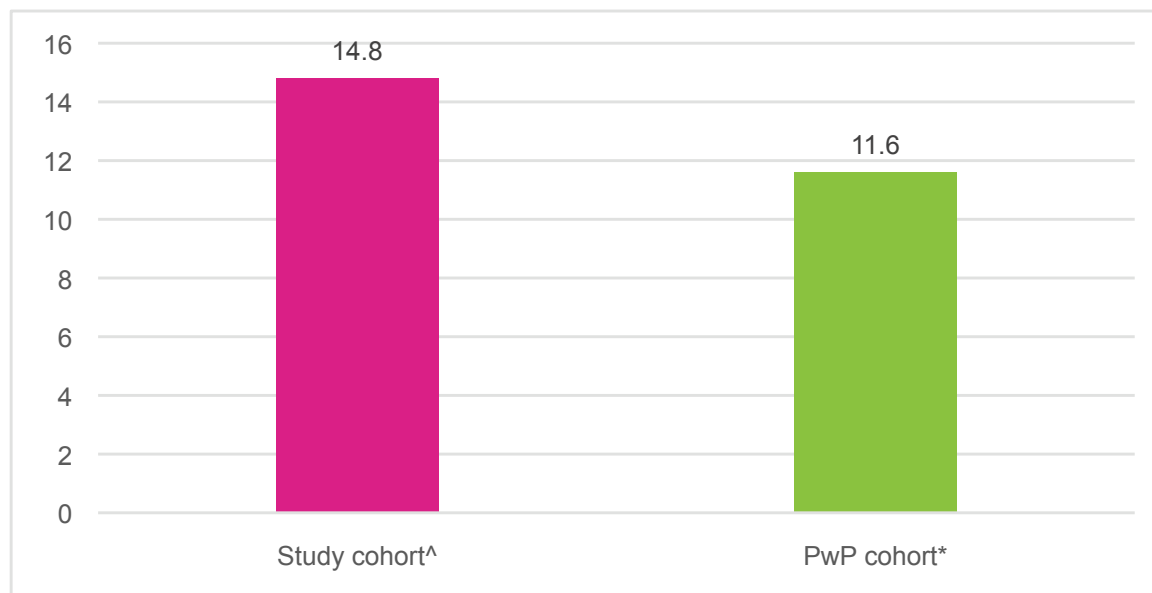


^n=471 (missing = 140) \*n=971 (missing = 500)

Figure 4.9: Service duration in months

#### 4.2.3.2 Number of sessions

Data on the number of sessions attended was analysed for both the overall PwP and study cohort (Figure 4.10). For the study cohort (n=538), the mean number of sessions attended was 14.8, slightly higher than the full PwP cohort (n=1,103), which averaged 11.6 sessions.

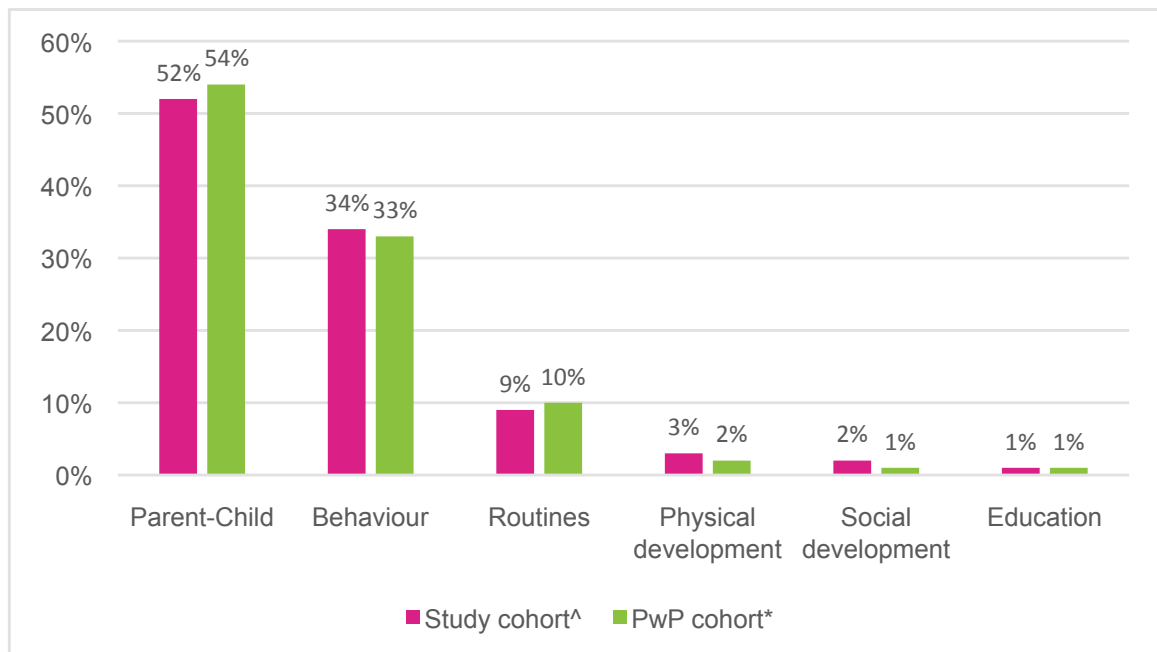


^n=538 (missing = 73) \*n=1,103 (missing = 368)

Figure 4.10: Mean number of sessions attended

#### 4.2.3.3 Plug-in usage

Exploring data on usage of the plug-ins, overlap was evident between the overall PwP cohort and smaller study cohort. For the overall PwP cohort (Figure 4.11), it can be seen that the most common plug-in used was parent-child relationship (54%, n=768), followed by behaviour (33%, n=466). Next was routines (10%, n=142), followed by physical development (2%, n=24). Finally, social development (1%, n=13) and education (1%, n=11) were the least commonly used plug-ins among the PwP cohort. Similarly, for the study cohort, it can be seen that the most common plug-in used was parent-child relationship (52%, n=306), followed by behaviour (34%, n=202). Routines accounted for 9% (n=52), followed by physical development (3%, n=15). Finally, social development (2%, n=11) and education (1%, n=8) were the least commonly used plug-ins.

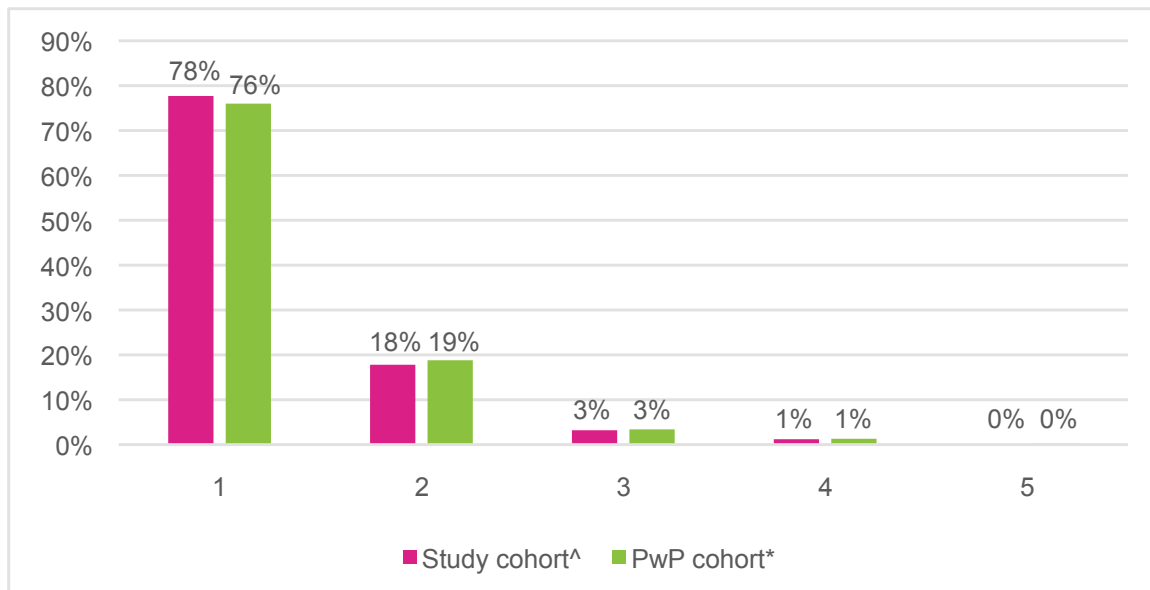


^n=594 (multiple plug-ins can be utilised in a single service delivery)

\*n=1,424 (multiple plug-ins can be utilised in a single service delivery)

Figure 4.11: Usage of plug-ins

Exploring the number of plug-ins completed for both cohorts, the most common scenario was that one plug-in was used with each service user (Figure 4.12). In the case of both cohorts, it was much less common that two or more plug-ins were used. Looking at the PwP cohort, it can be reported that one plug-in was the most common scenario (76%, n=862), followed by two plug-ins (19%, n=213). For the study cohort, again the most common scenario was one plug-in (78%, n=383), followed by two plug-ins (18%, n=88).



^n=494 (missing = 117) \*n=1,130 (multiple plug-ins can be utilised in a single service delivery)

Figure 4.12: Number of plug-ins used

#### 4.2.3.4 Crisis management and practical support

In addition to the six plug-ins, the PwP programme also offers guidance on approaches to crisis management and practical support. Usage for both was relatively low in the context of available data for all modules. For the main PwP cohort, there were 56 recorded uses of the practical support approach, accounting for 4% of all module data (n=1,521), and 41 recorded uses of the crisis management approach, accounting for 3%. For the smaller study cohort, there were 30 recorded uses of practical support, accounting for 5% of all available module data, and just 15 recorded uses of crisis management, accounting for 2% of all module data. While it may appear that these add-on modules were less commonly used, in reality it is likely that this type of work was undertaken with families but not recorded as part of a PwP module.



#### 4.2.3.5 Other service delivery

Additional data on other service deliveries (n=3,742<sup>15</sup>) received by the PwP cohort was exported from the Barnardos children’s services database. In total, 49 other service deliveries were captured for 1,114 service users also in receipt of PwP. The most common service delivered alongside PwP was individual work with the parent (11%, n=412), followed by practical family support (10%, n=384). Notably, crisis intervention was also recorded in 3% of cases (n=97). For the purpose of this report, the responses were grouped and are presented below (Figure 4.13). The top category of other service deliveries was assessment work at 27% (n=1,018), followed by family support work (21%, n=776). Following on from this was individual work with parents (19%, n=715) and interagency work (12%, n=458). Information, advice and advocacy work accounted for 10% (n=362) of other recorded service deliveries for the PwP cohort. Group work and other programmatic work accounted for 7% of other service deliveries (n=249), with child welfare and protection work accounting for 4% of other service deliveries (n=164).

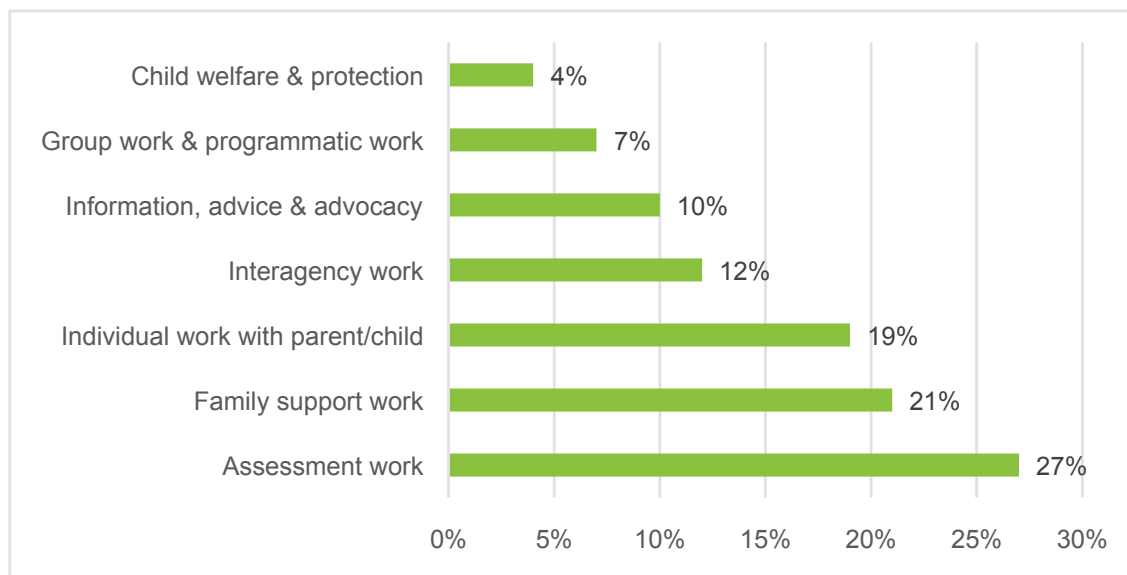


Figure 4.13: Other service deliveries

### 4.3 STATISTICAL ANALYSIS OF PCRI DATASET

The study cohort consisted of a dataset of 611 participants, from 2012–2017. Paired samples ranged from 197 pairs to 200 pairs<sup>16</sup> for each domain of the PCRI, representing 33% pre-post completion rate. A summary of the pre-post t-test results can be seen in Table 4.2 below, followed by a detailed explanation for each domain.

15 This number is larger than the overall PwP cohort as individual families may have had multiple service deliveries from Barnardos.

16 In a number of cases, there is missing data due to incomplete PCRIs. During the scoring of the completed PCRIs by the evaluation team, a domain with missing data were excluded but the other completed domains were included as each parenting domain is independent within the PCRI. Due to the domains not being inter-related during scoring, the range of total paired samples for the respective domains varied between 197 pairs and 200 pairs.

Table 4.2: PCRI t-test results

	Pre mean score	Post mean score	95% confidence interval	Sig (two-tailed)	Cohen's d effect size
Support	43.82	50.43	(-8.05, -5.19)	.00	0.6
Satisfaction	47.14	48.73	(-2.87, -0.3)	.016	0.2
Involvement	44.93	49.27	(-6.02, -2.67)	.00	0.4
Communication	43.14	48.61	(-6.93, -4.01)	.00	0.5
Limit Setting	42.62	48.33	(-6.97, -4.45)	.00	0.6
Autonomy	42.86	45.13	(-3.26, -1.28)	.00	0.3

#### 4.3.1 Support Scores

There was a statistically significant increase in Support scores from Time 1 (M=43.82, SD=10.71) to Time 2 (M=50.43, SD=10.54),  $t(198) = -9.12, p < .05$  (two-tailed). The mean increase was 6.61, with a confidence interval ranging from -8.05 to -5.19. Cohen's d indicates a medium effect size.

#### 4.3.2 Satisfaction Scores

There was a statistically significant increase in Satisfaction scores from Time 1 (M=47.14, SD=9.14) to Time 2 (M=48.73, SD=9.24),  $t(200) = -2.43, p < .05$  (two-tailed). The mean increase was 1.59, with a confidence interval ranging from -2.87 to -0.3. Cohen's d indicates a small effect size.

#### 4.3.3 Involvement Scores

There was a statistically significant increase in Involvement scores from Time 1 (M=44.93, SD=11.53) to Time 2 (M=49.27, SD=10.87),  $t(197) = -5.12, p < .05$  (two-tailed). The mean increase was 4.34, with a confidence interval ranging from -6.02 to -2.67. Cohen's d indicates a small to medium effect size.

#### 4.3.4 Communication Scores

There was a statistically significant increase in Communication scores from Time 1 (M=43.14, SD=10.41) to Time 2 (M=48.61, SD=8.87),  $t(199) = -7.4$ ,  $p < .05$  (two-tailed). The mean increase was 5.47, with a confidence interval ranging from -6.93 to -4.01. Cohen's  $d$  indicates a medium effect size.

#### 4.3.5 Limit Setting Scores

There was a statistically significant increase in Limit Setting scores from Time 1 (M=42.62, SD=8.30) to Time 2 (M=48.33, SD=8.65),  $t(200) = -8.93$ ,  $p < .05$  (two-tailed). The mean increase was 5.71, with a confidence interval ranging from -6.97 to -4.45. Cohen's  $d$  indicates a medium effect size.

#### 4.3.6 Autonomy Scores

There was a statistically significant increase in Autonomy scores from Time 1 (M=42.86, SD=7.14) to Time 2 (M=45.13, SD=7.57),  $t(200) = -4.53$ ,  $p < .05$  (two-tailed). The mean increase was 2.27, with a confidence interval ranging from -3.26 to -1.28. Cohen's  $d$  indicates a small effect size.

#### 4.3.7 Validity Indicators

The Social Desirability Indicator consists of five items that are rarely endorsed in the positive direction. A low score (9 or less) suggests that the parent is giving distorted responses intended to portray the parent-child relationship in an unrealistically positive light. The mean score for the PwP study cohort is 15.2 at baseline, and 15 at end-point. This indicates realistic responses from the parents.

The Inconsistency Indicator comprises ten pairs of highly correlated items. The response to one item in the pair in effect predicts the response to the other item. High scores (2 or higher) on this indicator suggest inattentive or random responding. The mean score for the PwP study cohort is 0.77 at baseline, and 0.69 post programme. Overall, this is a good indicator of a valid dataset.

#### 4.4 STATISTICAL ANALYSIS OF THE PARTNERSHIP WITH PARENTS™ ASSESSMENT WHEEL DATASET

Analysis was undertaken for over 100 matched assessment wheels. The purpose of the assessment wheel tool is to help the parents understand and reflect on the different aspects of their parenting, to identify the areas they believe they are doing well in and those that they may need support around. This assists the worker and parent to decide on which plug-in to start on. The assessment wheel domains correspond to programme plug-ins: parent-child relationship, routines, behaviour, social development, physical development and education. Parents provide scores ranging from 1-10, with one indicating a domain of parenting they are struggling with and 10 a domain in which they believe they are doing well.

The study cohort consisted of a dataset of n=611, from 2012–2017. Paired samples for wheels ranged from 104 pairs to 114 pairs for each domain of the assessment wheel<sup>17</sup>, representing 19% pre-post completion rate. Paired-samples t-tests were conducted to evaluate the impact of PwP across all domains. A summary of the results is presented in Table 4.3, followed by a detailed explanation for each domain.

Mean scores pre-programme ranged from 5.31 for Behaviour to 7.82 for Physical Development. Scores mirrored choice of plug-ins. At end point, scores ranged from 7.19 (Behaviour) to 8.47 (Physical Development). All domains besides Social Development had statistically significant gains over time. A possible explanation for the non-significant finding in the domain of Social Development is the small usage of the social development plug-in (2%, n=11) in the study cohort.

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<sup>17</sup> In a number of cases, there was missing data due to incomplete assessment wheels. As each domain was independently scored by the participant, a missing score in a single domain did not affect the score in the other domains so the range of total paired samples varied between 104 pairs and 114 pairs.

Table 4.3: PwP assessment wheel t-test results

	Pre mean score	Post mean score	95% confidence interval	Sig (two-tailed)	Cohen's d effect size
Parent-child Relationship	6.54	7.96	(-1.93, -0.91)	.00	0.5
Behaviour	5.31	7.19	(-2.34, -1.41)	.00	0.8
Routines	6.73	8.11	(-1.83, -0.93)	.00	0.6
Social Development	7.19	7.45	(-0.82, 0.3)	.36	NA
Physical Development	7.82	8.47	(-1.07, -0.23)	.003	0.4
Education	7.46	8.43	(-1.46, -0.46)	.00	0.3

#### 4.4.1 Parent-Child Relationship

Parent-child Relationship scores moved from a medium level of ease to a high level – post-intervention. The change was a statistically significant increasing from Time 1 (M=6.54, SD=2.28) to Time 2 (M=7.96, SD=1.78),  $t(107) = -5.56, p < .05$  (two-tailed). The mean increase was 1.42, with a confidence interval ranging from  $-1.93$  to  $-0.91$ . Cohen's d indicates a medium effect size.

#### 4.4.2 Behaviour

Behaviour scores moved from a medium level of ease to a high level – post-intervention. The change was statistically significant increasing from Time 1 (M=5.31, SD=2.21) to Time 2 (M=7.19, SD=1.82),  $t(106) = -7.97, p < .05$  (two-tailed). The mean increase was 1.88, with a confidence interval ranging from  $-2.34$  to  $-1.41$ . Cohen's d indicates a large effect size.

#### 4.4.3 Routines

Routines scores were high pre-intervention, but moved to even higher levels of ease post-intervention. The change was statistically significant increasing from Time 1 (M=6.73, SD=2.3) to Time 2 (M=8.11, SD=1.74),  $t(114) = -6.05, p < .05$  (two-tailed). The mean increase was 1.38, with a confidence interval ranging from  $-1.83$  to  $-0.93$ . Cohen's d indicates a medium effect size.

#### 4.4.4 Social Development

There was an increase in Social Development scores from Time 1 (M=7.19, SD=2.2) to Time 2 (M=7.45, SD=2.3),  $t(104) = -0.93, p=.36$  (two-tailed), however, it was not statistically significant. The mean increase was 0.26, with a confidence interval ranging from -0.82 to 0.3. While no significant change was reported in this domain, the level of ease was high pre- and post-intervention.

#### 4.4.5 Physical Development

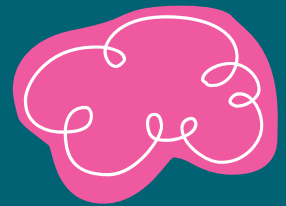
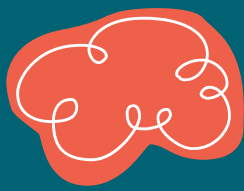
Physical Development scores were high pre-intervention, but moved to even higher levels of ease post-intervention. The change was statistically significant increasing from Time 1 (M=7.82, SD=1.97) to Time 2 (M=8.47, SD=1.75),  $t(108) = -3.08, p<.05$  (two-tailed). The mean increase was 0.65, with a confidence interval ranging from -1.07 to -0.23. Cohen's  $d$  indicates a small effect size.

#### 4.4.6 Education

Education scores were high pre-intervention, but moved to even higher levels of ease post-intervention. The change was statistically significant increasing from Time 1 (M=7.46, SD=2.64) to Time 2 (M=8.43, SD=1.67),  $t(108) = -3.81, p<.05$  (two-tailed). The mean increase was 0.97, with a confidence interval ranging from -1.46 to -0.46. Cohen's  $d$  indicates a small to medium effect size.

# Chapter 5

## Findings: Interview Series and Online Survey



## 5.1 INTRODUCTION

This chapter provides findings based on the data collected from a series of interviews and focus groups with parents, children, project staff, project leaders and stakeholders from six Partnership with Parents™ (PwP) sites, in addition to feedback gathered from an online survey of staff (Table 5.1).

Table 5.1: Summary of study respondents

Evaluation method	Timeframe	Respondents
Online survey of staff	Nov 2017 – Jan 2018	64
Interviews with parents	2018	30
Interviews with children	2018	17
Interviews with staff	2018	21
Interviews with stakeholders	2018	11

### 5.1.1 Demographics

#### 5.1.1.1 In-depth interviews

Interviews were conducted across six sites including: Athlone, Waterford, Dublin South, Limerick South, Tallaght (Dublin 24), and Mulhuddart (Dublin 15), with a total of 79 interviewees participating in 42 semi-structured interviews and 16 focus groups (Table 5.1). The majority of interviews were conducted with respondents from Limerick (n=31, 39%), followed by three sites in Dublin (n=20, 25%), Waterford (n=15, 19%) and Athlone (n=13, 16%). (Figure 5.1)



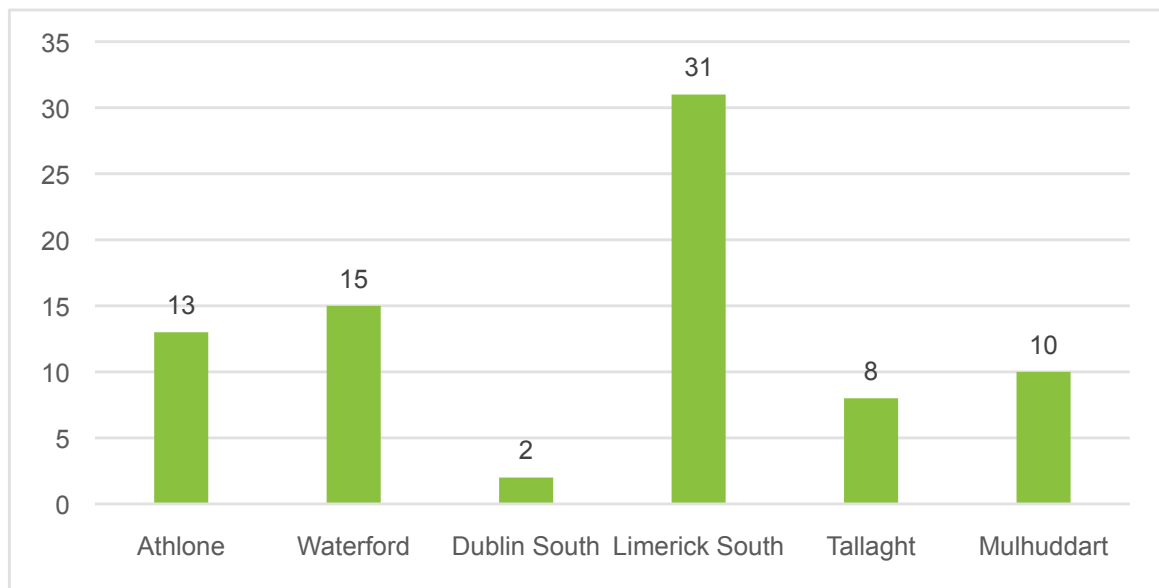


Figure 5.1: Total interviewees by project site

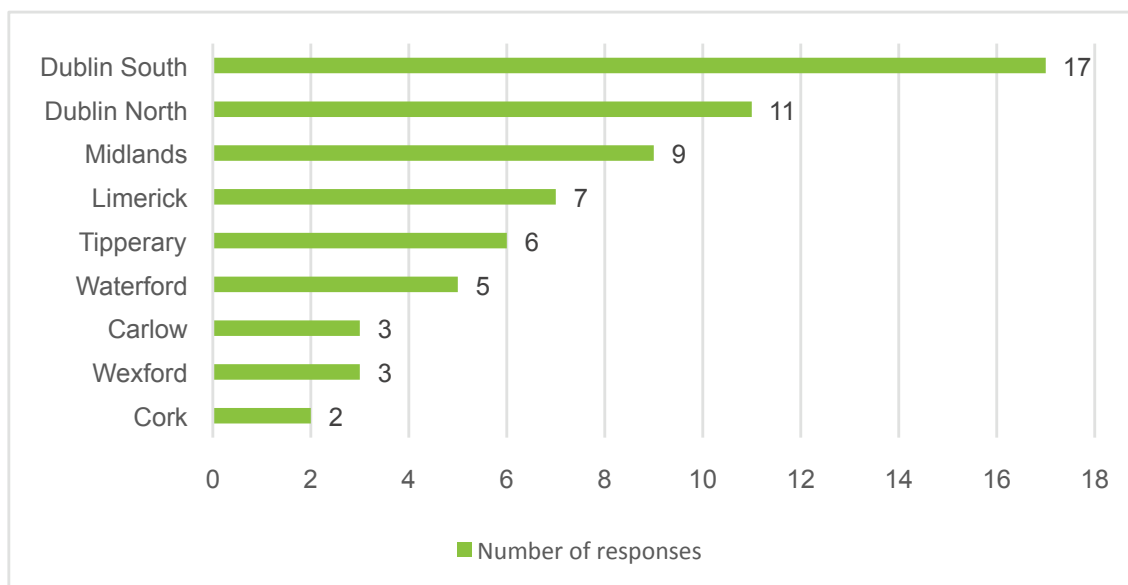
A further breakdown of the type of respondents is presented in Table 5.2. The majority of respondents were parents, with both mothers (n=23) and fathers (n=7) represented. Children accounted for 22% (n=17), with eight under 11 years of age and nine over the age of 11. Project staff represented 27% of respondents (n=21), followed by other stakeholders (n=11, 14%).

Table 5.2: Total interviewees by role and project site

	Athlone	Waterford	Dublin South	Limerick South	Tallaght	Mulhuddart	Total
<b>Young child</b>	0	2	0	4	0	2	<b>8</b>
<b>Older child</b>	1	4	0	4	0	0	<b>9</b>
<b>Mother</b>	4	3	1	8	3	4	<b>23</b>
<b>Father</b>	3	2	0	1	0	1	<b>7</b>
<b>Project staff</b>	4	3	1	6	4	3	<b>21</b>
<b>Stakeholder</b>	1	1	0	8	1	0	<b>11</b>
<b>Total</b>	<b>13</b>	<b>15</b>	<b>2</b>	<b>31</b>	<b>8</b>	<b>10</b>	<b>79</b>

### 5.1.1.2 Online survey

The majority of survey respondents were located in Dublin with 27% (n=17) based in South Dublin and 17% (n=11) in North Dublin (Figure 5.2). Dublin was followed by the Midlands (14%, n=9) and Limerick<sup>18</sup> (11%, n=7). The area with the lowest proportion of respondents was Cork<sup>19</sup>, representing 3% (n=2) of respondents. Figures were not proportional based on the overall delivery of PwP, but represented a variety of geographical locations utilising PwP across the country.



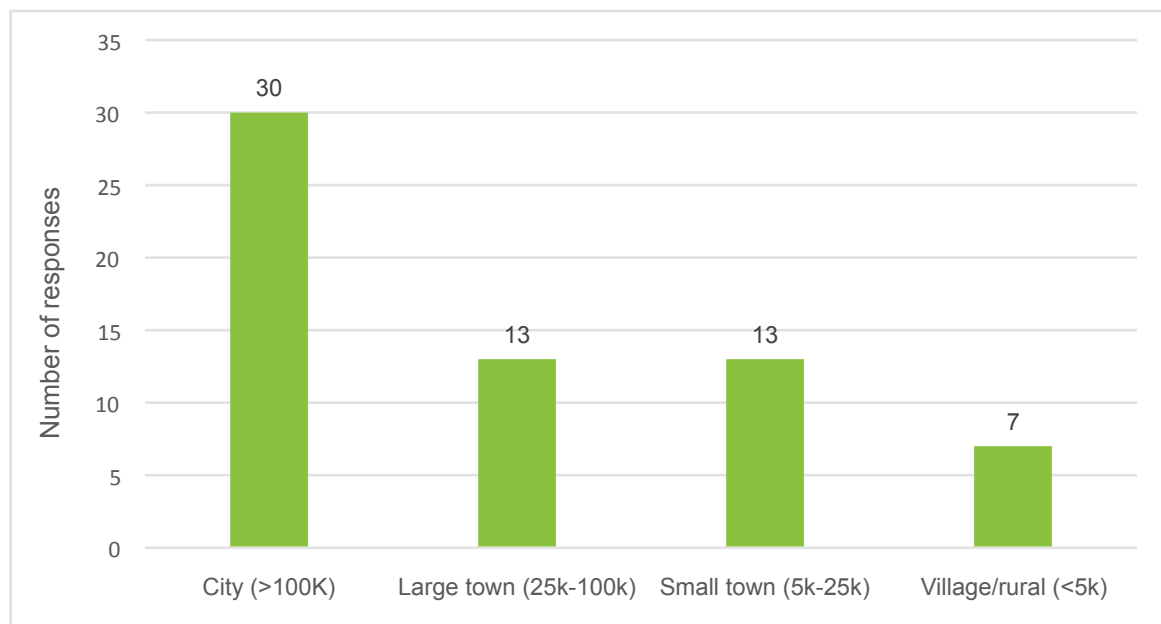
n=63 (missing = 1)

Figure 5.2: Survey respondents by area

Further analysis of the geographical data illustrates that the majority of respondents, 48% (n=30), were located within a city (Figure 5.3). Of the remaining, the majority were equally distributed across large and small towns, representing 21% (n=13) each, with staff delivering PwP in villages or rural areas the smallest proportion of the survey cohort at 11% (n=7).

<sup>18</sup> Limerick included all the projects based within Limerick city and Limerick county.

<sup>19</sup> Cork included all the projects based within Cork city and Cork county.



n=63 (missing = 1)

Figure 5.3: Area type of survey respondents

## 5.2 VIEWS OF PARENTS

### 5.2.1 Presenting Needs

The presenting needs of the 30 parents (23 mothers and seven fathers) interviewed tended to vary widely; ranging from child-specific issues, such as behaviour and poor school attendance, to more parent-specific issues, such as poor routines, lack of confidence and a sense of being overwhelmed. However, children and their needs were often the primary reason given for any parent starting PwP, particularly with self-referrals.

In one particular case, a mother self-referred to Barnardos for support in relation to parenting a young child. She reported that she lacked confidence in her parenting skills due to a 10-year age gap between her children. It was found in several cases that low confidence in one's own parenting ability was a secondary need that directly resulted from a perceived inability to resolve the primary reason for service involvement (e.g. managing behaviour). One mother described a cyclical process, prior to PwP, where she had sought advice for a presenting need, which led her to feel like a failure as a parent and, as a result of this decreasing confidence, she would isolate herself from her support network.

A number of separated parents who also worked full-time reported feeling overwhelmed while parenting their children and this resulted in them, as parents, feeling constantly tense and anxious:

*... when I first started I wasn't in a good place, even in my own head I wasn't in a good state. It was because of my kids I wasn't in a good state. I knew I wasn't coping, not the kids, but you know, life and then I was obviously not coping with the kids at the time.*

*Parent interview 001 (Mother)*

Another mother, when asked about her primary reason for participating in the programme, spoke about attending PwP to assist her in developing a successful morning routine for her children. Both children, under the age of four, were presenting with difficulties in line with those of Autism Spectrum Disorder (ASD) and their complex needs and behaviour were often difficult for her to manage:

*To be honest with you, before when I was so stressed with him, when he was having his tempers and stuff in the mornings I just wouldn't bring him to school.*

*Parent interview 002 (Mother)*

Another mother provided a lengthy example of a regular day in her life as a single parent to highlight to the interviewer why she was feeling constantly overwhelmed as a parent:

*I will give you a day, Thursday. Thursday, I had to get up, I had to bring [child] to school, I had to go and collect my money, I had to go into town and get my shopping. I had to go to the doctors with the kids. Go down to the [shopping centre], do the shopping, taxi refused me so I had to walk home. Then I had to go back down and collect [child] because he gets out at 2:25 because he is getting bullied inside in school. Then when I go up to the school I have nothing but complaints. Then I am walking back down the road and my young fellow is giving me the height of cheek, you know what I mean? You can't do nothing, what can you do? Then when I get home it is really hard because you are after doing a day's work, after walking all day long, and you are coming home to clean the house, make a dinner, clean up the mess after them, make sure they are showered, make sure they change into clean clothes, make sure their rooms are spotless. Put the kids to bed, then they are whinging, one is teething, another one is roaring for a bottle.*

*That is the way it is.*

*Parent interview 003 (Mother)*

Other reports of feeling isolated were highlighted by single parents with limited social networks. Feelings of isolation were not limited to sole parent families, however, which is not unusual. One parent from a two-parent family reported feeling isolated due to a lack of informal support and effectively parenting alone due to the mental health needs of their partner.

Several parents reported challenging behaviour from their children as being the primary reason for referring to Barnardos for parenting support. One referral was due to a child becoming very angry and aggressive at home. This behaviour started around age 12 and the relationship between mother and daughter grew so strained that the mother was considering placing her daughter into voluntary foster care. Another mother of three reported struggling with two boys with behavioural issues, which often resulted in physical altercations between the two children.

A number of parents noted that the primary need for their children and themselves was a stable routine. In some cases, the lack of routines was not due to lack of intent or desire to implement routines, but due to other emotions and feelings based on past experiences with their children that were unresolved:

*Because one thing that I was very bad with my girls was routine.*

*You see for a long time ... I have guilt from the past so for a long time I was letting my girls walk over me. So even putting them to bed I felt that I was doing them wrong, where I knew in the end that I wasn't, I was doing it for the best that I could.*

*Parent interview 001 (Mother)*

A mother reported poor school attendance as the main presenting need, as her younger son would not leave the home or interact with anyone and this had been going on for a number of years:

*... he just wouldn't go out, he wouldn't interact with anybody. He wanted to be on the X Box 24/7 and he just didn't interact with anybody out on the road. He wanted to be in the whole time and he didn't want to go out.*

*Parent interview 004 (Mother)*

Similar presenting needs were highlighted by another mother with a young teenage son who would not go to school and had isolated himself at home.

### 5.2.2 Source of Referral

A number of parents who had multiple presenting needs for their family and required some additional support self-referred to Barnardos after being advised to complete PwP by social workers on their local social work duty team. This corresponds with the relatively high number of self-referrals reported in section 4.2.1.1 of this report. On a few occasions, the families interviewed were referred to Barnardos by social workers after no engagement occurred between the children and statutory bodies. Separately, during a meeting with a school principal concerning the behaviour of one of her sons, the principal suggested to another parent to explore if Barnardos would be able to offer any support.

### 5.2.3 Relationship with Project Worker

Parents reported that, in the main, they had a very positive relationship with their project worker, which was based on trust and openness. A mother who self-referred due to lack of confidence in her parenting ability expressed high levels of trust in her project worker:

*I genuinely would be lost without her, not even to do with kids, in my own personal sense, she has just been a fantastic support all round.*

*Parent interview 005 (Mother)*

When asked how she would describe her relationship with the project worker, a parent valued the project worker not knowing her or her family. This allowed her to trust the project worker's input and suggestions into her situation:

*Even if you are thinking that you are a very good parent and love your children and whatever it is, it is very good to see, not see, but hear questions from people who doesn't know you, simple questions about you starting to think. Because when you are living your usual life ... what has happened sometimes looks like it is usual, it is normal, but the people are starting to ask and you start to think, my God there is something wrong.*

*Parent interview 006 (Mother)*

In one interview, a father discussed how he and his wife formed strategies and plans in collaboration with the project worker and then practised them to see if they worked:

*[Project worker] would make suggestions, they wouldn't be orders, she would make suggestions, we would try them out, if they worked, they worked, fine, and if they didn't, they didn't.*

*Parent interview 007 (Father)*

The majority of parents noted that the project worker would arrange the PwP sessions at the same time each week. A parent reported that they just got used to the project worker calling each week. This regular and consistent approach appeared to ensure completion of the programme and reduce the number of missed sessions as parents had a time set aside each week to reflect on their parenting. Most of the parents did not find the hour-long sessions challenging and often reported that they looked forward to the sessions.

One parent noted that her project worker was very flexible with the delivery of the programme, particularly regarding times and locations, due to the caring demands on the mother. Another parent valued the availability of staff outside of the weekly hour of the PwP programme to answer queries regarding their child:

*It is a help and if I am ever stuck, even if I am stuck to get an appointment or if I am stuck for help with [child] or have questions on any of the kids I can just ring and ask.*

*Parent interview 002 (Mother)*

#### **5.2.4 Content of PwP Programme**

Parents and project workers often decided on which plug-in to use in a conversation together. A number of parents recalled using the assessment wheel as a method of choosing the appropriate plug-in. Parents often felt that the chosen plug-in was the right approach for them at that particular time.

In one case, where a child also attended an early years service, the parent and project worker organised a meeting with staff from the early years service to discuss the child's needs and which plug-in would be most appropriate to focus on at the time. This demonstrated a consideration of the project worker to involve all people providing input to the child in order to establish the most effective plan for the child's needs.

Some parents found the PCRI questionnaire to be helpful as a tool to evaluate their parental relationship prior to starting a plug-in:

*It is a nice tool. I mean rating yourself to say do you not have a relationship with your child, do you think your child can trust you? Do you think you can trust that child? We were being truthful.*

*Parent interview 008 (Mother)*

A parent noted that, with a family of three children, after completing the routines plug-in, it took over 12 months to implement all the daily routines that the family uses. These routines have been so successful that the parent reported that her children had not missed a day of school in four years. Other parents reported that they had successfully integrated strategies from the routines plug-in to their child's daily life. Other parents noted when they implemented the routine board at home, it was very helpful in reducing their child's frustration, as they were able to orientate themselves better within their daily schedule.

Some parents found the parenting log helpful, as they were able to write down and organise their thoughts and reflections. Other parents appreciated the structure of the parent-child relationship plug-in:

*It is easy to understand and it is easy to work along with chapter by chapter. It is one step after the other, it doesn't just jump to a topic without delivering the first part, doing the sessions that needed to be done before the last session.*

*Parent interview 008 (Mother)*

One parent, whose child had a diagnosis of ASD, noted how successful the behaviour plug-in had been with helping them to manage their child's behaviour and establish boundaries and expectations:

*... things had improved once we started doing that and applying it improved greatly, the situation in the house with [child]. Say coming up to the summer, from the summer on, because we did a lot of work when he was home from school then over the summer we did a lot more parenting obviously with him because we had him at home more. And then by the time he went back to school in September he was almost back to himself.*

*Parent interview 010 (Father)*

Parents noted that the scenario-based exercises within the behaviour plug-in was the component that allowed the greatest point of learning:

*We went through the book, the behaviour, ... she [project worker] was able to elaborate on that and explain and give scenarios, take scenarios in the house and use them as examples. We would give her information and she was able to explain to us about how to handle that, you know.*

*Parent interview 010 (Father)*



Most parents reported that the parent's activity booklets (which they referred to as 'workbooks') used with each plug-in were easy to follow and understand. They found the parent's activity booklets very useful and did not require a lot of time to provide input. For a number of other parents who were anxious about the PwP programme, the parent's activity booklet seemed to be beneficial as it provided parents with a reference point or grounding in the material:

*Being able to go back [to the workbook] to where it was saying what kind of approach you had to parenting, were you authoritarian, were you this.*

*Parent interview 011 (Mother)*

The review meetings were also highlighted as allowing space and opportunity for the parents and project workers to look at the overall needs of a family and see if any areas may require some input. Sometimes the conclusion of a review meeting would be the need for a second plug-in.

### 5.2.5 Changes for Children

The majority of changes reported were linked to the parent-child relationship, corresponding to the quantitative findings where this plug-in was most frequently utilised (section 4.2.3.3). After completing the parent-child relationship plug-in, one parent noted seeing a large change in the relationship with her child:

*She seems to have matured an awful lot and I think she realises now how much she is actually loved at home. I wasn't probably showing her how I loved her in the way that she wanted to be shown.*

*Parent interview 012 (Mother)*

A parent who reported that her two sons' behaviour was her family's main presenting need noted that their behaviour was not as severe as it had been before, that it was now a normal level of conflict between male siblings. She reported being able to leave them for a few minutes upstairs in the home without the fear that one of them was going to get seriously hurt in her absence.

One father reported improved social interaction for a child who did not want to go outside or interact with people, and was now going outside:

*We came up with a plan with [child] and ourselves to get him out more and keep him off the X Box, give him a couple of hours during the day, give him less time on the X Box, and we did that.*

*Parent interview 007 (Father)*

Other parents noted similar experiences of children's social interaction increasing as the parent-child relationship improved. An older child (15 years old) was now attending a new sports club twice a week and meeting new people from outside his home.

Parents also reported improvements in routines and school attendance. While considering the high number of days of school missed by her children prior to PwP, a mother reported dramatically improved school attendance for her two youngest children after years of poor attendance:

*Because since September I would say the two smallies missed four days because they were sick. They were missing weeks. They would have missed a week and a half in one month and then two weeks in another month and then it was like I just didn't care.*

*Parent interview 004 (Mother)*

For older children, parents reported that their attendance at school and ability to have a consistent morning routine had greatly improved. In a case where an older child refused to attend school in any capacity, after PwP he changed his mind regarding attending school and articulated a desire to finish school and go to university.

Separated parents reported improvements in family functioning and their child's ability to cope with change. A separated parent (mother) shared a story of how her daughter had learned to engage confidently with her father who was not living in the home and set boundaries and expectations in this relationship. Guidance on navigating this challenging area of her life was provided by a project worker through the strength of the relationship built during PwP. A separated parent reported how PwP had benefitted her younger daughter in dealing with the constant change associated with shared access. A parent told of how her daughter told her sibling that she would help him to understand change as she learned about change from the project worker in a session.

### 5.2.6 Changes for Parents

Parents reported that PwP had positively affected their relationship with their children and had helped foster mutual trust in the relationships. This was evidenced by the reported pre-post outcome improvements across most domains in both the PCRI and PwP assessment wheel (sections 4.3 and 4.4). In one interview, a mother talked of the importance of mutual respect in the parent-child relationship:

*Now I find when I say things that [child] actually respects what I say, even though we don't always see eye to eye on things ... she seems to have gone back into being a child.*

*Parent interview 012 (Mother)*

*It has made more of a stronger bond with both kids because [project worker] certainly helped to ... Like in the mornings [male child] would go to school so then I have just [female child], so that is bonding time for myself and [female child], so we play games or we do stories or something, or even dancing, because she loves dancing. And then in the evening time at 1:30 she goes to school so then it is just me and [male child] and I am on my own there with [male child] so if I have any issues or anything I can ring [project worker] because it is difficult at times. So, we would often sit down and read a story together or we would play games.*

*Parent interview 002 (Mother)*

Some parents noted, simply, that the improved relationship with their children allowed them to spend time with their children and do fun activities. This further impacted on parental perceptions of self-efficacy and confidence in their roles. Parents also reported improved confidence and reduced anxiety through the knowledge that the project worker was available to them if required. Some parents reported a sense of empowerment as they realised that they were able to complete aspects of parenting for themselves after an initial period of support. A mother reported feeling more in control as a parent, exercising greater consistency, and a reduced need to resort to punitive actions with her daughter to get the expected behaviour. A similar sentiment of restored parental role was expressed by another parent:

*You realise that we are the adults and the child isn't, you know what I mean?  
And to listen to him, not to react straight away.*

*Parent interview 010 (Father)*

One parent with young children who had complex developmental needs cautioned against the idea that any parenting programme can solve all of a family's presenting needs. She did, however, acknowledge the gradual benefit of PwP in her case in helping her to cope as a parent by increasing her capacity rather than lessening the complex presenting needs. Successful results for a parent can be, as in this mother's case, that the routines plug-in had helped her to implement a routine. Several parents expressed confidence that they felt prepared to deal with various parenting issues if they resurfaced in the future, but also if new challenges arose.

Of significance for parents was the need to develop reflective capacity. With reflection being a core element of the PwP programme, a parent reported being challenged to reflect on issues they may not have considered before. Several parents reported being able to see things from a different perspective and being able to complete parenting tasks in a different way:

*Sometimes it does ask questions that you don't really know or want to answer because you don't really think about them, but it does make you think. And that is a good thing.*

*Parent interview 005 (Mother)*

*One thing that I found stood out for me, it brings your feelings out. A lot of people don't talk about their feelings.*

*Parent interview 001 (Mother)*

A parent who identified as having a 'disciplinarian' style of parenting reported changing their parenting style after incorporating strategies from PwP, with other parents implementing new strategies, and a father reporting positives changes for his children.

*It [PwP] changed the way we approached, completely changed the way we approached our parenting.*

*Parent interview 010 (Father)*

*Since we started with Barnardos they have changed our way of thinking, they have changed our point of view.*

*Parent interview 007 (Father)*

Parents described seeing things from their children's perspectives. One parent reported understanding better the possible source of her daughter's emotions, which were most likely impacted by a parental separation during her early years, indicating increased empathy.

*And it was that, it was looking at seeing things from my children's [point of view]... seeing me as a parent from my children's perspective. I would never had stepped into their shoes without the guidance of this programme, ever*

*Parent interview 015 (Mother)*

A parent who identified feeling tense and anxious as an initial presenting need, upon completion of the programme recognised an improvement in mental health, which had improved her capacity as a parent and her enjoyment of the parenting role:

*My head wasn't in the right place because I hadn't got routine. I wasn't being mummy; do you know what I mean? But now I am being mummy and life is so easy, life is so easy right now for me which is great.*

*Parent interview 001 (Mother)*

### **5.2.7 Changes for Families**

Parents reported feeling very happy with the improvement in behaviour and routines, impacting on family functioning as a whole. One set of parents attributed engagement with PwP as enabling them to have their family all sitting around the table talking. Another single parent felt that the work of PwP helped her children and family life become much calmer:

*My two girls now are at school, I can go out and do my shopping, clean my house, do whatever I have to do, whether there is a job in the mornings. Before I couldn't do that because they'd be running around screaming, shouting, not listening to mummy. Now it is a lot different. It changed my life.*

*Parent interview 001 (Mother)*

*Being able to actually get a routine in place because before I had no routine at all and there were all different hours they were going to bed and stuff.*

*Parent interview 002 (Mother)*

Interestingly, a mother reported that improvements to the family home were the biggest change for the family of seven. Practical support was offered to the family prior to beginning any of the plug-ins and it demonstrated three important factors. Firstly, it highlighted the necessity of a home environment to be in a state of relative calm (rather than chaotic) - in order to allow a family to thrive. Secondly, this example underlined how practical support is an invaluable component of PwP and is often required to create stability prior to the parenting input. Thirdly, the ability to offer practical support as part of a parenting programme demonstrated to parents that they are viewed in a holistic manner with multiple inter-related needs.

*The biggest change is the house is more settled, the family life is more settled. We seem to be getting on. I won't say we weren't getting on beforehand but we seem to be getting on 100% better.*

*Parent interview 013 (Father)*

A single parent with young children emphasised another perceived benefit of practical support offered through PwP. This parent spoke about how the project workers would organise day trips for the family and play with children in order to allow the parent to have some respite.

### 5.2.8 Strengths of PwP

Parents spoke about the strengths of the programme more broadly. Parents described how the learning from the programme could be extended or applied to other children. Some parents valued the additional support that they received from the project worker with other children who were not necessarily the source of the referral. This represented an advantage of the home-based approach.

In one example, for a family who had four children in school, PwP was focused on a younger son initially, as there were presenting needs concerning school attendance and lack of interaction with others. Over time, the sessions were expanded to include two other children in the PwP programme, a son and a daughter. The daughter had issues over school attendance while the inclusion of the second son was due to difficulties in getting him to attend school and other behaviour issues – fighting at school and verbal abuse to the parents.

*Yeah so instead of doing one we said we get all three of them together and sort things out ..., it was a lot easier to manage around the three of them and the suggestions that [the project worker] made.*

*Parent interview 004 (Mother)*

*... in the home she could watch, even the relationship with the other kids and help us, asking us questions and asking, 'How do you, with this age group, if this child does this, what would happen?' So, it wasn't just about the one child, it was about the other kids from different age groups.*

*Parent interview 008 (Mother)*

When considering her degree of input into the delivery of the programme, one parent described how the programme felt tailored and could be adapted to their needs, or changing circumstances.

*I won't say it is moulded for you but it feels like it is.*

*Parent interview 005 (Mother)*

Parents also expressed satisfaction with the nature of the content. After initially expressing some apprehension over the PwP programme, fearing that it may be unrealistic in its expectations of her as a parent, a mother was surprised to find that it was very practical and realistic in its expectations:

*I wasn't expecting it to be so practical, but it was very, very practical. In the play, they weren't expecting you to play with your toy like 24/7, just like give a small gap of twenty minutes per day of play and stuff like that.*

*Parent interview 005 (Mother)*

Parents reflected that key to the programme's success was the non-judgemental relationship with their project worker. Following a report to social work department due to physical abuse (smacking), another couple identified the importance of being listened to and understood as a key mechanism in changing their approach to parenting and discipline:

*She [project worker] tried to understand us from our point of view, she was listening to our own needs. We thought our needs were going to be neglected but we felt understood, but she was able to understand us and then bring us around to a better way of dealing with the situation instead of having to smack the child.*

*Parent interview 008 (Mother)*

Parents also reported that their project worker provided a source of advocacy support during a challenging time. One couple noted that PwP, with a focus on the parents along with children, added a balance to the work and focus of other agencies within this trying process. The project worker was able to fulfil an advocacy role for the parents to ensure optimal outcomes for the children and parents:

*The two parts started working together, the social worker and Barnardos started working together to put missing pieces together. And that helps the balance. When we were able to express to Barnardos, [the project worker] was able to present it in a better way to the social worker. And the social worker was able to work along with the child, telling the child that the parents are still the parents and they are still taking care of the needs and sometimes you need to listen to your parents.*

*Parent interview 008 (Mother)*

In addition, when schools were involved in the initial referral or if it would be helpful, project workers often linked in with the school. In one case, the project worker organised an interagency meeting with six other people involved with the child: parents, teacher, liaison officer, school principal and play therapist. When asked to consider some of the advantages of PwP, a project worker felt that PwP complements other statutory services that were providing support to families – a sentiment that was reiterated by a parent:

*And between the two services I am now seeing a different child, I am getting the child back that I had.*

*Parent interview 012 (Mother)*

One parent reported that, after completing PwP, she was confident in knowing that there were supports out there for struggling parents, which also suggests her willingness and ability to seek out further supports for her family, if needed.

When asked by the interviewer whether they would recommend the PwP programme to other parents, several parents had already recommended the programme to other parents who had subsequently self-referred to Barnardos for PwP. The option for parents to be able to self-refer to PwP is an important component of the programme, as parents will often know other parents who have the same presenting needs and who may also benefit from PwP. Furthermore, referrals from other parents tend to carry an additional weight due to the solidarity within peer support.



### 5.2.9 Challenges with Implementing PwP

The multiple adversities faced by parents presented the most significant challenge when implementing PwP. Notably, parents who struggled with housing insecurity voiced concerns with maintaining the positive changes resulting from PwP. One parent worried that her hard work around routines would be jeopardised due to insecurity of tenure:

*So, keeping a routine going is actually what keeps me going but being homeless is going to... I am worried everything will just fall apart and I will fall apart with it.*

*Parent interview 014 (Mother)*

Parents also expressed difficulty with routines, often associated with other needs. Parents reported that they often agreed upon the routines in theory, but that implementing the routines was much more difficult in practice as often one parent relented on the agreed plan. Connected to this were issues separated parents faced with consistency of routines, where the children received different messages in different homes:

*... there were times where she [wife] wouldn't let him [son] do something and I would let him do something because it would wreck my brain. She would say one thing and I'd say, whatever, or I'd let him do something and she wouldn't agree. So, we [my wife and I] had to come to an agreement where we both had to say yes or no and that was it.*

*Parent interview 007 (Father)*

Time constraints presented as an issue for some parents. This is an important factor, considering the average duration of the programme was nine months (section 4.2.3.1). A number of parents noted how challenging it was to find the time to attend sessions. In one instance, where both parents were self-employed, the father was unable to leave work, so the mother was trying to provide him with a summary of the sessions and the main lessons learned. However, the parent noted how flexible the project worker was regarding organising sessions around the parents' schedules. Other parents who acknowledged their difficulty in engaging with the programme on a regular basis were single parents with a number of young children. They would often miss appointments due to the challenges of managing a number of young children.

### 5.3 VIEWS OF CHILDREN

Partnership with Parents™ (PwP) is a parenting programme, however the ultimate goal of PwP is to improve outcomes for the entire family. While children are not formal participants of the programme, they are likely to benefit from the changes in their parent's approach. With this in mind, the views of children were sought as part of the evaluation, and are summarised below.

#### 5.3.1 Views of Young Children (Under 11 Years)

##### 5.3.1.1 Remembering PwP

When eight young children, aged between five and ten years, were asked to recollect their memories of the PwP programme, the majority of younger children talked about their project workers in a very positive way. Since the primary focus of PwP was working with parents, however, it was entirely understandable that the children had little insight into the work between project workers and their parents as these sessions usually took place when the children were in school. However, children remembered the project workers coming to their home and noted the activities and trips – picnics, making puzzles, going for hot chocolate – that occurred during the PwP programme.

The comparison of PwP with schoolwork was drawn by one child as he described the visits from the project worker feeling like schoolwork. He did not mind the project worker being present in his home, however, he reported that the project worker was not someone who meant a lot to him, but somebody he knew.

Another child from a separated household, living in an alternating schedule with both parents, identified the project worker as someone who meant a lot to her. She remembered the project worker visiting the household each week and completing the workbook, which she thought was 'very easy'. Further to the established rapport between the child and project worker, she also identified that the purpose of the visits to her family home was to help her.

##### 5.3.1.2 Remembering feelings

When the PwP home visits began, some children noted apprehension at the start, particularly with a person they were not familiar with coming to their home. One child noted that he 'started hiding past the door (don't know people too well)' and 'when I don't know people that well I just hide'. But the child added that the project worker was okay with him once they had established a relationship. This child's sibling reinforced this sentiment of enjoying the project worker once a relationship was built:

*When I got to know her, I kind of thought she would be nice and she is nice*

*Child interview 016 (10 years)*

Recalling when her parents were working on the routines and behaviour plug-ins of PwP, one child's description was that it '*felt strange, kind of happy*'. It was unclear if the child ascribed the sense of unfamiliarity to the presence of a project worker in her home or if she was describing the home environment when her parents were implementing new parenting practices. However, it is noteworthy that she identified that period of time as being happy. When asked by the interviewer if things are better since PwP was started, most children agreed that things were better with their family:

*Before there was a lot of punishing and stuff, now everything is really good*

*Child interview 017 (11 years)*

### 5.3.2 Views of Older Children (Over 11 Years)

#### 5.3.2.1 Presenting needs

Drawing on the data from nine interviews with older children, a small number did not recollect what was going on in their home environment before PwP started with their family, while the most commonly reported factor was a strained relationship with parents. While navigating the challenges of being a teenager and having separated parents, one child described the environment prior to PwP as consisting of a very strained relationship with her mother. The most common interaction involved arguing, often descending into screaming and shouting at one another. The child further identified some of this behaviour as being a combination of anger and anxiety:

*It was kind of probably just because I was growing up and acting out because my brother was moving out and I was trying to copy him, teenage angst.*

*Child interview 018 (15 years)*

#### 5.3.2.2 Remembering PwP

One child, while being able to remember the programme elements of PwP, primarily valued the practical support he received from the project worker as he transitioned from primary school to secondary school. The project worker helped him with practical support – schedules, locker organisation and routines – outside of the PwP curriculum. This additional support helped the child to describe his transition to secondary school as '*different but not difficult, I didn't find it difficult*'. Furthermore, he agreed with the interviewer that he enjoyed working with the project worker.

Project workers also helped out with what was going on in the lives of the children on a day-to-day basis. An older child benefitted from the project worker getting involved with the school as part of practical support. He reported that his mother had had difficulty in trying to intervene on his behalf after episodes of physical bullying, but was pleased that the project worker liaised with the school regarding his behaviour and sought feedback from the teachers. Even home-based practical support inputs, such as arranging for a house to be cleaned, were noted by the children involved who were aware of the impact of a chaotic environment on their parents. Decisions on the best approach for using PwP with family members were often made between the parent, young person and the project worker.

### 5.3.2.3 Remembering feelings

Compared with the younger cohort, older children did not tend to express any initial apprehension with PwP sessions, in fact, they tended to make quick judgements:

*I liked her at the very beginning.*

*Child interview 019 (12 years)*

For an older child who had experienced a close family bereavement and was currently experiencing physical bullying from school peers, the feeling of being understood by the project worker was highlighted. He noted that the project worker was very nice as:

*... she is able to talk to me, she understands what I say.*

*Child interview 019 (12 years)*

In cases involving a parent and a child, the project worker often empowered the older children by reinforcing the need for them to both work together to build their relationship. The young person described her response:

*And we said we did, so straight away me and my mum both said, look we have to kind of understand both our perspectives from things.*

*Child interview 020 (15 years)*

### 5.3.2.4 Change for family

There was a general sense from the older children that PwP had benefitted their family and, by and large, they did not mind working through the programme or having the project worker in the home. When asked by the interviewer if PwP was helping, a teenager said that the project worker ‘*kind of brought us together a bit more*’ as a family and that there had been an improvement in interaction. He also agreed with the interviewer that he now felt

closer as a family and understood each other a little better. Another child noted that she now had a much improved relationship with her mother's new partner.

A teenager in a two-parent household, who were initially referred to the PwP programme for a younger sibling, reported that she was now better able to express her feelings to her parents because she could trust that they would respond to her in an appropriate and predictable manner:

*Yeah, but it has gotten a lot easier to express my feelings like when I am not happy about something but now I know I can, even if they don't agree with it, because I know they have been taught about how to react to certain things and stuff like that. So, I think it really has helped them.*

*Child interview 021 (16 years)*

As a consequence of closer relationships with parents, some young people reported that their overall family dynamic had improved since PwP started, as there were fewer arguments with their mother and father. One young person highlighted that his mother had been losing hope that things could change within their family, but PwP had helped to bring about change to the family dynamic:

*Yes definitely because she kind of gave up at the idea of helping, connecting us all together, she never thought my dad would go and talk to [the project worker] and then he did so that shows clearly everyone is trying to change and a closer bond.*

*Child interview 018 (15 years)*

Connected to this was a reported better understanding of expectations of parents. When parents separated, some children discussed the challenging scenario whereby they found themselves reassessing their expectations of each parent and what they could offer to them as a parent. An older child reported lowering her expectations of her birth father's ability to parent and had no expectations that he could manage their relationship better. Positively, this lowering of expectations did not end the relationship with her father, but the change of perspective helped to set boundaries to protect her from harm and disappointment.

Also noted was a positive association for older children between improved engagement with school and increased stability in the home due to improved family dynamics and parental relationships. A number of children noted that previously they didn't care much about school, but now their attendance had improved along with their engagement in schoolwork.

## 5.4 VIEWS OF PROJECT STAFF

This section of the report presents and arranges the findings from the in-depth interviews with staff (n=21), in addition to the feedback gathered through the online survey (n=64). The breakdown of staff was similar across interviews and survey respondents, with the majority representing project workers (88%), followed by project leaders. This is in line with the overall organisational structure.

### 5.4.1 Training Received to Deliver PwP

Survey respondents indicated the benefit of receiving training in order to successfully implement the programme. This prerequisite enhances a project worker's ability to implement the programme as intended. A skilful and well-prepared project worker is important for ensuring fidelity to the programme, discerning parental needs, and providing suitable support.

*Comprehensive training given to workers. Workers gain confidence as they run the programme and will use it in a way that suits individual clients.*

*[Survey respondent]*

While most respondents did not comment on the training received, some respondents took the opportunity to praise the training. For those who expressed suggestions for training, many reported a desire for ongoing or refresher training. Some respondents also expressed a desire to use refresher training as an opportunity to share best practice with other staff.

*Training was excellent. I feel I would benefit from a reflective refresher to ensure I am maintaining a high standard of delivery as it's been a long time since I did the initial training.*

*[Survey respondent]*

Furthermore, some respondents stated finding value in the training, but added that most learning happened when engaging with families and implementing the programme.

*Training was very good but it takes practice and confidence during delivery that really gives you a good understanding and knowledge of the programme.*

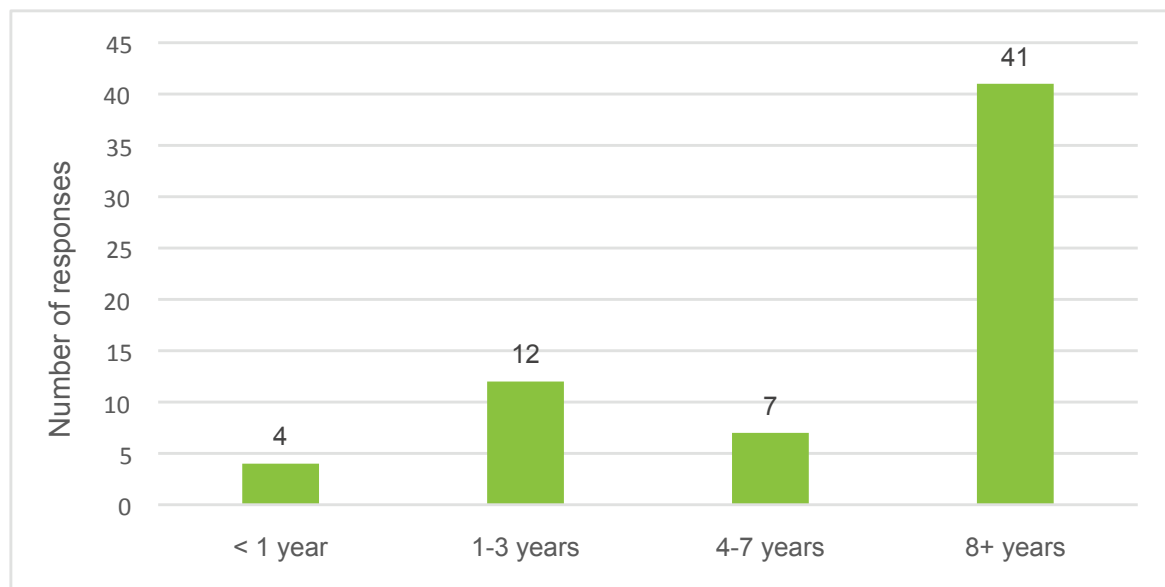
*[Survey respondent]*

Overall, survey respondents found the initial training useful and comprehensive. Some respondents found the training foundational, but not as transformative as engaging in the field. Considering this idea and the fact that many respondents desire a refresher programme, perhaps there is a good opportunity to capitalise on ongoing professional development.

After staff gain vital experience in the field, periodic refresher courses could be organised to capitalise on learning and share best practice.

### 5.4.2 Experience of Delivering PwP

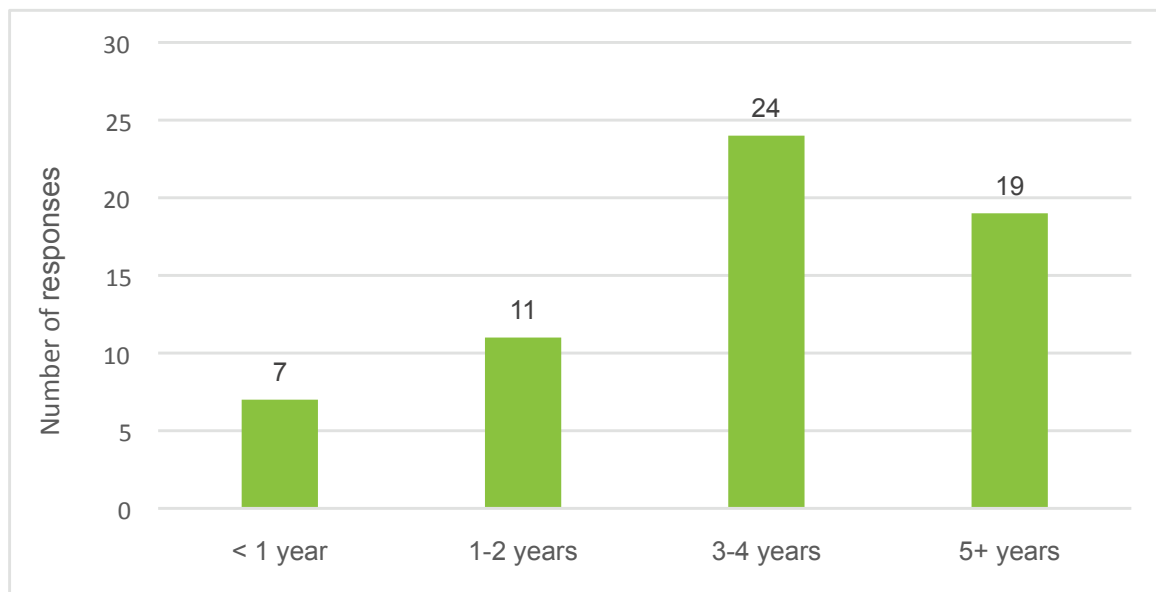
Since the secondary data presented previously in this report extended as far back as 2012, survey staff were asked questions relating to their length of time with the organisation. The majority (n=41, 64%) had been working in Barnardos eight years or more (Figure 5.4). Overall, the data indicated that most of the staff surveyed had substantive experience working within Barnardos.



n=64

Figure 5.4: Years working with Barnardos

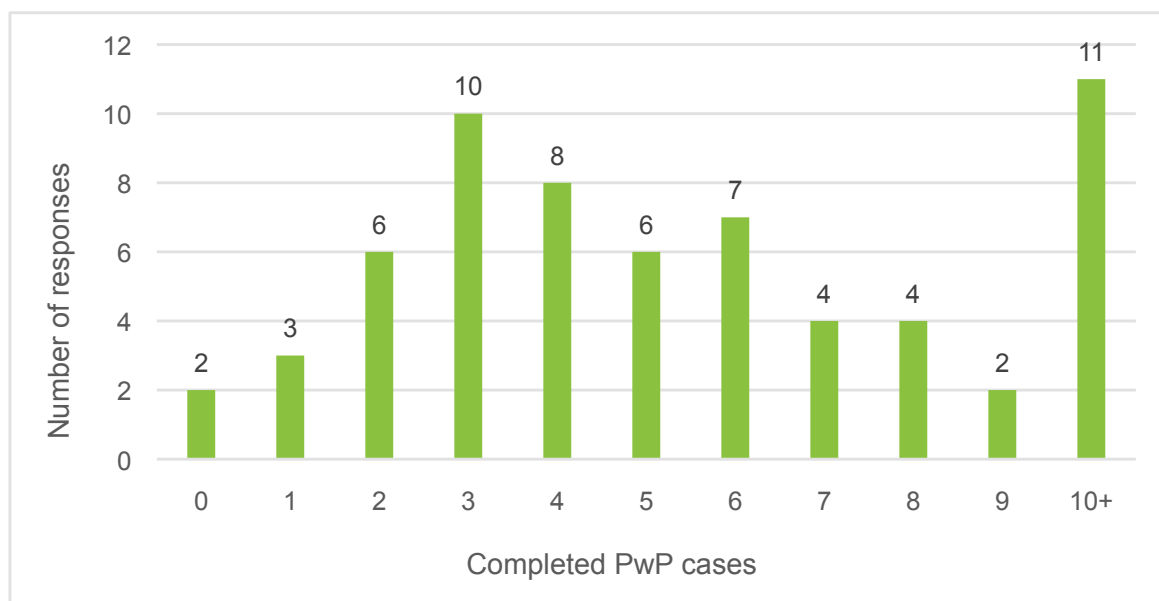
Staff surveyed were also asked about their experience of delivering the PwP programme. The majority (n=24, 39%) had been delivering PwP with families for 3–4 years, followed by 31% (n=19) who had been delivering it for five or more years, and 18% (n=11) for 1–2 years. Only 12% (n=7) were new to the programme, having delivered PwP for less than one year. (Figure 5.5)



n=61 (missing = 3)

Figure 5.5: Years delivering PwP

In order to gain further understanding of experience of delivering PwP, respondents were also asked how many parents had previously completed the PwP programme with them. The majority (n=11, 18%) had delivered the programme to ten or more families (Figure 5.6).



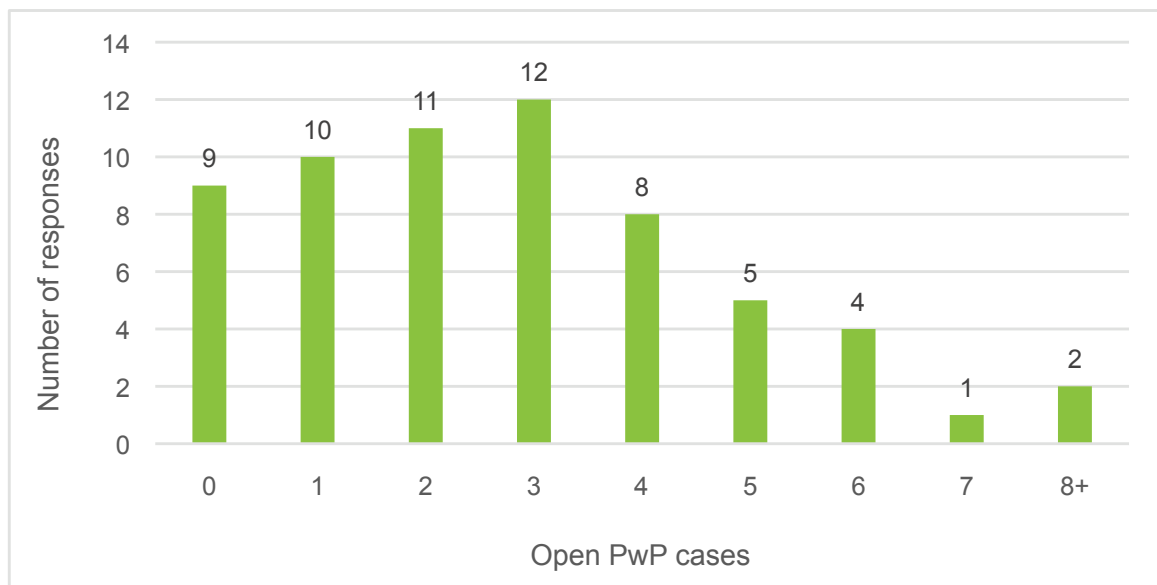
n=63 (missing = 1)

Figure 5.6: Number of completed PwP cases



The survey also asked respondents how many families they were currently undertaking the PwP programme with. Most respondents were working with either one, two or three families, comprising 16% (n=10), 18% (n=11) and 19% (n=12) of respondents respectively. Notably, 15% (n=9) of respondents were not delivering PwP at the time of the survey. (Figure 5.7)

In terms of staff participating in the in-depth qualitative interviews, project staff reported using PwP for over half of their family cases, indicating there was a high degree of usage. Some project workers always considered PwP as an option during initial meetings with a family.



n=62 (missing = 2)

Figure 5.7: Number of open PwP cases

### 5.4.3 Presenting Needs of Parents

Projects workers noted that parents presented with a varying range of needs, often complex and multiple. Families engaging with PwP rarely had one area of need, instead project workers reported that families often presented with multiple complex needs such as addiction issues, domestic abuse, precarious housing, school attendance and poverty, alongside challenges within the parent-child relationship (as noted in section 4.2.1.2). A number of project workers reported that the majority of parent-child difficulties were due to relationship breakdown with children and parents. Some project workers noted that children could become abusive to their parents, which was a challenging issue.

Other project workers noted that the already complex needs were being amplified by housing and environmental factors, precariousness of housing, neglect in terms of poor home conditions and overcrowded conditions.

When considering all of a parent's presenting needs, a project worker noted that decreased parental capacity was a presenting need, due to the assistance required with carrying out basic parenting skills, for example, dressing, washing and school routines. Another challenge identified by some of the project workers was the parents' ability to get their children to school. Project workers noted that this was often due to parents not maintaining routines at home.

#### 5.4.4 Suitability of Parents to PwP

##### 5.4.4.1 Indicators of positive engagement

The survey asked respondents to consider parental characteristics that would permit an effective engagement with the PwP programme. While responses touched on a breadth of important characteristics, most respondents identified the need for parents to be willing and able to reflect on their present situation. Notable was the fact that many respondents saw stability in the parent's life as vital to allowing the ability to reflect to be utilised by parents.

*A parent who has some basic level of self-awareness and capacity to reflect and who has enough self-confidence to scaffold them and support them to be able to take constructive feedback and self-reflect sufficiently to make changes.*

*[Survey respondent]*

Other necessary traits cited by respondents were motivation and a willingness to engage. Respondents acknowledged the advantages of working with parents who wanted to make positive changes to their family dynamic and were willing to see the programme through in order to achieve this.

*Parents who are open to the programme and want change and have motivation for change. Parents who will attend the programme and who will honestly engage with the programme.*

*[Survey respondent]*

Another prevailing sentiment was that a good relationship between project worker and service user was essential.

*Openness and honesty between parent and staff. Having a positive and supportive relationship and staff being flexible to meet the needs of the parent.*

*[Survey respondent]*

During the in-depth interviews, when asked what attributes or characteristics were most indicative of a parent having a successful engagement and positive outcome with PwP, most project workers underlined the importance of a parent being reflective and having the capacity to reflect on their experiences:

*But this parent, as I said, her reflective skills, I suppose she was really willing to learn, she wanted to take on the learning, she was committed to the work so they were all the things, yes, while she had challenges in her life she really did take it and focused on the piece and as I said the homework in particular. So, she would set aside time in the week to look at and work through some of the strategies that we would talk about in the session.*

*[Staff interview 024]*

Positively, some project workers reported that the presence of multiple complex needs was not always a barrier to engagement. A project worker reported PwP working well for a parent following rehabilitation from substance misuse, as the parent was familiar with reflective practice and was able to participate in this type of activity:

*I went in with her when she had come out of addiction and was doing well and I literally basically just sat down and facilitated her going through that programme because she was well able to reflect. I didn't give her any nudging, she was able to come up with the answers herself, she was in that place.*

*[Staff focus group 028]*

#### 5.4.4.2 Potential blocks for engagement

While there are varied characteristics or traits that would predispose parents to an effective engagement with PwP, there are also numerous parental characteristics that could lead to a less desirable level of engagement and higher levels of staff input. Principally, parents who are overwhelmed by their needs, or in a period of crisis, were identified by respondents as having more challenges in being able to engage effectively with the programme. Oftentimes, parents were faced with several needs presenting at the same time. A wide variety of issues and needs emerged from the data, with the most prevalent being homelessness or consistent instability.

*Parents who are in crisis, who need practical support first. Perhaps who don't recognise that things could be better. Parents who are overwhelmed and not in a place to engage with support.*

*[Survey respondent]*

Alongside parents presenting in a period of instability, other parental characteristics that led to less effective engagement with the programme were suggested in the survey and focus groups. These included active addiction, unmanaged mental health difficulties and limited learning capacity. These personal challenges made it more difficult for parents to engage fully with the programme, as there is a significant requirement for reflection on the part of the parents. Oftentimes, these issues caused parents to exist in the continual state of crisis, requiring a higher level of staff input.

*Parents with learning difficulties who need high levels of support to implement strategies and plans; parents with mental health issues who need high levels of support to implement any changes or new approaches; unstable drug use, chronic domestic violence; high level of attachment/bonding issues ...*

*[Survey respondent]*

Considering working with two-parent families and separated families, a project worker noted that when parents were separated, it could be difficult to engage the father. Project workers reported trying to engage fathers if they were involved in family life in any capacity:

*I have tried to engage one dad in particular who had left the family home and him and mam had divorced and he just didn't want to do it, he didn't want to do parenting work.*

*[Staff focus group 028]*

Typically, where the parents were living together there were fewer issues reported engaging the father in PwP. However, where parents were separated, a challenge that could emerge when engaging with fathers was the issue of finding a suitable time for both parents. A key difficulty was getting a time that suited both parents if the father was working. In cases such as these, staff did evening appointments to facilitate the parent's working hours.

Poor parenting capacity is a common presenting need that can be a challenge for project workers, as PwP had to be delivered at a slower pace. PwP tends to not work if parents require guidance and demonstration on how to carry out simple acts of parenting, such as playing with their child:

*Where parents would need to be guided and prompted and shown ... how to play with their child ... probably PwP really wouldn't fit there. That the staff need to be hands on and showing them and modelling for parents how to engage with their children.*

*[Staff interview 023]*

## 5.4.5 Content of PwP Programme

### 5.4.5.1 Manualised approach

Staff in general were positive about the manualised approach of PwP. Staff also reported that parents valued the layout and design of PwP materials. Considering how parents utilised the materials, project workers agreed that some parents responded well to the parent's activity booklets when there were no literacy barriers. Literacy did seem to help with usage of the materials, as project workers highlighted parents who had good literacy and reflective skills as benefitting greatly from the parenting log. Conversely, a project worker did not think that the parenting log worked for a lot of the parents based on experience<sup>20</sup>.

Other project workers concluded that the manualised programme and booklets helped them to build trust with parents, as parents realised that other parents had been through this programme before them.

Project workers reported that the support network piece, where people were able to map out their support network in the booklet, was really useful as they felt less alone and were aware of the people who could offer them support, particularly when PwP finished:

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20 The parenting log was originally conceived and designed for the parent to complete during the week outside of sessions and the project worker did not have to see it. The parent is encouraged to write how they are getting on and in particular what they are doing right to help build their skills and confidence. However, in reality, and possibly due to the referral from statutory bodies, participants view the log as homework to share with the project worker so they were often bringing them back to the project workers during the weekly sessions.

*I suppose that is a really good piece, and I know that comes towards the end as well, but that is a really good place for them to finish up in terms of well actually these are all the people that I can actually get them to map it out on the booklet, in terms of these are the people that can support me and that*

*[Staff interview 024]*

#### 5.4.5.2 PwP assessment tools

Project staff were very positive about the multifarious advantages of using the assessment wheel as an assessment tool prior to delivering the programme with parents. The assessment wheel was very helpful in opening up the initial conversation to ascertain the needs of the parents and children:

*The PwP wheel is very beneficial because you are opening up a discussion about every area and you are really identifying, okay this is where they have identified that they need the most support. And it is based on what they are telling you, you are not going, I think this programme suits them best or this plug-in suits them best.*

*[Staff interview 026; two participants]*

Other staff reported that the assessment wheel helped to set the tone at the assessment stage for the collaborative relationship, which is central to the success of PwP. The assessment wheel was also reported as beneficial in the initial assessment stage as it can also be utilised by project staff to empower parents, even parents who reported being overwhelmed and lacking in confidence. This is because the assessment wheel acknowledges the strengths of the parent alongside areas of struggle.

*PwP is collaborative, it is discursive, it is not that we have gone in and decided well this is just a disaster so we will mark this. It is about the discussion with the parent and equally having the guide of the different domains and where parents might need support in the different areas.*

*[Staff interview 027; two participants]*

However, assessment measures can prove difficult for parents who are in crisis, or coming out of a period of crisis, as they find it very difficult to narrow in on one aspect to focus on. The PCRI was noted as helpful because it helped staff to quickly ascertain whether parents were being open and honest about the process and their experiences. Project workers described having a tentative idea of which particular plug-in may suit a parent based on the outlined needs on the referral form, but staff reported being willing to change the plug-in

based on input from the parent and information gained from the PwP assessment tools. Project workers noted that the individual plug-ins complement each other, so staff feel less pressure to agree on the right plug-in as engagement in one domain will have associated effects in other domains.

#### 5.4.5.3 Use of different plug-ins

Survey respondents were asked to state the likelihood of using each of the six standard plug-ins: parent-child relationship, behaviour, routines, social development, education and physical development. Responses were in line with the secondary data analysis (section 4.2.3.3) with respondents most likely to use the parent-child relationship and behaviour plug-ins.

The combination of two, or multiple, plug-ins was also popular. Survey respondents indicated that this was often needs-led, depending on the presenting needs of families. Another reason behind choosing multiple plug-ins was the complementary nature of plug-ins.

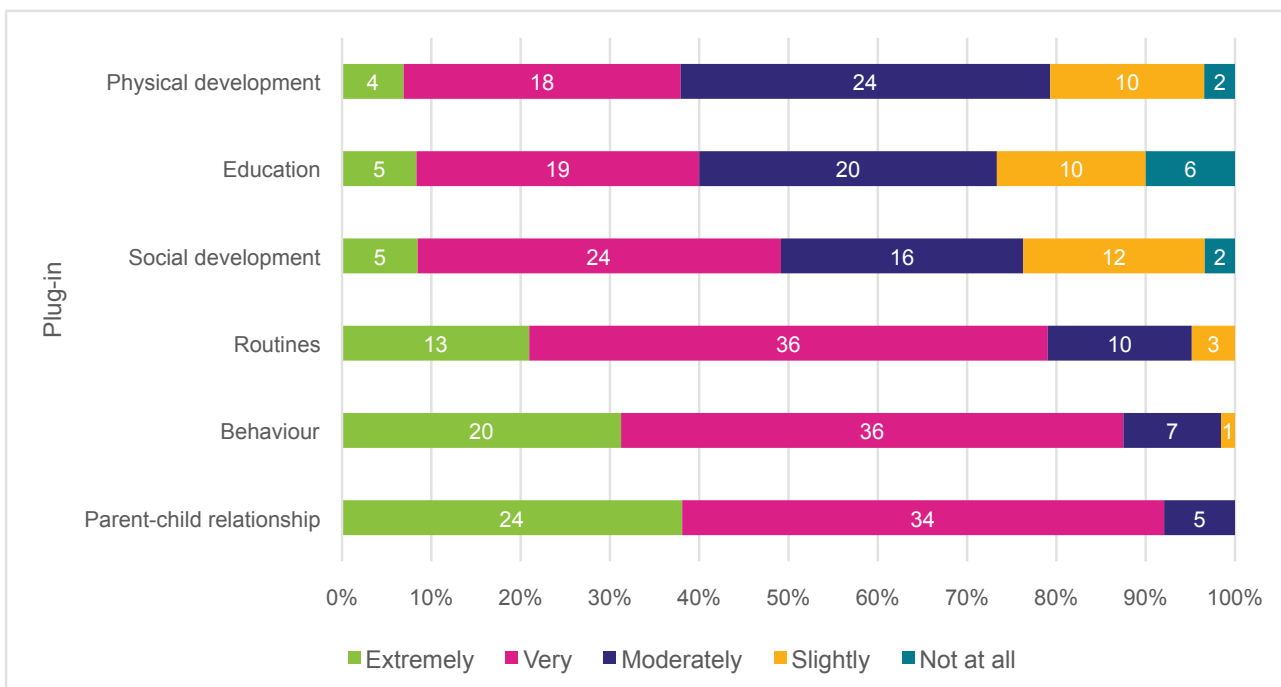
*Most often parents identify they need help with their child's behaviour and setting limits. Very often parents are upset and feel unsure about their parenting. On assessing the situation, I usually find that at the core of the problem are the family's relationship dynamics, attachment, communication, etc. I therefore usually start with the PCR plug-in and follow with the Behaviour plug-in.*

*[Survey respondent]*

#### 5.4.5.4 Usefulness of plug-in content

Survey respondents were also asked about the usefulness of each standard plug-in. Responses echoed those from the suitability question (section 5.4.4). Again, the parent-child relationship, behaviour and routines plug-ins were perceived as the most useful. More than half (54%, n=34) of respondents rated the parent-child relationship plug-in very useful and 38% (n=24) rated it extremely useful. Similarly, 56% (n=36) indicated that the behaviour plug-in was very useful and 31% (n=20) felt it was extremely useful. Neither of the two plug-ins received any responses of *not at all* useful. (Figure 5.8).

The physical development, education and social development plug-ins received a low number of responses of *extremely* or *very*, but a high number of responses of *moderately* or *slightly*. For example, 7% (n=4) of respondents rated the physical development plug-in *extremely* useful whereas 41% (n=24) rated it *moderately* useful. Overall, responses indicate the routines, behaviour and parent-child relationship plug-ins are considered more useful than the physical development, education and social development plug-ins.



Note: Some respondents did not answer this question, resulting in a slightly different number of responses for each plug-in. Therefore, valid percentages were used to correct for any missing responses. Parent-child relationship: 1 missing; routines: 2 missing; social development: 5 missing; education: 4 missing; physical development: 6 missing

Figure 5.8: Usefulness of plug-in content

During the in-depth interviews, staff reflected positively on the plug-ins. Project workers found that the parent-child relationship plug-in worked easily across the age ranges, as the material did not require much adaptation; however, some references to pop-culture were slightly outdated. Some project workers appreciated the flexibility of the plug-in to adapt the scenarios if they needed to contextualise the key learning for parents:

*Activity six, you have to adapt that as you go along and there is the option for them to do their own bit and put in their own scenarios.*

*[Staff interview 024]*

The routines plug-in was recognised by a number of staff as achieving improved outcomes for parents and children. The behaviour plug-in was reported as being especially suitable with a younger age group. Project workers often adapted the scenarios based on family or age of child.



#### 5.4.5.5 Use of practical support and crisis management guidance

In addition to the standard plug-ins, respondents were asked how often they used the two approaches of practical support and crisis management. Though figures vary, most respondents utilised practical support *often* (42%, n=27) or *very often* (27%, n=17). Crisis management was used *sometimes* (39%, n=25) or *often* (22%, n=14), indicating that respondents were more likely to use practical support than crisis management with families.

When asked why they used crisis management (or why not), respondents clarified that it was often not relevant or not needed with many families.

*The need has not been there. Most of the parents that I am working with attend and complete sessions each week.*

*Crisis happens rarely or is responded to in different ways depending on the crisis*

*[Survey respondents]*

Staff members deemed crisis management necessary when the crisis took the focus away from the planned session. During in-depth interviews, project staff reported that the crisis management approach and accompanying guidance was empowering to parents even if they were in a chaotic situation that may require the plug-in sessions to be paused. Respondents noted implementing the crisis management approach and then returning to the intended focus.

*It is quite empowering for parents, okay initially if they are in the midst of whatever it is that has happened they might be quite overwhelmed but I suppose to have a staff member who is calm, who is in control saying here is the tool, we will work through it.*

*[Staff interview 026; two participants]*

During the in-depth interviews, staff were also asked about the use of practical support. A number of project workers reported not necessarily using the practical support approach directly, but offering a level of practical support all the time. However, other project workers reported using the practical support guidance regularly as it went hand-in-hand with the PwP plug-ins.

In addition to these approaches, there was a period for check-in built into the start of each session which allowed project workers to debrief the previous week with parents in order to allow the best level of engagement in the session:

*Give them the ten minutes at the start of the session as regards to debrief whatever has happened in that family home and then as regards understanding then that we move onto the PWP. So, for those families that need that ten minutes to get it off their shoulders or whatever as regards what has been going on for them during the week.*

*[Staff interview 023]*

#### **5.4.6 Changes for Parents**

Project workers highlighted the benefit of the reflective work for parenting practice as it allowed parents to consider how the way they were parented impacted upon their parenting practice with their children:

*And I think the fact that the programme very much gets the parents to reflect on their experiences, so whether it is the communication, how we were communicated with as a child, what was your experience of school, the education, or routines.*

*[Staff interview 026; two participants]*

Project workers reported outcomes related to communication with children, as parents became conscious of how they spoke, their body language, and verbal and non-verbal communication. This respectfulness was often reciprocated by the children:

*She [parent] would really have come to the realisation that how she spoke, her body language, her verbal, non-verbal, stuff like that, was really impacting on how she communicated things. And how she asked for the children to do certain things, and doing it in a way that was respectful. I suppose what she would say then was what she got back was far more respectful than what she would have got before.*

*[Staff interview 024]*

In terms of what parents can present in order for the programme to be successful, survey respondents echoed their previous sentiments that engaged and motivated parents fared best with PwP.

*Parental motivation is key to the success of the programme and achieving good outcomes with the families.*

*Commitment from parents and that they understand they need to practice the different responses during the week outside of the programme.*

*[Survey respondents]*

#### **5.4.7 Strengths of PwP**

Through the online survey and in-depth interviews, Barnardos staff identified several different aspects of the programme that they found to have worked well with families. The parent's activity booklet was highlighted as a strength of the programme. Parents reportedly felt the content was very appropriate, as it allowed for reflection/discussion related to their lives, while also remaining focused on a topic.

*Yes, I like having the workbooks to go through. I find it helps parents ground themselves and concentrate on specific tasks in the workbook.*

*[Survey respondent]*

Additionally, respondents felt the home-based nature of the programme was effective, for both logistics and gaining insights.

*I like doing the programme in the home as it gives way to natural examples of parenting difficulties to discuss and work with.*

*The fact that it's home-based and one-to-one really works for some people*

*[Survey respondents]*

A number of project workers emphasised the home-based approach, allowing for a tailored and flexible service delivery within the family's own living environment. It also allowed for observation of parent-child interaction.

*... that opportunity to observe parents with children and I think that is the difference. I suppose you could have parents coming into a group and they could be telling you everything is wonderful at home, I suppose it is very dependent on the engagement of parents and how open and honest they are being. And sometimes parents won't want to highlight all those challenges, especially within a group context.*

*[Staff interview 023]*

Tied to this was the finding that the use of a structured programme in the home was especially successful. A number of project workers reported feeling more comfortable going into a parent's home with the manualised programme:

*For some parents it is very helpful to have a book in front of you and say we are going to look at this activity today. Because you could get pulled in all directions with different parents, there is lots of stuff going on for them. So, that in itself is really helpful.*

*[Staff focus group 028]*

Project workers reported that group-based programmes worked quite well for lower levels of need on the Hardiker scale (Hardiker, Exton, & Barker, 1991), where things can be somewhat challenging but the group context supports that low level of need. The majority of project workers deemed PwP suitable for families with a higher level of need, level 3 or 4 on the Hardiker level of need, as it is delivered on a one-on-one basis.

Project workers reported that PwP fitted well with the majority of the families who required parenting support. As the programme is flexible some parents took the minimal time, based on the completion of one session each week, while on average parents required almost nine months as other issues arose that required practical support from the project worker.

*For that particular family it worked very, very well because we were able to move through it at a really good pace as well.*

*[Staff interview 024]*

Project workers valued their ability to deliver the programme at a pace suitable to the parent or to pause the programme for a number of weeks to address other emerging needs for the parents and children:

*It does have the flexibility so if there is something that a parent is really struggling with and we need to spend three or four sessions on, I suppose the evidence is there for us as a staff member to be able to go into [our project leader] and say, 'Look, I know this plug-in is only supposed to be eight weeks or seven weeks, but it is really valuable that we spend these three weeks on this particular piece to let us move on.' And, I suppose that is because we are doing it with the parents, we are not doing it to them, we do have that relationship. And we can name it with them [parents], okay I can see you are kind of struggling with this, would it be more useful if we focused on...?*

*[Staff interview 027; two participants]*

Another project worker highlighted the involvement of children in the PwP sessions as a key strength of the programme as project workers could assess how changing parental practice was impacting upon the child:

*It is really important that the sessions are done with the children ... [as] sometimes the parents' perception can be that it is going quite well. But then when you actually see it in action with the child it is not so much, or maybe it is not led by the child. That is the really important bit ... the involvement with the children which is vital.*

*[Staff interview 024]*

Project workers acknowledged the advantages of having a focus on collaboration with the parents as the PwP programme was an agreed intervention they were doing with parents to support them, rather than a prescribed programme being dictated to them. The ability to establish a professional relationship with parents where trust develops was recognised as another strength of the programme. Openness, transparency and a non-judgemental attitude during the initial assessment was understood by the project workers as the cornerstone of the relationship with parents:

*We are honest with them and they know we are very honest with them; we are not doing things that they are not made aware of or... Every assessment is there for them to see.*

*[Staff interview 027; two participants]*

One notable example of the high level of trust between project workers and parents was an example where a project worker had submitted child protection notifications, but reported that the dynamic of the relationship with the parent did not change. This may have been a consequence of the open and transparent nature of the meetings at the beginning of the PwP input. Parents are, therefore, aware of what to expect during the programme and they respond positively to this knowledge.

As a large proportion of the referrals for PwP were from social workers in relation to child protection concerns, these parents' cases were subject to regular case conferences and review meetings with the referrers. Project workers found that PwP, as a manualised programme, was very helpful for when they had to provide feedback to these review meetings and important decisions were being made regarding the parents and their children.

*... able to go in and evidence that staff and the family have worked through this particular programme or this particular module, here is the parents' understanding, here is what they demonstrated.*

*[Staff interview 026; two participants]*

#### 5.4.8 Challenges of PwP

Project workers identified a number of challenges to successful implementation of the programme, ranging from initial apprehension and challenging relationships with parents, to literacy and language issues. Many of the challenges confirmed those raised by parents. However, it is important to note that many of the challenges are not unique to the PwP programme, but are familiar and recognisable challenges in the area of parenting support.

A number of project workers noted that parents were apprehensive during the initial meeting in their home. A project worker noted trying to dispel this initial apprehension by reassuring the parents that they were the experts on their children:

*I had it recently where a parent told me she found it insulting that I was going to come down and tell her how to parent her four kids. But I suppose the approach I took, you are the expert, you know your kids better than anyone else does, I am not going to come in here and take over being the children's parent, I am just going to help you be their parent.*

*[Staff focus group 028]*

Literacy challenges were occasionally reported as an issue and this impacted upon parents' capacity to engage fully with the written material. Project workers noted that, in these cases, they scaled the programme back and focused on the visuals and scenarios to prevent possible disengagement. Another project worker reported using a translator service in order to deliver the programme with a parent where English was not their first language. However, another project worker reported that even a family with literacy challenges still liked having the parent's activity booklet, as *'they liked the idea of having a book to be able to write things down as well'*. The project worker added that she wrote into the parent's activity booklet as the parent dictated to her. When parents had difficulties with literacy, this affected the length of the input, as the project worker estimated that it took two-to-three times longer as the project worker allowed extra time for the PwP sessions. Similarly, the PCRI was also reported as being more challenging to administer when literacy and comprehension were issues.

When considering challenges with delivering PwP, a project worker described a case where neither parent completed the programme, due to their very different parenting styles and experience of being parented:

*... they were very different in terms of their parenting styles and even their experiences of being parented...*

*[Staff interview 025]*

When working with a separated father who was trying to gain access to his children, a project worker described how challenging it was to implement the programme as he did not have access to the children. The parent-child relationship plug-in was utilised on this occasion so, when the parent did have access, he had more awareness of what he needed to do.

The feedback from the online survey also referred to challenges staff experienced when delivering PwP. Responses echoed the parental characteristics that caused less effective engagement with the programme. For example, many respondents referenced parents who did not prioritise change, and therefore had inconsistent commitment and engagement with the programme, as being a challenge.

*Yes. Parents being unable to follow through/implement new learning. Parents being unable to commit to attending consistently for the number of months required to complete the programme. Disengagement.*

*Length of time for them to commit; motivation to put in place learning from previous week.*

*[Survey respondents]*

While staff enjoyed delivering the programme and appreciated its merits, they noted that the programme was not always suitable for the families engaging with it.

*I think that the programme doesn't suit all the families that we work with and one size doesn't fit all.*

*[Survey respondent]*

#### **5.4.9 Perceived Efficacy of PwP**

Survey respondents were asked to reflect on the different ways PwP contributed to improved outcomes for parents and families. Respondents read nine statements and, using a 4-point scale, indicated to what extent they felt each statement was true (Figure 5.9). A total of 87% (n=55) of respondents felt PwP centred on improving outcomes for the child *to a great extent*. Similarly, 68% (n=43) of participants indicated that PwP established a partnership between parent and project worker. Regarding all nine statements about the programme, no respondents felt the plug-ins were *not at all* effective.

Respondents were split as to what degree PwP increased parental understanding of, and ability to manage, the child’s behaviour and increased parent-child communication. For the former, 55% (n=35) indicated to a *great extent* and 45% (n=29) *somewhat*. The latter question received 50% (n=32) to a *great extent* and *somewhat* responses each.

There were three questions with relatively low positive responses when compared to the other questions. When asked how well PwP increased parental ability to manage crises effectively, 78% (n=50) indicated *somewhat* and 13% (n=8) indicated *very little*. Likewise, 82% (n=49) indicated PwP improved the child’s social development *somewhat* and 8% (n=5) *very little*. Lastly, when asked how well PwP increased parental involvement in the child’s education, 82% (n=48) responded *somewhat* and 9% (n=5) *very little*.

Overall, a large majority of respondents surveyed felt that PwP was to a *great extent* or *somewhat* effective. Of particular note was PwP’s focus on improving outcomes for the child and establishing a partnership between parent and project worker. Only a very small minority felt any aspects of the programme were only effective to a *very little* extent.

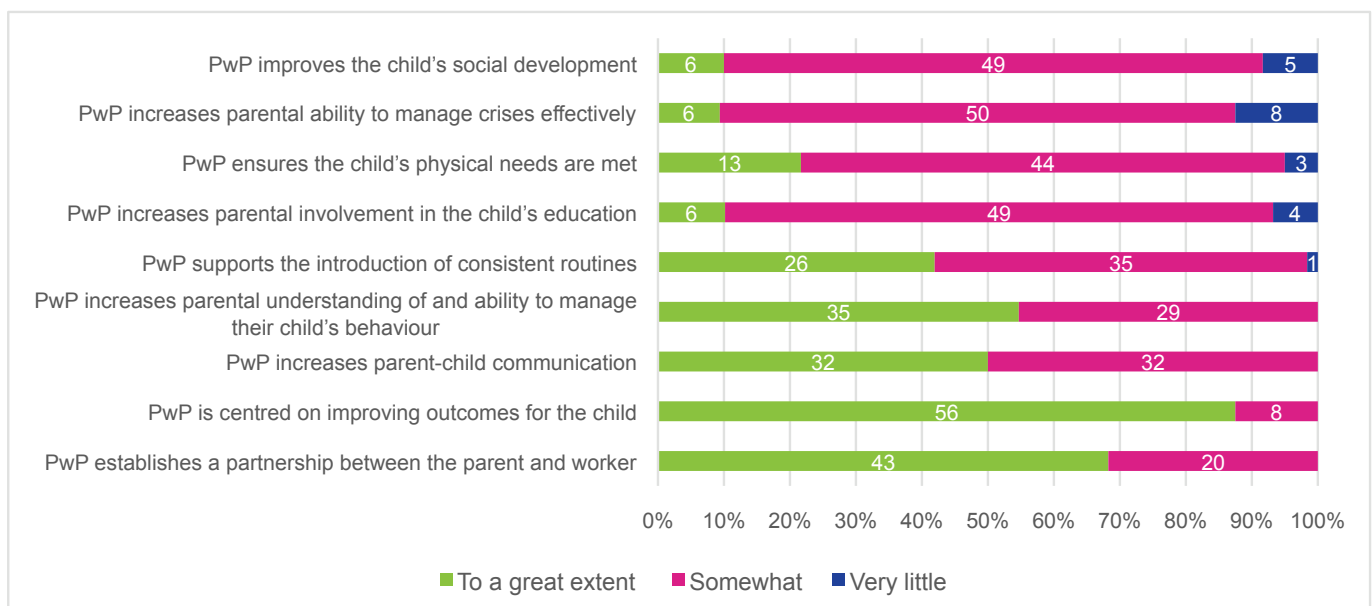


Figure 5.9: Perceived efficacy of PwP



The majority of staff praised the programme and, in general, felt the programme was a good tool for generating positive changes in the lives of families. PwP was deemed enjoyable for both the project worker and the parent.

*I find the programme is very helpful to the parents/carers that I can run it with. Parents are demonstrating a greater knowledge and understanding of their child/children and are making positive changes; families reporting the difference that it is making in their lives. It is a programme that I enjoy running with parents as it is evidence based and achieves positive change.*

*Survey respondent]*

#### **5.4.10 Professional Experience with PwP**

Respondents were asked to reflect upon their professional experience with the PwP programme. Using a 3-point scale, respondents indicated if they felt a series of eight statements were: *certainly true*, *somewhat true* or *not at all true*. As displayed in Figure 5.10, most respondents reported feeling confident and supported in their role (86%, n=54 and 92%, n=59, respectively). Additionally, more than three quarters of participants (76%, n=48) received sufficient PwP training and 66% (n=42) were provided with adequate feedback.

In terms of the efficacy of assessment tools, the survey found that 53% (n=34) felt it was *somewhat true* that the assessment wheel was effective and 44% (n=28) felt it was *certainly true*. With responses tending towards a neutral or negative response, 45% (n=29) indicated that it was *somewhat true* that PCRI was an effective tool, and 27% (n=17) felt it was *not true*.

In general, this data shows that a large percentage of respondents felt they had a positive professional experience with PwP, especially in regards to their role. Most felt there was room for growth with the assessment tools currently used within PwP, especially with regards to the PCRI.

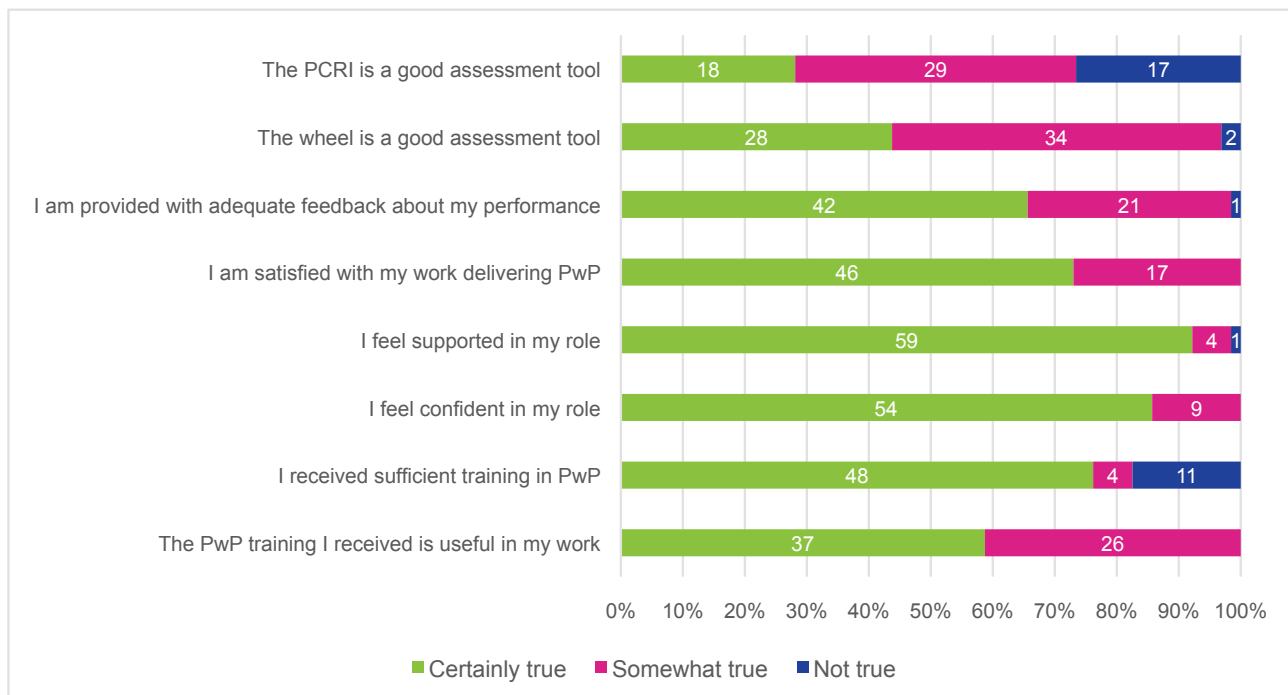


Figure 5.10: Professional experience with PwP

## 5.5 VIEWS OF STAKEHOLDERS

Eleven stakeholders were interviewed during the fieldwork to ascertain the perspective and experiences of PwP by external agencies. This cohort was formed primarily by duty social workers and social work team leaders from Tusla in the respective sites, which was reflective of the high referral rate of parents to the PwP programme from Tusla.

### 5.5.1 Presenting Needs of Parents

When asked for the main presenting needs of families within their catchment, practice stakeholders reported that the families they worked with were generally from lower socio-economic status groups. There were also families who would not be considered socioeconomically deprived, however, there were high levels of conflict impacting on children:

*Often in those scenarios they would be separated parents where there is a lot of acrimony in the relationship and that is having a direct impact on the children.*

*[Stakeholder interview 029]*

A stakeholder acknowledged that most of the referrals to Barnardos tended to be families identified through social work. In some cases, parents required support with basic parenting needs, including coping:

*There is a mix, certainly they would be families who require basic parenting, just again routines in families, children of different ages, different needs and I suppose developing and understanding of child development.*

*[Stakeholder focus group 030]*

The presenting needs of families identified by practice stakeholders varied widely, but tended to include one, or a number of, the following factors: housing needs, poverty, educational achievement gaps, additional needs concerning educational assessment, and needs concerning speech and language. A stakeholder noted that other parents presented with chaotic lifestyles, further complicated by a lack of routines.

*A lot of housing need, a lot of families are homeless or have experienced homelessness or are at risk of it or insecure tenancy where it is fragile ... So, there is no consistency in life, it is just very chaotic ... substance misuse issues and domestic abuse within relationships seems to be significant patterns of unhealthy relationships featuring in these children's lives, whether it be verbal, physical, emotional. Just fraught with arguments and ...*

*[Stakeholder interview 029]*

It was also reported that some parents had mental health issues. Considering presenting needs, one stakeholder highlighted mental health issues being evident across all the parents in their catchment area. They explained this as parents trying to adapt to being a parent alongside poor family support, leading to families becoming more isolated:

*But I do think that there is more isolation. Most of the Meitheals<sup>21</sup>, it is lone parents, lone mums that are trying to manage it.*

*[Stakeholder focus group 031]*

Several stakeholders reported that the majority of families could be suitable for PwP, but the key question was whether there was sufficient capacity on their part. Stakeholders identified a number of personal and structural characteristics that could be a barrier to engagement with PwP. These included engaging parents who were separated and had little or no access to their children, and parents who lacked of awareness around their role or parental responsibilities:

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21 Meitheal is a National Practice Model to ensure that the needs and strengths of children and their families are effectively identified and understood and responded to in a timely way so that children and families get the help and support needed to improve children's outcomes and realise their rights. (Tusla Child and Family Agency, 2013b)

*If somebody doesn't use a new skill and apply it that is going to disappear, and they don't have necessarily the access to it so they are learning in a vacuum and that can be quite difficult.*

*[Stakeholder focus group 031]*

### 5.5.2 Strengths of the Programme

The majority of stakeholders had a sense of PwP being a very good programme, based on feedback from parents partaking in PwP who had contact with the stakeholders in other contexts. Stakeholders who were familiar with the PwP programme identified a range of elements or attributes of the programme that they perceived as a strength and, in some cases, a distinguishing mark from other parenting programmes.

Stakeholders consistently identified how the programme contributed to improved parental capacity and better parent-child relationships, confirming the outcomes reported by staff and parents, as well as evidenced in the quantitative data presented in this report (section 4.2). Other stakeholders also noted the value of working in an environment familiar to the child and parent, with the potential to provide timely feedback to the parent. Stakeholders agreed that PwP was particularly helpful in supporting the project worker to get a clearer picture of family life. Stakeholders also reported positive outcomes for children of parents participating in the programme.

*The other piece then is observation work so in doing the parenting work with the parent there is constant feedback from observations, if they are made, the parent child relationship. And that is really good.*

*[Stakeholder interview 029]*

Based on their role, several stakeholders considered goal setting in PwP as very important. Within the task of goal setting, the collaborative process of how needs were identified, and subsequent goals specified and agreed, was recognised as part of the task of empowering parents through the process of goal setting:

*I think it is much better than generic parenting work ... it can be specified, it can be targeted, you can set goals.*

*[Stakeholder interview 029]*

PwP also assisted the family to address practical needs with a stakeholder. An example was given of a family who had an agreed plan at a case conference where they had PwP sessions in the Barnardos centre, then had practical support sessions in the home to help address the identified need and implement other routines around school and bedtime. PwP was flexible enough to address both needs simultaneously. Another stakeholder identified that it could be difficult to tease out what made the change or impact for parents – the PwP content or the wider package of supports:

*You have reduced the stress and now I am more open to learning because I have that space in my head. It is hard to pull out what it is. But I think there is a positive in that because it is showing us that it isn't a go on a six-week programme, go on a twelve-week programme and we will rubber stamp you and that is it. It is showing that there is more to how you support and what has an impact.*

*[Stakeholder focus group 031]*

Further considering the strengths of PwP, stakeholders reported that the allocation of a dedicated key worker to a family as part of a parenting programme was very important. One stakeholder noted that sometimes with parenting programmes, there was no additional support as part of a wider package. However, Barnardos provided this level of support alongside PwP:

*There is a support package around them ... when parents talk about this it is in a whole piece, there is a minding, there is a scaffolding, a supporting, not just for them but possibly for the child. The child might be in breakfast club, after school, there is a whole piece there.*

*[Stakeholder focus group 031]*

Stakeholders reported the advantages of PwP as being home-based, responsive and flexible. The flexibility of being able to stop and start was beneficial, as some families were just not ready to start parenting programmes and it required preparation work. PwP can be tailored to the needs of the parent and their capacity:

*The strength that I see in it is its capacity to work at the pace of the parent as well. We would certainly see that there are parents we would be working with that would just never grasp it in a group, they need that pacing and that additional reinforcement.*

*[Stakeholder focus group 031]*

Other stakeholders acknowledged the benefit of Barnardos often extending the input for a significant period of time; one stakeholder in the focus group was aware that Barnardos would prefer to have shorter inputs, but sometimes the PwP programme ran for up to two years and this was required by some parents. They noted that some parenting programmes end after eight sessions and often that's not enough. Stakeholders recognised that PwP was 'very much tailored and one-to-one', which was beneficial because some families had needs that were very high end and complex. Some parents were at a level that they would not be suitable for fitting into pre-existing parenting programmes that may run over six or eight weeks. Stakeholders also identified how PwP complemented other work with parents, including where cases were open to social work. A number of stakeholders noted how PwP complemented the initial input of a social worker, resulting in a successful outcome for a particular family with multiple needs:

*I certainly know one family that did have this work done with them and very intensive work, which was brilliant, and it really worked for this particular family because there was multiple needs and I suppose there was a lot of research done as well, research done of the files, the history, chronology of events up to the current day. It would have incorporated the social work plan and Barnardos plan as well.*

*[Stakeholder focus group 030]*

# Chapter 6

## Discussion of Findings



## 6.1 INTRODUCTION

Partnership with Parents™ (PwP) is an intensive, one-to-one, parenting support intervention that is delivered in the home. It was developed in-house by Barnardos in Ireland, something that was seen as a key strength by those delivering the intervention, who described it as a distillation of the expertise within Barnardos and consistent with its ethos and theoretical underpinnings. The families that were referred to PwP tended to have higher levels of need than those that might typically be expected to attend a group-based parenting support intervention. Complex and challenging issues that faced families included (but were not limited to) prior experience of trauma by the parent or child, behavioural issues, challenged parent-child relationships, domestic violence, aggressive behaviour from the child toward the parent, alcohol/substance misuse, school refusal or poor school attendance, housing insecurity, low parenting skills, financial stress and mental health issues.

PwP is informed by evidence of what works in order to ensure that the programme has the best chance to succeed and make a real difference for parents and their children. The majority of parents referred to Barnardos who went on to undertake the PwP programme either self-referred or were referred by social work. While multiple reasons for referral were identified, the majority of parents in the PwP cohort were referred with parenting support needs or needs relating to their children's social and emotional well-being. Parental separation affected one in 12 parents. Lone mothers were the most common participants in the programme, accounting for six-in-10 of the study cohort.

This mixed method cohort evaluation of PwP was undertaken from September 2016 to September 2018. The study sought to evaluate the impact of the programme in contributing to positive outcomes for children and families. The evaluation sought to answer the following questions:

1. Does the PwP programme result in positive outcomes for children and families?
2. What influences the impact of the programme within the Irish context?

## 6.2 PARENTAL OUTCOMES

Statistically significant increases were recorded for scores across all PCRI domains of parenting – Support, Satisfaction with Parenting, Involvement, Communication, Limit Setting, and Autonomy – when pre-post analysis was undertaken for matched pairs. The increases ranged from small to medium, although all indicated improvements after completing the PwP programme. These increases suggest improvements across the domains captured in the PCRI, namely: *Support*, the availability of practical help and emotional support that the parent receives; *Satisfaction with Parenting*, reflects the enjoyment a participant receives from being a parent; *Involvement*, the level of engagement with the child and interest in their activities; *Communication*, how capably a parent communicates with his or her child in a variety of situations; *Limit Setting*, a participant's perception of the effectiveness of their discipline techniques; and *Autonomy*, the parent's capacity to promote his or her child's independence,



which is associated with positive outcomes for the child (Gerard, 2005; Coffman, Guerin, & Gottfried, 2006).

The validity indicator data – for social desirability and inconsistency – also indicated a robust dataset, supporting the evidence that the PCRI is a valid and reliable outcome measure (Coffman, Guerin, & Gottfried, 2006; Ganotice, Downing, Mak, Chan, & Yip, 2015).

Within the interview series, the qualitative data supported and corroborated these statistical findings. Focusing on the domain of *Support*, which saw the greatest improvement within the PCRI, it was evident from reports from parents that knowing the project worker was available, if required, led to improved confidence and reduced anxiety. Some parents reported a sense of empowerment as they realised that they were able to complete aspects of parenting for themselves after an initial period of support.

In terms of *Limit Setting*, parents reported feeling very happy with the improvement in routines, which impacted positively on overall family functioning. A mother reported feeling more in control as a parent, exercising greater consistency and needing to resort less often to punitive actions with her daughter in order to get the expected behaviour. Another parent summarised the work of PwP as helping family life become much calmer and improving her experience as a parent.

Similarly, some parents noted simply that the improved relationship with their children allowed them to spend time with their children and do fun activities, which supports the positive findings in the domain of *Involvement*. This further impacted on parental perceptions of self-efficacy and confidence in their roles, which could help to explain the improvements in the *Satisfaction with Parenting* domain.

Analysis was also undertaken on pre-post data for matched pairs relating to the PwP assessment wheel. Statistically significant improvements over time were recorded for all but one of the self-reported areas of parenting needs for their children, including Parent-child Relationship, Behaviour, Routines, Physical Development and Education. While an improvement was recorded over time for Social Development, this was not found to be statistically significant. Where statistical differences were found, these ranged from small to large improvements, with behaviour marking the area of greatest improvement.

Three core themes emerged within the interview series when parents and primary caregivers reflected on their participation in the programme in order to identify what worked well; centrality of relationship with their project worker, home environment and parental capacity. Firstly, and of particular significance, was their relationship with their project worker, the collaborative and participatory way of working, and the trust established over time. The high levels of trust with their project worker provided a base for the collaborative work that

followed, as project workers made decisions with parents regarding the type and nature of the intervention. This strong working relationship permitted project workers to challenge parents on aspects of their parenting, but also to empower parents and develop confidence and a sense of autonomy within the parent. These findings support the international evidence, identified by de Greef et al. (2018), indicating positive treatment outcomes where strong alliances exist between parents and professionals.

Secondly, parents identified the home-based nature of service-delivery as key to the success of the programme, a finding that is strongly supported by the evidence identified in a systematic review of international literature (Sweet & Appelbaum, 2004). Despite initial apprehension in some cases, parents preferred working in a familiar environment. Additional advantages to a home-based parenting programme emerged through the fieldwork, as parents described additional benefits related to other areas of family life. Project workers were able to implement the practical support guidance to help stabilise a chaotic home and allow the family the best opportunity to engage in the PwP programme. Parents reported satisfaction with support on tasks that related to their home life, including routines and practical work, in addition to describing how it facilitated an extension of the learning to other children in the family. Often other siblings, maybe not part of the initial referral, would benefit from PwP being delivered in the home, as project workers seemed to be cognisant of the needs of the entire family unit as part of delivering the programme.

Thirdly, PwP had a positive impact on parenting capacity and self-efficacy, reducing the sense of being overwhelmed that some parents reported. In most of the interviews, parents reported that their presenting needs – lack of confidence, overwhelmed as a parent, poor routines, challenging behaviour – were met, and in cases where the presenting needs were not met, there were often mitigating factors due to a series of complex needs rather than a single issue. Parents also noted how the programme reduced stress, improved empathy, improved confidence and family functioning, and contributed to improved self-efficacy as parents.

Of significance, when project workers finished the input from PwP, most parents had a sense of confidence for the future, in which they felt able to address any future issues that may arise for their households or children. This indicates that PwP is equipping parents with the core concepts of parenting, with parents feeling prepared and confident to apply previous learning to address new issues in the future. In essence, rather than learning to manage a particular situation or response, by focusing on the parent-child relationship as the cornerstone of good parenting, parents developed macro-changes rather than micro-changes to their parenting. This type of learning requires considerable reflexivity and engagement, and so it is likely that outcome trajectories will differ for parents with more complex needs, reflecting their own contextual capacities. Emerging complexities and person-specific contextual factors could be managed due to the tailored nature of the programme, whereby

project workers were often in a position to divert their work to crisis management, when required, and return to the programme at a later time.

The majority of parents who completed the PwP programme concluded that the programme was effective within their circumstances and that they would recommend the programme to other parents in similar situations.

### **6.3 CHILDREN'S PERSPECTIVES ON PARTNERSHIP WITH PARENTS™**

PwP is a parenting programme and, as such, there is limited direct work with children incorporated into the programme. However, this evaluation sought to consider the impact of the programme from the children's perspective.

#### **6.3.1 Younger Children**

Younger children, understandably, were not always able to reflect on the time their parent or family engaged with the programme. This was likely due their young age at the time of the programme, or the child may not have been involved in the sessions. However, when asked about the project worker who visited their home, the majority of younger children talked about their project workers in a very positive way, suggesting a high level of trust established with the project worker.

When considering their feelings at the time of PwP being delivered, some children, like their parents, reported a level of apprehension about a strange person in their home. It seems this initial trepidation dissipated quite quickly, with some children remembering the time as being a happy time in their childhood. Other children were able to identify an immediate impact of the PwP programme on their daily lives, when the means of discipline within the home was replaced by what was perceived as fairer parenting with more emphasis on positive relationships.

#### **6.3.2 Older Children**

Older children were better able to articulate and, as expected, had a better memory of their parent's engagement with PwP. When asked to consider the primary reason why they or their parents became involved with Barnardos and PwP, most of the older children described strained relationships with their parents and families. These strained relationships seemed to present differently based on the gender of the child and the composition of the family, ranging from home environments with high levels of conflict to withdrawal and isolation.

As the older children revealed changes that had occurred during the period of the PwP programme, the changes seemed to fall into three categories: internal thoughts, external actions and environmental changes. A key factor identified by children was being understood by an adult (project worker) for the first time, culminating in feelings of empowerment for older children. This maturity and empowerment was reported as especially important

for children from divorced or separated families as they described being able to manage their expectations of the parent not living in the home, while also having the confidence to establish boundaries. Secondly, older children reported having reduced anger and increased empathy with parents and siblings. The parent and child sessions seemed formative in this regard, as the child gained insight into the parental experience and discovered that their parent was trying as best they knew how. Thirdly, environmental changes reported by older children included improved family dynamics and improved engagement at school.

Notably, older children described a shift from ‘strained’ relationships to more positive relationships with parents, reflecting the core work of PwP and the prevalence of the parent-child relationship plug-in as a key element of the programme. The older children gained maturity and autonomy over important areas of their lives, such as education and relationships. Children also described improvements in areas that related to practical family support in the home, reflecting the value of the home-based elements of the programme and the tailored approach.

#### **6.4 STAFF EXPERIENCES OF PARTNERSHIP WITH PARENTS™**

Within the interview series and online survey, staff reported positive outcomes for parents. Notably, a number of project workers had experience of other parenting programmes, and went on to identify the home-based delivery of the programme as the key strength or advantage of PwP. Being based in the family home presented a number of opportunities for the project worker that would be unavailable within a centre-based group setting. The project workers noted how the home-based delivery afforded an accurate sense of family life and how the parent and child interacted with each other in a familiar environment. This knowledge was invaluable to identifying the core needs of the family, in collaboration with the parents and children, and then selecting the correct plug-in and tailoring the intervention to the level of parental capacity. This was captured both during the interview series and within the staff survey, which was administered nationally. In addition, the ongoing parent-child observation in the home environment allowed the project workers to track progress, supplementing parents’ perceptions of progress and outcomes.

Staff also reported positive experiences of utilising the manualised approach, highlighting the structured but flexible approach as working well with parents. Staff reported that the provision of this programme in a home-based context carried the potential to support parents with a higher level of need than would be possible with a group-based parenting programme. As parents taking part in a manualised parenting programme, particularly those in a period of crisis or elevated stress, can struggle with commitment and practical issues, a home-based lesson helped alleviate some of this additional stress. In fact, PwP was effective in a number of cases in re-focusing the parent to their needs that had remained open and were ‘drifting’ along.

Since a proportion of the PwP caseload were referred by statutory bodies, some parents were involved in case conferences and Meitheal. Staff were able to utilise the PwP programme to report parental engagement and parental progress to such meetings. This also permitted a level of advocacy on behalf of the parent and child to access further supports or gain additional time for learning to be internalised.

Staff also placed an emphasis on the occasions when the child participated as a key strength of PwP, reporting that the inclusion and involvement of children in the PwP sessions was both informative for staff and empowering for parents.

Staff identified challenges and barriers for some parents, notably where a parent was in crisis or experiencing multiple or complex needs, as impacting on their capacity to engage with the programme. While project staff demonstrated a willingness to engage with parents, it was noted that the programme was not feasible in some contexts, such as a chaotic home environment or one of active substance abuse, resulting in limited reflective capacity for the parents. This finding supports the original PwP programme guidance on who the programme may not be suitable for (Barnardos, 2013). In some cases, these issues could be addressed sufficiently to allow parents to engage with the programme. To this end, some staff reported the crisis management tool as helpful and empowering, while some parents could be so overwhelmed in crisis that it was not always suitable.

Interestingly, project staff highlighted good levels of success with parents who had been through rehabilitation for substance misuse as they had a familiarity with reflective work and found it somewhat easier to engage with PwP content.

Fathers were included in the work of PwP as much as possible, although challenges were found to exist when delivering the programme with separated parents who did not have access to children. Literacy issues and language barriers were also identified as presenting challenges for delivery.

Staff were very positive of the use of the PwP assessment wheel as an assessment tool, describing it as very helpful in starting a conversation about the programme. Some staff questioned the use of the PCRI as an assessment tool, describing it as 'outdated' in places; however, this issue was not identified by parents participating in the programme. Some parents valued the PCRI as an assessment tool, as it underlined the professional nature of the PwP programme and provided an opportunity to reflect on their parenting.

Further findings in relation to programme implementation emerged in the online survey with staff reporting professional autonomy and high levels of satisfaction. There are indications that the level of experience of staff, alongside the in-built flexibility of the programme, led to a high level of professional autonomy and judgement being exercised in the implementation

of PwP. Staff utilised the practical support and crisis approaches as required, whether as a precursor to the plug-ins or by pausing the plug-ins due to emerging needs or a period of crisis. As project workers attributed parents as having had formative experiences within the PwP programme, this led to high project worker satisfaction with the overall programme.

## 6.5 STAKEHOLDERS

Stakeholders corroborated the views of parents and staff when describing what worked well about the PwP programme. Notably, stakeholders emphasised the value of the home-based element of the programme; the importance of the relationship between the Barnardos worker and the parent; and the impact on parental capacity and self-efficacy more broadly. Considering the implementation of PwP with parents and children, external stakeholders placed a great value on the ability of the programme to be flexible and tailored to a parent's individual needs, and this was suggested to be a key reason why stakeholders had confidence in the programme.

Due to a certain degree of separation from the day-to-day implementation of the PwP programme, two additional themes emerged from the findings. Firstly, the input of the additional guidance – practical support and crisis management – was valued by stakeholders, who reported that their inclusion added value and reflected a holistic and over-arching approach to the lives of children and parents. This additional support was described as unique to PwP within the suite of parenting programmes available for stakeholders to refer families to. Cognisant of earlier reports of the multiple and complex presenting needs that parents may have on referral, this focus on wider support was perceived as necessary to create a base of stability to allow the concepts and content of the programme to be engaged with.

External stakeholders also identified how the programme carried the potential to complement other supports for families, in some cases social work involvement. This was a significant finding, given that many parents who participated in PwP were initially referred to Barnardos by social work.

Secondly, and understandably due to the possible reporting requirements, external stakeholders acknowledged the value placed on collaborative goal-setting with parents and families at the outset of the PwP programme. Recommendations suggested that all goal-setting should be re-oriented through the needs and outcomes of the child to ensure greater overlap within the goal-setting of the PwP programme and that of statutory bodies. However, for children as dependents within a family structure, goals and outcomes for parents and a family are invariably linked to the outcomes of the children, and it may be important to maintain goals framed around parenting, as PwP is primarily a parenting support.

## 6.6 REFLECTIONS ON EVALUATION DESIGN

The mixed method, cohort design of this evaluation was appropriate given the aims of the study and the complex nature of the intervention. Ultimately, the evaluation has shown major successes in the development and implementation of PwP within real world settings, and across a diverse group of practitioners and service users with complex needs. The results of the evaluation are arguably valid within the context of Barnardos; however, it is important to note that it does not have the same external validity given the uncontrolled, non-randomised nature of the methodology adopted.

When looking at the quantitative analysis, for example, only 33% of PwP participants who completed PCRI measure pre-intervention also completed the measure post-intervention. This could potentially introduce bias into the study findings, since arguably people who had a more positive experience with the programme may have completed the post-intervention measures. Having said that, high attrition rates of this kind are not unusual in evaluations of parenting programmes (Moore & Finkelstein, 2001), or other complex interventions (Szymczynska, Walsh, Greenberg, & Priebe, 2017). Such limitations are inherent when evaluating complex social interventions; therefore, the results are not intended to be generalisable and should be interpreted with caution.

Despite these limitations, the evaluation shows that PwP is a very promising intervention with evidence of positive impact on key outcomes for the target population. While it is acknowledged that this internal evaluation may impact on external perception of overall rigour, measures were put in place to ensure robustness.

- None of the team undertaking the research were involved in the service design. The internal evaluators were new to the organisation and qualified within the field of social research. External consultants were affiliated with a university department, and both had doctoral qualifications and experience of child-based fieldwork.
- External advisors, from the Centre for Parent and Child Support, NHS Foundation Trust and the School of Social Work and Social Policy – TCD, provided study guidance and oversight.
- The study cohort was examined for representativeness against the overall PwP programme cohort.
- The interview subsample was selected at random by the research team, using exported data from the Barnardos children's services database.
- External field researchers were recruited to support the fieldwork stage of the study.
- The PCRI is a validated measure and the tests run are robust and suitable for the dataset.

Having considered these limitations, the key strengths and challenges identified with the PwP programme are summarised below.

## 6.7 STRENGTHS OF PARTNERSHIP WITH PARENTS™

Taking the aforementioned study design limitations into consideration, it is possible to report a number of key strengths of the PwP programme based on the findings of the mixed method cohort evaluation:

- Parents participating in PwP had positive outcomes, as measured through the PCRI and PwP assessment wheel. Statistically significant increases were recorded for scores across the following domains of the PCRI: Support, Satisfaction, Involvement, Communication and Limit Setting. The validity indicator data for social desirability and inconsistency also suggested a robust dataset. Statistically significant improvements over time were recorded for all but one of the self-identified needs within the assessment wheel, including Parent-child Relationship, Behaviour, Routines, Physical Development and Education. The interview series and online survey corroborated these statistical findings, suggesting: positive outcomes; improved parent-child communication; establishment of routines; enjoyment of being a parent; increased self-efficacy; improved confidence and reduced anxiety; and supported in role as parent.
- The home-based approach to service delivery was key to the success of PwP, potentially allowing the project workers to observe parent-child interactions in the environment in which they were parenting, while also providing a familiar environment for parents where learning carries the potential to be extended to other children.
- The relationship between the Barnardos project workers and parents was central to the success of the programme, notably the collaborative and participatory way of working, and the establishment of a trusting relationship over time.
- The focus on the parent-child relationship and a reflective way of working was perceived positively by staff and parents, contributing to overall improved confidence in parental capacity and self-efficacy, along with a sense of being better able to cope.
- While it was more challenging to deliver the programme in a chaotic environment where there were substance misuse issues, it was found that where a parent had received treatment or was in active rehabilitation, the programme worked well. These parents had experience of working in reflective ways and were open to engagement with the Barnardos project workers.
- The tailored, flexible manualised approach was perceived as working well, complementing other work with parents, and impactful when working with parents with more complex reasons for referral.
- The inclusion of children in elements of the programme (where possible) was perceived as very important to parents, children and staff. Children in particular were able to reflect on the positive impact of the programme on their family function and overall social and emotional well-being.
- The variety of plug-in booklets, along with the crisis management and practical support approaches, provided staff with a range of options to meet the needs of parents. While some plug-ins were less frequently used, staff reported a preference to keep all existing materials, with plug-ins described as complementary and appropriate.



- The level of experience, training and skill of staff reportedly led to a high level of professional autonomy and judgement in implementation, and in tailoring the programme to families at a local level.
- The programme was highly regarded among external stakeholders, who emphasised the value of the home-based element, worker-parent relationship and the capacity of the programme to complement other work, including where parents were open to social work.

## 6.8 CHALLENGES OF PARTNERSHIP WITH PARENTS™

While the majority of findings were markedly positive, a number of challenges and opportunities for learning emerged from the programme.

- Parents may present with multiple and complex needs. Where a family is in chaos or crisis, PwP may be less impactful. The tailored and flexible nature of the programme allows for breaks in such instances, and the additional crisis management approaches can support practitioners to work with parents through crises. Nevertheless, PwP will not work for all parents at all times.
- Some staff expressed dissatisfaction with the PCRI, describing the tool as inappropriate and outdated. However, this view was different to those expressed by parents.
- Maintaining engagement and commitment was a challenge faced by some staff, although this was more likely where the family presented with more complex issues.
- Fathers were less likely to be the main participant in PwP, although the representation of fathers (24%) was above average when compared to the international literature; for example, an average of 17% was found in a systematic review conducted by Davison et al. (2016). Where parents were separated, it was more challenging to engage fathers in programme delivery. This is not unusual in a family support context.

## 6.9 RECOMMENDATIONS FOR POLICY AND PRACTICE

Overall, the findings of this evaluation offer a valuable contribution to policy and practice development in the area of parenting supports, particularly on the benefits for children of targeted parenting interventions.

- PwP is an example of a successful targeted programme for parents with complex needs who benefit from receiving input and support on a one-to-one basis in the home. PwP has been shown to work well with parents who have been referred from statutory bodies with multiple referring needs, where, in some cases, group-based programmes were previously deemed unsuitable. In essence, these parents with high levels of support needs appear to do well within the PwP programme.
- PwP should be incorporated as part of the audit of parenting programmes being undertaken by the Department of Children and Youth Affairs under the First 5 strategy. Once complete, this audit will help shape the tiered model of publically funded parenting services to be delivered on the basis of universal provision, with extra support available for parents in line with their level of need on a progressive basis.
- A specific goal of the First 5 strategy is to increase home-based parenting supports for families who need it. A continuum of need will be established and will build on the current Public Health Nurse home visit provision. PwP should inform, and be used in the design of, this continuum based model.
- Drawing on the strengths identified in the PwP programme (that is, it worked well with parents with substance misuse issues, or those open to social work involvement) there is plenty of scope to promote the impact of the programme among key agencies and professionals such as Drug Treatment Centres, Drug and Alcohol Taskforce agencies.
- PwP proved beneficial to parents experiencing mental health difficulties, including those experiencing isolation due to parenting alone and issues caused by environmental factors. Adding home-based parenting supports to the suite of non-medicinal, community-based services available to parents with mild-to-moderate mental health difficulties available by referral through primary care should be explored.
- A high proportion of parents cited separation as the primary reason for undertaking PwP and a significant proportion of parents (64%) were lone parents. The availability of home-based parenting supports, such as PwP, to lone parents and parents going through separation should be increased. Given fathers make up just 5% of the lone parent cohort and around a quarter of (study) parents overall, there should be specific emphasis on promoting to fathers the benefits of such programmes for both parents and children.

### 6.10 CONCLUDING REMARKS

This mixed method evaluation of Partnership with Parents™, spanning an implementation period of five years, supports the need for a tailored, individualised, home-based parenting programme in Ireland – one that is delivered holistically, on a case-by-case basis, empowering parents in partnership with a trusted family worker. The evidence presented in this report demonstrates how the unique design and implementation of PwP works well within the complex, real-world, everyday lives of parents. Furthermore, the programme works well across a wide range of presenting needs, and the design allows flexibility to navigate changing or evolving needs over time. The evidence provided in this report demonstrates, not only the need for such a programme, but the successes of PwP for parents, children and professionals providing the programme.

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