Parenting engagement and support interventions for high risk groups

Short report on topic scoping by the Public Health Research Review Team

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1. Background

The original review question prioritised by the NIHR PHR programme was "What are the best parenting engagement and support interventions for different population sub-groups?"

The definition of "parenting engagement and support interventions" is extremely broad and can range from informal community support (eg mother and baby groups) and generic support provided by health visitors or social workers to formal therapeutic interventions delivered by clinical health psychology or psychiatric services. The Early Intervention Foundation (EIF) defines parenting interventions as "advice and treatment offered to parents with the primary aim of supporting children's social, emotional and intellectual wellbeing".

This support is widely commissioned and provided in the form of "parenting programmes". There are a vast number of different programmes designed either to provide generic support, or as tailored support for parents or children with specific characteristics, of which a large number have been developed or adapted specifically for delivery in the UK.

We therefore asked both experts and programme providers for advice and feedback on how the proposed review question could be best addressed. We received invaluable input from members of the Parenting Programmes Alliance and from Race Equality Foundation colleagues which clarified why it might be unhelpful to attempt to identify the "best" programmes for population subgroups.

Stakeholders highlighted that the current evidence base suggested that

1. Universal programmes had been demonstrated to be effective and cost effective in a number of high risk groups and recent reviews suggested there was a large number of effective programmes with no clear evidence that some were more effective than others or that effectiveness differed between population groups.
2. Many research reviews and policy reports highlight that it is more important for programme providers to be sensitive to individual families' needs and the reasons for, or barriers to, engagement with a programme rather than providing separate or different programmes (in line with policies of proportionate universalism, and being aware of the risk that separate targeted programmes can stigmatise both individual families and communities).

They also highlighted a number of ongoing randomised trials and evaluations that are currently adding to the evidence base and would provide further insights into the areas where further research on parenting programmes would be most useful to commissioners and providers.

We therefore proposed to NIHR that, rather than undertake the proposed review, we would provide this brief summary of the available evidence base, and of the ongoing and recent research, together with some suggestions on the implications of the current evidence base for future research commissioning.

2. Summary of findings and recommendations from recent key research and policy reviews

Almost 20 years ago, an evidence review found that most evaluated parenting programmes had been found to be effective and provided an evidence base to support commissioning.[1]
Shortly after, a study from the Joseph Rowntree Foundation found that parenting programmes were both effective and acceptable to ethnicity minority and low income families and advised the use of universal screening tools to identify parents who would most benefit from support.[2]

Whilst some evaluated programmes have been tailored to achieve specific outcomes, and some tailored for specific groups of parents or children, reviews did not generally identify specific programmes as more effective than others.

Narrative reviews.[3] and a subgroup meta-analysis of trial data. suggested that universal programmes can be equally acceptable and effective for different communities, including ethnic minority communities and more deprived communities.

There are also a number of reviews of the factors that promote engagement that have found that sensitivity to individual practical and socio-cultural needs and addressing the factors that promote engagement of individual families are crucial, irrespective of the nature or content of the specific intervention.

The original project scoping exercise in included in Appendix 1 and the most relevant evidence reviews identified by initial scoping are listed in Appendix 2.

3. Summary of recent and current research on parenting programmes

Previous and current evaluations of parenting interventions funded by NIHR have added significantly to the UK evidence base in this field. These projects have been funded under a number of different programmes including the PHR programme, the HTA programme and as Programme Development Grants; a current evaluation call has been issued by the Policy Research programme. The NIHR PHIRST programme is also currently evaluating a parenting programme for new parents in Nottinghamshire in collaboration with the commissioners and local providers.

This diversity of research programme funding reflects the diversity of parenting support interventions and the diversity of commissioning and funding arrangements: interventions may be delivered by local authority, NHS or community organisation staff and funded through local social services or NHS led programmes or, increasingly, through national government funded programmes funded through a number of different government departments.

Recent examples include the Department for Work and Pensions' Parental Conflict programme and the Ministry of Housing, Communities and Local Government-led Troubled Families programme. National government funding for both the Start for Life and Family Hubs programmes was jointly announced by the Department of Education and Department of Health & Social Care in October 2021 and whilst the Department for Education has commissioned the evaluation of Family Hubs (and related parenting programmes), the evaluation of the Start for Life programme is currently being commissioned by the NIHR Policy Research programme.

Evidence that the intervention effectiveness observed in a trial setting can be replicated in practice has been provided by evaluations such as the Parenting Early Intervention Pathfinder (PEIP) supported by the Department of Education. This evaluation compared Incredible Years, Triple P and Strengthening Families Strengthening Communities programmes, delivered across 18 different local authorities. The project report concluded "Evidence-based parenting programmes can be implemented successfully on a large scale in community settings despite the lack of concentrated and sustained support available during a controlled trial".[5]

A list of programmes evaluation by the EIF Guideline is provided in Appendix 3 and an annotated list of recent and current research commissioned by NIHR is provided in Appendix 4.

4. Implications for future research commissioning

Published research and policy reviews, and the primary research commissioned by NIHR, have generated a number of recommendations in relation to the future direction for research to support the commissioning of parenting programmes.

There is already a very substantial evidence base for the effectiveness and cost effectiveness of some widely implemented parenting programmes and a number of the programmes currently delivered in the UK have been subject to randomised trials. There is also a consensus based on randomised trial evidence that both universal parenting programmes and programmes developed to

address specific aspects of parenting are effective if delivered with sufficient fidelity to the evaluated programme content (for example HENRY or "Health, exercise, nutrition for the really young" which addresses childhood nutrition). There is also a consensus that both universal and targeted or tailored programmes are effective and that universal programmes are effective for higher risk families including poorer and ethnic minority families.

There are a number of areas where future research could address gaps in the evidence base and inform future programme commissioning and delivery. This includes both

  a. trials and service evaluations of existing programmes that have already be developed and successfully implemented and
  b. more generalisable research that could usefully inform commissioning and delivery of a much broader range of programmes, with a focus on how to identify individual families that could benefit most from support, and how to best support their engagement with interventions.

Some specific examples are provided below.

  1. *Randomised controlled trials:* To further develop the evidence for the effectiveness and cost effectiveness of specific programmes, there is potential to commission definitive trials of programmes for which pilot studies have already reported. These include
     • NIHR- funded pilot trial of the Incredible Years Infant and Toddler Program (E-SEE)
     • NIHR-funded feasibility study for an intervention to support families of young children with intellectual disability (E-PAtS).

  2. *Targeting interventions:* Given resource constraints, both universal and targeted programmes need to ensure they can identify and engage families at highest risk of adverse outcomes without the additional support these programmes provide.

Research question: What are the most effective strategies for identifying and engaging families at increased risk in order to offer parenting interventions?

Research question: How feasible, acceptable, effective are the assessment tools currently in use to identify those who benefit most from the offer of additional support?

Tailoring support: Enabling parents to engage with the offered support requires an understanding of their most immediate support needs and an understanding of the practical, social, economic and cultural barriers that may make it more difficult for parents to accept support or engage with programmes[6]

Research question: What forms of support or content do parents want and need most from parenting programmes; what aspects of current programmes do they value most?

Research question: What factors make it easier for families to accept or sustain engagement with parenting interventions? What are the reasons that families find it difficult to accept or sustain engagement with parenting interventions?

References

1. Moran P, Ghate D, Van Der Merwe A, Policy Research Bureau. What works in parenting support?: A review of the international evidence. London: DfES Publications; 2004.
2. Scott S, O'Connor T, Futh A. What makes parenting programmes work in disadvantaged areas. The PALS trial. York: Joseph Rowntree Foundation. 2006.
3. Kane GA, Wood VA, Barlow J. Parenting programmes: a systematic review and synthesis of qualitative research. Child: care, health and development. 2007;33(6):784-93
4. Gardner F, Leijten P, Mann J et al. Could scale-up of parenting programmes improve child disruptive behaviour and reduce social inequalities? Using individual participant data meta-analysis to establish for whom programmes are effective and cost-effective, Public Health Research, 10.3310/phr05100, 5, 10, 2017.
5. Lindsay, G., Strand, S, Davis, H., A comparison of the effectiveness of three parenting programmes in improving parenting skills, parent mental-well being and children's behaviour when implemented on a large scale in community settings in 18 English local authorities: the parenting early intervention pathfinder (PEIP). BMC Public Health, 2011;11(1), pp.1-13.
6. Hackworth NJ, Matthews J, Westrupp EM, Nguyen C, Phan T, Scicluna A, Cann W, Bethelsen D, Bennetts SK, Nicholson JM. What influences parental engagement in early intervention? Parent, program and community predictors of enrolment, retention and involvement. Prevention Science. 2018 Oct;19(7):880-93.

Appendix 1: Results of initial database scoping (Completed March 2021)

What are the best parenting engagement and support interventions for different population subgroups	The focus needs to be on marginalised groups: people on low incomes, people from ethnic minority groups.	Need to define outcomes – engagement for what purpose. Difference between engagement with parents and engagement for parenting. Challenging search-wise. Key issue relates to recruitment. Engagement strategies include: monetary incentive, setting, testimonial, advertisement, and engagement package. Challenge is separating parental engagement e.g. with treatment/education from engagement with parenting. Wales document (2014)[1]	Findings predominantly drawn from literature reviews and qualitative studies[2,3]. Large literature on issues (1427 results for Parenting and Public Health – NHS Evidence[4]). Not plentiful on interventions with health outcomes. Reviews of all populations by outcome. Large representation of educational literature. Campbell protocol on truancy /delinquency. Low methodological quality of studies[5]	Targeted systematic reviews for specific subpopulations OR UK focus only (to include desk review of current UK practice)?	Limited number of populations can be covered within resource. Key issue is sampling: based on heterogenous groups selected for diversity of key characteristics? or groups requiring shared mechanisms? Or a limited number of groups selected more qualitatively as "case studies". Potential to produce a research brief to allow further primary research in specific groups

What are the feasibility, acceptability and effectiveness (Outcomes) of parenting engagement and support interventions (Intervention(s)) for different population subgroups (Population)?

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Which specific parenting engagement and support interventions are feasible, acceptable and effective for marginalised groups: people on low incomes, and people from ethnic minority groups?

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	Population	Intervention	Comparison	Outcomes
Key words	'Populations outside of mainstream society' migrants, Irish Travellers, homeless people, drug users, sex workers and people living in deprivation, ethnic minorities, women and girls, people with physical and mental disabilities, and Lesbian Gay Bisexual Transgender Queer and Intersex (LGBTQI) people. Also, low socio-economic status? Protected characteristics?	Parenting engagement and support interventions		"Best"? Need to specify outcomes. Health Outcomes/ Cost Effectiveness? Or including educational outcomes?

Marginalised Groups - Exclude: frail elderly populations, care home residents

	Population	Intervention	Comparison	Outcomes
Synonyms - related terms and variant spellings	Ethnic minorities, women and girls, people with physical and mental disabilities, Lesbian Gay Bisexual Transgender Queer and Intersex (LGBTQI) people Marginalised/ Excluded Low Income*	Parenting engagement and support interventions Parent engagement; Parent involvement Parenting, parental skills training, parental role, parenting programmes		Health Outcomes? child development
Subject headings eg MeSH	**Social Marginalization Marginalization, Social**	**Parenting**		**Parent-Child Relations Parent Child Relationship Parent-Child Relationship**

Which databases to search?

Database	Coverage
Social Care Online/NHS Evidence	UK Coverage
ASSIA	Social Care UK focus
MEDLINE	Public Health coverage
EMBASE	Public Health coverage
Web of Knowledge	Social Care/Social Services
Scopus	Social Care/Social Services

1. Parenting in Wales: Guidance on engagement and support (Welsh Government, 2014) www.gov.wales/docs/dsjlg/publications/cyp/140910-parenting-in-wales-guidance-en.pdf
2. Pote I, Doubell L, Brims L, Larbie J, Stock L, Lewing B. Engaging disadvantaged and vulnerable parents: An evidence review. Early Intervention Foundation (pdf). 2019 Apr.
3. Cramphorn K. Engaging parents in community-based support to develop co-parental relationships that positively impact on their children: a voluntary sector perspective. Voluntary Sector Review. 2020 Jul.
4. Doubell L, Stock L, Acquah D, McBride EB. Inter-parental relationship support services available in the UK: Rapid review of evidence. London: Early Intervention Foundation. 2017.
5. Gonzalez C, Morawska A, Haslam DM. Enhancing Initial Parental Engagement in Interventions for Parents of Young Children: A Systematic Review of Experimental Studies. Clin Child Fam Psychol Rev. 2018 Sep;21(3):415-432. doi: 10.1007/s10567-018-0259-4.

Appendix 2: Previous research and policy reviews (2002-2022)

1.   Sampaio F, Nystrand C, Feldman I et al. Evidence for investing in parenting interventions aiming to improve child health: a systematic review of economic evaluations, European Child & Adolescent Psychiatry, 10.1007/s00787-022-01969-w, (2022).

2.   Edwards, A., Gharbi, R., Berry, A., & Duschinsky, R. (2021). Supporting and strengthening families through provision of early help: a rapid review of evidence. National Children's Bureau, London.

3.   Vseteckova J, Boyle S, Higgins M, A systematic review of parenting interventions used by social workers to support vulnerable children, Journal of Social Work (2021), 10.1177/14680173211037237.

4.   Cramphorn K. Engaging parents in community-based support to develop co-parental relationships that positively impact on their children: a voluntary sector perspective. Voluntary Sector Review. 2020 Jul.

5.   Pote I, Doubell L, Brims L, Larbie J, Stock L, Lewing B. Engaging disadvantaged and vulnerable parents: An evidence review. Early Intervention Foundation. 2019 Apr.

6.   Gonzalez C, Morawska A, Haslam DM. Enhancing Initial Parental Engagement in Interventions for Parents of Young Children: A Systematic Review of Experimental Studies. Clin Child Fam Psychol Rev. 2018 Sep;21(3):415-432. doi: 10.1007/s10567-018-0259-4.

7.   Barlow J, Coren E. The effectiveness of parenting programs: a review of Campbell reviews. Research on Social Work Practice. 2018 Jan;28(1):99-102.

8.   Puthussery S, Chutiyami M, Tseng PC, Kilby L, Kapadia J. Effectiveness of early intervention programs for parents of preterm infants: a meta-review of systematic reviews. BMC Pediatrics. 2018 Dec;18(1):1-8.

9.   Asmussen K, Waddell S, Molloy D, Chowdry H. Commissioning parenting and family support for troubled families. Early Interventions Foundation report. EIF 2017

10.   Medlow S, Klineberg E, Jarrett C et al. (2016).A systematic review of community-based parenting interventions for adolescents with challenging behaviours, Journal of Adolescence, 10.1016/j.adolescence.2016.07.003, 52, 1, (60-71),

11.   Stevens M. The cost-effectiveness of UK parenting programmes for preventing children's behaviour problems–a review of the evidence. Child & Family Social Work. 2014 Feb;19(1):109-18

12.   Parenting in Wales: Guidance on engagement and support (Welsh Government, 2014) www.gov.wales/docs/dsjlg/publications/cyp/140910-parenting-in-wales-guidance-en.pdf

13.   Mytton J, Ingram J, Manns S, Thomas J. Facilitators and barriers to engagement in parenting programs: A qualitative systematic review. Health Education & Behavior. 2014 ;41(2):127-37.

14.   Whittaker KA, Cowley S. An effective programme is not enough: A review of factors associated with poor attendance and engagement with parenting support programmes. Children & Society. 2012 Mar;26(2):138-49.

15.   Barlow J, Smailagic N, Bennett C, Huband N, Jones H, Coren E. Individual and group based parenting programmes for improving psychosocial outcomes for teenage parents and their children. Cochrane Database of Systematic Reviews. 2011(3).

16.   Kane GA, Wood VA, Barlow J. Parenting programmes: a systematic review and synthesis of qualitative research. Child: care, health and development. 2007 Nov;33(6):784-93.

17.   Moran P, Ghate D, Van Der Merwe A, Policy Research Bureau. What works in parenting support?: A review of the international evidence. London: DfES Publications; 2004 Jul.

Also see EIF Guidebook for compendium of evaluated programmes
https://guidebook.eif.org.uk/ (and https://www.eif.org.uk/reports - 55 reports including rapid evidence reviews)

Appendix 3: List of evaluated UK parenting programmes included in Early Intervention Foundation Guidebook

All classified as programmes delivered in the UK; defined as "selective" or "indicated" programmes; all settings; all ages 0 to 18; all modes of delivery

a.   Inclusion based on social contextual factors (fostering, parental divorce, material disadvantage, ethnicity, experience of abuse/trauma/crime) and/or identified behavioural problems

1.   5 Pillars of Parenting (4–11 Years) - targeted-selected programme, aimed at Muslim parents with a child between the ages of 4 and 11 years.
2.   Child-Parent Psychotherapy (CPP) - psychoanalytic intervention targeting mothers and preschool children (aged three to five) who may have experienced trauma or abuse or are otherwise at risk of an insecure attachment and/or other behavioural and emotional problems
3.   Circle of Security Parenting (COS-P) - parenting programme for caregivers of children between the ages of 4 months and 6 years. It is a targeted-selective programme delivered in a variety of settings (e.g. children's centres, CAMHS units, fostering and adoption units); aims to improve children's attachment
4.   Empowering Parents, Empowering Communities (EPEC) - for disadvantaged families experiencing behavioural difficulties with a child between two and 11
5.   Enhanced Triple P (Level 5) provides adjunctive interventions (alongside a Level 4 Triple P programme) to address family factors that may impact upon parenting
6.   Families and Schools Together (FAST) - community strengthening multi-family group approach designed to build protective factors for children and build stronger families and communities.
7.   Family Check-up (FCU) for Children - strengths-based, family-centred intervention that motivates parents to use parenting practices
8.   Family Nurse Partnership (FNP) - home-visiting programme for young mothers expecting their first child.
9.   Functional Family Therapy (FFT) - therapy for young people between 10 and 18 years involved in serious antisocial behaviour and/or substance misuse
10.   Group Lifestyle Triple P - a targeted programme for parents or caregivers of children 5 - 10 years, concerned about their weight and activity level
11.   Helping the Noncompliant Child (HNC) - programme for parents having difficulties managing the behaviour of a child between three and eight years
12.   Incredible Years (IY) Toddler programme - for parents (typically living in disadvantaged communities) with a child between the ages of two and three
13.   Incredible Years (IY) Preschool basic programme - for parents with concerns about the behaviour of a child between the ages of three and six
14.   Incredible Years (IY) School age programme - for parents with concerns about the behaviour of a child between the ages of six and 12
15.   Incredible Years (IY) ADVANCE programme - targeted parenting programme for parents in addition to BASIC programme if other risk factors present
16.   Keeping Foster and Kinship Parents Trained and Supported (KEEP) – group programme for foster/ kinship carers with child between 5 and 12 with behavioural difficulties.
17.   PEEP Learning Together Programme - PEEP for 3s/4s is for parents with children between three and four/ four and five
18.   Let's Play in Tandem - school-readiness programme for children aged three living in socially disadvantaged communities
19.   Level 4 Group/Standard Triple P - targeted-indicated intervention for parents with a child between 0 and 12 who have concerns about their child's behaviour
20.   Level 4 Standard Teen Triple P - targeted-indicated intervention for parents with a child between 12 and 16 who have concerns about their child's behaviour
21.   Level 5 Pathways Triple P - targeted-indicated programme for parents who have difficulty regulating their emotions and at risk of harming their children

22.   Mellow Toddlers - group-based programme for mothers or fathers (separate groups for each) with identified parenting difficulties with a child aged 1-3

23.   Multisystemic Therapy (MST) - for families with a young person aged 12–17, who are at risk of going into care due to serious antisocial and/or offending behaviour.

24.   Multi-systemic Therapy for Child Abuse and Neglect (MST-CAN) - intensive treatment for families who have recently been reported to Child Protection Services for physically abusing and/or neglecting a child between 6 and 17

25.   Multisystemic Therapy for Problem Sexual Behaviour (MST-PSB) - targeted-indicated programme for families with a young person aged between 10-17.5 years who has committed a sexual offence/ demonstrated problematic sexual behaviour

26.   ParentChild+ – formerly known as Parent Child Home Programme (or PCHP) - home-visiting programme primarily targeted at low-income families with children between the ages of 2 and 3

27.   Parents Plus Adolescent Programme (PPAP) - for parents who have concerns about the behaviour or emotions of a child between the ages of 11 and 16

28.   Parents Plus Children's Programme (PPCP) - for parents with a child between 6 and 11, with concerns about behaviour, learning or emotional development

29.   Parents Plus Parenting when Separated - for children between the ages of 0 and 18 whose parents are going through/have gone through, a separation or divorce

30.   Parents as First Teachers (PAFT – also referred to as Parents as Teachers) - for parents with a child aged three or under, typically living in a disadvantaged community

31.   Raising early achievement in literacy (REAL) - aims to improve children's early literacy by teaching parents effective strategies for supporting their preschool children's learning

32.   The New Forest Parenting Programme (NFPP) - for parents with a child between the ages of three and 11 with moderate to severe symptoms of ADHD

33.   Trauma-Focused Cognitive Behavioural Therapy (TF-CBT) is a therapeutic intervention for children and families who have been exposed to a traumatic event

34.   Treatment Foster Care Oregon Prevention (TFCO-P)*- for families with a looked-after child between 3 and 6 who are in foster/residential placements

35.   Treatment Foster Care Oregon – Adolescent (TFCO-A)* is for young people between the ages of 12 and 18, and their families

36.   Family Transitions Triple P (FTTP) Level 5 - intensive intervention programme for parents experiencing difficulties as a consequence of separation or divorce

37.   Triple P Online - web-based parenting intervention used as an early intervention strategy or as a more intensive programme for parents with children up to 12 years with significant social, emotional or behavioural problems.

b.   Inclusion criteria based on clinical diagnosis

1.   4Rs2Ss – families with child between 7 and 11 years old who are diagnosed with oppositional defiant disorder or conduct disorder

2.   Auditory Verbal Therapy (AVT) - equips parents and carers with the skills to maximise their deaf child's listening and spoken language development

3.   Early Talk Boost (ETB) - targeted intervention for children between the ages of 3 and 4 with delayed language

4.   Stepping Stones Triple P/Standard Tripe P - for parents/ caregivers of children aged 0-12 with a developmental disability, such as Down's Syndrome or Autistic Spectrum Disorder

c.   Targeted interventions delivered to children (not parents/carers or families)

1.   Blues Programme - a school-based cognitive behavioural therapy programme- for pupils between the age of 13 and 19 experiencing depressive symptoms

2.   Building Blocks - preschool mathematics curriculum for children of 3 and 4

3.   FRIENDS for Youth - aims to improve resilience in secondary school children

4.   Incredible Years Child Training (Dinosaur School) - group-based programme for children with behavioural difficulties between the ages of 4 and 8.

5.   Journey of Hope Primary - school-based programme for children aged 7–11

6.   The Nuffield Early Language Intervention (NELI) (20 weeks OR 30 weeks) - oral language programme; targeted programme for children from 4 to 6

7.   Nurture Groups – short-term intervention grounded in Bowlby's attachment theory, intended for primary school children who have difficulties coping in mainstream classes, at risk of underachievement

8.   The PATHS® Preschool/Kindergarten curriculum promotes emotional and social competencies and reduces aggression and behaviour problems in preschool/kindergarten-aged children

9.   Pyramid Club - targeted programmes for primary school/transition/secondary school children who are identified as being quiet, shy, and behaviourally more likely to internalise

10.   Reading Recovery - school-based literacy programme for children aged 5 and 6 with reading difficulties

11.   Second Step Early Learning (SSEL) pre-school classroom programme for 4-5 year olds designed to increase students' school success and decrease problem behaviours by promoting social-emotional competence and self-regulation; universal programme that has been targeted at disadvantaged areas

12.   Switch-on - schools-based literacy programme for children between 6 and 14 working below age expectations in reading and writing

13.   Talk Boost Key Stage 1 (TalkBoost KS1) is an intervention for children with delayed language for children between the ages of 4 and 7

d.   Programmes listed on website but not currently included in Early Intervention
Foundation Guidebook due to insufficient evidence to date

•   Active Parenting
•   Assertive Outreach Model, including Baby Express
•   Baby Express
•   Baby Steps
•   Bookstart Baby ; Bookstart Corner
•   Born to Move
•   Circle of Security (home visiting)
•   Enhancing Adoptive Parenting
•   Enhancing Parenting Skills programme (EPAS)
•   Families and Schools Together (FAST) Baby
•   Family Action's Perinatal Support Project (evolved from Newpin)
•   Go-Givers Make A Difference Challenge (MADC)
•   It Takes Two to Talk
•   Kaleidoscope Play & Learn
•   Learning Together Programme – Early PEEP: Level 1s & 2sl; Baby PEEP
•   Mellow Babies; Mellow Bumps
•   Modified Interaction Guidance
•   My Baby's Brain
•   Parent Infant Project (PIP)
•   Parenting Wisely
•   Parents 1st Community Parent Volunteer Peer Support Programme
•   Parents as Partners (formerly known as Supporting Father Involvement)
•   Second Step Middle School
•   Sing & Grow Programme
•   Strengthening Families Program
•   TalkAbility
•   Target Word
•   The Newborn Behavioral Observations (NBO) System
•   Triple P Primary Care
•   Triple P Selected Seminar Series
•   Video-feedback Intervention to Promote Positive Parenting – Sensitive Discipline (VIPP-SD)
•   Video-feedback Intervention to Promote Positive Parenting (VIPP)

Appendix 4: Current and recent NIHR funded evaluation of parenting programmes

A. Current funded and ongoing projects

1. Lodder A, Mehay A, Pavlickova H et al. Evaluating the effectiveness and cost effectiveness of the 'strengthening families, strengthening communities' group-based parenting programme: study protocol and initial insights. BMC Public Health. 2021 Dec;21(1):1-3. *(TOGETHER RCT due to be completed in 2022)*
2. Farris O, Royston R, Absoud M et al. Clinical and cost effectiveness of a parent mediated intervention to reduce challenging behaviour in pre-schoolers with moderate to severe intellectual disability (EPICC-ID) study protocol: a multi-centre, parallel-group randomised controlled trial. BMC Psychiatry. 2020 Dec;20(1):1-1. *(Triple P programme due to be completed in 2022)*
3. Raouna A, Malcolm R, Ibrahim R, MacBeth A. Promoting sensitive parenting in 'at-risk'mothers and fathers: A UK outcome study of Mellow Babies, a group-based early intervention program for parents and their babies. Plos One. 2021 Feb 3;16(2):e0245226. *(due to be completed in 2022)*
4. Cavallaro FL, Gilbert R, Wijlaars L, Kennedy E, Swarbrick A, van der Meulen J, Harron K. Evaluating the real-world implementation of the Family Nurse Partnership in England: protocol for a data linkage study. BMJ Open. 2020 May 1;10(5):e038530. *(due to be completed in 2022)*
5. Together in Prison: Developing a parenting programme to promote family wellbeing for young fathers in prison *(due to be completed 2023)*
6. PHIRST evaluation of Nottinghamshire Start for Life specialist parenting support for infants from birth onwards *(due to be completed in 2023)*

B. Current calls

Policy Research Programme call for Evaluation of the Start for Life Programme
This will include evaluation of infant and early years parenting programmes and support (https://www.nihr.ac.uk/documents/policy-research-programme-evaluation-of-the-start-for-life-programme-improving-outcomes-in-the-1001-critical-days/30481) Projects to start Feb 2023 (suggested end date June 2026).

Evaluation will complement the current Department for Education-led evaluation of Family Hubs and parenting programmes. https://www.gov.uk/government/publications/evaluation-of-family-hubs

C. Previous NIHR funded evaluations of parenting programmes

1. Gardner F, Leijten P, Mann J et al. Could scale-up of parenting programmes improve child disruptive behaviour and reduce social inequalities? Using individual participant data meta-analysis to establish for whom programmes are effective and cost-effective. Public Health Res 2017;5(10).

Findings suggested that programmes could be equally effective for disadvantaged or minority groups
"There is no evidence that the benefits of the IY parenting intervention are reduced in disadvantaged or minority families; benefits are greater in the most distressed families, including parents who are depressed….further research is needed on enhancing equality of access to interventions"

2. Blower SL, Berry VL, Bursnall MC et al , Enhancing Social-Emotional Outcomes in Early Years (E-SEE): Randomized Pilot Study of Incredible Years Infant and Toddler Programs. Journal of Child and Family Studies. 2021 Aug;30(8):1933-49. Bywater T, Berry V, Blower SL, et al Enhancing Social-Emotional Health and Wellbeing in the Early Years (E-SEE): a study protocol of a community-based randomised controlled trial with process and economic evaluations of the incredible years infant and toddler parenting programmes, delivered in a proportionate universal model. BMJ Open. 2018 Dec 1;8(12):e026906.

Key findings: First pilot of a proportionate universal delivery of the IY parent program; trial retention was high at 88% at final follow-up; emerging findings suggest a definitive trial is warranted; Definitive trials should consider methods to enhance intervention uptake; trials should consider intervention compliance with relevant guidelines.

3. Morpeth L, Blower S, Tobin K, Taylor RS, Bywater T, Edwards RT, Axford N, Lehtonen M, Jones C, Berry V. The effectiveness of the Incredible Years pre-school parenting programme in the United Kingdom: a pragmatic randomised controlled trial. Child Care in Practice. 2017 Apr 3;23(2):141-61; Edwards RT, Jones C, Berry V et al. (2016), Incredible Years parenting programme: cost-effectiveness and implementation", Journal of Children's Services, Vol. 11 No. 1, pp. 54-72. https://doi.org/10.1108/JCS-02-2015-0005

RCT and intervention funded by Birmingham City Council in collaboration with NIHR CLAHRC South West Peninsula/ NIHR CLAHRC Yorkshire & Humber. Paper concluded "This study confirms the effectiveness of IY in a public system delivered with fidelity by regular children's centre staff, supporting findings from a similar trial in Wales. These results support the wider roll-out of IY to similar children." Cost-effectiveness analysis reported "The IY programme was found to have a high probability of being cost-effective, shifting an additional 23% of children to below the cut-off on the SDQ compared to the control group, at a cost ranging from £1612-£2418 per child, depending on the number of children in the group."

4. Mytton J, Ingram J, Manns S, Stevens T, Mulvaney C, Blair P, *et al.* The feasibility of using a parenting programme for the prevention of unintentional home injuries in the under-fives: a cluster randomised controlled trial. *Health Technol Assess* 2014;18(3)

Findings "This feasibility study has developed an innovative injury prevention intervention … a trial should target all families attending children's centres in disadvantaged areas. The intervention could be delivered by a health professional supported by a member of the children's centre team in a community setting."

5. Coulman E, Gore N, Moody G, Wright M, Segrott J, Gillespie D, et al. Early positive approaches to support for families of young children with intellectual disability: the E-PAtS feasibility RCT. Public Health Res 2022;10(2)

Findings "The E-PAtS intervention was well received and outcomes for families were positive. A barrier to future organisation participation is funding for intervention costs. A definitive trial to test the clinical effectiveness and cost-effectiveness of E-PAtS would be feasible."

6. O'Farrelly C, Barker B, Watt H, Babalis D, Bakermans-Kranenburg M, Byford S, *et al.* A video-feedback parenting intervention to prevent enduring behaviour problems in at-risk children aged 12-36 months: the Healthy Start, Happy Start RCT. *Health Technol Assess* 2021;25(29).

Findings "VIPP-SD is effective in reducing behaviour problems in young children when delivered by health visiting teams. Most of the effect of VIPP-SD appears to be retained over 24 months. However, we can be less certain about its value for money".

7. Thompson MJ, Au A, Laver-Bradbury C et al Adapting an attention deficit hyperactivity disorder parent training intervention to different cultural contexts: The experience of implementing the New Forest Parenting Programme in China, Denmark, Hong Kong, Japan, and the United Kingdom. PsyCh journal. 2017 Mar;6(1):83-97. (RP-DG-0614-10002).

Paper outlines "the adaptions that were needed in order to be able to deliver the program in different countries with their own expectations of parenting, culture, and language. Training had to be differently focused; manuals and handouts had to be revised, translated and back-translated; and supervision had to be delivered at a distance to maintain the fidelity of the program."

Examples of other previous research evaluations funded by charities, local and national government

Funded by AIM Foundation: Raouna A, Malcolm R, Ibrahim R, MacBeth A. Promoting sensitive parenting in 'at-risk'mothers and fathers: A UK outcome study of Mellow Babies, a group-based early intervention program for parents and their babies. Plos One. 2021 Feb 3;16(2):e0245226. *Pragmatic pre-post outcome evaluation; no control group – positive short term impacts*

Funded by a consortium of four local authorities in South Wales: Cardiff, Torfaen, Newport and Caerphilly and the Welsh Assembly Government: Simkiss DE, Snooks HA, Stallard N, Kimani PK, Sewell B, Fitzsimmons D, Anthony R, Winstanley S, Wilson L, Phillips CJ, Stewart-Brown S. Effectiveness and cost-effectiveness of a universal parenting skills programme in deprived communities: multicentre randomised controlled trial. BMJ Open. 2013 Jul 1;3(8):e002851.