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VOLUME ONE

Part A: Main Thesis

Part B: Critical Literature Review

Part C: Clinical Case Study

A thesis submitted in partial fulfilment of the degree of Doctorate in Clinical Psychology (DPsych) Portfolio

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May 2015

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Vol. 2
pp 50-127: **Appendix A2.** Lee, N. & Lee, S. (2011) The Parenting Course Manual, London: Alpha international
pp 129-158: **Appendix A3**. Caring for Kids handouts.

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Preface

I have worked as a Clinical Psychologist with children and families for 20 years. The theme of this portfolio relates to parent and child well being. The research component evaluates a parenting course, the critical literature review takes as its focus the impact of social media on adolescent friendships, an important concern for parents today and the case study illustrates a piece of work carried out with a parent and her child to improve their relationship, the child's well being and bolster the parent's role. The three components are linked by my passion for working with families and helping them manage their children and enjoy family life more. In addition, each component of this portfolio served to further hone my research skills, particularly in relation to quantitative methods and critical thinking.

The background to my research subject (Part A) is that in 2009 I started working as a volunteer for my church helping to run The Parenting Children Course in a new setting: around a table, with 6-10 single mothers on a housing estate. I had recently had my third child whilst living abroad for three years and had returned to an honorary clinical post in Paediatric Psychology. It was a time of feeling rusty as a clinician and somewhat overwhelmed as a parent with now three strong willed children. I signed up to volunteering because in spite of my own struggles, I was passionate and interested in parenting, how it works, what works. Working with inner city parents in a non-clinical capacity felt very fulfilling of my interests without the constraint of being the 'expert clinician' or the 'expert parent'.

The main facilitator of this group took charge of the group environment by rearranging the meeting room to have chairs around a table with a plastic table cloth on it, some cups, big teapot, biscuits, fruit and pastries. She told me this would make the women more comfortable. From the very first session, I was hooked. Sitting around having tea with these women was not only rewarding in terms of seeing visible change from week to week, but I experienced it genuinely as a place to share, listen, teach and learn all made possible by the warm, non-judgemental attitude of the leader, the 'kitchen table' setting and the sharing of one's own life whilst feeding in wisdom from the course material. It was this experience that gave me my thesis subject. I wanted to evaluate this programme, in this setting to see if it really did make a difference to families. Once I started the doctorate in fact, I was gently

reminded by my supervisor not to be ‘so enthusiastic’ but to remember to be a scientist and look at the data objectively. Wise words.

Whilst this version of The Parenting Children Course was my primary interest, when it came to planning my research, I decided that I should evaluate the ‘main’ programme, run Live at our church three times a year by the originators, Nicky and Sila Lee, as well as their new product: The Parenting Children Course on DVD. For two reasons this was important: one, the small inner city version came from the main programme and therefore knowing if that works is very important for credibility for the small course and two, personally I wanted to gain experience of quantitative research which I had not done since undergraduate days. My reasons for doing the doctorate were hence two fold: to bring my clinical and research skills up to date and to contribute to the progress of this parenting intervention that I experienced as very useful and potentially very impactful.

Employing a mixed methodology was both challenging and satisfying. I have enjoyed qualitative research in the past and doing Thematic analysis (Braun & Clarke, 2006) has built on my existing knowledge of searching for themes and making meaning from the data that I had gathered doing my previous degree. The learning curve for employing quantitative methods has been frighteningly steep at times but it has meant that I am not only more knowledgeable of quantitative methods, but more aware and critical in my reading of clinical literature and even media reports in terms of evaluating the rigour of the studies I am reading about and weighing up their credibility based on their methods of gathering and analysing data.

Carrying out the critical literature review (Part B) felt like another excellent exercise in pulling apart studies and assessing them not just for their content, but for their process as well. The subject I chose, ‘The impact of social media on existing adolescent friendships’ came from a personal curiosity as well as a clinical one. I was working with adolescents and my two older children were on the cusp of adolescence. What was very striking when talking with these teens was how the use of social media was absolutely central to their lives and particularly to their friendships. Those children who were not allowed to go on social media seemed to feel that their friendships were negatively affected. This in fact turned out to be an observation corroborated by the literature; Valkenburg and Peter (2009a) and others

argue, that for school connectedness, adolescents who more frequently used online communication were more likely than less frequent users to feel connectedness to school, by having friendships that were more cohesive.

I felt this topic would fit in with the portfolio's remit of parenting in that social media is here to stay (as emphasized by Subrahmanyam & Greenfield, 2008) and parents could benefit from understanding why it is important to their children and how best to manage it rather than to react adversely to what appears at face value, to be a negative influence in their children's lives.

It was very interesting to learn about the different theories that have sprung up in this field in the last few years. For example, a popular theory in the early days of the internet was the *displacement* hypothesis which states that online communication impairs the quality of adolescents' existing friendships, because it displaces the time that could be spent in more meaningful interactions with offline friends (Kraut et al., 1998; Mesch, 2003; Nie, 2001). Because online contacts are seen as superficially weak-tie relationships that lack feelings of affection or commitment, the internet is believed to reduce the quality of existing friendships among adolescents.

More recently, the *stimulation or increase* hypothesis emphasizes that more recent internet-based communication technologies are designed to encourage communication with existing friends. As a result, much of the time spent on online communication is used to maintain and deepen existing friendships, which eventually enhances their closeness (Bryant, Sanders-Jackson & Smallwood, 2006; Valkenburg & Peter, 2007).

Boyd (2008): "Despite the perception that social media is enabling teens to reach out to a new set of people online, the majority of teens define their peers and friendships by the relations fostered in school' (p. 177).

This more recent hypothesis seems to run contrary to most parents' feelings and fears on the subject and on what is presented by the media. Having an opportunity to carefully examine the evidence and its credibility has been extremely helpful in informing my practice on the subject.

Alongside building up my research skills, I was also keen to more sharply attune my clinical skills. For the case study therefore (Part C) I decided to be quite deliberate in practicing from a theoretical base. Before going abroad, I had become increasingly interested in Solution Focused Therapy (de Shazer, 1985). It aims to help people make changes in their lives in the shortest possible time. It holds that change comes from encouraging clients to describe their *preferred future* - what their lives will be like should the therapy work and by building on resources they already have. From these, clients are able to make necessary adjustments in their lives. The main difference for me as a clinician using this method was the questioning. In my clinical training, the focus was on getting a very clear picture of when the problem is *present,* in order to help the client. In Solution focused work, the therapist works hard to get a clear picture of what things are like when the problem is *absent.* I was drawn to the positive nature of this method and was keen to try and implement it. In spite of reading up on it and attending regular supervision from a solution focused therapist, I found executing the method in a pure fashion difficult. I found I naturally made hypotheses and was drawn to try more narrative and behavioural exercises to help the family. I was relieved then to find solution *oriented* therapy: a method developed by Selekman (2010) who advocated for a looser version of the solution focused method which allowed for the use of other theoretically based techniques as long as they were solution oriented.

This has been an exciting discovery for me as it is a natural fit for the way I work; allowing space for some hypothesising about why things are the way they are whilst remaining focused on moving the family on towards a solution rather than dwelling on the problem. It provides more of a framework to my practice than I might otherwise have as an experienced clinician. Exercising the purposeful discipline of following theory quite closely, I feel was a good exercise in refining my clinical skills and reminding me of the need for our practice to be evidence based as well as using the valuable tool of age and experience as well.

In sum, the aim of this portfolio is to demonstrate my attempts to further the field of parenting by addressing key gaps in the literature relating to technology and children, the impact of parenting interventions in community settings and the demonstration of clinical practice with children and families informed by a clear theoretical base. In

addition, my hope is that this portfolio will show the progress I have made as a researcher, observer and interpreter of information I have gathered from the research participants, the literature and my clients.

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PART A: MAIN THESIS

The Parenting Children Course Study: A Quantitative and Qualitative Evaluation of a Church Based Parenting Intervention in the Community

ABSTRACT

Introduction Evidence based parenting programmes have been shown to improve parenting competence and reduce child behaviour problems. More rigorous evaluations of such programmes are needed. This study provides such an evaluation of The Parenting Children Course run by Holy Trinity Brompton (HTB) church in London. The course runs Live, on DVD and in inner city settings with small groups. Quantitative methods were used to evaluate the first two versions and qualitative methods for the latter.

Method 84 parents participated in the Live course and 141 in the DVD courses (n=225). Five parents were interviewed from the inner city courses. Live and DVD formats were evaluated for *Parental disciplinary skills* using the APQ (The Short Alabama Parenting Questionnaire; Elgar, Waschbusch, Dadds & Sigvaldason, 2007); *Self-efficacy* using the TOPSE (Tool Of Parental Self Efficacy; Kendall & Bloomfield, 2005); *Child behaviour*, using the ECBI (Eyberg Child Behaviour Inventor; Eyberg, 1999); *General family functioning*, using the General Functioning Scale of the FAD (McMaster Family Assessment Device; Epstein, Baldwin & Bishop, 1983). The impact of changing leaders for the Live course and duration of the DVD course from five to ten weeks was also addressed. The study used 2x2 and 2x3 mixed factor ANOVAs to examine changes in parental scores between the start and end of the course and 3 months later. Semi-structured interviewing and Thematic analysis were used for the inner city version.

Results Parents improved in confidence, decreased negative parenting skills, reported better child behaviour and family functioning. Positive parenting skills were not impacted. The Live and DVD versions were equally effective. Neither changing the leader of the Live course nor the length of the DVD course affected change. Qualitative analysis revealed the leader, environment and group support were important to parents. Other important elements were viewing themselves as being able to change and increasing their understanding of themselves and their children. Strengths and limitations of the study, implications for clinical practice and directions for future research were discussed.

Chapter 1

Introduction

1.1 Background

The aim of this study is to provide a rigorous evaluation of The Parenting Children Course, a voluntary-sector parenting course run in the community by Nicky and Sila Lee, pastors at Holy Trinity Brompton (HTB) church in London. The course is run Live over five sessions, three times a year, with an average of 35 parents attending, as well as on DVD for church leaders to purchase and run in their communities. (See Appendix A2 for the guest manual script). In addition, this course has been adapted and run in an inner city setting for small groups of parents (See Appendix A3 for the handout). The study will use both quantitative and qualitative methodologies to evaluate the different versions of the course. Further details of the course and rationale for this study will be given at the end of this chapter.

Prior to that, this Introduction will provide an outline of the current literature highlighting the main parenting interventions evaluated to date, their theoretical underpinnings and outcomes observed so far for parents and children alike. Some discussion of the limitations of previous studies will be offered, particularly in relation to research design; however, given the huge volume of literature in this area, this chapter neither aims to be a critical nor a systematic literature review, but rather aims to provide a context for the current study in terms of highlighting key findings to date and providing a rationale for the study.

Studies were chosen for inclusion in this review based on their relevance to the issue being raised and their pertinence to the current study. The most well-known parenting intervention evaluations will be presented as they provide the main framework for the work carried out in the field to date. In addition, literature particularly relating to community, voluntary and faith based programmes will be examined as The Parenting Children Course is set in a church context and run by pastoral leaders.

As the current study aims to use both quantitative as well as qualitative methods, an outline of the issues raised in the literature in relation to qualitative and mixed methods will be given here as well.

It is hoped that at the end of this chapter, the reader will have a broad understanding of current research trends in the field as well as its limitations and some clarity as to how the current study responds to the need for such research highlighted by previous studies.

Day, Michelson, Thomson, Penney & Draper (2012) report that disruptive behaviour is the most common reason for referral to child mental health services particularly in inner city areas which impacts considerably on child and parental well being. Academic failure, crime, unemployment are some of the sequelae to conduct problems in childhood with considerable economic and social costs to society (Fergusson, Horwood, & Ridder, 2005).

Research suggests that it is possible to prevent and treat behavioural problems in children. Some of the most effective interventions target parenting skills because the quality of the parent-child relationship is strongly associated with children's wellbeing (Amussen, Matthews, Weizel, Bebiroglu & Scott, 2012). In addition, studies have shown that parenting programmes with a proven theoretical base provide an effective way to support the development of parenting skills. The sheer diversity of family life means that one size fits all approaches are unlikely to be uniformly successful for all contexts. Giving families access to diverse information and support that they can use as they think best is the approach that is most likely to be effective (Arkan, Üstun & Guvenir, 2013).

While a handful of parenting interventions have been evaluated for efficacy, many other courses that are run in community settings and in the voluntary sector have not been studied. There is now a growing recognition of the need to provide rigorous evaluations of more parenting courses so as to assist more families (Moran, Ghate & Van Der Merwe, 2004). The Parenting Children Course is being evaluated for this reason.

1.2 Evidence based parenting programmes in the UK

Central and local government recognise that the role of the parent is crucial to the development of the child: support for parents has therefore become an integral part of policy (Whitmarsh, 2008). The UK Government has increasingly favoured the use of evidence-based parenting programmes (EBPPs) because of their proven efficacy (Lewis, 2011). These will be outlined briefly below. As mentioned earlier, a critique of the methods and findings of studies evaluating such interventions is beyond the scope of this chapter and therefore the programmes are only described in order to set the context for the current study. Some of the limitations of studies that 'prove' the efficacy of such interventions will however be raised in a later section.

EBPPs have an identifiable theoretical underpinning, are carefully scripted week by week and require those who deliver them to follow a manual. The goals of such programmes have been to improve short and long-term parenting and to bring about social change by improving children's behaviour.

The Children's Workforce Development Council (CWDC) and the National Academy for Parenting Research (NAPR) developed a Commissioning Toolkit of programmes which have been evaluated and rated by NAPR. This is in order to understand the potential of programmes that may not have undergone a randomised controlled trial as well as to identify programmes that are not working so they can be decommissioned. (National Academy for Parenting Practitioners, 2008)

Additionally, The National Academy for Parenting Practitioners (NAPP) has determined that there are three key elements underpinning the success of evidence based interventions:

- *Eligibility*: the intervention's target audience is appropriate and clear
- *Fidelity*: the 'active ingredients' of the programme are rolled out without significant deviation
- *Intensity*: the support provided matches the need. An outcomes focused approach should be adopted. This will involve establishing systems for monitoring and evaluating service outcomes to ensure that it is achieving its intended objectives. These systems should ideally use pre- and post-services measures.

NICE (National Institute for Clinical Excellence) (2006, and since updated March, 2013) has published guidance for parent training/education in the management of children with conduct disorder (serious behaviour problems which can affect a child's development or interfere with their ability to lead a normal life) aged 12 years or younger. This recommends group-based programmes, only recommending individual-based programmes where families' needs are too complex for such an approach.

NICE holds that all programmes should:

- Be based on social learning theory
- Include ways of improving family relationships
- Offer enough sessions (usually 8-12)
- Help parents identify goals
- Include role play and homework
- Be given by people who are trained, skilled and supported
- Follow the programme's manual to ensure consistency (NICE, 2006)

1.2.1 *Theoretical underpinnings of evidence-based programmes*

Many theories have linked parenting to child outcomes but two perspectives – *attachment theory* and *social learning theory* have been especially influential in recent times and have led to different types of parenting programmes. There have been several trials for attachment-based interventions, mostly with infants. The meta-analysis by Bakermans-Kranenburg, van Ijzendoorn, and Juffer (2003) found 81 studies. Overall, the interventions modestly improved parental sensitivity and attachment security. It will not be discussed further as it is of limited relevance to the current study. *Social Learning Theory* will be described below as most courses in the UK are underpinned by it (Scott, 2008) and it forms the basis of the parenting programme in this study.

In addition, this section will also describe Parenting Style Theory, associated with the work of Baumrind, (1991) and elaborated by others (Hetherington, Henderson &Reiss, 1999; Maccoby & Martin, 1983; Steinberg, Lamborn, Darling, Mounts & Dournbusch, 1994) as it too forms part of the theoretical base of The Parenting Children course which is the focus of this research.

1.2.2 *Parenting styles theory*

This theory, based on the work of Baumrind (1991), has been influential but has not led to specific interventions (Scott, 2008). Baumrind observed interactions between parents and young children. Core dimensions of parenting were measured and observed.

Four parenting typologies were repeatedly seen and were constructed from a cross of warmth, conflict and control. They were described as follows:

- *Authoritative* (high warmth, positive/assertive control)
- *Authoritarian* (low warmth, high conflict, coercive, punitive control attempts)
- *Permissive* (high warmth coupled with low control attempts)
- *Neglectful/disengaged* (low warmth and low control)

These typologies have proved to be robust and repeatedly associated with child outcomes (Scott, 2008). Children and adolescents of authoritative parents are consistently found to be more pro-social, academically and socially competent and less symptomatic. Children whose parents are described as authoritarian, permissive or disengaged show significantly worse outcomes. Children of authoritarian parents show the worst adjustment of the four.

1.2.3 *Social learning theory*

Social learning theory has led to interventions mainly for children over three years old. It evolved from various roots in general learning theory and behaviourism based on the work of Bandura (1977), (Scott & Yule, 2008).

Scott (2008) describes the notion behind social learning theory as “that children’s real-life experiences and exposures directly or indirectly shape behaviour” (p. 1047). The key point is that moment-to-moment exchanges are crucial: if a child receives an immediate reward, like parental attention, for good behaviour, they are likely to repeat that behaviour. If they are ignored (or punished for it), they are less likely to do it again.

Other proponents of social learning theory have expanded this focus to consider the cognitive processes such as attributions and expectations that underlie the parent’s

behaviour (Bugental, Blue & Cruzcosa, 1989; Dix, 1992) and its effects on children (Dodge, Pettit, Bates & Valente, 1995). Therefore the model suggests that children learn strategies about managing emotions, resolving disputes and engaging with others both from their own experiences but also from the way parents react.

Research on social learning theory approaches to parenting interventions is most closely associated with the work of Patterson (1969), founder of the Oregon Social Learning Centre. Social learning theory has added to its focus on the harmful effects of parent-child conflict and inconsistent discipline, an emphasis on the positive dimension of parenting as a way of promoting child positive behaviour and affect and providing a more positive and effective relationship context for parental disciplinary interventions (Gardner, 1987). The vast majority of the programmes evaluated in the literature to date are based on social learning theory.

1.2.4 *Review of key parenting programmes*

Mrazek and Haggerty (1994) delineated three types of preventative parenting interventions: *universal* (targeting an entire population irrespective of risk), *selective* (targeting individuals or subgroups with elevated risk of conduct problems or mental health problems) and *indicated* (targeting high-risk individuals who are identified as having minimal but detectable problems foreshadowing disorder).

Programmes based on social learning theory have evolved over 40 years and there is a large evidence base for them. Some best known examples of targeted parenting interventions based on social learning theory include: *Triple P* (Markie-Dadds & Sanders, 2006), *Helping the Non-Compliant Child*, (McMahon & Forehand, 2003), *Parent-Child Interaction Therapy*, (Brinkmeyer & Eyberg, 2003), *Defiant Children*, (Mash & Barkley, 2006) and *The Incredible Years*, (Webster-Stratton & Reid, 2003).

In the UK, local authority commissioners are particularly drawn to Incredible Years (IY) and Triple P due to their robust evidence base (Ramage, 2011). The Department for Education's Commissioning Tool rates these programmes with their maximum four stars 'strong.'

The Incredible Years Programme (Webster-Stratton & Reid, 2003) has been extensively evaluated in rigorous studies demonstrating high effectiveness on a range

of child and parent outcomes, plus longer-term effectiveness (Moran et al. 2004). Targeting children 2-9 years old, the programme provides education in groups. An important principle of the programme is that a strong and positive parent-child relation is the source of effective discipline. Groups consist of 10-12 parents on average. The drop out rate of parents varies between 10% to 50% (Webster-Stratton, 2004,2005). The programme has been subject to multiple studies around the world including the USA, the UK, China and Sweden which include a number of randomised controlled trials which demonstrate that the IY parenting programme significantly improves parenting interactions, reduces conduct problems and promotes children's social-emotional competence. (Webster-Stratton, 1990a; Webster-Stratton & Hammond, 1990; Webster –Stratton, Hollinsworth & Kolpacoff, 1989).

The Positive Parenting Program, commonly referred to as "Triple P" is a parenting initiative first developed in Australia. The evidence base for Triple P appears to be extensive, with more than 200 publications and large number of published randomised trials (Wilson, Rush, Hussey, Puckering, Sim, Allely, … & Gillberg, 2012). Different service types (Group, Self-directed, Individual, Telephone assisted) are used and customised in accordance with changing requirement levels and choices of families (Universal, Selective, Primary Care, Standard, Enhanced). The time period of the programme varies between 4 and 12 weeks depending on the type selected. The group programmes averagely consist of 10-12 parents. The drop out rates of the parents participating in the programme vary between 5% and 44% (Markie-Dadds & Sanders, 2006). There are four existing meta-analyses for the programme, uniformly reporting positive effects on child behaviour (Sanders, Markie-Dadds, Tully & Bor, 2000; Nowak & Heinrichs, 2008; de Graaf, Speetjens, Smit, de Wolff, & Tavecchio, 2008a; Thomas & Zimmer-Gembeck, 2007; de Graaf, Speetjens, Smit, de Wolff, & Tavecchio, 2008b).

1.3 Key variables to consider in parenting interventions

1.3.1 *Demographic variables*

Lundahl et al. (2006) and Reyno and McGrath (2006) suggest that parent risk factors predict poorer outcomes implying that parenting interventions generally are less successful at engaging the most distressed and disadvantaged families. In contrast,

some large recent trials found no adverse effects of family disadvantage on child outcome, in both community preventative and clinic-referred samples. Werba, Eyberg, Boggs and Algina (2006) and Scott (2005) also found the opposite: those with higher initial levels of child behaviour problems improved more following parenting interventions.

Demographic indicators such as single parenthood, lower maternal education, lower family income and larger family size have all been found to have small but negative effect on parent and child outcomes following parenting training (Reyno & McGrath, 2006). Malilken & Katz (2013) suggest that parental psychopathology has been shown to moderate the effectiveness of parent management training (Furey & Basili, 1988; McMahon, Wells & Kotler, 2006) and that children of depressed mothers tend to be less responsive to such training when compared to children of non-depressed parents (Beauchaine, Webster-Stratton & Reid, 2005 ; Suchman, Mayes, Conti, Slade & Rounsaville, 2004). This may be because the presence of psychopathology may impact parents' motivation to stay and complete the programme (Stoolmiller, Duncan, Bank & Patterson, 1993; Patterson & Chamberlain, 1994; Forehand, Furey & McMahon, 1984).

Findings are mixed with regards to the impact of ethnicity on the take up of parenting interventions (Patel, Calam & Latham, 2011). For example Lamb and colleagues (2002) and Messent & Murrell (2003) reported the underutilisation of services by minority ethnic groups. However Scott et al., (2006) were able to recruit 75% of families approached within a predominantly African population in London to a parenting intervention. Patel et al., (2011) in their study looking at whether ethnicity impacted intention and interest in parents to attend a parenting intervention found virtually no differences in perceived barriers or interest in attending between White British families and other ethnic groups.

Two meta–analyses suggest that child risk factors, such as male gender and severity of conduct problems do not necessarily lead to poorer outcomes and may, in the latter case, confer advantage in terms of intervention effects. (Lundahl et al., 2006; Reyno & Mc Grath, 2006). Dishion & Patterson (1992) found parent training to be of similar effectiveness for both younger children and adolescents, contrary to popular opinion that such interventions are less successful with older children. This finding

was replicated by Beauchaine et al., (2005). Scott (2005) concludes that age is not a clear determinant of outcome. Furlong, McGilloway, Bywater, Hutchings, Smith & Donnelly, (2012) in a recent Cochrane Review concluded that parenting programmes appear effective for parents regardless of socioeconomic status, trial setting and severity of conduct problems at baseline. They also noted faithful implementation of the programme is an important component of effectiveness.

1.3.2 *Child behaviour problems*

The vast majority of the programmes mentioned above are targeted interventions aimed at reducing conduct disorders and other behavioural difficulties. In the UK roughly one out of every ten children will be diagnosed with a mental health or conduct problem every year. If left untreated these problems can impair personal functioning into adulthood and when costs to the NHS of providing treatment for mental health problems and school-related costs are taken into account create considerable financial cost to society. As discussed above, it is now widely accepted that targeting parenting skills is an effective intervention for helping children with behaviour difficulties because the quality of the parent-child relationship is strongly associated with children's wellbeing (Amussen et al., 2012). Many studies have found evidence based parenting courses generally work well for children aged 3-10 (Lundahl, Risser & Lovejoy, 2006; Maughan, Christiansen, Jenson, Olympia, & Clark, 2005; McCart, Priester, Davies & Azen, 2006; Scott, 2002; Furlong et al., (2012). Change in reported child behaviour will be one of the outcomes measured by the current study.

1.3.3 *Parental Self-efficacy*

Researchers have found that higher levels of parental self-efficacy are associated with more effective parenting and therefore lower child mental health problems (Jones & Prinz, 2005). Parenting self-efficacy refers to parents' beliefs in their ability to influence their children in ways that foster their development and success (Ardelt & Eccles, 2001). Theoretically, a higher sense of self-efficacy leads parents to be more persistent in the use of parenting skills that are associated with desirable outcomes. Parents who trust their ability to deal with their child are warmer, and more accepting toward the child (Gondoli & Silverberg 1997). Parents who lack a

sense of competence not only show less adequate parenting, but they also tend to withdraw from interactions with the child and give up addressing child problem behaviours altogether (Coleman & Karraker, 1998).

Several studies have shown that parenting programmes have positive effects on parental sense of competence (Landy & Menna 2006; Leung, Sanders, Leung, Mak & Lau, 2003; Thompson, Ruma, Schuchmann & Burke, 1996). Moreover, higher parental self-confidence at the start of a programme appears to improve programme outcomes, both in terms of problem behaviour of the children (Hoza, Owens, Pelham, Swanson, Conners, Hinshaw … & Kraemer, 2000) and in terms of more adequate parenting skills (Spoth, Redmond, Haggerty & Ward, 1995).

A recent review of the studies that examined parents' experience and perception of parenting programs (Kane, Wood & Barlow, 2007) showed that parents themselves view an increase in their sense of competence to deal with child problem behaviour as one of the most valuable elements of parenting programmes. Self-efficacy is therefore an important factor to measure and will be one of the outcome variables evaluated in the current study.

1.3.4 *Parental disciplinary skills*

Poor parenting skills are a key risk factor for child maltreatment (Belsky, 1993; Tolan et al., 2006). Parenting interventions have been shown to reduce the risk and incidence of child maltreatment in low income settings by enhancing positive parenting skills and providing effective but non-physical forms of discipline (Barlow et al, 2006; Prinz et al., 2009; Webster-Stratton & Reid, 2010).

In addition, as well as change in parenting skills impacting parental well being, Beauchaine et al. (2005) found that changes in harsh and ineffective parenting both predicted and mediated child behaviour change. These findings replicated those found by Tein, Sandler, MacKinnon and Wolchik (2004) and Gershoff et al., 2012). Change in observed positive parenting skills may also be an important predictor of change in child outcome rather than just a change in negative parenting (Dishion, Shaw, Connell, Gardner, Weaver & Wilson, 2008; Gardner et al., 2007). Changes in both positive and negative parenting skills will be measured in this study.

1.3.5 *General family functioning*

Less well documented is the impact of parenting interventions on general family functioning. The researcher was interested in this variable as The Parenting Children Course is a universal course not aimed at parents with children diagnosed with conduct disorder and therefore evaluating its more general impact on the well-being of the family seemed appropriate.

Researchers have found that family environment measured by expressed emotion explained both depression and behavioural problems in children (Baker, Heller & Henker, 2000). Nomura, Wickramaratne, Warner, Mufson, & Weissman, (2002), in a longitudinal study with 83 families found the presence of family discord was associated with higher rates of childhood major depressive disorder and conduct disorder. The authors suggest that the effects of both family discord and parental depression on offspring that begin in childhood and adolescence persist even into adulthood.

Morse, Rojahn and Smith (2014) also found a significant interaction between child behaviour outcome variables and general family functioning and concluded that parental stress due to behaviour problems was reduced in families that functioned well as a unit. Furthermore, parenting interventions contribute to reducing family stress and maternal mental ill health (Barlow et al., 2012) that are also known to be important risk factors for maltreatment (Knerr, Gardner & Cluver, 2013).

1.3.6 *Facilitator variables*

Also of interest to the current study is Scott's (2008) suggestion that another important factor contributing to the success of any parenting intervention is the facilitator's ability to make an *alliance* with the parent, their *fidelity* to specific components of a model and the *skill* with which the facilitator works.

The qualitative part of this study will be interviewing parents to understand how they experienced being part of a parenting course and how these interventions work. Research has shown large effects relating both to therapist/facilitators skill and alliance in terms of improving parenting outcomes (Kazdin, Whitley & Marciano, 2006; Scott, Carby & Rendu, 2006a).

Koerting, Smith, Knowles, Latter, Elsey, McCann, … & Sonuga-Barke (2013) have shown that adopting a non-judgmental, empathic and empowering approach is essential in fostering good relationships. It is also recommended that wherever possible professionals share some similarities with parents to overcome the distrust often initially experienced by parents. Professionals should be aware that distrust could be a barrier for parents: developing a trusting relationship is key, particularly when working with hard to reach families.

1.4 Summary

In sum, there is general acceptance that EBPP's can have a positive effect on child and parental well being regardless of gender, age or severity of disorder (Furlong et al., 2012). Furthermore, whilst there remains a dearth of studies that have rigorously evaluated current parenting interventions in low income settings and countries, there is some evidence that they are potentially adaptable and applicable across cultures, countries and income groups with only surface adaptations required to accommodate for language, literacy and other societal differences (Knerr et al., 2013).

In addition, the recent Allen Report (2011) stressed the need to show the *effectiveness* of parenting programmes in community settings or 'real life settings' in addition to testing their *efficacy* in research trials. Such settings include mental health (Scott, Spender, Doolan, Jacobs, & Aspland, 2001b), primary care (Turner & Sanders, 2006), schools (Dishion, Nelson & Kavanagh, 2003) and welfare (Gardner, Shaw, Dishion, Burton, & Supplee, 2007) as well as in the non-profit sector (Gardner, Burton & Klimes, 2006) and in community settings for disadvantaged preschools (Hutchings, Bywater, Daley, Gardner, Whitaker, Jones … & Edwards, 2007; Webster-Stratton, 1998). NICE in fact now recommends that EBPP's should have a degree of flexibility built in to allow practitioners to tailor their services to the needs of their community (Barrett, 2009).

The current study aims to evaluate a community run intervention and issues relating to parenting programmes in 'real world' settings are described below.

1.5 Evidence based programmes in 'real life' settings in the community

Between 2006-2008 the UK Government commissioned an important evaluation of parenting interventions carried out in real life settings (following recommendations from Lindsay & Strand, 2013). The Parenting Early Intervention Pathfinder (2006-2008) was funded in 18 local authorities (LA's). It focused on parents of children aged 8-13 exhibiting or at risk of behavioural problems. The results of that initial evaluation (Lindsay, Davis, Band, Cullen, Cullen, Strand, … & Stewart-Brown, 2008) were sufficiently positive to encourage the Department for Children, Schools and Families (which became the DfE in 2010) to implement parenting support in 43 LAs with data on over 6000 parents, who experienced one of four evidence-based programmes: Triple P, Incredible Years, Strengthening Families, Strengthening Communities and the Strengthening Families Programme 10-14 (SFB 10-14).

Essentially the PEIP evaluation has demonstrated that all four programmes were effective in increasing parents' mental well-being and reducing their children's behavioural difficulties. These are key protective factors for long-term child outcomes. This evidence was used to inform the Guidance (Lindsay, Band, Cullen & Cullen, 2007) that was issued to all LAs to help them set up and deliver PEIP nationally in 2009. The PEIP operated within a new policy framework, *Think Family* (Lindsay et al., 2007).

This brought together several parenting support initiatives including the PEIP. The policy allowed LAs greater freedom in decision-making and they were allowed funding through PEIP to implement any of five programmes approved by the DCSF on the advice of the National Academy of Parenting Practitioners (NAPP).

Michelson, Davenport, Dretzke, Barlow and Day (2013) also postulate that the next step is to assess whether the main therapeutic effect of EBPP's on child behavioural difficulties varies under conditions that approximate 'real world' services for children and families so that practitioners can use the interventions in their community settings. Their study involved a systematic review and meta-analysis of relevant randomised controlled trials. The aim was to systematically examine the child outcomes achieved by a range of parenting programmes when delivered across four real world conditions and in comparison with waitlist control groups. Consistent

with other meta-analyses (Dretzke, Frew, Davenport, Barlow, Stewart-Brown, Sandercock, … &Taylor, 2005; Dretzke, Davenport, Frew, Barlow, Stewart-Brown, Bayliss, … & Hyde, 2009; Serkeitch & Dumas, 1996), parent management training was associated with significantly greater improvements in child disruptive behaviour compared to waitlist control conditions. No difference was detected in the overall performance of parent management training depending on whether it was delivered to clinic or study-referred populations; in service oriented or research settings; or by non-specialist or specialist therapists (including programme developers).

These results suggest that child disruptive behaviour can respond effectively to parent management training courses even when such treatment is delivered under a variety of real world practice conditions. This challenges assumptions held by some (Dulcan, 2005) that evidence-based interventions are likely to be less effective when provided outside of the tightly controlled conditions of efficacy trials. On the other hand, the authors stress that the results do not warrant the conclusion that all parent management training interventions are guaranteed to work within all clinical contexts and urge clinicians to think carefully about the specific applicability of any evidence based intervention to a given case.

In addition, most participants in the above studies are self-referred, suburban, Caucasian, and middle-class. Given that the highest rates of disruptive behaviour in Western countries are found in inner city areas (Davis, Day, Cox & Cutler, 2000; Loeber & Farington, 2000), the shortfall in research outputs originating from these settings and involving parents from minority ethnic and other socially disadvantaged communities is a major concern (Michelson et al., 2013). The authors make a strong case for funding for future large-scale randomised evaluations of PMT to be targeted towards methodologically rigorous studies designed under genuinely real-world conditions and involving diverse populations.

Universal parenting interventions, which are not targeted to address conduct disorder, will be considered next as the programme being studied here fits into this approach. The primary goal of universal parenting support programmes is to normalise and de-stigmatise parenthood. Sanders (2010) holds that although universal parenting programmes have existed for many years there is relatively little empirical evidence concerning their efficacy.

1.6 Universal approaches

Current UK government policies recognise the need for universal parenting support to complement target and indicated approaches (Simkiss et al., 2013). The demand for universal parenting support is clear from research showing that around three-quarters of parents would like this (Peters, Garnett & Edwards, 2010) and that about 70% think being a parent now is harder than for the earlier generations (Family Lives, 2011).

Given the range and prevalence of health and social outcomes on which parent-child relationships have an influence (Simkiss et al., 2013), universal approaches are appealing. However such programmes can suffer from low recruitment and retention rates. They can also be challenging to evaluate. Normal populations may show little change on clinically validated outcome measures and control groups may experience contamination as in such community settings; existing parenting support may already be available and thus could 'contaminate' control group outcomes (Stewart- Brown, Anthony, Wilson, Winstanley, Stallard, Snooks & Simkiss, 2011).

The CANparent trial operated by the DfE during 2012-2014, was a Government initiative to examine the development of a universal offer of parenting classes to all parents of children aged 0-5 years (Lindsay, Cullen, Cullen, Totsika, Bakopoulou, Goodlad, Brind, Pickering, Bryson, Purdon, Conlon, Mantovani, 2014).

The aim of the trial was to see whether providing parenting classes for free would incentivise providers to offer additional parenting classes nationally, including for parents beyond the foundation stage and whether a universal approach could normalise and de-stigmatise parenting classes. The research design included both qualitative and quantitative methods. Overall, the results of the trial found that parents felt more satisfied with being a parent, saw themselves as more effective parents and had higher levels of mental well-being than before taking the parenting class. Short courses (1-2 sessions) were associated with no change and negative impact on parenting interest. The recommendations of the trial included urging policy makers to create a nationwide narrative about the desirability of universal, quality parenting support.

In terms of other universal parenting interventions, The Family Caring Trust's resources have been among the most popular universal parenting materials in Britain and Ireland. Over half a million parents have experienced at least one of their low-cost community based courses. Their parenting and family relationship materials are skill-based community education programmes. They are delivered across the statutory, voluntary, faith and community sectors and have been translated into many languages. No one parenting model is espoused by the Trust.

The Pram to Primary Programme (also known as the 'Noughts to Sixes' Programme) and the Fives to Fifteens' Programme were graded by researchers at the National Academy of Parenting Practitioners as being more than adequately evidence based, meeting almost all criteria for best practice in training and supervision, and reaching the highest possible grading for having appropriate targets, content and approach.

Triple P has performed some trials of universal parenting programmes (Sanders et al., 2000; Sanders, Turner & Markie-Dadds, 2002) with some success. Two other brief group-based parenting programmes have been subject to randomised controlled trials: the first in Australia with parents of eight month olds (Hiscock, Bayer, Price, Ukoumunne, Rogers & Wake, 2008) and the second an individually randomised trial in Germany with preschoolers (Lösel, Beelmann, Stemmler & Jaursch, 2006). No changes in parenting or child outcomes were observed (Simkiss et al., 2013). We therefore have very little information on the efficacy of universal interventions and yet there is a call both in the literature and from policy makers for more such courses. This study hopes to add to this literature in its evaluation of The Parenting Children Course.

1.7 Voluntary sector studies

In addition to the interest in universal services, recent policy guidance from the UK Dept. of Health (2004) and US Centers for Disease Control (2004) recommend greater use of parenting interventions that start early and are locally based and accessible, particularly given that families most at risk may find it hard to access conventional services. To achieve this, they emphasise partnership between health services and community-based organisations, including the voluntary sector. This is

relevant to the current study as The Parenting Children Course is run by a voluntary sector organisation.

Voluntary organisations may bring remarkable energy and innovation into services (Gardner et al., 2006). Common challenges, however, may include insecure funding and employment, partial reliance on volunteers, poorly equipped facilities and less qualified staff. This raises issues about training and supervision for complex interventions.

Gardner et al., (2006) carried out the first randomised trial of a parenting programme in the voluntary sector. The intervention was the IY programme delivered in multiple neighbourhood sites by a voluntary sector organisation. The researchers hypothesised that the intervention will be effective in reducing conduct problems and increasing parental skill and confidence.

Using both parent-report and direct observational methods, significant intervention effects were found on child problem behaviour, play, sibling behaviour, positive and negative parenting. Compared to samples of referred children in other parenting treatment trials (Scott et al., 2001b; Taylor, Schmidt, Pepler & Hodgins, 1998; Webster-Stratton & Hammond, 1997), this sample showed similar or slightly higher levels of social disadvantage and problem behaviour, and broadly comparable medium-to-large effect sizes.

In terms of policy implications, these findings add to a growing body of knowledge suggesting that a well-structured parenting intervention can be translated across service settings (Gardner et al., 2006). Moreover, it can help socially disadvantaged families whose children have high levels of conduct problems. It is important to note that whilst lacking any specialist mental health background, the staff who participated in the study were well trained and supervised weekly.

As programmes are diffused more widely into community and voluntary sector settings, it is vital to know if they are still effective.

1.8 Faith based interventions

Of specific relevance to the current study in terms of types of voluntary interventions, are interventions that have been provided by the Church in the UK or

by independent Christian Charities. More people do unpaid work for church organisations than any other organisation; More than 116,000 volunteers and an additional 4900 employed adults run children/young people activity groups sponsored by the Church of England outside church worship. (Church of England, 2014).

One faith-based organisation is Care for the Family, an established Christian charity providing churches with marriage and parenting resources to use in communities in the UK. Their courses *Time Out for Parents Early Years,* (TOFPEY) and *Drug Proof Your Kid* (DPYK) have been evaluated 'in house.' Parents reported that their parenting skills on specific aspects had improved and they generally enjoyed the courses. They reported how useful it was to meet other parents and how helpful the courses were in making them think about their parenting and learn more skills to help their children. (Cater, 2006). However, while participants' comments were reported, no standardised measures were used and no rigorous qualitative analysis was conducted, therefore falling considerably short of the evaluation criteria recommended for parenting interventions described above.

The authors of DPYK comment on the need for more rigorous trials testing the effectiveness of the course in helping parents protect their children compared to a control group (Cater, 2006).

Similarly, other Christian Charities such as Oasis have anecdotal recorded evidence that parents appreciate their parenting courses but to the researcher's knowledge, none of these organisations have provided an evidence base for their programmes.

Interestingly, Family Caring Trust, whilst having no links with any religious organisation, has developed additional programmes specifically tailored for family ministry within the church. They now publish two programmes specifically for church communities that also reinforce the values and ethos of their parenting programmes. *Enjoy Praying* and *What Does God Expect of Parents?* Anecdotal feedback has been collected showing that parents appreciated material that explicitly helps parents assume their responsibilities in teaching their children the ways of faith, through structured reflection on what God expects of parents, on what holiness means at home and on family prayer. Material is provided for their children to reflect

in separate sessions on their behaviour at home, peer pressure, and the gift of the Holy Spirit.

The provision of courses based on other faiths will not be discussed here as the current study is evaluating a course developed in a Christian context. There is however, a general dearth of research on spiritually based parenting interventions in the literature in general (Mahoney & Tarakeshwar, 2005) and the researcher is not aware at the time of writing of any non-Christian faith based programmes

Patrick, Rhoades, Small & Coatworth (2008) also record the lack of available empirical evidence regarding faith based initiatives in the US in spite of the finding that 60% of Americans believe religion is relevant for family and social problems (Puffer & Miller, 2001) and Mahoney, Pargament, Tarakeshwar & Swank, (2001). The authors conclude from their trawl of the literature looking at spirituality and parenting, that "greater parental religiousness relates to more positive parenting and better child adjustment" (p.559). Patrick et al.'s (2008) paper is interesting, as they conducted a pilot study running a faith-*placed* course; i.e. a secular evidence-based programme run in a church setting and evaluated it using interviews during focus groups upon completion of the course. The authors suggest that delivery of empirically validated programmes through churches may yield significant benefits thus far overlooked, including a familiar time and location for meetings, available childcare and youth programmes, the endorsement of respected leaders and the comfort and security of established social networks. They predicted key barriers to engagement of implementation and retention might be overcome as churches are familiar community organisations (DeHaven, Huner, Wilder, Walton, & Berry, 2004). Their preliminary findings supported their hypotheses, reporting an influx of new faces to the programme as time went on, rather than parents dropping out and parents reporting satisfaction with the familiar context of the church, its leaders, congregation and therefore trusting the material to be of benefit to them. Following these preliminary findings, the authors concluded that as faith based programmes are likely not to have any evidence regarding the effectiveness of their courses, this may be a way forward combining scientific rigour of an evidence-based programme with the context advantages of the church setting. Implications for this study and the

applicability of the ideas suggested above will be discussed in the Discussion chapter.

In sum, there is huge potential for more people to be reached in their own communities through schools, clinics, places of worship and community centres, but a proper evaluation of potential courses is essential. Much work is still to be done to evaluate the effectiveness of well-known courses in community settings as well as evaluate the efficacy of lesser-known courses. In addition, the field is also now moving toward investigating mechanisms of change and understanding predictors and moderators of outcome (Scott, 2008; Maliken & Katz, 2013) which is beyond the scope of this study.

1.9 DVD based interventions

Another alternative to attending clinic or community-based courses is to follow a programme via DVD. There is very little research on parenting courses delivered via DVD although there is recognition of the value of computer technologies in the delivery of parenting and family support programmes (Long, 2004). The Triple P – Positive Parenting Programme (Sanders, 1999) exemplifies a parenting support system that uses the media as an integral part of a tiered continuum of parenting interventions within a public health perspective. Universal Triple P, the first of five levels of the system, involves the development of media and communication strategies to promote positive messages about raising children. Sanders, Calam, Durand, Liversidge &Carmont (2008).

Barnes (2010) carried out a study looking at differences in participants' affective and cognitive learning in face-to-face (F2F) versus distance education (DE) course formats of the Common Sense Parenting (CSP) programme. The results showed no significant differences between DE versus F2F participant's perception of cognitive learning or affective learning as measured using standardised scales. These findings are similar to research comparing F2F versus DE formats with regard to adult learning (Urtel, 2008). Barnes (2010) concludes there are no significant differences in perceived cognitive or affecting learning between the two formats and therefore shows the CSP parenting programme can be offered in various formats and have similar outcomes.

The current study will evaluate the effectiveness of the Parenting Children course delivered in several communities via the use of DVD. This is a potentially fruitful method of delivering inexpensive interventions to a large number of parents.

1.10 Limitations of quantitative studies to date

Before moving on to look at studies employing combined and qualitative methods, it is worth pausing to consider some of the main limitations of the quantitative literature presented so far, in particular in relation to the prevalence of studies using RCT's. In the literature to date, as highlighted above, RCT's have held the privileged position of being considered the very best of research methodology in this area (Stewart-Brown et al., 2011). Observational studies are criticised because groups are rarely balanced in terms of age, severity of symptoms and participant characteristics, leading to difficulties in interpretation. These biases are considered by many to be best dealt with by double blind randomisation in a RCT. Major studies, such as the Allen (2011) review were based on this reasoning and the NAPP (2011) guidelines award studies using RCT's the highest marks in terms of quality. However, Stewart-Brown et al., (2011) postulate that for the field of parenting evaluation, RCT's may not necessarily be the method of choice. For example, the current preference in the evaluation of evidence based parenting interventions for randomised controlled studies as 'the gold standard' poses many critical challenges for the voluntary sector. Firstly, the knowledge, skills and understanding needed to participate in such robust evaluation processes are not necessarily available. Secondly, there is not an established relationship between the voluntary sector and potential funders and academic institutions that currently undertake such trials. Thirdly, the cost of engaging in a randomised controlled trial is prohibitive for most if not all voluntary sector organisations.

Other arguments against conducting an RCT in the field of parenting evaluation include the fact that it is very difficult to keep the stringent double blind criteria required for an effect RCT as used in for example, pharmaceutical trials as parents will know whether they are receiving an intervention or not and may well talk to the researcher about their experiences even if asked not to. Another issue is that trials need to define a priori, a primary outcome in order to determine the necessary sample size. Most of the studies described earlier have chosen the reduction of child

behaviour problems as the key outcome variable to measure change. However, parenting programmes can produce many other beneficial outcomes as discussed: increase in parental confidence better family functioning, better relationships within the family without necessarily affecting the child's behaviour in a measurable way. This is particularly an issue in universal programmes where only a proportion of the children will have problem behaviour at the outset. Changes could statistically be very small but in fact equate to very important shifts for parents and children and be very worthwhile at a population level. Results of trials based on change on one outcome may therefore miss important effects unless they are very large. In addition even when change is shown, the results may not be that helpful to practitioners as they show an average level of change which can hide great individual variation. Other types of research, such as qualitative research can give this information as well as identifying many other ways people can change which may be more helpful at a practical level.

In addition, participants in RCT's of preventative interventions may be less likely to benefit than the general population. Britton et al., (1998) suggest that trials of preventative strategies attract participants that are not typical of the general population: they are generally of a higher social group, better educated and thus potentially more healthy and less able to benefit that the population as a whole. Such recruitment bias might lead studies to find smaller effects than could be achieved if the programme were offered to people most likely to benefit.

Snooks et al., (2011) and Kane et al., (2007), suggest that qualitative and multi-method studies can describe more accurately the impact of multifaceted interventions so practitioners and commissioners alike can have a clear idea of changes that can be expected from parenting interventions. The RCT has been offered as a method to policy makers and commissioners to provide them with the best quality evidence. However, it is important to be aware of the limitations of such design. It is simplistic to believe that finding out what helps can be achieved with just one research approach. Evidence based practice is important but evidence should be considered from a variety of good studies of different designs in order to improve outcomes for children.

1.11 Qualitative and mixed methodology studies: understanding process

The current study will employ both quantitative and qualitative methods in its evaluation of different formats of the course. Some researchers, (e.g. Yardley & Bishop, 2008), argue that using both methodologies helps to gain a better understanding not only of how effective parenting interventions are but why they are so and how they work. Some examples of studies using both methodologies will be reviewed below.

1.11.1 *Combining methodologies*

Lindsay & Strand (2013) argue the importance of using combined methods for the evaluation of parenting programmes and suggest qualitative methods have an important role to play in helping understand the mechanisms by which parenting programmes work for parents. The authors conducted a study of mixed methods design undertaken for the United Kingdom Government's Department for Children, Schools and Families (DCSF), now the DfE – see Lindsay et al., (2011) and Lindsay et al., (2008). The project was on a large scale over three years and produced findings that led the government to fund a roll out across all local authorities. The quantitative results and recommendations from the Parenting Early Intervention Pathfinder (PEIP) were described in an earlier section and showed parents held very positive views about attending the programme while the interviews enabled these opinions to be explored in more detail. The parents' views of the US and Australian content of two of the programmes were explored to understand perception of relevance and match. In fact parents had no issues with adjusting to US and Australian examples and were positive about programme content and implementation including the skill and sensitivity of the facilitators.

Lindsay & Strand (2013) conclude that valuable information was gleaned from these interviews that would not be captured by the quantitative strand and argue that combining qualitative and quantitative methods for evaluating parenting programmes is essential to provide the most meaningful data. In this case the study's evidence was used by the DCSF when it decided to extend the funding of evidence based programmes to all English LA's, an initiative that was itself evaluated (Lindsay et al., 2011).

Byrne, Holland and Jerzembek (2010) carried out a mixed method study with mothers using a telephone survey to elicit participants' perceptions of a home based parenting programme, Parents Plus. Survey data were quantitatively and qualitatively collated. Interviews were transcribed verbatim and subjected to a content analysis. The findings showed the intervention offered mothers a valuable source of support in terms of confidence boosting, providing reassurance and encouraging reflection on their roles in the family unit.

The authors call for more such studies to understand the processes underlying parenting interventions, particularly to explore whether the same parenting advice presented in group settings or through video might have been equally effective. In addition, the field urgently needs to address the needs of fathers whose voices are rarely heard in these early intervention studies.

1.11.2 *Qualitative methodologies*

Furlong & McGilloway (2011) propose that qualitative analysis may help to identify the critical ingredients that contribute to success under 'real world' conditions which in turn can help inform and refine future developments of parenting interventions. A systematic review and synthesis of qualitative research was carried out by Kane (2007). These studies exploring parents' views about parenting programmes have begun to identify a number of aspects of courses that parents find important (Webster-Stratton & Spitzer, 1996; Grimshaw & McGuire 1998; Barlow & Stewart-Brown, 2001).

The main themes that emerged from the meta-analysis were: *control*: parents' lack of ability to discipline their children led to anger and frustration, and to feelings of being *out of control*. The findings of the review suggest that parenting programmes helped them gain confidence and increased their ability to cope; *guilt*: parents' anger and loss of control in dealing with their children caused them to blame themselves and to feel guilt. They evaluated their parenting skills as poor and a causal factor in their children's problems. There was a reported reduction in feelings of guilt after the programme; *social/cultural/group influences*; many of the parents in the included studies also reported feelings of social isolation and stigma. The findings also suggest that parenting programmes had led to enlightenment and some degree of

empowerment; *knowledge and skills*: many parents felt that prior to the parenting programme they lacked the necessary knowledge and skills to deal with their children's problem behaviour, and did not acknowledge or recognise the family's problems. Parents reported that parenting programmes had enhanced their understanding and their ability to use the new skills in different settings. They reported increased empathy with their children and sensitivity to their children's developmental struggles. Overall, parents reported increased competence and the use of more positive discipline strategies.

These constructs were based upon reports given by participants discussing their feelings about the programme before, during and after it. The authors developed a framework which identified parents' perceptions of key components of parenting programmes linking together the themes identified: Acquisition of knowledge, skills and understanding, together with feelings of acceptance and support from other parents in the parenting group; enabled parents to regain control and feel more able to cope. This led to reduced feelings of guilt and social isolation, and increased empathy with the children and confidence in dealing with their behaviour. The authors add that this framework can identify some of the key factors which may need to be considered when attempting to positively engage parents in parenting programmes.

Furlong & McGilloway, (2011) found many of the themes mentioned so far in their trawl of qualitative research of parents' experiences of the *IYP* including: new found parental confidence obtained through group support (Morch, Clifford, Larsson, Rypal, Tjeflaat,….& Reedtz, 2004); the acquisition of new parenting skills, (Patterson, Mockford & Stewart-Brown, 2005) and the use of group process to reflect on the experience of being parented in order to develop empathy for the child (Levac, McCay, Merka & Reddon-D'Arcy, 2008).

The authors carried out their own qualitative study using grounded theory to evaluate the experience of 33 disadvantaged parents of children aged 3-7 years old participating in *IYP Basic* in Ireland. They found key ingredients to involve the enhancement of parental confidence and teaching of positive skills with a focus on positive attention and relationship-building through play and praise, developing empathy and problem solving skills. Their study added support to previous findings

that an increase in positive skills rather than a decrease in critical parenting is an important mechanism of change (e.g Gardner et al., 2010: Patterson et al., 2005). Similar to other qualitative research (e.g Patterson et al., 2005), parents also emphasised increased personal confidence as being important in removing guilt and isolation and instilling self-efficacy beliefs – factors that are likely to be important in maintaining positive outcomes over time (Hutchings, Lane & Kelly, 2004). Reflecting on childhood experiences of being parented may be important for some parents in overcoming cultural and personal barriers to implementing play and praise skills. (Furlong & McGilloway, 2011).

Limitations of this study and others is that not all the observed change can be accounted for by changes in parents. Other elements at an organisational level such as the supervision and training of group facilitators are important ingredients too (Hutchings, Bywater & Daley, 2007). In addition this study focused only on short term outcomes and fathers were also under represented. However the findings are generalisable in that they are consistent with the themes reported in other qualitative studies.

The qualitative literature will be looked at again following analysis of the data and findings in relation to it will be reported in Chapter 7: Discussion of Qualitative Findings.

1.11.3 *Barriers to engagement found in the qualitative literature*

Finally, understanding the low take up, high drop out rates of parenting interventions is essential to improving services for parents and children. Koerting, Smith, Knowles, Latter, Elsey….& Sonuga-Barke, (2013) carried out a thematic synthesis review of published qualitative evidence relating to factors that block or facilitate access and engagement of parents with such programmes. They found a range of situational factors (e.g. transport and childcare problems), psychological factors (fear, stigma and distrust), unavailability or unawareness of programmes and issues with poor interagency collaboration. Barriers to continued engagement included group issues, perceiving the programme to be unhelpful and changes in family circumstances. This paper echoes points highlighted earlier regarding the fact the widely varying circumstances facing families need to be considered when planning a

parenting intervention. Programmes need to be designed to be flexible and accommodate real needs of families. In addition the authors call for programme leaders to be skilled, trained and able to adopt a non-judgemental, empathetic and empowering approach to foster good relationships with vulnerable parents. Developing a trusting relationship is key when working with hard to reach families (Koerting et al., 2013).

1.12 Rationale for the present study

In sum, the study at hand is a response to the call in the literature to provide more rigorous evaluations of community based courses run by or with the voluntary or faith sector in order to reach more parents in need.

The Parenting Children Course is run by Nicky and Sila Lee, Pastors at Holy Trinity Brompton Church. It is a universal parenting programme run in the church, for parents with children from 0-12 years old from both inside and outside the church community. Below are the headings of the five sessions.

Session 1: Building strong foundations

Session 2: Meeting our Children's needs

Session 3: Setting Boundaries

Session 4. Teaching Healthy Relationships

Session 5. Our Long-Term Aim

The programme attracts an average of 35-40 parents on each course, three times a year. Typically around 40% of the attendees come from outside the church. It has a manual for parents to follow and combines didactic teaching with small group discussions and video clips. The material contains some Christian references such as talking about prayer and the leaders pray at the end of each session. In their manual however, they suggest leaders can leave out specific Christian references if thought not to be appropriate. The content of the 'teaching' is not particular to a Christian world view. It is based on Parenting Style and Social Learning Theory - thus meeting the NICE guidelines for parenting interventions (NICE, 2006; 2013). The main programme runs live over five sessions.

Since 2010, the course has been released to run as a DVD. This format will also be evaluated. This DVD is available for any church leader to purchase from the church website. The DVD format carefully follows the same script and activities as the Live Course. This course is of interest as Barnes (2010) suggests, DVD courses have the potential to reach many people around the country in different settings. The DVD course is being run all over the country and attendance ranges from six-eight parents meeting in a facilitator's home to 30 parents meeting in a church or school setting.

Both of these formats will be evaluated using quantitative methodology.

A far smaller version of the course, developed for inner city settings, run 'kitchen table' style with typically two facilitators feeding in material from the course to prompt discussion around a table with six-seven parents, has also been piloted in two inner city settings. Whilst the format of this course is very different, involving discussion only, with the leader both contributing personally as well as providing the educational element of the course, the content of the material discussed remains the same. No Christian references are included in this course and the facilitators do not pray. A qualitative evaluation of this inner city version of the course will be conducted by interviewing five parents from one setting and carrying out a thematic analysis on the interview transcripts to understand if this format is valuable to inner city parents and to understand the process that underpins such interventions.

The Parenting Children Course is potentially very interesting as it is 'home grown,' having been developed by pastors and run in the church where it was developed. Holy Trinity Brompton is well known for its community services and has an excellent reputation in the wider community. Because of HTB's prominence in the community, this parenting course attracts many from outside the church itself, and is thus not limited to church members or even those of Christian faith.

The ability of the course to reach people beyond its own community borders with the DVD version means that it is potentially scalable and relevant to many people in the UK and beyond. Fidelity is assured as the DVD version adheres tightly in content to the Live version. No training is necessary for potential facilitators of the DVD course.

Of great interest too is the inner city version of the course offered as a group intervention to families living in disadvantaged areas who may be wary of traditionally presented parenting interventions, and may prefer an informal setting run by a family intervention worker in their community. A qualitative analysis will hopefully shed light on the processes underlying such groups and offer insight into whether they bring positive changes for parents and their children in those settings.

Therefore, this study will aim to evaluate the effectiveness of the Live and the DVD formats of the Parenting Children Course study in terms of:

- Parental disciplinary skills (both positive and negative) and self-efficacy as both of these have been found in previous studies to be important outcomes following successful interventions, (Beauchaine et al., 2005; Deković, Asscher, Hermanns, Reitz, Prinzie & Van Den Akker, 2010.)
- Child behaviour, as it is important that the intervention improves any behavioural issues (Scott et al., 2001b)
- General family functioning, although lesser known, has been shown to have a significant impact on both parental and child well being (Morse, Rojahn and Smith, 2014).

This study will build on previous literature in terms of providing a rigorous evaluation of a potentially scalable, voluntary sector offering which responds to Government policy and recommendations from expert centres such as NAPP.

The study will not meet the 'gold standard' of evaluation as it will not be a randomised controlled trial and it does not provide input from several sources, only parent self report. However, it will use standardised measures and robust statistical analysis, thus scoring high according to NAPP guidelines. Its results should offer support or otherwise to the 'proof of concept' of the course. In addition, it will offer a medium term follow up of three months which will add to the robustness of the findings in terms of evaluating if any changes can be maintained in the medium term. Three months was considered a reasonable time by the researcher to assess for decay of any improvements found and corroborated by the literature (e.g Simkiss, 2014).

The qualitative analysis of the inner city version of the course will also offer more intimate insight into potential mechanisms at work for the success of a community

intervention thus responding to the current trend of the research in this area; as well as illustrating if such courses are considered valuable by parents in more inner city community settings.

The literature has suggested that the leader or facilitator may have an effect on the outcome for parents attending interventions (Scott, 2008). The first three Live courses that were involved in the study were run by the originators of the course, whilst the last two courses involved were run by leaders trained by the originators. Therefore, it will be useful to see if which leader leads the course makes any difference in terms of outcome. Also to be evaluated is whether the length of the DVD course (five or ten weeks) makes any difference to efficacy as the DVD version of the course has been designed to run for either length.

1.13 Research questions

The focus of this study will therefore be to answer the following questions:

1. Regardless of which format they participate in, do parents report improved parenting skills, overall confidence and report better family functioning and child behaviour after finishing The Parenting Children Course and are these improvements maintained after three months?
2. Is there any difference in improvements among parents who received the course Live and those who received it via the DVD at the end of the course and three months later?
3. Does it make a difference to parents' outcomes a) which leader leads the Live course and b) does the length of the DVD course impact parents' improvements?
4. Does the experience of parents who participated in the small, inner city version of the course suggest that they benefit from doing the course and what can we learn about the processes underlying such an intervention

To answer these questions, both qualitative and quantitative methods will be used. Quantitative methods will be used to answer the first three questions and will evaluate the efficacy of the Live course and the effectiveness of the DVD course as well as examine whether DVD course duration is a significant factor and if changing the leader of the Live course has an impact on outcomes. The following hypotheses will be tested:

1. Hypothesis 1: Do parents who participate in either the DVD course or the Live course versions of the parenting course improve in terms of parenting outcome variables, child behaviour and general family functioning by the end of the course and at the three month follow up point and does the format of the course make a significant difference to any of the outcome variables?
2. Hypothesis 2: Do parents who participate in Live course versions of the parenting course improve in terms of parenting outcome variables, child behaviour and general functioning by the end of the course and at the three month follow up point and does which leader leads the Live course make any difference to any of the outcome variables?
3. Hypothesis 3: Do parents who participate in the DVD course improve in terms of parenting outcome variables, child behaviour and general functioning by the end of the course and does the duration of the DVD course make any difference to any of the outcome variables?

Thematic analysis will be used to answer Question 4 and aims to understand the processes involved in the participation of a small group parenting intervention in an inner city setting as well as seeking to learn if such an intervention is useful for parents. This will be described in more detail in Chapter 5.

Using both qualitative and quantitative methods is a useful way to not only provide a rigorous evaluation of a voluntary sector course but also to provide some rich data to further understand how these interventions work (Lindsay et al., 2011). Ideally, qualitative methods would have been used alongside the quantitative methods when evaluating the Live and DVD courses in order to gain insight into processes underlying those groups as well as using them to understand the processes underlying the smaller group format. However, it simply was not practical to do so within the practical and time constraints of the study and gain any meaningful data. Therefore interviews and qualitative analyses were carried out only with parents from the small group format where it was felt that interviewing even a small number of parents could generate important insights as to the processes underlying such groups as the numbers involved in that format are always very small and therefore the data is more likely to be representative of the parents attending the programme.

The following three Chapters (2-4) will present the Quantitative Method, Results and Discussion. The ensuing three Chapters (5-7) will present the Qualitative Method, Findings and Discussion and Chapter 8 will offer a final Discussion and Conclusion of what has been learned from both aspects of the study alongside strengths and limitations of the study, implications for clinical practice and further research and impact and dissemination of the findings.

Chapter 2

Quantitative Method

2.1 Introduction

In this study, both quantitative and qualitative tools were used for different sections of the research. The rationale behind this is that quantitative methods best suit the aim of evaluating the effectiveness of the Live Course and the DVD course as both of these are designed to reach large numbers of people and quantitative methods do offer advantages with large groups as they allow for breadth of knowledge and providing results that may be, even if not perfectly, generalised to particular samples (Cresswell, 2009**).**

However, to understand the experiences of the small group version of the course held in an inner city setting, the qualitative tools of in depth interviews and analysis were deemed more appropriate as they allow for the data collected to be used in its entirety (Willig, 2012). These will be described in more detail in the Qualitative Method Chapter.

2.2 Ethics

The Psychology department research & Ethics Committee at City University London considered my application for ethical approval. The committee returned a view that the project is a service evaluation using pre and post measures that would fall into the service related research/audit remit because the researcher was not changing service as usual delivery but evaluating the efficacy of the service delivery in meeting the expected outcomes. The committee felt that in this instance ethical approval was not necessary. The committee suggested that the researcher contact the audits/R&D departments (if one exists) within the church to follow their procedures. This was done by sending the Ethics form to the church administrator who wrote a letter to the Committee to confirm their approval of the project within their premises (see Appendix A1 for the letter and full Ethics application form).

2.3 Quantitative methodology

2.3.1 *Inclusion criteria*

All parents who registered on the Parenting Children Course, either for the Live course or for any of the DVD courses at the different locations, were invited to participate in the study regardless of severity of child behaviour problems, age of child, race, gender or church attendance. The only exclusion criteria applied was to parents of children under the age of one as the outcome measures would not fit that age group.

2.3.2 *Sample size*

To determine the sample size, power calculations were conducted in GPower 3.0, using an alpha of .050 and a power of 80%. The hypothesis tested was that the effect size, i.e the difference between pre and post intervention, would be 0.35, using a paired samples t-test. Simkiss, Snooks, Stallard, Anthony, Winstanley, Wilson & Stewart-Brown (2010) suggest an effect size of 0.4 is the level of difference which could be expected on the basis of changes observed on objective measures of parenting in recent UK trials of the IY's programme (Scott, O'Connor and Futh, 2005; Bywater and Hutchings, 2005) and other studies quote effect sizes between 0.14 and 0.45 for change in child behaviour outcome scores (e.g Lindsay &Strand, 2013 and Eisner, Nagin, Ribeaud & Malti, 2012) . Following the literature, with a power of 80% a sample size of 51 in each group at each time point was thought to be adequate.

2.3.3 *Measures*

In this study a number of measures were used in the form of parental questionnaires that aim to assess change in a number of variables found to be important from previous studies and discussed in the previous chapter: a) *parental self efficacy:* A recent review of the studies that examined parents' experience and perception of parenting programs (Kane et al., 2007) showed that parents themselves view an increase in their sense of competence to deal with child problem behaviour as one of the most valuable elements of parenting programmes. *b) parental disciplinary methods:* Beauchaine et al. (2005) found that changes in harsh and ineffective

parenting both predicted and mediated child behaviour change. These findings replicated those found by Tein, Sandler, MacKinnon and Wolchik (2004) and Gershoff et al., 2012). *c) reported child behavioural problems:* Seeing a change in reported child behaviour problems as well as changes in parental outcomes is key to evaluating the success of any parenting intervention (Utting & Pugh, 2004) and *d) general family functioning:* good family communication and problem solving are also found in previous studies to be important outcomes following the success of parenting interventions (Brody et al., 2008; DeGarmo et al., 2009).

As the Parenting Children Course is very much a general, universal course aimed at supporting parents overall in their task, the measures selected were chosen for their use with the general population, rather than with a targeted group. It was also important to balance brevity so that they were not too onerous for parents to complete. All the measures chosen have good psychometric properties and have been used elsewhere in similar studies.

The packet of measures for parents to complete can be found in Appendix A4 and included:

1. **The General Functioning Scale of the McMaster Family Assessment Device (FAD) (Epstein, Baldwin & Bishop, 1983)**

Family functioning is conceptualised using the McMaster model (Epstein, Bishop, & Levin, 1978), which emphasises a functional approach to understanding how and whether families accomplish basic tasks of daily life. The McMaster model has proven useful for examining the course of individuals' behaviour within the contexts of their family situations (Forman, & Hagan, 1984; Fristad, 1989; Miller, Epstein, Bishop & Keitner, 1985; Miller, Kabacoff, Epstein, Bishop, Keitner, Baldwin & van der Spuy, 1994; Miller, Kabacoff, Keitner, Epstein, & Bishop, 1986).

The model postulates six domains of family functioning: (a) Problem Solving, (b) Communication, (c) Roles, (d) Affective Responsiveness, (e) Affective Involvement, (f) Behaviour Control and (g) General family functioning which is a global assessment of the family's ability to accomplish basic everyday tasks across domains. This includes information from each domain but not necessarily a linear combination of functioning in the specific area. The 12 items comprising the General

Functioning Scale have been used alone as a brief measure of overall family functioning with excellent psychometric properties (Alderfer, Fiese, Gold, Cutuli, Holmbeck, Goldbeck, & ... Patterson, 2008;Sawin, Harrigan & Woog, 1995; Nabors, Seacat & Rosenthal, 2002) and is the version used in this study.

The FAD is a self-report questionnaire. The test–retest reliability and internal reliability of the FAD have been good in community samples in North America (Byles, Byrne, Boyle & Offord, 1988), in China (Shek, 2001), and in referred samples (McDermott, Batik, Roberts, & Gibbon, 2002). This measure has been translated into 14 languages, with empirical evidence of its utility in different cultures and has been used in 40 research studies as well as with family treatments. In general these studies support the discriminative validity of the FAD and its utility as a research instrument. Miller, Ryan, Keitner, Bishop and Epstein, (2000) looked closely at 11 such studies that confirm the FAD's validity and reliability). For the FAD, the cut off norm as recommended by Epstein et al. (1983) is any score above 2.

Scores on the FAD range from 1 (very healthy) to 4 (very unhealthy), with questions worded to emphasise both positive and negative family functioning. The FAD distinguishes between families rated by clinicians as healthy or unhealthy (Miller et al., 1985) on each dimension of the McMaster model (Keitner, Ryan, Miller, Epstein, & Bishop, 1989).

This measure was chosen over similar measures such as the Family Satisfaction Questionnaire (FSQ) (Olson, 1995) as the wording of the questions seemed more user friendly and more appropriate in this setting as they are more specific and not in need of elaborating on or explaining. Other scales of general family functioning were also looked at such as Family Assessment Measure (FAM) (Skinner, Steinhauer & Sitarenios, 2000) and the Family Environment Scale (FES) (Moos & Moos, 1984) but overall the FAD has been used the most in a research setting and has been shown to be valid and reliable whilst remaining manageable in terms of size and effort for parents.

2. The Eyberg Child Behaviour Inventory (Eyberg, 1999)

This 36 item parent report scale measures children's behaviour and includes a range of behaviours likely to be present in a child with behaviour problems, and can

compare behaviour problems in different populations over time. It is suitable for children aged 2–16 years. The inventory enumerates the number (problem scale) and frequency (intensity scale) of the problem behaviours. Rating scales are well suited for repeated measures, which make them useful for evaluating treatment programs (Eyberg & Pincus, 1999). For the ECBI intensity scores, clinical cut off is taken to be 132.

This scale is widely used in the research in this area (Burns & Patterson, 2000; Eyberg & Pincus, 1999) and has the important advantage of supplying a lot of information about a child whilst only taking five minutes to administer.

Following collection of the data, it became clear there was a high rate of missing data for the ECBI problem scale (32% missing at Time1, 71% missing at Time 2 and 45% missing at Time 3). It was decided therefore to omit the scale from the analyses and only use the ECBI intensity sale, as although it is a good measure, such high rates of missing variables rendered it unreliable in this context.

3. Tool Of Parental Self Efficacy (Bloomfield & Kendall, 2007)

The TOPSE was developed as a tool to evaluate parenting courses. Originally the measure was designed for nurses in a health setting to evaluate their work with parents; but since then, the tool has been used in other settings by a wide range of practitioners and found to be effective. The underpinning theoretical framework is Bandura's social learning theory (Bandura 1982; 1986; 1989) from which the concept of self-efficacy is derived and maintains that the acquisition and retention of behaviour is affected by the person's expectations that the action will result in anticipated benefits (Bandura, 1982). People are motivated to attempt behaviour that they feel confident in performing.

This theory underpins many parenting interventions as they seek to help parents understand the effects of their behaviour on their children and to feel empowered and confident in their parenting roles.

The TOPSE is a multi-dimensional instrument of 48 statements within eight scales, each representing a distinct dimension of parenting: Emotion and affection (six items), Play and enjoyment (six items), Empathy and understanding (six items),

Control (six items), Discipline and boundary setting (six items), Pressure (six items), self-acceptance (six items), Learning and knowledge (seven items). The items are rated on an 11-point Likert scale. The scale contains positive and negatively worded items and the responses are summed to create a total score; the lower the score, the lower the level of parenting self-efficacy.

Frequently, general self- efficacy in the parenting role has been studied using the Parental Sense of Competence Scale (PSOC; Johnston & Mash, 1989), but there is some evidence that prediction is improved by using a measure that assesses efficacy in terms of specific parenting skills, rather than general self-efficacy (Sanders & Woolley, 2005).

A new measure developed by the National Academy for Parenting Research (Woolgar, in press, http://www.corc.uk.net/resources/measures/parent/) was also considered but as it was not quite ready, the TOPSE was chosen as it measures similar constructs alongside several others. Previous studies have provided support for the reliability and validity of the TOPSE (Kendall & Bloomfield, 2005).

The TOPSE was therefore chosen for its user friendliness, sound psychometric properties and comprehensive cover of all areas of parental self-efficacy. It also seemed an excellent fit for this particular parenting programme that essentially addresses all the domains that the TOPSE evaluates in that it is a universal intervention. No norms for the TOPSE were available at the time of writing.

4. The Short Alabama Parenting Questionnaire (Scott, Briskman & Dadds, 2011)

This questionnaire was developed from a widely used assessment of parenting practices, the Alabama Parenting Questionnaire (Frick, 1991). Theories of social development posit that there is a relationship between the quality and consistency of parenting practices and emotional and behavioural problems in children (Prinz & Jones, 2003). Longitudinal data indicate that inconsistent, non-contingent and harsh punishment; lack of supervision and lack of rewarding behaviours by parents are predictive of child externalising problems (Dadds, 1995; Patterson, Reid & Dishion, 1992). However few measures tap both the positive and negative dimensions of parenting and in a review of 76 questionnaires and 27 interviews measuring parental

discipline, parental nurturance or both, it was concluded that most of these measures focus on ineffective or problematic discipline and neglect (Locke & Prinz, 2002).

The development of the APQ has advanced the assessment of parenting practices in clinical and research settings (Frick, 1991; Locke & Prinz, 2002; Shelton, Frick, & Wotton, 1996). The APQ measures five dimensions of parenting that are relevant to the etiology and treatment of child externalising problems: (1) positive involvement with children, (2) supervision and monitoring, (3) use of positive discipline techniques, (4) consistency in the use of such discipline and (5) use of corporal punishment. The APQ has good psychometric properties including criterion validity in differentiating clinical and nonclinical groups (Dadds, Maujean, & Fraser, 2003; Frick, Christian, & Wooton, 1999; Shelton et al., 1996).

However, with 42 items, the length of the APQ was unsuitable for the current study. Elgar et al. (2007) developed and evaluated a shortened version of the APQ which was used instead that retains its content coverage while limiting the time taken to administer it when it is used repeatedly over short intervals or alongside other measures.

The Short APQ is a 15-item short scale around its three factors: Positive Parenting, Inconsistent Discipline and Poor Supervision. As the APQ was used in its short form, no norms are available

Arnold, O'Leary, Wolff and Acker's (1993) measure of dysfunctional parenting was also considered to look at parental discipline but was decided against due to its length which comprises 30 items on discipline, as this was not considered the primary focus of the Parenting Course, but rather just one area to be considered alongside others such as relationship, general functioning and self efficacy. It was also designed for parents of toddlers whilst this course looks at children up to the age of 10.

2.3.4 *Missing values and syntax files for all outcome measures*

Multiple syntax files were written to calculate total scores for each measure using a pro rating method. For the APQ positive and negative total scores, two answers out of three were prorated to three and any less than two data points were excluded from

the analysis. For the ECBI, responses of 20 and over out of a possible 36 were prorated and those with less than 20 were removed. For the FAD responses, greater than eight out of the possible 12 responses were prorated and those less than eight were excluded from analysis. To calculate the TOPSE subscales, responses greater than four out of a possible six responses were prorated and the responses from participants who gave less than four answers per subscale were excluded. To calculate the TOPSE total scores, where six out of the eight subscales were completed, scores were prorated whereas where less than six were completed, these responses were not used for the analysis.

2.4 Procedure for quantitative data collection

2.4.1 *Live Course*

In order to achieve 51 participants completing questionnaires at Time 1 (T1), Time 2 (T2) and Time 3 (T3), for the Live course, more than one course was targeted. A total of five courses participated.

After a light dinner in their small groups, the study was introduced by the researcher at the start of the session. It was explained that parents would be asked to fill in a pack of questionnaires that would take approximately 15 minutes at the start of the course, then again the same pack at the end of it, to see if any change had occurred on the measures. A follow up pack would be sent to their home three months later to see if any change had been maintained.

Parents were encouraged to participate but it was made clear that participation was voluntary. Each parent was given a pack containing the questionnaires, a SAE envelope, should they need to finish it at home and a consent form to sign and return with the pack. Parents were encouraged to complete the pack within the session rather than take it home. Questionnaire packs were only sent out to those parents not present at the first or last session.

Time was made within the teaching to fill in the questionnaires in lieu of the first group activity scheduled in the session. Information sheets were removed from the packs to simplify completion and replaced by the researcher presenting the information orally at the start of the course and having a pile of sheets available at

the back of the room for anyone interested in learning more. See Appendix A5 and A6 for copies of the information sheets and consent sheets.

Confidentiality was assured by each parent having an assigned code which was used for all the analyses. Codes were matched to parents' details only for the purpose of sending out the follow up questionnaire and feedback. This system was adopted for all the data collection following the first one. A reward of £15 to compensate for the time spent filling in all three questionnaire packs was offered to all participants who did so.

Participants who did not return their questionnaires after each collection time, were followed up once with an email, letter or phone call gently reminding them to do so.

2.4.2 *DVD Courses*

A number of churches across the country were approached to run the study who registered on the Parenting Children Course website to run the course. Other churches, known to the researcher were also contacted. A total of 15 churches agreed to participate in the study.

The researcher either visited the church personally or talked on the phone with church administrators to explain the protocol. Packs of questionnaires were then sent to them to hand out to the participants together with a 'how to' sheet explaining the protocol and how to present it to their group at the first session. See Appendix A7 for a copy of this sheet. Facilitators were asked to offer participants £15 as a compensation for their time to fill in all three questionnaire packs.

Administrators were asked to provide the researcher with a list of names, and contact details of each participant and their corresponding code as written on each page of the questionnaires.

Received questionnaires were kept in a locked filing cabinet in the researcher's office.

Packs were then sent out to the facilitators at the end of the course corresponding only to those people who had filled in Time 1 and any that were not returned were followed up once by letter or email to gently remind them to do so (see Appendix A8

for an example letter). At the three month follow up mark, all those participants who had completed Time 1 and Time 2 were sent a third and final pack to complete with an accompanying letter thanking them and reminding them of the £15 reward at the end (see Appendix A9).

At the end of the collection of data, all parents who had completed three packs of questionnaires were sent a letter thanking them for their contribution to the study together with a summary of the overall findings (see Appendix A10). All facilitators of the DVD courses and the Live courses were also sent a letter thanking them with a summary of the overall findings as well as those specifically from their course (see Appendix A11).

Table 2.1 shows the geographical distribution of parents participating in the DVD courses: The majority of DVD courses took place in the South East of England.

Table 2.1. Geographical distribution of parents participating in DVD courses

Geographical Location	Percent (%)
South West London/ Surrey	28.8
Inner London	17.3
Bath	14.4
Northern Ireland	10.1
Southampton	8.6
Glasgow	7.2
Essex	7.2
East Sussex	6.5

2.4.3 *Participant Demographics*

Parents attending both the Live and DVD courses were invited by the course leaders via leaflets and video promotions both within the church and through local community services. Any parent was welcome including those expecting their first child although this group was not invited to participate in the study. Parents were not targeted based on family functioning or child behaviour problems or any other variable. The programmes were run as a community programme open to all parents.

As can be seen from the Figure 2.1 below and from Table 2.2 showing participant characteristics for the whole sample, two thirds of the sample took part in the DVD version of the course compared to only one third doing the Live course. The overall sample size had sufficient power to test the hypotheses.

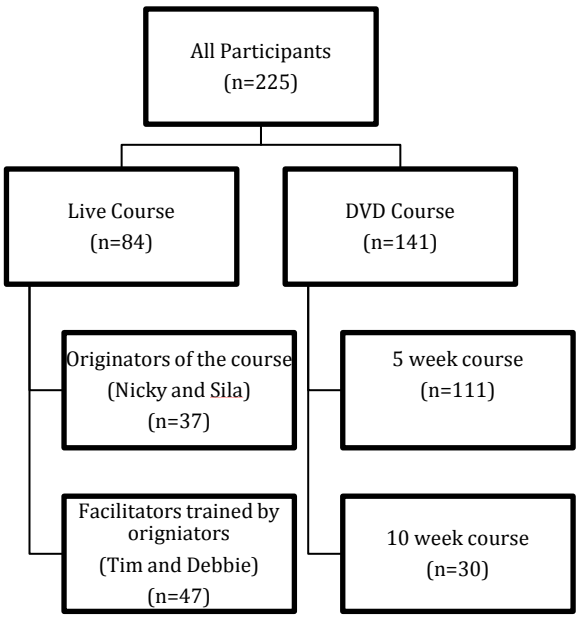

Figure 2.1. Flow chart showing distribution of parents to the different versions of the course at Time 1

The full break down of ethnic groups recorded is shown in Table 2.2 but for the ensuing analyses, only two groups were used to describe the ethnicity of the whole sample: White and Black and Minority Ethnicity (BME).

Table 2.3 and Table 2.4 show the demographics for the DVD and Live courses separately. There was a slightly higher percentage of mothers doing the DVD course than the Live and the average age of the target child in both formats was under five. More BME parents were represented at the Live course than the DVD course. Due to missing data, valid percentages were used to report ethnicity.

As the Parenting Children Course is based in churches, data was also collected to see what percentage of participants would describe themselves as Christians. Of those that did answer, using valid percents, 85 % described themselves as Christian and 15% as non Christian/no faith.

Table 2.2. Demographics of all participants for DVD and Live courses

	Time Period		
	Time 1	**Time 2**	**Time 3**
Sample size	N = 225	N = 156	N = 123
Child gender			
Female	59%	54%	58%
Male	41%	46%	42%
Child's age (years)	4.44 (2.82)	4.50 (2.69)	4.68 (2.89)
Child's prorate age (years)	4.77 (2.91)	4.68 (2.70)	4.76 (2.84)
Gender of parent			
Mother	69%	70%	74%
Father	31%	30%	26%
Ethnicity			
White	74.6%	73.4%	74.1%
Black	2.6%	3.6%	3.6%
Asian	6.9%	7.9%	7.1%
Mixed race	7.9%	8.6%	8.0%
Information not supplied	7.9%	6.5%	7.1%

Table 2.3 shows participant characteristics of those attending only the DVD courses throughout the country:

Table 2.3. DVD participant characteristics at T1, T2 and T3

	Time Period		
	Time 1	**Time 2**	**Time 3**
Sample size	N = 141	N = 93	N = 79
Child gender			
Female	56%	51%	56%
Male	44%	49%	44%
Child's age (years)	4.60 (2.75)	4.65 (2.61)	4.98 (2.92)
Child's prorate age (years)	4.87 (2.85)	4.76 (2.60)	5.00 (2.83)
Gender of parent			
Mother	74%	76%	77%
Father	26%	24%	23%
Ethnicity			
White	86%	85%	87%
BME	14%	15%	13%

Table **2.4**. shows the participant characteristics for parents attending the Live course:

Table 2.4. Live Course participant characteristics at T1, T2 and T3

	Time Period		
	Time 1	**Time 2**	**Time 3**
Sample size	N = 84	N = 63	N = 44
Child gender			
Female	60%	59%	61%
Male	40%	41%	39%
Child's age (years)	4.18 (2.93)	4.25 (2.84)	4.13 (2.79)
Child's prorate age (years)	4.59 (3.01)	4.55 (2.86)	4.31 (2.85)
Gender of parent			
Mother	61%	60%	68%
Father	39%	40%	32%
Ethnicity			
White	72%	67%	65%
BME	28%	33%	35%

Figures are % (number) or mean (standard deviation). For child gender and ethnicity valid percents are reported.

2.4.4 *Use of data regarding post codes and caseness*

At the beginning of the study, it was decided together with the programme originators that, given the tight timing of the course and the emphasis on creating an informal, relaxed learning environment that it would not be appropriate to collect data on the socioeconomic status of the participants, their levels of education or employment as doing so can be quite cumbersome and time consuming and possibly uncomfortable for participants. Post code data was available but it was decided that on its own it did not provide sufficient detail to be reliably used with regards to the socio economic status of the participants and therefore was not included in the analysis. The implications of this decision will be considered in the Quantitative Discussion chapter. The course is universal, therefore no one variable was the target of the intervention; rather the programme was offered to all and can be seen as a general intervention designed to help parents think about their families and their parenting and grow in confidence to manage their children more effectively. However, it may be of interest to note that 33% of participants scored above the clinical cut off of 132 on the ECBI at T1 which is higher than the percentage expected to do so in the general population.

2.5 Research design

To test the hypotheses outlined in the Introduction, changes in parental scores between the start of the course (T1) and the end of the course (T2) and at a follow up time of three months later (T3) were examined using standardised questionnaires for all the outcome variables at the three time points. The IV's (independent variables) were the two formats evaluated: DVD and Live; the two leaders within the Live group: Tim or Nicky and Sila and the two durations within the DVD course: 5 or 10 weeks. The DV's (dependent variables) were the outcome measures: The TOPSE, APQ positive and negative scales which all measured parenting skills; the ECBI intensity scale which measured reported child behaviour and the FAD which measured general family functioning.

The following section will now present the findings from the quantitative part of the study. The Qualitative Method, Results and Discussion can be found in Chapters 5-7.

Chapter 3

Results

3.1 Introduction

This chapter will present findings from the statistical analyses carried out to test the hypotheses outlined at the end of the Introduction chapter. 2x2 mixed factor ANOVAs were used to examine the changes in parental scores on all outcome measures between the start and end of the course. The within group factor is the two time points assessed, T1 and T2, and represents the change in the variables regardless of the type of intervention. The between group factors represent features of the intervention; a) the two types of intervention, i.e. DVD versus Live course, b) 5 week versus 10 Week DVD course and c) the two facilitators of the Live course. The interaction between Time and intervention indicates where there were differences between the different groups over time; e.g. which specific features of the intervention (for example DVD or Live, Tim or Nicky, 5 or 10 weeks duration) were more or less effective.

Differences between the start of the course (T1) and a follow up time of three months later (T3) were examined using 2x3 mixed factor ANOVAs. The two between subjects factors were as above, whilst the 3 within subject factors were the three time points. The data analysis here is more complex because the changes that might occur between T2 and T3 could be decay, stability or an on-going improvement in outcomes. Consequently, planned contrasts were carried out to answer the research question as to whether improvements found at the end of the course were maintained three months later and if there was a decay in outcomes from the end of the course to follow up, was the final state at Time 3 above that at Time 1 (i.e, in spite of decay at the end of the course in terms of changes, did parents still end up with better outcomes than what they started with).

For both sets of time points (T1- T2 and T1, T2 - T3), the following outcome variables were assessed:

1. *Parenting variables:* To look at changes in parenting practices, the APQ positive and APQ negative and TOPSE scales were analysed together as they can all be considered to measure aspects of parenting skills. This grouping of variables allowed for the running of an omnibus MANOVA which provided overall significance values of the combined measures. These were then explored for significance and individual ANOVA's inspected as follow ups where appropriate;
2. *Child behaviour*, as measured by the ECBI intensity scale was analysed by running 2x2 and 2x3 mixed factor ANOVA's examining changes in scores for all participants at Time 2 and Time 3 respectively;
3. *General family functioning*, as measured by the FAD was analysed by running 2x2 and 2x3 mixed factor ANOVA's examining changes in scores at Time 2 and Time 3 respectively.

As the analyses in **2.** and **3.** were assessing theoretically distinct aspects, a Bonferroni correction was not considered necessary. Total scores of each measure at T1 and T2 and T1, T2 and T3 were used.

In order to test the first hypothesis looking at the impact of the course for all participants, data from the DVD group and from the Live group will be considered together (N=225) as well as looking at differences between the two formats. Subsequent analyses addressing Hypotheses 2 and 3 will only use data from the Live Course (N=84) and DVD courses (N=141) respectively.

Before the analyses are reported, details on how the data was prepared prior to analysis are presented together with a report of the descriptive statistics of the sample, attrition rate and correlations between the outcome and demographic variables. A summary of the results is presented at the end of the chapter. Implications of the findings will be discussed in the subsequent Discussion chapter.

3.2 Data preparation

Prior to the statistical analyses, the data was examined for normality, skewness and kurtosis. See Table 1. in Appendix A12 for details. Kolmogorov—Smirnov Statistics were inspected in addition to z scores for skewness (Table 2. In Appendix A12) and kurtosis (Table 3. in Appendix A12) to determine whether the assumption of normality

had been violated. Using Fife-Schaw's (2014) recommendations the FAD was found not to be normal and so a logarithmic transformation was carried out and all reported FAD scores in the analyses are log transformed (see Figs. 1-3 in Appendix A12).

Correlation tables were inspected (see Tables. 3.5 and 3.6) for collinearity between the measures and the demographic variables and it was found that no assumptions were violated.

Normality assumptions were tested for all analyses. Where appropriate, Levene's test of equal variance was run for each analysis and where significant results were found, equal variance not assumed statistics were reported instead.

Mauchley's test for sphericity was also run where relevant and when significant results were found, Epsilon values were inspected and based on Girden's (1992) recommendations if these values were above .75, Huynh Feldt degrees of freedom were reported and if they were below .75, then Greenhouse Geisser degrees of freedom values are reported.

3.3 Demographics and exploring data

Below in Table 3.1 are the descriptive statistics showing the change in participant scores between Time 1, Time 2 and Time 3. Improvements on all outcome measures for the whole sample between T1, T2 and T3 can be seen with the exception of the APQ positive where improvements at T2 are not sustained at T3. Findings from the statistical analyses are reported in a following section.

Table 3.1. Mean scores and standard deviations of all measures for whole sample

	Time Period		
	Time 1	**Time 2**	**Time 3**
Sample size	N = 225	N = 156	N = 123
TOPSE	363.037(46.894)	384.985 (37.340)	392.311 (41.187)
APQ Positive	30.811(2.730)	31.301 (2.585)	31.080 (2.381)
APQ Negative	11.272 (2.799)	10.413 (2.348)	9.939 (2.508)
ECBI Intensity Scale	120.026 (30.696)	113.164 (29.942)	109.095 (31.552)
FAD	.227 (.111)	.199 (.113)	.192 (.128)

Figures are mean (standard deviation).

3.3.1 *Attrition rate*

The drop out rate for completing the questionnaires for the overall sample between Time 1 and Time 2 was 31% and 21% between Time 2 and Time 3, with an overall drop out rate of completing the questionnaires between Time 1–Time 3 of 45%. It was unfortunately not possible to account for the attrition rate in terms of knowing whether parents had dropped out of the programme by Time 2 or whether they were absent for logistical reasons at Time 2 but had been engaged up until that point or whether they were present but did not wish to complete the second set of questionnaires. Additionally, parents were not asked why they did not complete the Time 3 questionnaire packs as it simply was not practical to follow up all those who did not return the packs, beyond one reminder. The implications of this lack of information will be discussed in the limitations section of the Discussion chapter.

The 45 % attrition rate fits within the range most commonly found in previous studies. Drop out rates for parents reported in studies evaluating the Incredible Years Programme varies between 10%-50% (Webster-Stratton, 2004, 2005); for Triple P, drop rates have been reported to be anywhere from 5%-44% (Markie-Dadds & Sanders, 2006) and echoed in the large study conducted by Lindsay et al. (2013) in their roll out parenting interventions across the UK to all English LA's to implement one or more of five evidence based parenting interventions. Triple P, Incredible Years, Strengthening Families Strengthening Communities, Families and Schools Together (FAST), and the Strengthening Families Programme (10–14) found an overall take up rate of 54% at the 1 year follow up. Results were very similar across the prgrammes: 52.2% TripleP, 56.8%, IYP, 54.1%, SFSC and 58,3% for SFP 10-14. In that study, facilitators were asked to report on the reason for non-completion by the parents. For 16% of parents the facilitator provided a reason for non-completion which included a) the parent did not complete the course (12%); b) the parent completed the course but declined to complete the booklet (1%) or c) the parent did not complete the booklet for some other reason (2%) e.g. transferred to another group, sick child etc. For a large proportion of parents (32%) there was no facilitators' report from the group so reasons for non-completion, as in the current study, are not known. In fact this study stands out in attempting to report reasons for drop out as most studies to date have not reported systematically collected information on the reason for drop out (e.g. Gardner, 2010).

A key issue revolves around whether those who responded to the post-course questionnaire packs differ systematically from those who did respond. In the large study carried out by Lindsay et al., (2013), no differences were found in terms of gender or ethnicity, child age or gender. They did find those who did not respond at the end of the programme were more likely to socially disadvantaged than responders and more likely to have no educational qualifications or to own their own property and more likely to have a child on free school meals. The current study did not collect SES data and so cannot compare findings on these measures. They also examined differences between participants at Time 1 and found two significant differences which were non responders at Time 2 were more likely to have lower mental well-being at Time 1 than those who did respond at Time 2. They were also likely to have higher parental laxness at the start of the course. However, they conclude that these differences are likely to be minimal as the effect sizes were very small and probably only significant due to the large sample size and that in fact there is little evidence that non responders at post course differed substantially from those that did respond in terms of pre-course scores.

For the current study, prior to the analysis of the data, independent *t*-tests were also conducted to compare the characteristics of the participants who completed the questionnaires at T1 but not at T2 as well as those who completed at T1 and T2 but not at T3. The latter test addressed whether there were any differences in terms of the demographic data collected and the measures administered to parents, between those who completed the course as well as the follow up and those who completed the course but did not complete the follow up. Dummy variables were created that coded for presence of data at Time 2 (156, 69.3%) and a second for those who had data at Time 2, whether data was present at Time 3 (120, 76.9%). These were subsequently used as the between factor in the independent samples t-tests or chi-squares, as appropriate. Table 3.12 and Table 3.13 show the results from the independent *t*-tests and chi-squares for T1-T2 and T1, T2 –T3 respectively. The only significant results found were for gender of the parent and gender of the child but as in the Lindsay study, once a Bonferroni correction was applied, which given the large number of tests run would be advised, these differences became non significant. Therefore, it is likely, as in previous studies (e.g. Lindsay et al., 2013 and Gardner, 2010) that the data drop out was relatively unbiased.

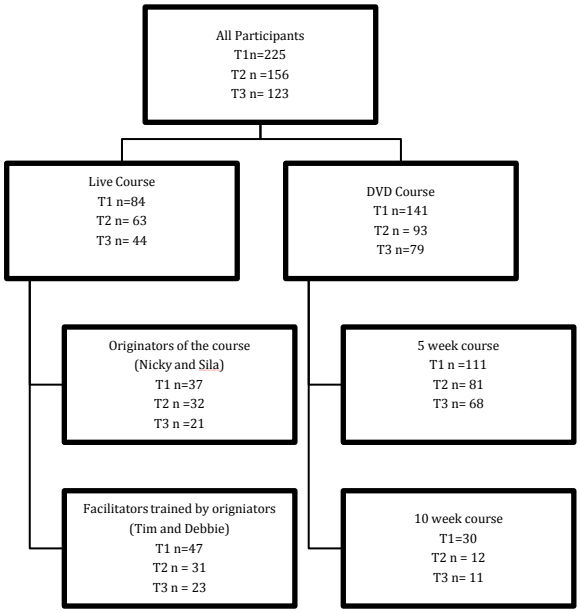

Figure 3.1. Flow chart showing attrition rate of participants for all groups between T1, T2 and T3.

Table 3.2. Independent samples *t*-tests drop out analysis of differences with regard to all variables between those who completed T2 and those that did not and also for those who completed T3 and those that did not.

	Completed T2		**Didn't complete T2**				
	Mean	SD	Mean	SD	*t*	DF	*P* value
TOPSE Time 1	364.47	45.71	359.76	49.67	.69	221	.49
APQ Positive T1	30.93	2.67	30.53	2.86	.94	191	.35
APQ Negative T1	11.31	2.77	11.18	2.89	.32	200	.75
ECBI Intensity T1	120.30	30.82	119.43	30.65	.19	204	.85
FAD T1	.22	.11	.24	.11	.66	219	.51
Target child age	4.50	2.70	4.25	3.20	.501	182	.61
Prorata child age	4.68	2.70	4.99	3.39	.65	91.499	.57
	Percent		Percent		χ^2		
Target child gender (F)	54%		73%		5.61	1	.02*
Gender of parent (F)	70%		68%		.11	1	.74
Ethnicity (White)	78%		89%		2.21	1	.1
	Completed T3		Didn't complete T3				
TOPSE T1	364.64	45.31	363.92	47.68	-.08	153	.94
APQ Positive T1	31.18	2.68	30.14	2.53	-1.94	132	.05
APQ Negative T1	11.29	2.76	11.38	2.84	.16	138	.87
ECBI Intensity T1	120.61	31.13	119.33	30.29	-.21	140	.83
FAD T1	.212	.11	.24	.12	.99	152	.32
Target Child Age	4.56	2.73	4.25	2.56	-.55	138	.59
Prorata child age	4.65	2.70	4.77	2.75	.24	153	.81
	Percent		Percent		χ^2		
Target child gender (F)	56%		47%		.947	1	.330
Gender of parent (F)	75%		53%		6.50	1	.01*
Ethnicity (White)	79%		76%		.15	1	.70

*p < .05; **p < .01; ***p < .001.

Note where Levene's test was significant equal variances not assumed statistics are reported instead. Where dichotomous variables are used chi-squared tests and percentages are reported.

Table 3.3. Independent Samples *t*-tests drop out analysis for those who completed T3, having completed T2 and those that did not.

	Completed T3		**Didn't complete T3**				
	Mean	SD	Mean	SD	*t*	DF	P value
TOPSE Time 2	384.84	37.13	385.49	38.57	.09	154	.93
APQ Positive T2	31.52	2.50	30.59	2.75	1.82	136	.07
APQ Negative T2	10.33	2.48	10.69	1.86	.79	142	.43
ECBI Intensity T2	113.92	29.69	110.80	31.06	.54	143	.59
FAD Time 2	.20	.11	.21	.12	.74	153	.46
Target child age	4.56	2.73	4.25	2.56	.55	138	.59
Prorata child age	4.65	2.70	4.77	2.75	.24	153	.81
	Percent		Percent		χ^2		
Target child gender (F)	57%		47%		.95	1	.33
Gender of parent (F)	75%		53%		6.50*	1	.01
Ethnicity (White)	79%		76%		.15	1	.70

*p < .05; **p < .01; ***p < .001.

Note where Levene's test was significant equal variances not assumed statistics are reported instead. Where dichotomous variables are used chi-squared tests and percentages are reported.

3.3.2 *Differences between participants at Time 1*

Independent sample *t*-tests were carried out between the means of the scores of each of the groups shown in Figure 3.1 in order to understand whether any differences found between the different interventions could be attributed to differences in the characteristics of participants at the outset of the course.

Table 3.4. shows there were no significant differences between participants on any of the outcome measures regardless of which format of the course they participated in, the length of the course, if they did the DVD version, or which facilitator led the course, if they did the Live course. Due to the universal nature of the course it was decided it was more appropriate to check for differences across all outcome measures rather than only severity of child behaviour at Time 1 as would be common practice in studies where the intervention is targeted toward parents of children with specific conduct disorders.

Table 3.4. Independent samples *t*-tests comparing initial T1 scores between groups for format, leader and duration.

	Mean (SD)	**Mean (SD)**	***t***	**DF**	**P value**
Format	*DVD*	*Live Course*			
TOPSE	361.16 (43.19)	366.14 (52.58)	.73	149.514	.47
APQ Positive	30.85 (2.66)	30.75 (2.86)	.26	191	.80
APQ Negative	11.13 (2.42)	11.50 (3.32)	.85	127.943	.40
ECBI Intensity	118.01 (28.04)	123.34(34.55)	1.21	204	.223
FAD	.22 (.10)	.24 (.12)	1.50	143.429	.14
Leader	*Nicky & Sila*	*Tim*			
TOPSE	368.67 (49.71)	364.16 (55.19)	.39	82	.70
APQ Positive	30.77 (2.76)	30.73 (2.96)	.05	71	.96
APQ Negative	11.82 (2.96)	11.25 (3.59)	.75	76	.45
ECBI Intensity	123.76 (34.33)	123.02 (35.12)	.09	76	.93
FAD	.26 (.11)	.22 (.13)	1.22	82	.23
Duration	*5 week*	*10 week*			
TOPSE	362.90 (41.53)	354.83(48.99)	.91	137	.37
APQ Positive	30.80 (2.63)	31.04 (2.82)	.40	118	.69
APQ Negative	11.14 (2.43)	11.07 (2.40)	.13	122	.89
ECBI Intensity	117.70 (27.77)	119.08 (29.46)	.23	126	.82
FAD	.22 (.11)	.22 (.09)	.41	135	.69

*p < .05; **p < .01; ***p < .001.

Where Levene's test was significant, equal variances not assumed statistics are reported instead.

3.4 Correlations of demographics and outcome measures

In addition to looking at the differences between participants at T1, correlations were inspected between the outcome and demographic variables. These are shown below.

Table 3.5. Correlation table between outcome measures for all participants at T1

	Pearson Correlation at Time 1				
	APQ Positive	APQ Negative	ECBI Intensity	FAD	TOPSE
APQ Positive		.14*	.00	-.22**	.20**
APQ Negative			.50**	.25**	-.29**
ECBI Intensity		.		.35**	-.47**
FAD Total					-.53**
TOPSE Total					

**p<.01, *p<.05

Table 3.6. Correlation table between outcome measures and demographic variables for all participants at T1

	Pearson Correlation at Time 1				
	APQ Positive	APQ Negative	ECBI Intensity	FAD	TOPSE
Age of target child	.01	.35**	.20*	.28**	-.17*
Prorata Age	.01	.37**	.15*	.21**	-.14*
Gender of target child	.15*	.22**	.20**	.10	-.07
Gender of parent	-.14*	.04	-.01	.05	.08
Ethnicity BME	-.06	.09	.01	-.07	-.03

**p<.001, *p<.05

Table 3.5 shows moderate correlations between the ECBI and the other measures with the exception of the APQ positive scale for this sample. Table 3.6 shows a moderate correlation between the age of the target child and the APQ negative scale. In fact there is a small correlation between age of the target child and all the measures with the exception of the APQ positive scale. Following inspection of these tables, no further analyses beyond those described to test the hypotheses will be carried out.

3.5 Analyses of findings

Analyses were conducted on three groups: the whole sample, the Live course and the DVD course (Figure 3.1 shows the groups) Two separate analyses using MANOVA and separate ANOVAs were carried out to examine the effectiveness of the course and the impact of the course format, leader and duration (respectively) of the course on parenting variables, child behaviour and general family functioning over time. Parenting variables were measured by the TOPSE, APQ negative and APQ positive taken together as they are all measuring parenting skills. Child behaviour was measured using the ECBI intensity scale and general family functioning was measured using the FAD. For the first group, the whole sample, the two formats were the DVD and the Live version of the course. For the second group, the Live group, the leaders were Nicky and Sila or Tim and Debbie. For the third group, the DVD group, duration was either 5 or 10 weeks. T1 was before the start of the course, T2 was the end of the course and T3 was three months later. Planned contrasts were carried out to test whether any improvement found at T2 was maintained at T3 as well as whether there was still overall improvement at T3 compared to T1 if decay occurred between T2 and T3.

The rationale for doing two separate analyses is that the primary aim of this study was to evaluate the effectiveness of the Parenting Children Course using pre and post standardised measures thus replicating the model most commonly found in the literature. In addition, however, data was also collected at T3 in order to evaluate whether any improvements found at T2 were maintained or decayed three months later. Carrying out a single analyses for T1-T3 was also found not to be powered enough to test the main hypotheses relating to T1-T2 due to the large attrition rate of returned questionnaires at T3 (see Figure 3.1). This means that the follow up data for T3 is a first exploratory step for testing the duration of effects. Therefore, the first MANOVA for each group (whole sample: Live and DVD), compared T1 and T2 on parenting outcome variables to replicate previous research. However a second MANOVA was used to look at T3 to evaluate whether any improvements found at T2 for parenting outcome variables were maintained three months later. Univariate ANOVAS were then inspected for the parenting variables following any significant omnibus findings. Furthermore, two separate ANOVAS were conducted for the child behaviour variable, as measured by the ECBI intensity scale and the general family functioning variable as measured by the FAD for each of the three groups as described earlier in this chapter.

3.6 Exploring the whole sample: DVD and Live Course data

3.6.1 *Changes between T1 and T2 for the whole sample (testing Hypothesis 1)*

Parenting outcome variables

To examine the overall improvement in scores on parenting outcome variables between T1 and T2 using Live course or DVD, a 2(Time: T1 vs T2) x 2(Format: Live vs DVD) Mixed Factor MANOVA was carried out. Using Wilk's Lambda, there was a significant effect of time on parenting outcome measures, Wilk's Λ =.64, $F(3,123) = 23.36$, $p < .001$, $\eta_p^2 = .37$ indicating that the course had significant effects on parenting outcome variables between the start and end of the course. There was no significant interaction between format of the course and time, Wilk's Λ = .98, $F(3,123) = .77$, $p = .52$, $\eta_p^2 = .02$ which means that which format parents participated in did not affect outcome on parenting variables.

Looking more closely, As shown in Table 3.11, separate Univariate ANOVAs on the parenting outcome variables revealed there was a significant change in scores over time for the TOPSE at the end of the course, $F(1,125) = 65.64$, $p < 0.001$, $\eta_p^2 = 0.34$ ($d = 0.56$) as well as for the APQ negative scale, $F(1,125) = 23.06$, $p < 0.001$, $\eta_p^2 = 0.16$ ($d = 0.36$). However, no significant difference was found between scores over time on the APQ positive scale, $F(1,125) = 2.33$, $p = 0.19$, $\eta_p^2 = 0.02$. Therefore it would seem that participants do not improve in their ability to parent more positively by the end of the course although they do decrease their negative parenting methods and their confidence and self-efficacy increase.

Child behaviour

Table 3.7. Means and s.d's for ECBI intensity scale for whole sample between T1-T2

	Format	Mean	s.d	N
ECBI int T1	DVD	117.02	27.78	84
	Live Course	125.04	34.47	58
	Total	120.30	30.82	142
ECBI int T2	DVD	110.76	27.66	84
	Live Course	117.64	31.44	58
	Total	113.57	29.35	142

To examine the overall improvement in scores on child behaviour variables, as measured by the ECBI intensity scale, a separate 2(Time: T1 vs T2) x 2(Format: Live vs. DVD) ANOVA was conducted. Table 3.7 shows the means and related standard deviations for the ECBI intensity scale. A main effect of time on the intensity of the child's behaviour, was found between the start and end of the course: $F(1,140) = 19.26$, $p<0.001$, $\eta_p^2 = 0.12$ ($d = 0.24$) indicating that parents reported an improvement in their child's behaviour at the end of the course. However, there was no interaction between Time and Format on child behaviour scores by the end of the course: $F(1,140)=0.13$, $p = 0.72$, $\eta_p^2 = 0.001$ showing again that format of the course did not make a significant difference to outcome.

Caseness analysis

33% of total ECBI scores scored within the clinical range of 132 or above. To investigate whether clinical significance was obtained as well as statistical significance, a crosstabulation was conducted between ECBI Time 1 scores of 132 or above and those below, compared to ECBI Time 2 scores of 132 or above and those below and shown in the table below.

Table 3.8. Crosstabulation between ECBI T1 and T2 scores

			ECBI_Time2above132		
			.00	1.00	**Total**
ECBI_Time1above_132	.00	Count	89	7	96
		% within ECBI_Time1above_132	92.7%	7.3%	100.0%
	1.00	Count	17	29	46
		% within ECBI_Time1above_132	37.0%	63.0%	100.0%
Total		Count	106	36	142
		% within ECBI_Time1above_132	74.6%	25.4%	100.0%

From the table, it appears 92.7% of participants reporting ECBI scores below the clinical cut off of 132 at Time 1 continued to report at below the cut off at Time 2, whereas 7.3% met the threshold for caseness at Time 2 having not met it at Time 1, despite the intervention.

63% of those scoring in the clinical range at Time 1 for the ECBI, did so at Time 2 as well, and 37% scored in the non clinical range at T2 having scored in the clinical range at T1.

Therefore it appears 37% of participants scoring in the clinical range reported improvements at the end of the course for their child's behaviour compared to the start of the course. However, after carrying out a Mc Nemar test as shown below, it appears any changes found between the two groups just failed to reach significance: p=0.06. Therefore, whilst we can see improvements in child behaviour overall between the start and end of the course, it appears for those in the clinical range, whilst improvements were found, they fell short of being statistically significant.

Table 3.9. Chi-Square Tests showing McNemar Test result

	Value	**df**	**Asymp. Sig. (2-sided)**	**Exact Sig. (2-sided)**	**Exact Sig. (1-sided)**
Pearson Chi-Square	51.077[a]	1	.000		
Continuity Correction[b]	48.174	1	.000		
Likelihood Ratio	50.055	1	.000		
Fisher's Exact Test				.000	.000
Linear-by-Linear Association	50.717	1	.000		
McNemar Test				.064[c]	
N of Valid Cases	142				

a. 0 cells (.0%) have expected count less than 5. The minimum expected count is 11.66.

b. Computed only for a 2x2 table

c. Binomial distribution used.

General family functioning

Table 3.10. Table showing means and s.d's for FAD for whole sample between T1 and T2

	Format	Mean	S.d	N
Log FAD T1	DVD	.21	.10	90
	Live Course	.24	.12	63
	Total	.20	.11	153
Log FAD T2	DVD	.21	.10	90
	Live Course	.19	.13	63
	Total	.20	.11	153

A separate 2(Time: T1 vs T2) x 2(Format: Live vs. DVD) ANOVA was also conducted to examine the effect of time on general family functioning as measured by the FAD. Table 3.10 shows the means and related standard deviations for the FAD scale. A main effect of time on general family functioning was found, $F(1,151)= 15.65$, $p<0.001$, $\eta_p^2= 0.09$ ($d = 0.22$) showing that parents reported an improvement in general family functioning over the duration of the course. There was also a significant interaction between Time and Format for general family functioning, as measured by the FAD between T1 and T2: $F(1,151) = 10.87$, $p<0.001$, $\eta_p^2 = 0.07$ ($d = 0.22$) suggesting that format did influence outcomes for general family functioning between the start and end of the course. Post hoc paired samples *t* tests were carried out to further understand this interaction. These tests showed that the significant change is occurring for parents on the Live course $t(62) = 4.27$, $p < 0.001$, $d=0.56$, but not for the DVD course $t(89) =0.54$, $p= 0.59$, $d=0.06$. See Figure 3.2 below.

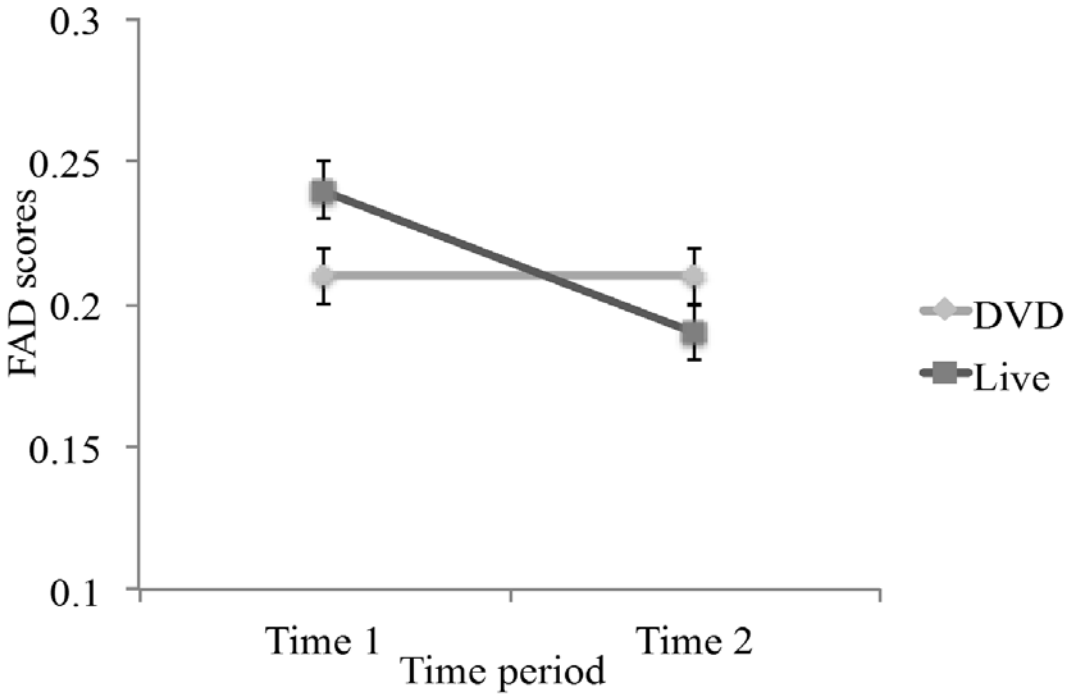

Figure 3.2. Graph showing interaction between FAD scores between T1 and T2 for DVD and Live course participants

Table 3.11. Univariate ANOVA follow up results for parenting variables for all participants for T1-T2 (N=127)

	T1 Mean (SD)	T2 Mean(SD)	*F*(1,125)	P Value	η_p^2
TOPSE					
Time	362.01 (46.45)	385.66 (37.4)	65.64***	<.001	.34
Format	359.16 (42.46)	385.04(33.9)	0.38	0.54	.00
Time*Format	366.27 (51.97)	386.58(42.5)	0.88	0.35	.07
DVD (n = 76)					
Live (n=51)					
APQ Positive					
Time	30.90 (2.62)	31.20 (2.42)	2.33	.19	.02
Format	31.03(2.51)	31.49(2.25)	1.70	.19	.03
Time*Format	30.70(2.79)	30.77(2.62)	0.94	.34	.07
DVD (n=76)					
Live (n=51)					
APQ Negative					
Time 1- 2	11.36 (2.68)	10.469 (2.27)	23.06***	<.001	.16
Format	10.98(1.97)	10.17(1.91)	4.2*	.04	.03
Time*Format	11.92(3.43)	10.92(2.67)	.22	.64	.02
DVD (n=76)					
Live (n=51)					

N.B. Effect sizes reported are partial eta squared, where a small effect size = 0.02, a medium effect size = 0.13 and a large effect size = 0.26.

3.6.2 *Changes between T1, T2 and T3 for the whole sample*

Parenting outcome variables

To examine the overall improvement in scores on parenting outcome variables between T1, T2 and T3 using Live course or DVD, a 3(Time: T1 vs T2 vs. T3) x 2(Format: Live vs DVD) Mixed Factor MANOVA was carried out. Using Wilk's Lambda, there was a significant effect of time on parenting outcome measures, Wilk's Λ =.57, $F(6, 84) = 10.39$, $p < .001$, $\eta_p^2 = .43$, suggesting that there was a significant change in scores over the three time points which will be explored in more detail below in the ANOVAs with planned contrasts. There was no significant interaction between format of the course and time, Wilk's $\Lambda = .97$ $F(6, 84) = .50$, $p = .80$, $\eta_p^2 = .04$, indicating that the mode of delivery did not affect outcome for parenting variables.

As shown in Table 3.12, separate Univariate ANOVAs on the parenting outcome variables revealed there was a significant change in scores over time for the TOPSE at the end of the course: $F(1.554,138.301) = 31.31$, $p<0.001$, $\eta_p^2 = .26$. Planned contrasts showed significant change between T1 and T3, $F(1,89) = 38.29$, $p < 0.01$, $\eta_p^2 = 0.30$ as well as between T2 and T3, $F(1,89) = 5.85$, $p < 0.05$, $\eta_p^2 = 0.06$. This shows participants' TOPSE scores continued to improve after the end of the course.

A significant difference in scores over time for the APQ negative scales was also found: $F(2, 178) = 18.12$, $p<0.001$, $\eta_p^2 = 0.17$. Planned contrasts showed significant change in scores between T1 and T3, $F(1,89) = 32.50$, $p<0.001$, $\eta_p^2 = 0.27$ but no significant changes between T2 and T3, $F(1,89) = 2.61$, $p = 0.109$, $\eta_p^2 = 0.03$. This suggests APQ negative scores improve at T2, with no significant change at T3 and ending up with higher scores at T3 than at T1. No significant difference was found between scores over time on the APQ positive scale, $F(2,178) = 2.18$, $p=0.12$, $\eta_p^2 = 0.02$ indicating once again that parents' positive parenting skills do not appear to be impacted by the course.

Table 3.12. Univariate follow up results for all variables for all participants at all 3 time points and means and standard deviations for all variables for all participants at all 3 time points, (N=91)

	T1 Mean (SD)	T2 Mean (SD)	T3 Mean (SD)	*F*	DF	*P* value	η_p^2
TOPSE							
Time	361.39 (46.39)	384.40 (36.78)	391.04 (41.95)	31.31***	1.554, 138.301	<.001	.26
Format	358.00(42.49)	384.43(35.99)	391.74(41.31)	0.10	1, 89	0.75	.00
Time*Format	368.29(53.57)	384.33(38.98)	389.62(43.88)	1.67	1.554, 138.01	0.20	0.02
DVD (n=61)							
Live (n=30)							
APQ Positive							
Time	31.09 (2.61)	31.54 (2.35)	31.13 (2.44)	2.18	2, 178	.12	.02
Format	31.25(2.58)	31.62(2.33)	31.20(2.42)	.75	1, 89	.75	.00
Time*Format	30.77(2.70)	31.38(2.44)	31.00(2.53)	.20	2, 178	.82	.00
DVD (n=61)							
Live (n=30)							
APQ Negative							
Time	11.31 (2.70)	10.34 (2.36)	10.04 (2.34)	18.12***	2, 178	<.001	.17
Format	10.98(1.90)	9.90(1.95)	9.62(1.99)	6.17*	1, 89	.02	.07
Time*Format	11.97(3.81)	11.233(2.85)	10.90(2.77)	.40	2, 178	.67	.00
DVD (n=61)							
Live (n=30)							

*p < .05; **p < .01; ***p < .001.

Child behaviour

Table 3.13. Means and s.d's for ECBI intensity scale for all participants between T1, T2 and T3

	Format	Mean	S.d	N
ECBI int T1	DVD	116.72	27.37	68
	Live Course	128.55	34.64	37
	Total	120.90	30.50	105
ECBI int T2	DVD	109.38	27.62	68
	Live Course	123.11	29.51	37
	Total	114.22	28.92	105
ECBI int T3	DVD	106.91	32.58	68
	Live Course	114.17	29.06	37
	Total	109.47	31.44	105

To examine the overall improvement in scores on child behaviour variables, as measured by the ECBI intensity scale a separate 3(Time: T1 vs. T2 vs. T3) x 2(Format: Live vs. DVD) ANOVA was conducted. Table 3.13 shows the means and related standard deviations for the ECBI intensity scale for T1-T3. There was a significant main effect of time for the ECBI intensity scale, at the three month follow up point, $F(1.895, 195.145) = 19.83$, $p<0.001$, $\eta_p^2= 0.11$, suggesting that there was a significant change in scores relating to child behaviour over the three time points and explored below in the ANOVA's and planned contrasts. Planned contrasts showed that there was a significant change in scores between T3 and T1, $F(1,103) = 30.977$, $p<0.001$, $\eta_p^2= 0.231$ as well as significant change in scores between T2 and T3, $F(1,103) = 11.120$, $p=0.001$, $\eta_p^2= 0.097$. This shows that participants' ECBI scores continued to improve after the end of the course.

Again, there was no interaction between Time and Format between T1-T3, $F(1.895, 195.145) = 1.499$, $p = 0.227$, $\eta_p^2= 0.014$ indicating that the method of delivery did not impact child behaviour outcome..

General family functioning

Table 3.14. Means and s.d's for FAD scale for all participants between T1, T2 and T3

	Format	Mean	S.d	N
Log FAD T1	DVD	.21	.10	73
	Live Course	.22	.11	40
	Total	.21	.10	113
Log FAD T2	DVD	.21	.10	73
	Live Course	.17	.13	40
	Total	.19	.11	113
Log FAD T3	DVD	.19	.12	73
	Live Course	.19	.13	40
	Total	.19	.13	113

A separate 3(Time:T1 vs T2 vs T3) x 2(Format: Live vs. DVD) ANOVA was also conducted to examine the effect of time on general family functioning as measured by the FAD for the whole sample. Table 3.14 shows the means and related standard deviations for the FAD scale. Significant improvements over time were reported overall for general family functioning as measured by the FAD at a three month follow up time point, $F(1.948, 216.247) = 5.06$, $p < 0.01$, $\eta_p^2 = 0.04$, indicating that significant changes occurred in general family functioning scores over the three time points. To further explore these changes, planned contrasts were carried out which showed a significant change in scores between T1 and T3, $F(1,111) = 6.66$, $p<0.05$, $\eta_p^2 = 0.06$ but no significant change in scores between T2 and T3, $F(1,111)=0.04$, $p=0.85$, $\eta_p^2 = 0.000$. This suggests that FAD scores change over the duration of the course, do not significantly change between the end of the course and the follow up point although are still an improvement on the original scores at T1. There is no significant interaction between Time and Format for the FAD between T1-T3, $F(1.948,216.247) = 3.027$, $p=0.052$, $\eta_p^2 = 0.027$ suggesting once again that format of the course does not impact outcome on general family functioning.

The above section has shown that a) there is a general improvement for all participants regarding parenting skills as measured by the TOPSE and APQ scales; child behaviour, as measured by the ECBI intensity scale and general family

functioning as measured by the FAD by the end of the course and at the three month follow up point and b) that there were few differences in outcomes for whether they attended the Live or DVD course. The exception being for the FAD at T1-T2 where improvement was only seen in the Live course participants. When the data relating to parenting variables was inspected further, it became clear that parents do not improve with regards to positive parenting skills as measured by the APQ positive scale at either T2 or T3.

The following section now looks at each format separately to examine what improvements were found over time within each format as well as answering specific questions relating to each type of course delivery.

3.7 Exploring the Live course

84 parents took part in the Live course at T1. 37 of the Live course parents participated in three courses run by the originators of the course, Nicky and Sila and 47 parents participated in two courses led by Tim and Debbie who were trained by the originators.

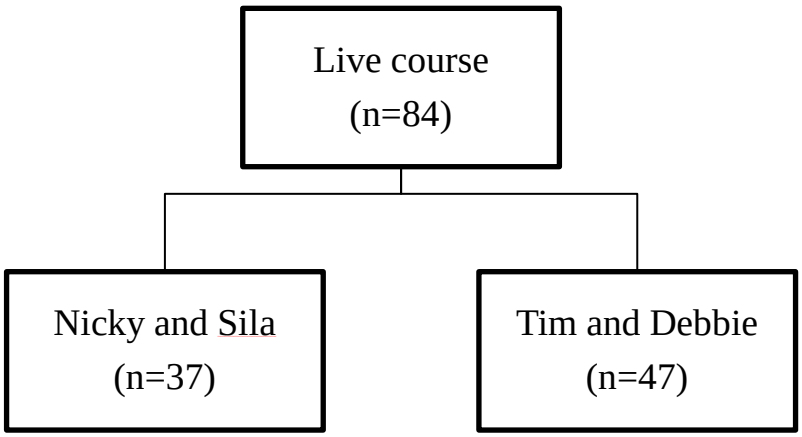

Figure 3.3. Flow chart showing distribution of parents attending Live courses at T1

Below is the Table of Correlations relating to the outcome measures and demographic variables pertaining to the Live course alone.

Table 3.15. Table showing correlations between outcome measures for Live course participants only at T1

	Pearson Correlation at Time 1 for Live Course Only				
	APQ Positive	APQ Negative	ECBI Intensity	FAD	TOPSE
APQ Positive		.12	-.03	-.23	.23*
APQ Negative			.53**	.23*	-.38**
ECBI Intensity				.39**	-.60**
FAD Total					-.55**
TOPSE Total					

**p<.01, *p<.05

Table 3.16. Table showing correlations between outcome measures and demographic variables for Live course participants only at T1

	Pearson Correlation at Time 1 for Live Course only				
	APQ Positive	APQ Negative	ECBI Intensity	FAD	TOPSE
Age of target child	-.07	.50	.49	.51	-.32
Prorata Age	-.07	.51	.41	.42	-.25*
Gender of target child	.13	.30*	.25*	.22*	-.21
Gender of parent	-.14	.02	.17	.11	-.05
Ethnicity BME	-.11	.08	.08	-.070	-.121

**p.01, *p<.05

Age of the target child appears to be moderately correlated to all the measures with the exception of the APQ positive scale. The ECBI is moderately correlated to all measures with the exception of the APQ positive scale. The TOPSE is moderately correlated to the FAD and the APQ negative scale. No further analyses beyond those planned to answer Hypothesis 2 will be carried out as a result of inspecting the correlation tables.

3.7.1 *Changes between T1 and T2 for Live course participants (testing Hypothesis 2)*

Parenting outcome variables

To examine the overall improvement in scores on parenting outcome variables between T1 and T2 on the Live course led by Nicky and Sila or Tim and Debbie, a 2(Time: T1 vs T2) x (Leader: Nicky vs. Tim) Mixed Factor MANOVA was carried out. Using Wilk's Lambda, there was a significant effect of time on parenting outcome measures, Wilk's Λ =.64, $F(3,47) = 8.72$, $p < .001$, $\eta_p^2 = .36$ indicating that within the Live course, parents showed an improvement in parenting skills over the duration of the course. There was no significant interaction between the two leaders, Wilk's Λ = 1.00, $F(3,47) = .07$, $p = .98$, $\eta_p^2 = .00$ suggesting that who delivered the course did not make a significant difference to parenting outcomes.

As shown in Table 3.17, separate Univariate ANOVAs on the parenting outcome variables revealed there was a significant change for Live course participants in TOPSE scores over time, $F(1,49) = 23.91$, $p<0.01$, $\eta_p^2 = 0.33$ ($d = 0.43$) as well as in APQ negative scores, $F(1,49) = 9.26$, $p<0.01$, $\eta_p^2 = 0.16$ ($d = 0.33$. There were no significant changes found for the APQ positive scale for Live course participants at the end of the course: $F(1,49) = 0.043$, $p = 0.831$, $\eta_p^2 = 0.001$.

These findings show that parents improve in self-efficacy and confidence as well as reducing their use of negative parenting skills by the end of the Live course. Positive parenting skills however to not appear to be affected. There was no significant difference in scores between the two Live course leaders' groups in relation to Parental skills between the start and end of the Live course

Table 3.17. Univariate ANOVA follow up results following the significant omnibus findings for participants on the Live course between T1 and T2, (N=51)

	T1 Mean (SD)	T2 Mean(SD)	*F*	DF	*P* Value	η_p^2
TOPSE						
Time	366.267 (51.974)	386.577 (42.501)	23.906***	1, 49	<.001	.328
Leader	361.26(44.797)	382.04(38.716)	0.588	1, 49	0.447	0.012
Time*Leader	371.47(59.009)	391.30(46.435)	0.13	1, 49	0.910	0.00
Nicky (n=26)						
Tim (n=25)						
APQ Positive						
Time	30.696 (2.793)	30.765 (2.618)	.043	1, 49	.831	.001
Leader	30.77(2.631)	30.69(2.084)	0.000	1, 49	.999	.000
Time*Leader	30.62(3.004)	30.84(3.121)	0.199	1, 49	0.658	0.004
Nicky(n=26)						
Tim (n=25)						
APQ Negative						
Time	11.922 (3.428)	10.922 (2.667)	9.256**	1, 49	.004	.159
Leader	12.35(2.77)	11.35(2.226)	1.187	1, 49	0.281	0.024
Time*Leader	11.48(4.012)	10.48(3.043)	0.00	1, 49	1.00	0.00
Nicky (n=26)						
Tim (n=25)						

*p < .05; **p < .01; ***p < .001.

Child behaviour

Table 3.18. Means and s.d's for ECBI intensity scale for Live course participants between T1-T2

	Leader	Mean	s.d	N
ECBI int T1	Nicky	125.97	36.00	29
	Tim	124.10	33.48	29
	Total	125.04	34.47	58
ECBI int T2	Nicky	120.22	34.49	29
	Tim	115.06	28.45	29
	Total	117.64	31.44	58

To examine the overall improvement in scores on child behaviour variables, as measured by the ECBI intensity scale, a separate 2(Time: T1 vs T2) x 2(Leader: Tim vs. Nicky) ANOVA was conducted. Table 3.18 shows the means and related standard deviations for the ECBI intensity scale for the Live Course participants. A significant reduction in the intensity of children's behaviour as reported by parents on the Live course and as measured by the ECBI intensity scale was found by the end of the course $F(1,156) = 8.45$, $p<0.01$, $\eta_p^2 = 0.13$($d = 0.22$). However, no interaction was found between Time and Leaders, $F(1,156) = 0.419$, $p=0.520$, $\eta_p^2 = 0.007$, indicating there was no evidence that who delivered the course made a significant difference to child behaviour as reported by parents.

General family functioning

Table 3.19. Means and s.d's for FAD for participants on Live course between T1 and T2

	Leader	Mean	S.d	N
Log FAD T1	Nicky	.27	.11	32
	Tim	.21	.13	31
	Total	.24	.12	63
Log FAD T2	Nicky	.21	.14	32
	Tim	.16	.11	31
	Total	.19	.13	63

To examine the overall improvement in scores on general family functioning, as measured by the FAD scale, a separate 2(Time: T1 vs T2) x 2(Leader: Tim vs. Nicky) ANOVA was conducted. Table 3.19 shows the means and related standard deviations for the FAD scale for the Live Course participants. Live course parents reported significant improvements at the end of the course in general family functioning, as measured by the FAD: $F(1,61) = 18.56$, $p < 0.001$, $\eta_p^2 = 0.23$ ($d = 0.13$) and again there was no interaction between Time and Leader, $F(1,61) = 0$, $p = 0.99$, $\eta_p^2 = 0.00$ indicating that which leader led the course did not significantly impact general family functioning scores for Live course participants.

3.7.2 *Changes between T1, T2 and T3 for Live course participants*

Parenting variables

To examine the overall improvement in scores on parenting outcome variables between T1, T2 and T3 for the two different leaders, a 3(Time: T1 vs T2 vs. T3) x (Leader: Nicky vs. Tim) Mixed Factor MANOVA was carried out. Using Wilk's Lambda, there was a significant effect of time on parenting outcome measures, Wilk's $\Lambda = .54$, $F(6, 23) = 3.27$, $p < .05$, $\eta_p^2 = .46$ suggesting that the parenting outcome scores did change across the three time points within the Live course. This will be explored in more detail below. There was no significant interaction between format of the course and time, Wilk's $\Lambda = .85$, $F(6, 23) = .68$, $p = .670$, $\eta_p^2 = .15$ suggesting that who delivered the Live course did not impact parenting outcomes.

As shown in Table 3.20, separate Univariate ANOVAs on the parenting outcome variables revealed there was a significant change in scores over time for the TOPSE at the end of the course: $F(2,56) = 9.91$, $p < 0.001$, $\eta_p^2 = 0.26$. Planned contrasts showed significant change in scores between T1 and T3, $F(1,28) = 13.31$, $p = 0.01$, $\eta_p^2 = 0.32$, but scores between T2 and T3 were not significant, $F(1,28) = 1.58$, $p = 0.22$, $\eta_p^2 = 0.05$. These findings suggest that there was no significant change in TOPSE scores between the end of the course and three months later and that participants scores were higher at the three month follow up than at the start of the course.

A significant difference in scores over time for the APQ negative scales was also found: $F(1.724, 48.258) = 4.29$, $p < 0.05$, $\eta_p^2 = 0.13$ indicating change occurred in

negative parenting skills over the three time points. Planned contrasts showed a similar pattern to the TOPSE, with significant change between T1 and T3, $F(1,28) = 6.06$, $p<0.05$, $\eta_p^2 = 0.18$ but non significant change in scores between T2 and T3, $F(1,28) = 1.60$, $p = 0.22$, $\eta_p^2 = 0.18$. Again these findings suggest that parents improved over the duration of the Live course in terms of their negative parenting behaviours, did not change significantly between the end of the course and the follow up time and ended with better scores at the follow up point than at the start of the course. No significant difference was found between scores over time on the APQ positive scale, $F(2,56) = 0.93$, $p=0.40$, $\eta_p^2 = 0.03$ once again showing parents on the Live course did not improve in their positive parenting skills over the three time points.

Table 3.20. Univariate ANOVA follow up results following the significant omnibus findings for participants on the Live course between T1 and T2 and T3

	T1 Mean (SD)	T2 Mean (SD)	T3 Mean (SD)	*F*	DF	P value	η_p^2
TOPSE							
Time	368.29 (53.57)	384.33 (38.98)	389.62 (43.88)	9.91***	2, 56	<.001	.26
Leader	360.26(50.90)	377.39(37.79)	378.68(37.54)	1.21	1, 28	0.28	0.04
Time*Leader	376.32(56.71)	391.27(40.19)	400.567(48.20)	0.34	2, 56	0.71	0.01
Nicky (n=15)							
Tim (n=15)							
APQ Positive							
Time	30.77 (2.70)	31.38 (2.44)	31.00 (2.53)	.93	2, 56	.40	.03
Leader	30.83(2.48)	31.13(1.72)	31.33(2.02)	0.02	1, 28	0.90	0.01
Time*Leader	30.70(3.00)	31.63(3.04)	30.67(2.99)	0.82	2, 56	0.45	0.03
Nicky (n=15)							
Tim (n=15)							
APQ Negative							
Time	11.97 (3.81)	11.23 (2.85)	10.90 (2.77)	4.29*	1.724, 48.258	.02	.13
Leader	12.20(2.71)	11.47(2.03)	11.40(1.91)	0.35	1, 28	0.56	0.01
Time*Leader	11.733(4.76)	11.00(3.55)	10.40(3.48)	0.34	1.584, 54.346	0.66	0.01
Nicky (n=15)							
Tim (n=15)							

*p < .05; **p < .01; ***p < .001.

Child behaviour

Table 3.21. Means and s.ds for ECBI intensity scale for Live course participants between T1 and T3

	Leader	Mean	S.d	N
ECBI int T1	Nicky	129.50	35.72	17
	Tim	127.79	34.61	20
	Total	128.58	34.64	37
ECBI int T2	Nicky	127.25	32.60	17
	Tim	119.59	26.96	20
	Total	123.11	29.51	37
ECBI int T3	Nicky	118.18	30.31	17
	Tim	110.77	28.29	20
	Total	114.17	29.06	37

To examine the overall improvement in scores on child behaviour variables, as measured by the ECBI intensity scale, a separate 3(Time: T1 vs. T2 vs. T3) x 2(Leader: Tim vs. Nicky) ANOVA was conducted. Table 3.21 shows the means and related standard deviations for the ECBI intensity scale for T1-T3. There was a significant main effect of time for the ECBI intensity scale, at the three month follow up point, $F(2,70) = 10.53$, $p<0.001$, $\eta_p^2 = 0.23$ which suggests change occurred in child behaviour scores as reported by parents on the Live course across the three time points. Planned contrasts carried out to further explore this change, showed significant change between T1 and T3, $F(1,35) = 17.43$, $p<0.001$, $\eta_p^2= 0.33$ as well as significant change in scores between T2 and T3, $F(1,35)=8.70$, $p<0.01$, $\eta_p^2= 0.20$. This shows participants' ECBI scores continue to improve after the end of the Live course.

Again, no interaction was found between leaders and time, $F(2,70) = 0.58$, $p = 0.56$, $\eta_p^2= 0.02$ suggesting which leader led the Live course did not affect ECBI scores across the three time points.

General family functioning

Table 3.22. Means and s.ds for FAD scale for Live course participants between T1-T3

	Leader	Mean	S.d	N
Log FAD T1	Nicky	.24	.09	19
	Tim	.21	.13	21
	Total	.22	.11	40
Log FAD T2	Nicky	.17	.13	19
	Tim	.17	.11	21
	Total	.17	.12	40
Log FAD T3	Nicky	.15	.12	19
	Tim	.22	.14	21
	Total	.19	.13	40

To examine the overall improvement in scores on general family functioning, as measured by the FAD scale, a separate 3(Time: T1 vs. T2 vs. T3) x 2(Leader: Tim vs. Nicky) ANOVA was conducted. Table 3.22 shows the means and related standard deviations for the FAD scale for T1-T3. Significant differences over the three time points were reported overall for general family functioning as measured by the FAD at a three month follow up time point, $F(2,76) = 4.14$, $p < 0.05$, $\eta_p^2 = 0.10$. However planned contrasts showed the change in scores between T1 and T3 was just non significant, $F(1,38) = 3,38$, $p = 0.07$, $\eta_p^2 = 0.08$ as was the change in scores between T2 and T3, $F(1,38) = 0.56$, $p = 0.46$, $\eta_p^2 = 0.01$. There was also a significant interaction between Time and leader, $F(2,76) = 4.04$, $p = 0.02$, $\eta_p^2 = 0.10$. The graph below shows the different trajectory of the scores for each leader and that the difference probably lies at T3. However, post hoc independent *t* tests however just failed to show significance at T3 between the two leaders, $t(39) = -2.01$ $p = 0.05$.

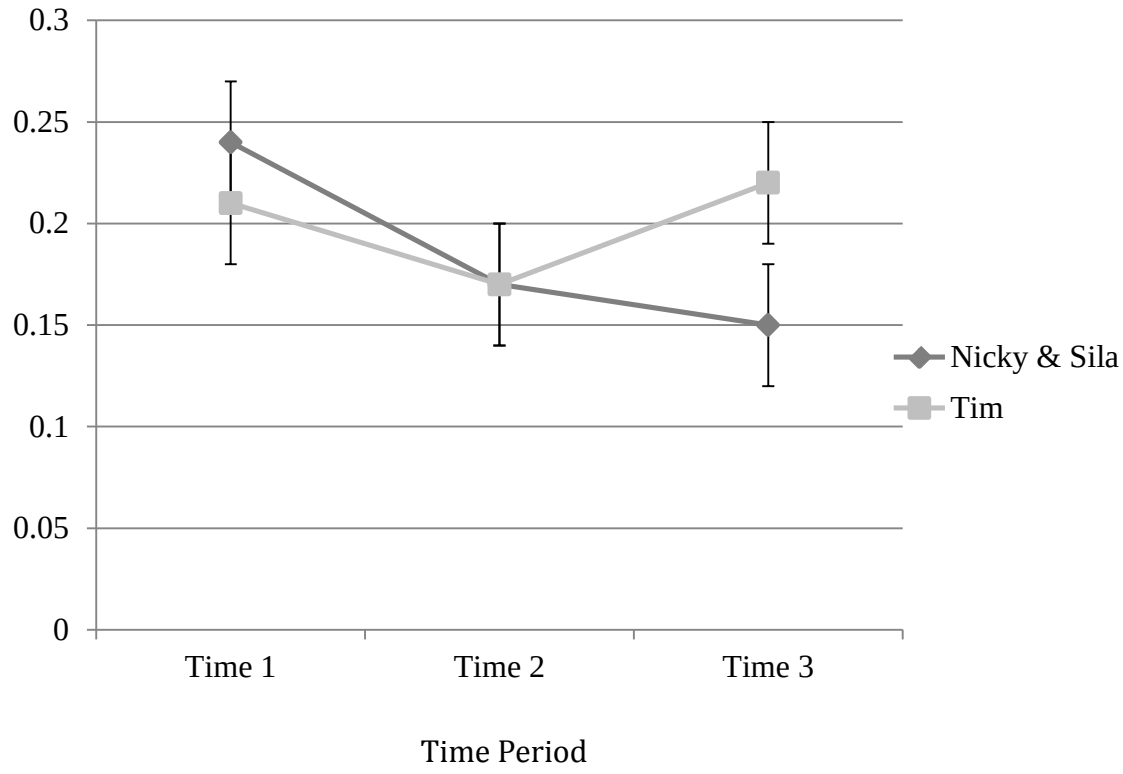

Figure 3.4. Graph showing FAD scores for Live course participants at T1, T2 and T3.

3.8 Exploring the DVD course

141 parents filled in questionnaires for the DVD courses at T1. The DVD course is available as a ten week or a five week course. 111 of those DVD parents attended the five week course and 30 attended the ten week course at T1.

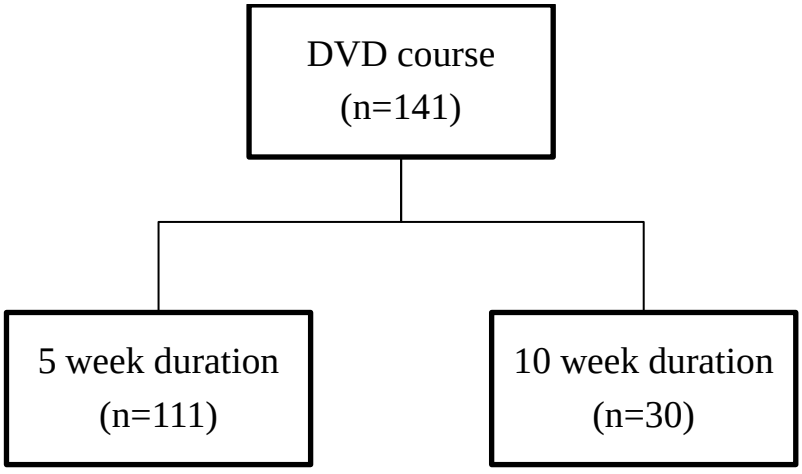

Figure 3.5. Flow chart showing distribution of parents attending DVD courses at T1

Below are the correlation tables for demographic variables and outcome measures pertaining to parents attending the DVD courses alone.

Table 3.23. Correlation table between outcome measures for DVD course participants only at T1

	Pearson Correlation at Time 1 for DVD only				
	APQ Positive	APQ Negative	ECBI Intensity	FAD	TOPSE
APQ Positive		.17	.03	-.21*	.17
APQ Negative			.46**	.28**	-.21*
ECBI Intensity				.30**	-.36**
FAD Total					-.52**
TOPSE Total					

**p<.01, *p<.05

Table 3.24. Correlation table between outcome measures and demographic variables for DVD course participants only at T1

	Pearson Correlation at time 1 for DVD only				
	APQ Positive	APQ Negative	ECBI Intensity	FAD	TOPSE
Age of target child	.06	.23*	-.01	.12	-.04
Prorata Age	.06	.26**	-.05	.08	-.04
Gender of target child	.17	.17	.17	.01	.05
Gender of parent	-.15	.05	-.18*	-.02	.17*
Ethnicity BME	.02	.10	-.07	-.09	.03

**p<.01, *p<.05

Table 3.23 shows moderate correlations between the ECBI scale and all the other measures with the exception of the APQ positive scale. There seems to be a very small correlation between age of the target child and the outcome measures with the exception of the APQ positive scale.

3.8.1 *Changes between T1 and T2 for DVD course participants (testing Hypothesis 3)*

Parenting outcome variables

To examine the overall improvement in scores on parenting outcome variables between T1 and T2 on either the five or ten week version of the DVD course, a 2(Time: T1 vs T2) x (Duration 5 weeks vs. 10 weeks) Mixed Factor MANOVA was carried out. Using Wilk's Lambda, there was a significant effect of time on parenting outcome measures, Wilk's Λ =.61, $F(3,72) = 15.10$, $p < .001$, $\eta_p^2 = .39$ indicating that within the DVD course, there was a significant change between pre and post scores which are explored in more detail below. There was no significant interaction between time and duration, Wilk's $\Lambda = .94$, $F(3,72) = 1.46$, $p = .23$, $\eta_p^2 = .06$ suggesting that the length of the course did not significantly alter those results.

As shown in Table 3.27, separate Univariate ANOVAs on the parenting outcome variables revealed there was a significant improvement for DVD course participants in TOPSE scores over time, $F(1,74) = 43.11$, $p<0.001$, $\eta_p^2 = 0.37$ ($d = 0.67$). A significant reduction in the use of negative parenting techniques over time as measured by the APQ negative scale was also found, $F(1,74) = 13.82$, $p<0.001$, $\eta_p^2 = 0.16$ ($d = 0.42$). There was no change over time in positive parenting skills, as measured by the APQ positive scale: $F(1,74) = 3.45$, $p = 0.07$, $\eta_p^2 = 0.05$. As seen previously, these findings indicate that the overall improvement in parenting outcomes are to be found in an increase in parenting confidence and self efficacy as well as a decrease in the use of negative parenting techniques, but no change in use of positive parenting techniques over the duration of the DVD course.

Child Behaviour

Table 3.25. Means and s.ds for ECBI intensity scale for DVD course participants between T1 and T2

	Duration	Mean	s.d	N
ECBI int T1	10 weeks	120.36	25.34	11
	5weeks	116.52	28.26	73
	Total	117.02	27.78	84
ECBI int T2	10 weeks	112.78	27.50	11
	5 weeks	110.45	27.86	73
	Total	110.76	27.66	84

A separate 2(Time: T1 vs T2) x 2(Duration: 5 weeks vs. 10 weeks) ANOVA was also conducted to examine the effect of time on child behaviour as measured by the ECBI intensity scale. Table 3.25 shows the means and related standard deviations for the ECBI intensity scale. Parents on the DVD courses reported a significant decrease in the intensity of their children's behavioural problems, as measured by the ECBI intensity scale, between the start and end of the course $F(1,82) = 5.76$, $p < 0.05$, $\eta_p^2 = 0.07$ ($d = 0.23$). There was no significant interaction between time and duration and therefore it can be said that duration of the course does not seem to be a significant factor impacting improvement in reported child behaviour as reported by parents on the DVD course, $F(1,88) = 0.74$, $p = 0.39$, $\eta_p^2 = 0.00$.

General family functioning

Table 3.26. Means and s.ds for FAD scores for DVD course participants between T1 and T2.

	Duration	Mean	S.d	N
Log FAD T1	10 weeks	.23	.06	11
	5 weeks	.21	.11	79
	Total	.21	.10	90
Log FAD T2	10 weeks	.20	.10	11
	5 weeks	.21	.10	79
	Total	.21	.10	90

A separate 2(Time: T1 vs T2) x 2(Duration: 5 weeks vs. 10 weeks) ANOVA was also conducted to examine the effect of time on general family functioning as measured by the FAD for DVD course participants. Table 3.26 shows the means and related standard deviations for the FAD scale. There were no significant changes in DVD parents' report of general family functioning, as measured by the FAD at the end of the course: $F(1,88) = 1.02$, $p = 0.32$, $\eta_p^2 = 0.01$ indicating that within the DVD course, the FAD was unaffected by the intervention. There was also no significant interaction between Time and duration, $F(1,88) = 0.741$, $p = 0.392$, $\eta_p^2 = 0.008$ indicating that length of the DVD course undertaken did not make a significant difference to outcome with regards to general family functioning for DVD course parents.

Table 3.27. Univariate ANOVA follow up results following the significant omnibus findings for DVD course participants between T1 and T2, (N=76)

	T1 Mean (SD)	T2 Mean(SD)	*F*	DF	*p* value	η_p^2
TOPSE						
Time	359.155 (42.46)	385.037 (33.91)	43.11***	1, 74	<.001	.37
Duration			4.43*	1, 74	0.04	0.06
Time*Duration			3.97	1, 74	0.05	0.05
5 weeks (n=66)						
10 weeks (n=10)						
APQ Positive						
Time	31.033 (2.51)	31.493 (2.25)	3.45	1, 74	.072	.05
Duration	30.98(2.38)	31.37(2.26)	0.80	1, 74	0.37	0.01
Time*Duration	31.35(2.38)	32.30(2.11)	0.59	1, 74	0.45	0.08
5 weeks (n=66)						
10 weeks(n=10)						
APQ Negative						
Time	10.987 (1.97)	10.165 (1.92)	13.82***	1, 74	<.001	.16
Duration	10.92(2.03)	10.20(1.92)	0.04	1, 74	0.84	0.00
Time*Duration	11.40(2.03)	9.95(2.01)	1.22	1, 74	0.27	0.03
5 weeks(n=66)						
10 weeks(n=10)						

*p < .05; **p < .01; ***p < .001.

3.8.2 *Changes between T1, T2 and T3 for DVD course participants*

Parenting variables

To examine the overall improvement in scores on parenting outcome variables between T1, T2 and T3 for the two different durations of the DVD course, a 3(Time: T1 vs T2 vs. T3) x 2(Duration: 5weeks vs. 10 weeks) Mixed Factor MANOVA was carried out. Using Wilk's Lambda, there was a significant effect of time on parenting outcome measures, Wilk's Λ = .59, $F(6, 54) = .40$, $p < .001$, $\eta_p^2 = .42$ indicating that within the DVD course there was a significant difference in parenting outcomes over the three time points that will be explored in more detail below. There was no significant interaction between format of the course and time, Wilk's Λ=. 87 $F(6, 54) = 1.37$, $p = .24$, $\eta_p^2 = .13$ suggesting that length of the DVD course did not make a significant difference to parenting outcomes for DVD course participants.

As shown in Table 3.28, separate Univariate ANOVAs on the parenting outcome variables revealed there was a significant change in scores over time for the TOPSE at the end of the course, $F(1.450, 85.534) = 22.22$, $p<0.001$, $\eta_p^2 = 0.027$. Planned contrasts showed significant change in scores between T1 and T3, $F(1,59) = 25.76$, $p<0.001$, $\eta_p^2 = 0.30$ but no significant change in scores between T2 and T3, $F(1,59) = 2.96$, $p=0.09$, $\eta_p^2=0.05$ indicating that there was no change in parental confidence and self efficacy between post treatment and follow up within the DVD course although at the follow up point, participants showed overall improvements in self confidence and self efficacy compared to at the start of the course.

A significant difference in scores over time for the APQ negative scales was also found: $F(2,118) = 10.01$, $p<0.001$, $\eta_p^2 = 0.15$. Planned contrasts show a significant change in scores between T1 and T3, $F(1,59)=17.47$, $p<0.001$, $\eta_p^2=0.23$ but not between T2 and T3, $F(1,59) = 0.00$, $p=0.95$, $\eta_p^2=0.00$. These findings suggest there was no significant change post DVD course to follow up although overall, parents reduced their use of negative parenting skills by the three month mark compared to at the start of the course. No significant difference was found between scores over time on the APQ positive scale, $F(2,118) = 2.67$, $p=0.07$, $\eta_p^2 = 0.04$ indicating that again parents do not seem to improve in their positive parenting skills over the three time points having completed the DVD course.

Table 3.28. Univariate ANOVA follow up results following the significant omnibus findings for DVD course participants between T1, T2 and T3, (N=61).

	T1 Mean (SD)	T2 Mean (SD)	T3 Mean (SD)	*F*	DF	*p* value	η_p^2
TOPSE							
Time 1, 2& 3	357.997 (42.49)	384.432 (35.99)	391.740 (41.31)	22.22***	1.450, 85.534	<.001	.27
Duration	362.49(43.16)	386.468(37.03)	393.75(41.31)	2.46	1, 59	0.12	0.040
Time*Duration	332.03(27.85)	372.67(28.10)	380.133(34.124)	1.17	1.450, 85.534	0.32	0.0
5 weeks (n=52)							
10 weeks (n=9)							
APQ Positive							
Time 1, 2 &3	31.254 (2.58)	31.615 (2.33)	31.197 (2.42)	2.67	2, 118	.07	.04
Duration	31.31(2.46)	31.47(2.34)	30.97(2.24)	0.87	1, 59	0.36	0.01
Time*Duration	30.94(3.32)	32.44(2.19)	32.50(3.08)	3.41*	2, 118	0.04	0.06
5 weeks (n=52)							
10 weeks (n=9)							
APQ Negative							
Time 1, 2 & 3	10.984 (1.90)	9.902 (1.95)	9.623 (1.99)	10.01***	2, 118	<.001	.15
Duration	10.92(1.95)	9.92(1.95)	9.52(2.02)	0.29	1, 59	0.59	0.00
Time*Duration	11.33(1.66)	9.78(2.05)	10.22(1.86)	0.87	2, 118	0.42	0.01
5 weeks (n=52)							
10 weeks (n=9)							

*p < .05; **p < .01; ***p < .001.

Child behaviour

Table 3.29. Means and s.d's for ECBI intensity scale for DVD course participants between T1, T2 and T3

	Duration	Mean	S.d	N
ECBI int T1	10 weeks	116.50	23.05	10
	5 weeks	116.76	28.23	58
	Total	116.72	27.37	68
ECBI int T2	10 weeks	108.53	24.88	10
	5 weeks	109.52	28.26	58
	Total	109.38	27.62	68
ECBI int T3	10 weeks	114.30	30.04	10
	5 weeks	105.64	33.85	58
	Total	106.91	32.58	68

To examine the overall improvement in scores on child behaviour variables, as measured by the ECBI intensity scale, a separate 3(Time: T1 vs. T2 vs. T3) x 2(Duration: 5 weeks vs.10 weeks) ANOVA was conducted. Table 3.29 shows the means and related standard deviations for the ECBI intensity scale for T1-T3. There was a significant main effect of time for the ECBI intensity scale, at the three month follow up point, $F(1.837,121.230) = 3.32$, $p<0.05$, $\eta_p^2= 0.05$ indicating that significant changes took place over the three time points in reported child behaviour which will be explored below. However planned contrasts showed that the change in scores between T1 and T3 was not significant, $F(1,66)= 3.23$, $p=0.08$, $\eta_p^2= 0.05$ and neither was the change in scores between T2 and T3, $F(1,66) =0.12$, $p=0.73$, $\eta_p^2= 0.00$. This probably means that the change occurred between T1 and T2 as reported in an earlier section and not picked up by the planned contrasts. Again, no significant interaction at the three month follow up point was found between the two DVD courses, $F(1.837,121.230) = 1.40$, $p = 0.25$, $\eta_p^2= 0.02$ suggesting that duration of the course did not make a significant difference to child behaviour outcomes as reported by parents on the DVD course at the follow up point.

General family functioning

Table 3.30. Means and s.ds for FAD scale for DVD participants between T1, T2 and T3

	Duration	Mean	S.d	N
Log FAD T1	10 weeks	.23	.06	10
	5 weeks	.20	.10	63
	Total	.21	.10	73
Log FAD T2	10 weeks	.22	.09	10
	5 weeks	.20	.11	63
	Total	.21	.10	73
Log FAD T3	10 weeks	.17	.11	10
	5 weeks	.19	.12	63
	Total	.19	.12	73

A separate 3(Time:T1 vs. T2 vs. T3) x 2(Duration: 5 weeks vs. 10 weeks) ANOVA was also conducted to examine the effect of time on general family functioning as measured by the FAD. Table 3.30 shows the means and related standard deviations for the FAD scale. Significant changes over the three time points were reported overall for general family functioning as measured by the FAD, $F(2,142) = 3.66$, $p < 0.05$, $\eta_p^2 = 0.05$. Planned contrasts showed a significant change in scores between T1 and T3, $F(1,71) = 5.92$, $p < 0.05$, $\eta_p^2 = 0.08$ as well as between T2 and T3, $F(1,71) = 4.09$, $p < 0.05$, $\eta_p^2 = 0.05$. This suggests that general family functioning outcomes continue to improve after the end of the course to the three month mark.

There was no significant difference between the five and ten week course over time with regards to change in family functioning as measured by the FAD at the three month follow up point, $F(2,142)=1.320$, $p = 0.270$, $\eta_p^2 = 0.018$ suggesting that the length of the DVD course did not affect general family functioning outcomes.

3.9 Intention to treat analysis

As an additional precaution against over optimistic results, given the relatively high drop out rate from the study, an intention to treat analysis was attempted on the whole sample data. ITTA is most often used in studies with randomised controlled groups in order to avoid biased and over optimistic results by analysing every

participant regardless of whether they attended the full programme and has the advantage of avoiding overoptimistic reporting of findings. However, ITTA is not meant to be used unless all outcome data is present. As it often isn't, as in this study, various methods of data substitution can be used. One such method is last observation carried forward (Manly & Wells, 2012). The advantage of this method is that it assumes no change occurred from pre to post treatment which is the most conservative assumption. However, on the other hand, it may unnecessarily dilute positive results especially in designs like this one that are not RCT's. ITTA was carried out on the T1-T2 data on all outcome measures, using LOCF, as a supplementary analysis to test if the statistically significant results and effect sizes would disappear using this more conservative method of analysis. Findings from the ITTA can be found in Appendix A13. The pattern of results is exactly the same as those described above regarding changes between T1 and T2 for the whole sample (testing Hypothesis 1). However, in all cases, the effect sizes are smaller.

It could not be used with data from T3 using the LOCF method as results could appear falsely optimistic in fact as no change between T2 and T3 would be assumed which is in fact in this context, a positive outcome. Multiple Imputation method, is generally recognised as one of the most robust methods of dealing with missing data, (Manly & Wells, 2012), was in fact attempted, but did not work with the data set and was therefore abandoned and the problem of missing values at T3 not resolved. Having it as an additional analysis to the main analyses can only provide a limited degree of information but does provide an added level of robustness to the findings in that it shows that the positive outcomes are not lost entirely.

3.10 Summary of Results

This chapter has set out findings relating to:

1. Hypothesis 1 which tested whether parents who participated in either the DVD course or the Live course versions of the parenting course improved in terms of parenting outcome variables, child behaviour and general functioning by the end of the course and at the three month follow up point as well as whether the format of the course made a difference to any of the outcome variables.

Looking at the data as a whole, the findings showed that there were improvements on all outcome measures across both types of course by T2, the end of the course. At the follow up mark at 3 months, gains made during the course were maintained with regards to reducing negative parenting methods, as measured by the APQ negative scale, and general family functioning as measured by the FAD as shown by scores at T3 ending up higher than at T1 with no real change between T2 and T3. Self-efficacy continues to improve after the end of the course at the follow up point as measured by the TOPSE as does reported child behaviour as measured by the ECBI intensity scale. However, no progress is made in terms of positive parenting skills, as measured by the APQ positive scale at either T2 or T3.

2. Hypothesis 2 which tested whether parents who participated in Live course versions of the parenting course improved in terms of parenting outcome variables, child behaviour and general functioning by the end of the course and at the three month follow up point as well as whether which leader led the Live course made any difference to any of the outcome variables.

Findings showed that Live course participants showed improvements by the end of the course in all the outcome measures, with the exception again of positive parenting skills. Improvements found on the TOPSE, measuring self- efficacy and the APQ negative scale, measuring negative parenting techniques, appeared to be maintained as shown by no significant change between T2 and T3 with scores at T3 ending up higher than at T1. As for the whole sample, ECBI scores measuring child behaviour appeared to continue to improve after the end of the course. FAD scores appeared to improve by the end of the Live course with the main change occurring at the end of the course. There appeared to be no effect of the leader with the exception of FAD scores at T3. It appears that Tim and Debbie's groups did not continue with their improvement in general family functioning found at T2, whereas Nicky and Sila's groups continued to improve at T3. However, the findings just fell short of being statistically significant.

3. Hypothesis 3 which tested whether parents who participate in the DVD course improved in terms of parenting outcome variables, child behaviour and general

functioning by the end of the course as well as whether duration of the DVD course made any difference to any of the outcome variables.

Findings showed that DVD course participants improved in terms of parental self-efficacy, negative parenting skills and child behaviour but not in terms of positive parenting skills or general family functioning by the end of the course. There was no significant change post DVD course to follow up on those outcome variables although improvements found at T2 were maintained at T3. Interestingly there was some improvement at the three month follow up point in general family functioning suggesting that although no changes were seen by the end of the DVD course, parents made progress with regard to general family functioning after it ended. Duration of the DVD course did not seem to significantly affect any of the outcome measures.

The above findings and their implications for practice and future research will be discussed in the following Discussion chapter.

Chapter 4

Discussion of Quantitative Findings

4.1 Introduction

This study set out to rigorously evaluate The Parenting Children Course in all three of its formats: Live, DVD and the inner city version of the course. The latter version was evaluated using qualitative methods and findings from the interviews carried out for the evaluation of this course are discussed in Chapter 5.

The Live and DVD versions of the course were evaluated using quantitative methods and the findings reported in the previous chapter will be discussed below in relation to previous literature and in terms of implications for future research, impact and dissemination. Strengths and limitations of the study will also be considered.

4.2 Overall effectiveness of the course T1-T2 for the whole sample

The first aim of the study was to add to the number of courses that have been properly evaluated using standardised measures, as currently there is a need for more courses to be evaluated (Moran et al., 2004). The first question therefore to be addressed was whether parents improved in terms of the outcomes measured having participated in this parenting course either by doing the Live version, or the DVD version.

4.2.1 *Main findings*

Looking at the findings for the whole sample, it is clear that this course was effective in bringing about change between the beginning and the end of the course, regardless of format, in terms of: parental self efficacy and confidence, parental disciplinary skill, children's reported behaviour problems and general family functioning. The only exception to this is that there was no improvement found for positive parenting skills; only for a decrease in negative parenting techniques. Results from an intention

to treat analysis on the whole sample, for all outcomes variables, replicated these findings, although effect sizes were slightly smaller. This main finding is in keeping with the growing literature evaluating parenting courses and finding them to be effective in the prevention and treatment of child behaviour problems (e.g.Amussen, Matthews, Weizel, Bebiroglu & Scott, 2012) and to improve short term and long term parenting.

More specifically, this study evaluated a course that is carried out in a 'real world' practice setting. The Live courses were carried out in a church and the DVD courses were carried out in schools, churches, private homes and a health centre. The positive findings from the study concur with previous studies that show that parent management training courses can be effective under a variety of real world practice conditions (Dulcan, 2005). Whilst the settings and sizes of the courses varied, the content of the course remained the same, thus retaining very high fidelity to the original manual. Fidelity is considered essential to the success of a parenting intervention (National Academy for Parenting Practitioners, 2008; NICE guidelines, 2006).

As well as being a community run course, The Parenting Children course is a universal course, a category which research shows is more and more in demand (Peters, Garnett & Edwards, 2010). UK government policies now recognise the need for universal parenting support alongside targeted approaches (Simkiss, Snooks, Stallard, Kimani, Sewell, Fitzsimmons, Anthony, Winstanley, Wilson, Phillips, & Stewart-Brown; 2013). These types of programmes, whilst appealing often are hard to evaluate as they can be hard to recruit and retain participants and it can be hard to detect change on standardised measures (Stewart- Brown, Anthony, Wilson, Winstanley, Stallard, Snooks & Simkiss, 2011). The average size of the Live course was consistently around 35 parents and it was run three times a year. The DVD courses ranged between 8-35 parents depending on the setting. There was a moderately high attrition rate of questionnaires not returned (31% between T1 and T2, 21% between T2 and T3 and 45% between T1 and T3). The effect sizes were medium to large on most of the outcome measures, with the exception of the APQ positive scale and so the concern in the literature that normal populations will show

little change on standardised measures (e.g. Stewart-Brown et al. 2011) was by and large not sustained in this study.

These findings also add to the growing body of knowledge of the impact of voluntary sector based interventions (e.g. Gardner et al., 2006) and shows that such interventions can be very effective. Increasingly, there is growing interest in interventions that are locally based in community settings and a recognition that parents may find attending a course in their local place of worship or school less threatening than attending a mental health service (UK Dept. of Health, 2004; Patrick et al., 2008).

As discussed in the Introduction, to the researcher's knowledge, there have been no evaluations of a faith based intervention carried out using standardised measures in the UK. This study is therefore pioneering the way for other faith based courses that are run in churches all over the UK to be evaluated and therefore become available to the wider community. More people do unpaid work for church organisations than any other (Church of England, 2014) and the church is a huge resource for children and families which as yet has been relatively untapped.

Looking beyond the overall effectiveness of the course to specific change on each of the outcome variables will contribute to our understanding of what impact parenting interventions under real world conditions have on improving parenting and child behaviour (Gardner, Hutchings, Bywater & Whitaker, 2010). This study looked at the impact of the course on parenting variables: positive and negative parenting skills, parental confidence and self-efficacy, child behaviour and general family functioning. In addition it looked at facilitator effects by comparing the two Live groups and duration effects by comparing the two DVD formats. These will be looked at in turn.

4.2.2 *Demographic variables*

This study looked to see if there were any differences between participants overall in terms of demographics or outcome variables at Time 1 and found none to be significant. This means that participants in the different groups did not differ significantly from one another in terms of age, gender, ethnicity or in terms of reported levels of child behaviour problems, self efficacy, parental skills or general

family functioning when they started the courses. These findings support others in the literature, (e.g. Beauchaine et al,, 2005; Scott, 2005) that outcome is not necessarily dependent on certain demographic characteristics or on the presence or absence of particular issues. In terms of caseness, 33% of parents were found to be above the clinical cut off on the ECBI at T1, which is a relatively high percentage given the percentage in the general population is closer to 10% (Office for National statistics, 2004 reports 10% of children in the UK present with emotional and or behavioural problems). A moderate correlation was found between the age of the target child and the APQ negative scale. In fact there was a small correlation between age of the target child and all the measures with the exception of the APQ positive scale which implies that the older the child is, the more likely parents are to report behavioural or relational difficulties with their child.

In addition, as the study did not collect comprehensive demographic data regarding SES, no inferences can be drawn as to the contribution of SES to success of the intervention.

4.2.3 *Outcome variables*

Parenting variables

With regards to parenting variables, the findings showed that parents overall improved after completing the course in terms of their use of disciplinary methods as measured by the APQ positive and negative scales and in their parental confidence and self-efficacy as measured by the TOPSE. Whether parents completed the DVD course or the Live course did not make a significant difference to the improvement they made.

When further inspecting these results for the whole sample, it transpired that there was no significant change by the end of the course in increasing positive parenting techniques, as measured by the APQ positive scale, only in decreasing negative parenting techniques, as measured by the APQ negative scale. This pattern was found also for the Live course participants and for the DVD course participants.

The specific effects for negative skills have been found previously, e.g. (Dishion & Patterson, 1992; Forgatch & DeGarmo, 1999; Dishion, Shaw, Connell, Gardner, Weaver & Wilson, 2008; Gardner et al., 2007). Beauchaine et al. (2005) found that

changes in harsh and ineffective parenting both predicted and mediated child behaviour change This study did not look specifically at the effect of other outcome variables on child behaviour, however it is a positive first step to find that the course has an impact on negative parenting behaviour as that is beneficial in and of itself as well as potentially having an impact on child behaviour too.

A recent Cochrane Review (Furlong et al., 2012) found positive results following parenting interventions for both positive and negative parenting practices but only in studies that used independent report. Once more rigorous criteria were applied to the studies reviewed, the self report measures used in some studies showed non significant effects for change in positive parenting, as did this study. The Review also found no statistically significant differences on this outcome between subgroups relating to level of conduct problems pre-treatment, trial setting or socioeconomic status.

Self efficacy

For the overall sample, a large and positive effect was seen for the TOPSE scores following completion of the course. The TOPSE is a measure of parental self-efficacy and confidence and this finding supports researchers who have found that parenting programmes have positive effects on parental sense of competence (Landy & Menna, 2006) Moreover, higher levels of parental self efficacy are associated with more effective parenting and therefore lower child mental health problems (Jones & Prinz, 2005). Kane, Wood & Barlow (2007) showed in a recent review that parents themselves view an increase in their sense of competence to deal with child problem behaviour as one of the most valuable elements of parenting programmes. This was supported by the qualitative data presented in Chapter 6 and will be discussed further in a subsequent chapter.

Child Behaviour

In terms of the effect of the parenting course on improving child behaviour, statistically significant improvements were reported when looking at the whole sample. Course format did not seem to make any difference to improvements measured. Improvement on child behaviour outcome has been the common denominator for studies evaluating the effectiveness of parenting courses (e.g. Gardner et al., 2010; Michelson, Davenport, Dretzke, Barlow and Day, 2013) and

these findings contribute to the existing literature that shows parenting interventions can have a positive impact on child problem behaviour. In fact over a third of participants scoring in the clinical range reported improvements at the end of the course for their child's behaviour compared to the start of the course although the changes just felt short of being statistically significant.

We can postulate from these results that this programme does bring about improvement for child outcomes, despite being a universal intervention including reducing clinical levels of reported behavioural problems in over a third of parents. However, given that the level of caseness did not change significantly, this programme is perhaps not best suited to those with clinically significant levels of child behaviour problems at the start of the programme. Therefore, programme facilitators need to be able to identify those parents who may need signposting to more specialised services following the programme in order to reduce child behaviour problems further into the non clinical zone.

General family functioning

General family functioning also improved by the end of the course looking at the sample as a whole, but inspecting the data more closely shows the improvements are primarily present for the Live course, rather than DVD course parents at the end of the course who did not show any significant improvements in general family functioning by the end of the course.

Previous studies have found that family environment measured by expressed emotion explained both depression and behavioural problems in children (Baker, Heller & Henker, 2000). Nomura, Wickramaratne, Warner, Mufson, & Weissman, (2002), found the presence of family discord was associated with higher rates of childhood major depressive disorder and conduct disorder.

There is also evidence that good family communication and problem solving are important variables that mediate programme effects on youth outcomes (Brody, Kogan, Chen & Murry, 2008); Nomura et al., 2002; Morse, Rojahn and Smith, 2014) The researcher felt this was an important outcome to look at due to the universal nature of the course and its emphasis on building strong family connections.

4.3 Facilitator effect – Live course only T1-T2

Scott (2008) suggests that the facilitator's competence in leading the parenting intervention has a significant impact on its success. As the Live course is often led by alternative facilitators who have been trained by the originators, it is important to consider the efficacy of the course when run by others. Looking at the Live course data alone, alongside finding that parents improved on all outcome measures; except for positive parenting skills, the findings showed that there is little difference between the groups led by the originators and those led by the alternative leaders in terms of improvement found on any of the outcome variables at the end of the course. This may be attributed to the close adherence of the alternative facilitators to the manual thus ensuring high fidelity, although adherence itself was not measured in the current study. This is a very encouraging finding as it means that with adequate training and maintenance of fidelity to the manual, many more leaders can be trained to deliver the programme, thus widening its potential for dissemination.

4.4 Effect of duration of the course – DVD course only T1-T2

The results for the DVD sample which examined the impact of duration on outcome, (participation in either a ten week or five week version of the course), showed a similar pattern as above with regards to parenting variables which showed an overall improvement but when inspected more closely, revealed no change in positive parenting skills. The length of the course did not make a difference to the improvements seen for parenting variables as well as for reported child behaviour which also improved by the end of the course and general family functioning which in fact did not change significantly after the intervention. However, it is a consideration that the sample doing the ten week version was considerably smaller than the five week version and therefore the analyses were underpowered to truly detect a difference between the two versions.

In spite of this limitation, it was still thought to be important to compare the two groups as the NICE guidelines (2006) call for courses to be between 8-12 sessions long. Previous studies, e.g. Lindsay et al., (2014) found short courses (one-two sessions) were associated with no change. As the Parenting Children Course is mainly run as a five week course, it was useful to examine whether there were any differences between the two lengths of the course. Finding that there were none,

albeit bearing in mind the possible weakness of the test, means services have greater flexibility regarding which format they choose and for how long they choose to run, subject to further investigation of this effect within an adequately powered study. As others have suggested, (e.g. Straus, Richardson, Glasziou & Haynes, 2010), it is important to match an intervention with client's own preferences and contexts.

The positive outcomes for the DVD course fit with the findings from the CAN trial (2012-2014) which found that courses that blended face-to-face and online components were the second most popular option after face-to-face delivery (Lindsay et al., 2014) as well conclusions from researchers such as Barnes (2010) who found that there were no significant differences between face-to-face learning versus distance education formats when participating in a parenting course. The Parenting Children DVD course blends watching a DVD with face-to-face contact with the course host and other group members and as such offers both components.

4.5 After the end of the course – the three month follow up

Few studies have followed up parents beyond the end of the course. This study aimed to follow up parents doing the Live and the DVD courses to see if any improvements found at T2, the end of the course, decayed at the three month mark and if they did, if their outcome scores at the follow up point were still higher than they were at the beginning of the course. Planned contrasts were carried out where significant results were found to answer these questions. Three months is considered a short-medium term follow up (e.g Simkiss, 2014) and provides additional robustness to the data. Clearly a longer term follow up such as a year or more would have been far more desirable. Again, the practical constraints of this study made such a long term follow up impossible and having some data at the three month mark is still worthy of reporting as it lends additional credibility to changes observed at the end of the course if they are still present three months later.

There was an attrition rate of 45% for the return of questionnaires between T1 and T3 which, whilst not unusual compared to previous literature (e.g. Lindsay et al, 2014), it does mean the results found need to be interpreted with some caution. Tests were carried out to assess whether participants who did return questionnaires at T3 differed from those who didn't and no systematic differences were found. However

some of the T3 samples such as the ten week group were very small and thus rendered the tests for the subsample analyses relatively underpowered to detect changes between T2 and T3.

The reasons for such attrition are not known and one can only speculate as to who might have dropped out of the study and why. The most likely hypothesis as to the large attrition rate at T3 is that the researcher relied on parents filling in the questionnaire pack in their own time and with only one reminder and therefore doing so was simply not a particularly high priority. Perhaps a more reliable method might have been to arrange a call with each parent after the deadline passed for the questionnaires to be returned and complete the questionnaire over the phone. Had this been practical, it might have yielded less attrition. As no differences were observed between those that completed T1 and T2 and but not T3 and those that did complete T3, it seems unlikely that the attrition rate was due to the particular parent characteristics that were measured.

4.5.1 *Overall sample –DVD and Live course data T1-T3*

Taking into account the potential limitations of the findings at T3, as discussed above, the results showed several of the domains either maintained improvements relative to T1 or indeed in some cases appeared to continue to improve post-treatment. For example, parents improved in terms of parental self efficacy, as measured by the TOPSE between the start of the course and the end of the course, and in addition that these improvements continued after the end of the course to the follow up point three months later.

With regards to negative parenting techniques, as measured by the APQ negative scales, analyses showed scores stayed stable between post treatment (T2) and follow up (T3) with an overall improvement at T3 compared to pre-treatment (T1). As before, no changes were found at T3 for positive parenting skills as measured by the APQ positive scale; consistent with the lack of effect by the end of treatment, there was no evidence of improvement nor indeed decay by the time of follow-up.

Looking at reports of child behaviour as measured by the ECBI at T3 it seems parents report continued improvement at T3 from T2 suggesting that improvement in child behaviour continues after the course has ended at least to the three month point.

Scores were stable between the end of the course and the follow up point for general family functioning variables, showing neither further improvement nor decay. No differences between the two formats, Live or DVD were found for any of the outcome variables at T3.

4.5.2 *Live course T1- T3*

Just looking within the Live course for change in parenting skills, once again improvements on the TOPSE and APQ negative scale were seen at T3 compared to T1 and scores between T2 and T3 were stable. Participants' improvement neither decayed nor continued and still remained higher than at the starting point. As seen above, there were no changes found on the APQ positive scale. There were no significant differences found between the two leaders in terms of changes found on any of the parenting outcome variables, so where parents made changes, they did so regardless of who led the course.

In terms of child behaviour, as measured by the ECBI intensity scale, it seems parents on the Live course reported continued improvement at T3 from T2. However, no differences were found between the two leaders in terms of outcome.

For general family functioning, whilst a significant result was found at T3 for the FAD, and the scores at follow up appeared to be different as seen in Fig. 3.4 in the Results chapter, planned contrasts indicated that this just failed to show a statistically significant effect. In fact no significant differences were found between T1and T3 or between T2 and T3. It appears that the main change in general family functioning for Live course participants occurred at the end of the course with no real change thereafter. Equally, the initial significant interaction found for the leader, just failed to show significance when a post hoc test was carried out.

4.5.3 *DVD course T1-T3*

With regards to parenting outcome variables for DVD course participants, findings showed participants' self efficacy and confidence were overall higher at the follow up point than when they started the course, although no significant change was seen between the end of the intervention and three months later so there was no decay and indeed inspecting the means shows slight if not significant improvements were made

at the follow up point. The same was true for negative parenting behaviour but as before, no change at all in positive parenting behaviour by the follow up point. Which length of the course parents joined did not seem to make any difference to how well they did although as discussed above, the sample for the ten week course was very small, so results must be interpreted cautiously.

In terms of improvement in child behaviour as measured by the ECBI intensity scale, whilst a main effect was found at T3, further analyses revealed there to be no significant differences between T1 and T3 or between T2 and T3. This most likely means that the main improvement is occurring at T2, which was not picked up by the planned contrasts. Duration had no impact on any changes that were found.

Interestingly at the follow up time, DVD parents did report positive changes in family functioning that were not reported at T2 in the earlier analysis, the end of the course. Duration did not make a difference but positive changes were seen both between T1 and T3 and between T2 and T3. This is a potentially interesting result as it might imply a time lag between participating in the course and benefitting from it. However, this would need further investigation as the sample was small and hence underpowered.

4.6 Summary of findings

In summary, the findings show that both formats of the course are effective at improving parental skills and also child behaviour and that the leader of the Live course and the duration of the DVD course did not significantly affect outcome. Specifically, parents seem to particularly improve in self efficacy and confidence, with improvements continuing or being maintained three months after the end of the course whilst very clearly not making any changes to their positive parenting techniques. They do seem to reduce their negative parenting behaviour and by and large, they report the intensity of their children's behavioural problems decreases after the intervention and overall this improvement is maintained. What is very encouraging is to find the overall improvements and the maintenance of these improvements over time for all but one of the variables measured.

4.7 Strengths and limitations of this study

This study had several strengths as well as some limitations, which will now be discussed. First of all, the course meets the criteria suggested by NAPP in their commissioning toolkit for the best programmes, which are:

An appropriately specified target population and recruitment process

The programme has clearly specified the children's age and level of need. The programme also has good systems for understanding whether the programme is meeting each family's needs." The Parenting Children Course is clear that it is available to all families in the community with children between the ages of 0-10 years old. All parents fill in a satisfaction questionnaire at the end of every course to determine if the course is meeting participants' needs and expectations.

Evidence-based content and activities

The programme's content is informed by scientifically proven theories of child development and therapeutic practice and the activities are sufficient for parents to learn new ideas and skills. The course is based on Social Learning Theory and Parenting Styles Theory.

Training and implementation support

The best programmes provide excellent training and implementation support to ensure that positive outcomes can be replicated in new and independent settings. The developers provide clear and thorough Leaders' manuals for Live course leaders and DVD course leaders. The courses are run in community settings all over the country.

Strong evaluation evidence

This was provided by the current study. In terms of the Commissioning Toolkit guidelines provided by NAPP, this course would fit into their two star category:

*"** are awarded to programmes with preliminary evidence of improving a child outcome. This means that the parents and/or child will have completed objective, standardised measures before the start of the programme and then again when the programme is through. While this evidence is not sufficient to link the positive family effects to the programme (since there isn't a comparison group), it is considered a*

preliminary indicator that the programme is potentially effective". (Commissioning Toolkit website)

In addition, the study meets the requirements laid out by the Toolkit in terms of method and design where the required characteristics of any evaluation are that the study:

- *Observed a statistically significant positive change in one child outcome or one parent/child outcome* (significant effects were seen on most outcome variables, with the exception of the APQ positive scale)

- *Observed this change with standardised measures completed by the parents before and after participating in the programme*. The measures used were all robust, standardised measures which were chosen based on the outcome variables highlighted by previous studies as being important: namely parental self efficacy, child behaviour, parenting skills, both positive and negative and general family functioning. The use of the TOPSE and the FAD were relatively new in the field, although found to be reliable and valid in other fields of study as discussed in the Quantitative Method chapter. The findings from the TOPSE were particularly important, showing very clear improvements in self-efficacy which add significant support to previous studies showing this to be an important outcome variable due to its impact on parenting skills and child outcome (e.g Landy & Menna 2006; Leung, Sanders, Leung, Mak & Lau, 2003; Thompson, Ruma, Schuchmann & Burke, 1996). Exploring the impact of the course on general family functioning was also relatively new as most studies concentrate on the impact of such interventions on child behaviour. Although the findings were more mixed for this outcome, exploring the effect on the overall family as well as on target children is an important addition to the field.

- *Observed this change with at least 20 families representative of the target population.* 156 parents participated in the study completing before and after measures and 123 parents, a three month follow up.
- *Observed no negative changes in the parents' or child's behaviour.* None was found.

In addition to responding to the call in the field for more courses to be rigorously evaluated, this study also adds to the body of evidence that speaks of efficacy of courses in every day settings by evaluating not only the course provided by the developers but also those provided by alternative leaders. Evaluating the DVD courses also addresses the course's efficacy as well as effectiveness.

It could be said that one limitation of the study was not having a control group, nor therefore the ability to add a randomised assignment component and so not being able to carry out a randomised controlled trial which is considered the 'gold standard' in the field of evaluation of parenting programmes. However, as the course was universal and took place in a community setting, this design would have been difficult to carry out due to lack of an appropriate control group for all the groups. As discussed in the Introduction, as the course is not run in a research context, it is complicated to set up a control group in such a 'real world' setting (Hurst, Price, Walesby, Doolan, Lanham and Ford, 2014). Even when such control groups can be set up, they may experience contamination as in such community settings, existing parenting support may already be available and thus could 'contaminate' control group outcomes (Stewart- Brown, Anthony, Wilson, Winstanley, Stallard, Snooks & Simkiss, 2011). Some researchers (e.g Stewart-Brown et al., 2011) also argue that conducting RCT's especially in a real world context, is not necessarily the best design as families benefit in many ways from parenting interventions that are not necessarily picked up by the study's design. In this case, this study provides proof of concept for the viability of this programme and the question can now be asked if this is a programme that would lend itself well to being evaluated as part of an RCT going forward. Therefore not being an RCT at this stage is not necessarily a limitation in that it is appropriate for the programme to be evaluated pragmatically for proof of concept before being considered for scaling up to an RCT.

The study did not collect service user satisfaction data, which could have added a valuable dimension to the findings and is therefore a limitation of the study. Day, Michelson & Hassan (2011) state that user experience and involvement are key points in recent health policy (Department of Health, 2008, 2004a,b, 2009). Such data could have also shed some light on who found the course useful and why and may have helped with the question regarding why parents did or did not drop out of

the study. The researcher did plan to do this but was limited by the anxiety of the course facilitator who felt too much data collection was intrusive.

The demographics of the parents attending the courses might also be considered a limitation although they follow very much the pattern of previous studies evaluating parenting courses, particularly universal ones; namely white and due to the church context, predominantly Christian. It can also be argued that meeting the needs of a specific community is perfectly acceptable (e.g Arkan, Üstun & Guvenir, 2013), but undeniably, it would be interesting to know if parents with very different ethnic and religious backgrounds also benefit from this course.

Likewise, having access to more detailed demographic data such as SES or education limits would have all added to what we can conclude about for whom this course was effective. Knowing that 33% of participants scored above the clinical cut off on the ECBI does give us some idea that this sample of parents contained a higher percentage of child behaviour problems than that seen in the general population (Office for National statistics, 2004 reports 10% of children in the UK present with emotional and or behavioural problems). SES was not considered appropriate to collect as it would have been an added intrusion to complete detailed demographic forms. Collecting detailed demographic information might have in fact made a significant impact on parents' participation in the study and even the course as they may have felt more self conscious or scrutinised than they were expecting to feel when signing up to a church parenting programme.

Future studies conducted in similar settings will need to consider how best to glean more detailed demographic information in an appropriate manner in order to provide more information regarding what makes such interventions effective and with whom.

Evaluating if courses make mid-long term impact is very important. Having the three month follow up, which others have used (e.g Simkiss, 2014), does provide some information about maintenance or decay of changes made by the parents who completed follow up questionnaires. However, as mentioned earlier, three months is still a relatively short-mid term follow up time period, and undoubtedly 6-12months would have added considerable credibility to the findings had such a long term follow up period been practical.

The 45% attrition rate at T3 of parents not returning questionnaires meant that it was not possible to be confident about generalising the findings at the follow up point because the sample may be biased in unsystematic ways. In addition, the underpowered tests for some of the groups, such as the within DVD and within the Live group comparisons also mean any conclusions drawn about leader or duration effects at Time 3 have to be tentative.

As with many of the studies described in the Introduction, this study uses only parent report measures as an evaluation tool which raises issues of shared method variance. In addition the same parent completed the same questionnaires at all three time points. It would have added to the robustness of the findings if other methods of data collection could have been undertaken as well as having others complete the measures and also in different contexts. There is the possibility that other reports might have yielded slightly different results. Child or teacher report or video observation would all be excellent supplements to the parent report measures obtained. Researchers (Goodman et al., 2000), practitioners (Norman et al., 2013) and parent/carers (Moran et al., 2012) have emphasised the advantages of including information from a variety of sources including clinicians and where possible, young people. These additional points of view and data collection add depth to the findings and add credibility to any significant changes observed. It was simply not practically possible however to obtain such triangulation within the constraints of time and scope of the work.

In sum, this study shares many of its limitations with others in the literature. Many of these issues have not yet been resolved by researchers as they are difficult to manage in real world settings and require balancing ethical and pragmatic considerations with ideal research criteria.

4.8 Directions for future research

In terms of building on the current study, it would be useful to run the course in a black Caribbean or black African church community to see if it has as much of a positive impact. A recent article in by Moody in *The Times* newspaper (February 9, 2015) reported that ‘the future of religion is black and brown’ based on research from David Voas at the University of Essex. The article writes that whilst figures for

attendance at churches with a black majority are unreliable, surveys do suggest strong growth in black churches contrasting with 'bleak prospects for faith among white Britons' (Voas, The Times, 2015). A similar pattern is reported in the US: Chatters, Taylor, Bullard and Jackson, (2009) report studies showing that black people feel more strongly about religious beliefs, attend services more regularly and pray more frequently than white people. They report 'the available evidence indicates higher levels of religious involvement among African Americans as compared to white Americans and these differences persist even with controls for demographic factors and denominational preference' (p. 1144). Therefore running this course with a predominantly black congregation would be a very useful next step for understanding the generalisability of this course to the wider faith community and then further out to the secular community.

Following that, as it is a faith based course, it would be interesting to know the extent to which it is translatable to secular settings, such as a school or Sure Start Centre as well as whether secular professionals could lead the course (as the references to prayer etc. are optional) in such settings or indeed in a church community setting.

As the origniators do not wish it to be restricted to particular faith groups, perhaps considering a partnering model such as that described by Patrick et al., (2008) with a secular organisation would combine the advantages of an experienced secular facilitator with a background in evidence based practice, with the comfort and familiarity of a church setting. As discussed in the Introduction, church based courses have been shown to overcome implementation and retention barriers that clinic based courses suffer from due to the endorsement of clergy, tapping into existing social networks and offering a familiar time and location for meetings with available child and youth programmes to run alongside. (Patrick et al., 2008). Other researchers have also highlighted the need to recognise that sometimes families, often those with complex needs, may not engage at all with traditional parenting services (Stevens, Harris, Ellis, Day & Beecham, 2013). Alternative methods of working then may be necessary. Day, Michelson, Thomson Penney & Draper (2012) for example, propose that peer led approaches might be one such alternative and the researcher proposes that running a church based intervention might also be another.

As a parenting course offered by the Church, it is most likely the only course to have been evaluated according to clinical guidelines as discussed in the Introduction Chapter. It is essential that more faith based organisations and more voluntary sector organisations take seriously the need to provide an evidence base for the success of their courses that they invite their community members to attend. As reported in recent policy guidance from the UK Dept. of Health (2004), mental health services in this country are stretched to such an extent that private and voluntary input is very welcome. However, as discussed in the Introduction, quality control is essential and this is an area that the voluntary sector needs to invest in in order to have credibility with commissioners and the community (NICE, 2006).

The results from the DVD courses were very encouraging and it would be very useful to learn about more parenting courses that can be offered in that format and evaluate their effectiveness as their reach can be much wider than that offered by any course delivered live.

Scott (2008) calls for researchers in the field to pay more attention to the underlying processes of what makes parenting interventions successful. In the current study no mediation or moderation analyses have been attempted. Future studies investigating this programme could look at mediation analyses potentially, using mid treatment assessments of the measures to see which ones changed and their impact on the other variables.

In particular, it would be useful for more attention to be paid to the role of general family functioning and its impact on child behaviour and parental well being as there is a dearth of studies in this area and this study adds to the literature suggesting this is potentially an important factor.

Finally, carrying out interviews with some of the parents who took part in the course, both Live and DVD, would be helpful to explore what helped them and why. Five parents taking part in the inner-city version of this course *were* interviewed and the data carefully analysed (see Chapter 6) but the format of that course is different to either of these so there is a limit as to how much we can say applies to the processes underlying the DVD and Live courses so further qualitative studies looking at both the Live and DVD course processes would be useful. However, more about the

possible connections between the qualitative part of this study and the quantitative part can be found in Chapter 8.

4.9 Implications for the field of parenting research

This study contributes to the field of parenting research in several ways: First, it is a valuable addition to the existing literature on the efficacy of parenting interventions run in community settings; Second, it offers an evaluation of a universal course which to date have been scarce on the ground as discussed in the Introduction chapter; Third, it adds credibility to voluntary sector programmes by showing a 'home grown' course can be very effective in reaching parents and making positive differences to their experience of parenting and their child's behaviour; Fourth, it adds to the very thin body of knowledge regarding faith based parenting interventions, thus blazing a trail for other faith based organisations to ensure their programmes are evidence based; Fifth, by looking at the impact of the programme leader and duration of the course, more light has been shed on what factors underlie the success of such parenting interventions. Finally, it also adds to the small body of knowledge regarding the use of DVD interventions, a format that definitely holds considerable potential for future developers to reach more of the country's parents.

The following Chapters 5-7 will now present the Method, Findings and Discussion relating to the Qualitative part of this research.

Chapter 5

Qualitative Method

5.1 Introduction to and epistemology of the qualitative methodology

In the current study, questionnaires analysed using quantitative methods were used to measure changes in outcome variables for parents participating in the Live and DVD versions of The Parenting Children Course.

Qualitative methods of interviewing and analysis will be used to answer the research questions relating to the small, inner city version of the course which were to do with:

1. Gaining a deeper understanding of the experience of participating in a parenting course and possible psychological and social processes associated with this and
2. Understanding if taking part in this small group version of the course was experienced by parents to be helpful to them in their parenting and in improving their relationships within their family.

5.2 Epistemological positioning in qualitative research

As in quantitative research, it is important to be transparent as to one's epistemological position when carrying out qualitative research and to select a methodology for data collection and analysis that best suits the purpose of the research, Willig (2008; 2012).

For the purpose of this study, as with the quantitative data, the researcher's position is *realist*. This position holds the view that the data collected ought to provide information about the world, about 'how things really are' (Willig, 2008). This means that the methods ought to be designed and carried out in such a way as to facilitate true and undistorted representations.

The realist position would allow for the belief that this process has a definable psychological impact on people undertaking it with tangible changes that can be discussed and recorded and the methods that suit this position (such as grounded theory and thematic analysis) would be the methods of choice.

Whilst all qualitative methodologies would recognise that the researcher is involved in the research process, there are differences in how much they view the researcher to be the author of rather than the witness to their findings.

From a realist epistemological position, the researcher is viewed more as a witness to what is unearthed in the research process as opposed to a more relativist position of the researcher being implicated in the findings.

5.3 Choice of qualitative tools for method and analysis

5.3.1 *The interview schedule*

Willig (2008) states that semi-structured interviewing is the most widely used method of data collection in qualitative research in psychology. It provides an opportunity for the researcher to hear about a participant's experience through the use of open-ended questions. Rapport is important to establish before beginning as well as transparency about confidentiality and the use of any equipment such as a recording device necessary to record the interview verbatim.

Generally an interview agenda consists of relatively small number of questions. Spradley (1979) produced a helpful guide to formulate four different types of questions that are conducive to participants answering questions in a rich and informative way:

Descriptive: these are general questions that allow for a broad-brush picture of an experience e.g. 'what was it like for you, doing this course?'

Structural: these are questions that ask about how the participant organises their knowledge: 'how did you decide to do a parenting course?'

Contrast: this type of question allows the interviewee to make comparisons between events and experiences. 'did you prefer talking to parents or reading the literature?'

Evaluative: this type of questions asks the interview to talk about their feelings about something/someone: 'how did you find talking to other parents about your parenting?'

Therefore, through the use of semi-structured interviewing, the researcher holds the view that themes can be derived from the rich data generated, that make sense of it. The researcher chose *thematic analysis* as the methodology to analyse the data for its ability to produce meaning through the derivation of themes without having to be developed further into theory, as other methods such as grounded theory (Strauss & Corbin, 1998) would necessitate. The research questions do not require the building of a new theory, but rather an exploration of parents' experience as they undertake this course. Content analysis does not go far enough for the researcher's purposes in that it does not allow for the discussion of meaning and interpretation but rather stops at cataloguing data.

5.4 Thematic analysis: What is it?

Thematic analysis involves the searching across a data set to find repeated patterns of meaning. There is some controversy with regards to whether it is a method in its own right or a process that is performed within other analytic traditions such as grounded theory (e.g. Ryan and Bernard, 2000). Braun and Clarke (2006) however maintain that thematic analysis should be considered a method in its own right and worked to establish Thematic Analysis within psychology (Braun & Clarke, 2013). Since then it has grown in popularity and is now recognised, accepted and more widely discussed method (e.g Howitt, 2010; Joffe, 2012). Through its theoretical freedom it provides a flexible and useful research tool, which can provide a rich and detailed, yet complex account of data. Thematic Analysis can be a realist method which reports meanings, experiences and the reality of participants or it can be a constructionist method which examines the way the above are effects of a range of discourses operating within society. When conducting thematic analysis, the researcher attempts not to be overly influenced by the literature. Braun & Clarke, (2013) suggest it is virtually impossible not to have engaged with some of the relevant literature prior to beginning the research, however keeping an open mind when analysisng the data is essential. Individual experiences will be looked for and described as richly as possible, whilst pulling together common threads from those

experiences to develop into themes that can be, albeit tentatively, said to describe the experience and impact of undertaking this particular parenting course in this particular context. In so far as is possible, therefore making some assumptions about outcomes for participants doing the course in similar contexts elsewhere.

When carrying out a thematic analysis, it is also important to determine the type of analysis that needs to be done and the claims that the researcher wants to make with respect to the data collected, for example providing a description of the entire set, as in the present study or perhaps providing an account of only one particular theme which relates to a question of interest (Braun & Clarke, 2013).

5.4.1 *What counts as a theme?*

"A theme captures something important about the data in relation to the research question and represents some level of patterned response or meaning within the data set." (Braun & Clarke, 2006; p. 82). Braun & Clarke (2006) go on to say there is no hard and fast rule regarding what proportion of your data set needs display evidence of the theme for it to be considered a theme. It is important for the researcher to exercise judgement about what constitutes a theme, or an important meaning in the data and retain some flexibility about naming them; 'the keyness of a theme is not necessarily dependent on quantifiable measures – but rather on whether it captures something important in relation to the overall research question" (Braun & Clarke, 2006; p.82)

5.4.2 *Inductive versus theoretical thematic analysis*

Themes within the data can be identified in one of two primary ways in thematic analysis:

1. inductive or 'bottom up' way (Frith & Gleeson, 2004) or
2. theoretical or 'top down' way (Boyatzis, 1998; Hayes, 1997).

This study will identify themes using the first method where themes are strongly linked to the data themselves (Patton, 1990) and in this way is similar to grounded theory. In this approach, the themes are not driven by any particular theoretical interest and the themes may bear little relation to the specific questions that were asked of the participants. This is therefore a process of coding the data without trying

to fit into a pre-existing coding frame, however, as discussed above, researchers can never free themselves entirely of their theoretical and epistemological positions. In other words, the data is not collected entirely in a theoretical and epistemological vacuum, but nor is it bound and held by them either. This is in contrast to the second, 'top down' method where the analysis would be driven by the researcher's theoretical interest in the area and therefore more explicitly analyst driven.

5.4.3 *Semantic or latent themes*

Similarly, there are decisions to be taken with regards to the level at which themes are to be identified: semantic, or explicit level or at a latent or interpretative level (Boyatzis, 1998).

This study will be looking at themes at a semantic level, which are where themes are identified within the surface meanings of the data, and the researcher will not be looking beyond what a participant has said. This process does not mean that a mere description of the data is presented in terms of answers to questions, but rather that the data has been organised to show patterns in content and an attempt is made to theorise the significance of the patterns and their broader meanings and interpretations (Patton, 1990) often in relation to previous literature (see Frith & Gleeson, 2004).

In contrast, a thematic analysis at a latent level goes beyond the surface content of the data and starts to look at the underlying ideas and assumptions that are shaping the semantic content of the data. Analysis within this latter tradition tends to come from a constructionist paradigm, (although not necessarily, Burr, 1995) and therefore would not be the right level for this study's realist epistemological position.

However, it is important to emphasise, that even from a realist position, the data must be interpreted beyond description to theorise motivations, experience and meaning as although the material is not examined beyond its surface presentation, it still assumes a relationship between meaning and experience and language (Potter & Wetherell, 1987). An example of poor thematic analysis would be where the researchers have simply used the questions put to participants as 'themes' identified in the 'analysis' (Braun & Clarke, 2013). What it does not do is to theorise the sociocultural contexts and structural conditions of the individual accounts provided

as does the analysis rooted in the constructionist paradigm as one example. This latter approach begins to cross over with other qualitative methods such as Discourse analysis (Taylor & Ussher, 2001).

5.4.4 *Possible disadvantages of this method*

Whilst thematic analysis is the method of choice for the reasons discussed in the previous section, it is not without its disadvantages: its very flexibility which is appealing in that it allows for a wide range of analytic options means that the potential range of things that can be said about the data is broad (Braun & Clarke, 2006) which can make it very difficult for the researcher to decide what aspects of their data to focus on.

One of the main issues with this methodology is there are common pitfalls awaiting the researcher. First of all, there is the tendency of many researchers when claiming to be using it, to actually fail to analyse the data at all! A common pitfall is merely to string together answers to the questions asked in the interview and present these as 'emerging themes'. Another issue is that of falling into the trap of presenting an unconvincing analysis where the themes do not actually work for example by the researcher trying to force the data into a pre-conceived theme or finding that the theme title and description doesn't really describe much of the data. The researcher can fail to capture the majority of the data when describing a theme, leading to themes being weak or anecdotal (Braun & Clarke, 2006).

Other disadvantages emerge when this method is compared to some of the other qualitative analytic methods. It does not for example allow the researcher to make claims about language use, or cultural or societal context as Discourse Analysis might (Braun & Clarke, 2006).

To help researchers conduct high quality thematic analysis, Braun and Clarke in their 2006 paper provide a 15-point checklist of criteria for using this method, which the researcher made best attempts to follow in order to produce a trustworthy analysis from which meanings can be derived and discussed. This will be discussed in more detail in the following section of this thesis.

5.5 Description of qualitative procedure and methodology

This section will describe the process of data collection and method of analysis of the qualitative section of the study.

5.6 The interviews

5.6.1 *The participants*

A total of five parents were interviewed for this part of the study. As at a typical course held in this context, approximately four-eight people attend at any one time and given the study's aim to understand better people's experience of the course, it was agreed with the research supervisor that five people would be a reasonable sample size to conduct interviews with.

They came from three different courses that had been held in the last 18 months and which came under the umbrella of Church activities. Two of the courses were specifically for single parents and one was offered as part of general Church activities for the community at large. Interviews took place over a ten month period.

All five participants were women and were selected by the facilitator who led all three courses. Women were selected on the basis that they were willing to participate in the study and the facilitator felt they were expressive and responsive enough to engage in an interview. Ethnically, they were all different from one another: one Black English woman, one White Polish woman, one Muslim woman from Iran, one mixed race (Nigerian/white British) woman and one Muslim woman from Bangladesh.

They each had at least one child and the ages of the children ranged from three-nine years old. Two participants were married, the other three were single parents. Age range of the participants was 30-35 years old.

The researcher made telephone contact with them directly once the course facilitator had ascertained their permission to be contacted and a meeting was arranged in the participant's home or in a quiet public space. All participants agreed to be recorded and signed a consent form having read an information sheet describing the scope of the study.

The researcher expressed thanks to the women for their kind participation by offering a box of chocolates at the time of the interview. Participants were not otherwise incentivised to take part.

5.6.2 *The Interview process*

After pleasantries were exchanged, the process of the interview was described and limits of confidentiality discussed. All participants were assured that no feedback was specifically given to the course facilitator and that no names would be used in the write up. An information sheet (see Appendix A14) was given out together with a consent form to sign before the interview began (see Appendix A15). The recording machine was then turned on and the interview began. Average length of time for each interview was 45 minutes.

A semi- structured interview was used as the framework for the meetings and the format was the same for each one with only the occasional follow on question included to clarify a point made.

The researcher used counselling skills of nodding, smiling, eye contact and clarifying statements to encourage the participants and help them feel at ease to talk honestly and openly.

The interview schedule can be seen in Appendix A16 and the questions were open ended and conducive to eliciting information freely without constraints such as: 'how did you decide to do the course' or 'how did you find talking about your parenting with other parents?'. A variety of descriptive, structural, contrast and evaluative questions were used (Spradley, 1979). As the researcher favours Solution Focused therapeutic questions (de Shazer, 1985), some questions did reflect that model such as asking participants to rate their level of confidence in their parenting out of 10 before and after the course. In this model, therapeutic conversations are solution and future orientated. The aim is to enable people to envisage their preferred future without the problem as clearly as possible and then set clear goals to achieve towards that future. Scaling questions such as the one included in this interview schedule help the therapist and the client gauge tangible progress towards the client's goal.

Questions were also clearly aimed at answering the research questions firstly in terms of understanding the process of undertaking a parenting course and secondly whether this format of The Parenting Children Course was found to be helpful for parents.

Literature pertaining to parenting group studies was looked at prior to beginning the study but not in great depth so as not to influence the questioning process unduly.

To assist with ensuring the validity of the questions, the researcher discussed the interview schedule with her supervisor prior to beginning the interviews. In addition, at the end of each interview, participants were asked if the questions covered all aspects of their experience or if there were other areas that they felt needed addressing. In all cases, participants felt the schedule covered all relevant areas and none had anything to add. All participants reported the process to be enjoyable and relaxed.

All interviews were then transcribed verbatim by a research assistant and can be found in Appendix A17.

5.7 Process of analysis

Thematic analysis was picked as the method of choice to analyse the interviews, as described above. This process involved closely following Braun and Clarke's excellent guide to carrying out Thematic Analysis in their seminal paper (Braun & Clarke, 2006) which they recommend to readers in their book on qualitative research in 2013.

This involved:

Phase 1: familiarising oneself with the data

Phase 2: generating initial codes

Phase 3: searching for themes

Phase 4: reviewing themes

Phase 5: defining and naming themes

Phase 6: producing the report. In their writing in 2013, the authors suggest that the report writing can be blended into previous stages if that suits the researcher better. In this case, the write up was completed after the analysis.

5.7.1 *Phase 1: familiarisation with the data*

This is the crucial stage of immersing oneself in the data collected and becoming very familiar with every part of it. This means reading and re-reading the material in an active way, looking already for meaning and patterns.

The researcher carried out the interviews but an assistant transcribed them so it was important to listen to the recordings more than once to be sure that the transcripts were accurate. Although thematic analysis does not require the recording of every pause, cough or laugh, in the same way that discourse analysis might warrant, Braun and Clarke call for at minimum a 'rigorous and thorough 'orthographic transcript' a 'verbatim' account of all verbal utterances' (Braun & Clarke 2006; p.88). Punctuation is important too as meaning can be changed.

The entire data set was therefore read through at least three times before Phase 2 began and involved checking for accuracy as well as jotting down notes and ideas that came up during the reading. The transcripts were also printed out using larger font than usual with larger spaces between lines to allow for annotations. Lines were numbered for easy referencing. See Appendix A17 for the transcripts. All page numbers given for quotes relate to the Appendices.

5.7.2 *Phase 2: coding*

Coding involves reading a segment of data and standing back from it to think what is this segment talking about, what meaning does it have and organising it into meaningful groups (Tuckett, 2005). The original question is not included in the coding so as to lift meaning from the text rather than categorising answers. Braun & Clarke, (2013) define two main approaches to coding: *selective coding* which involves identifying a particular phenomenon that one is interested in and searching for it in the data; or *complete coding* which involves identifying anything and everything of interest or relevance to answering the research question as described by Boyatzis (1998) above. Complete coding is the approach taken here and the codes

reflected the semantic content of the data rather than a theoretical interpretation of the data.

Coding took place after the first two interviews and then after the next two interviews and then finally after the last interview. The researcher worked systematically through the entire data set paying equal attention to each line of data to identify interesting aspects of it that later might become the basis of repeated themes. Notes were written above each line of data that were underlined in a different colour. Every line was given a code without trying to look for repetition at first. Code labels were given that seemed to describe what that data point was about. All coding was done manually.

If any repeated patterns or interesting ideas jumped out during this detailed coding of all data extracts, notes were written in the margin. For example, the idea that later turned into a theme called *"View of self to be improved"* started forming during this coding process.

Through a conversation with the researcher's supervisor, as the codes were reviewed together, this idea developed that perhaps parents had to have an idea of Self as something that can be worked on or improved in order to find the course helpful.

Following Braun and Clarkes' (2006) recommendations, individual extracts were coded sometimes more than once or recoded if a better code description came up later. Any data that didn't quite fit an emerging pattern was also included as it is just as important to retain the non-dominant stories as it is to retain the dominant ones.

Each transcript was treated as separate to the others and as a fresh collection of data.

See Figure 5.1 for an example of codes applied to short segments of data. Each data segment could have several codes attached to it.

Maria, p.200, L11:

> It's not only about you know just getting together and discussing whatever comes up or not …it was about you know just coming up with things that will be useful for us

Coded for: Course has a purpose, not just coffee am
Perception of course as useful for teaching something

Maria, p.201, L23:

> You know, the way I look at it, there's always something to learn.

Coded for: open to new learning

Hayley, p.253, L62:

> I knew that you could talk when you wanted to; it was kind of you know you were never forced to speak, you know, it was kind of there's a subject and then you'd just find yourself wanting to get involved and the parents do as well and it was in a friendly environment so it wasn't like a classroom.

Coded for: group perceived as easy to talk to
Not feeling picked on or on the spot
Process enabled participation
Friendliness valued
Not a classroom

Figure 5.1. Coding data extracts.

These codes are data driven as opposed to theory driven as the data was not approached with any background theory or literature in mind.

A list of all the codes generated can be found in Appendix A18.

5.7.3 *Phase 3: searching for themes*

This phase involves sorting the different codes into potential themes. It begins when all the data have been initially coded. This phase involves grouping codes into meaningful groups that form the basis of potential themes by seeing if any of the groups of codes might together form a theme. A theme should have a central organising concept that tells the reader something about the content of the data that's meaningful (Braun &

Clarke, 2013). The authors emphasise that it is possible to create many different analyses from qualitative data. The important point when searching for themes is to be selective in the analysis and find themes that answer the research question. They don't have to represent everything in the data (Braun & Clarke, 2013).

There are also many different ways of doing this grouping, such as using mind maps or cutting each code out and putting them in physical piles. Some codes, if they are rich or complex enough can be promoted to themes in themselves.

The researcher's method was to go through each list of codes for each interview and gave every code a letter from the alphabet. Those codes that seemed to describe the same thing were given the same letter and then grouped together and given provisional labels for potential themes so for example data that was coded 'looking to improve herself' in one interview and data that was coded 'hoping to learn something' would be grouped together under an umbrella heading of 'open to learning and improving'. This was the beginning of starting to think about how codes might fit together to form themes and potential relationships between themes. At this stage, nothing was discarded and temporary labels were given to even very small groupings of codes in case they later might become sub-themes to main themes.

The original transcripts with the alphabetical codes were reviewed three times more before moving on to ensure that nothing was missed in terms of ensuring all data was included in the coding groupings and not left out. Tweaks to code names and initial theme names were changed and added to during these reviews. Some codes were included in more than one potential theme at this point if they seemed to fit in both.

5.7.4 *Phase 4: reviewing themes*

This phase involves reviewing and refining the themes and looking to see if the codes grouped together form a coherent pattern and can be seen as themes. Some candidate themes might not actually turn out to be themes and others can be collapsed together to form one theme.

To do this, the researcher went back and forth between the provisional theme titles and the long lists of codes to check that provisional theme labels worked and to see if any of those labels were describing the same thing and could be collapsed together or

if they needed discarding altogether and the coded data re-filed under a different theme heading.

Braun and Clarke (2006) recommend once the researcher is happy that the themes fit the coded data adequately, to try and visually represent the themes to check their validity in relation to the data set. In other words, do the themes offer an accurate representation of the data set as a whole (Braun &Clarke 2006).

Any additional data that is picked up that has been missed in previous coding stages can be coded at this stage too.

5.7.5 *Phase 5: defining and naming themes*

This phase involves further defining and refining each theme by identifying the 'essence' of what each theme is about and also how they fit together to tell an overall story. This process was done three times, of reviewing and refining the themes before settling on the names and the way they fit together. For example one theme labelled: *Post course changes* in an early version of grouping the codes into a theme, was broken down under the larger theme heading of *Post course changes* into smaller themes: *More positive outlook* and within that three sub themes: i) *More positive view of the child;* ii) *More positive view of parenting*; iii) *More positive view of the course* in order to tease out the different important experiences described by parents which would otherwise be lost under a large heading. See Appendix A19 for earlier versions of the codes grouped into themes and Appendix A20 for the final list of themes.

At this point the researcher developed a thematic map using the overarching theme headings described in detail and shown in Fig. 6.1 in the next chapter. Re-reading the data with the thematic map alongside ensured that the map fit the data and adjustments were made where necessary. A final, more succinct map was produced at the end of that process and can be seen in the in Fig. 6.2.

During the course of Phase 6, the write up, this list was further refined into clusters of themes identified as relating to *Pre-Course, Course Process* and *Post Course Changes*.

These are described in the next section in some detail with accompanying extracts of data to illustrate each theme as the Findings of the study.

Chapter 6

Qualitative Findings

6.1 Overview of the findings: a thematic model

Before the themes are outlined and discussed individually in some detail, it might be helpful to start with an overview of the findings.

What emerged clearly from analysing the interviews is that these parents found the parenting group to be a positive experience. They all described feeling better about themselves as parents and viewing their children more positively after the course. Becoming aware of their own style of parenting was also seen as a positive change alongside learning new tips and techniques to deal with parenting challenges.

The nature of the environment created by the leader was found to be an important element in allowing change to take place. The provision of food and child care were seen as important to enabling parents to relax and learn. The leader had an important role in maintaining the delicate balance between free flowing conversation which fostered friendship and support and introducing the techniques and exercises provided by the course to foster learning and growing in parenting skills. It was clear that participants were anxious that the group not be a coffee morning for 'support' only nor a 'lecture' to go to purely for learning. It was up to the leader to negotiate that balance.

A key element that was found was that parents having a view of parenting as something that could be learned or improved upon meant that they came with expectation to learn something and had the belief that they could improve themselves in this area. This shows they didn't view parenting as something static or fatalistic, dependent on outside factors such as God or the child's temperament alone. This belief was also influenced by their values and intentions behind doing the course, their own experiences of being parented and their willingness to examine these in order to be better, more confident and aware parents. However, this learning came about in conversation with others; this was key. All parents felt the group was essential to

bringing out in the open their own attitudes, behaviour and beliefs and that in isolation, this learning would not take place. They also found the introduction of formal ideas and techniques to be useful in structuring the conversation and bringing in new ideas.

The above summary comes from teasing out meaning from the responses to the interview schedule and organising them into themes following the procedure outlined earlier.

To help make sense of the themes and how they fit together, a diagrammatic model was designed.

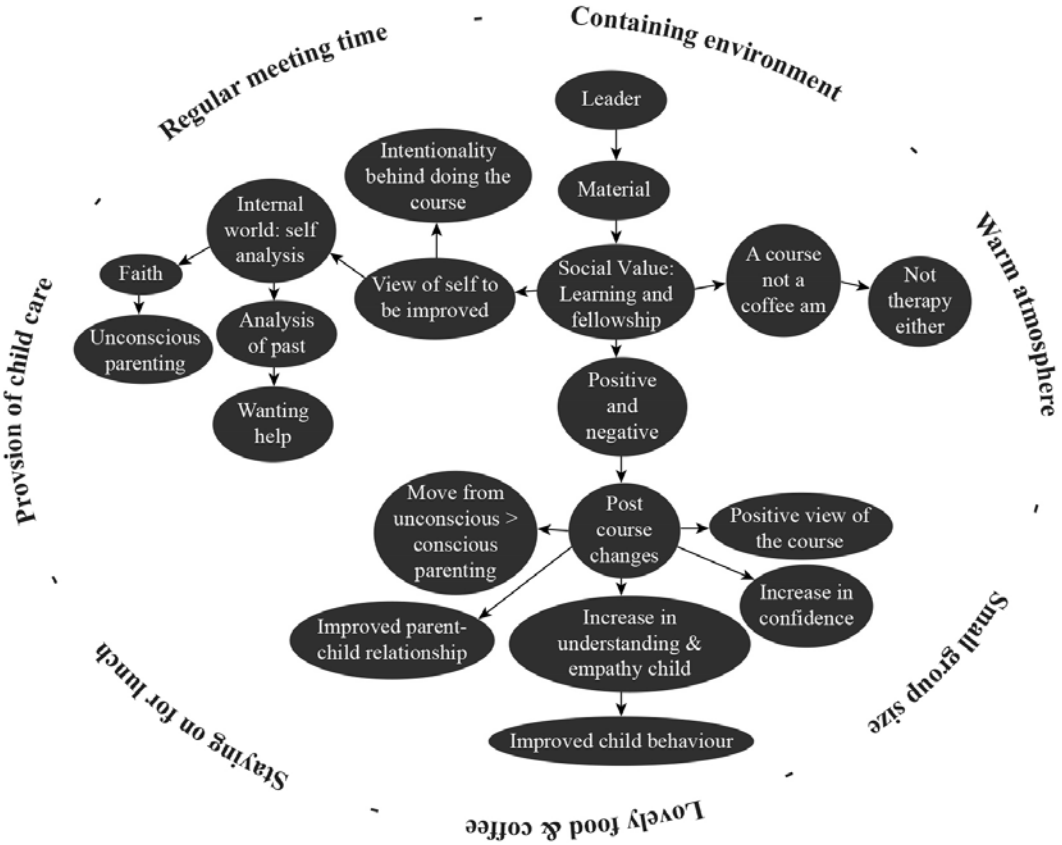

Figure 6.1. Detailed map showing connection between themes

Figure 6.1 Shows a detailed map suggesting how the themes might fit together. Around the outside of the diagram are the environmental elements that combine to create a safe, containing environment for learning: the regular meeting time, the lovely food, warm atmosphere, small group size, provision of child care next to the

group session and the opportunity to have lunch together informally onsite at the end of the meeting.

Centrally placed in the map are the key themes of *View of self to be improved and learning* and *Social value: learning and fellowship.* These seem to be central. Pre-course themes such as the parents' own internal world and ability to self-analyse, their desire for help, the extent to which their parenting is unconscious at the start and their reasons for doing the course all have an impact on their view of how helpful this course can be and are represented by the boxes linked to *View of self to be improved and learning*.

The input and impact of the Leader and the material presented interact with the discussion format of the course and the premise that the meeting is more than just a coffee morning and yet is not a therapy session or a lecture and lead to the Post course changes. Those elements are labelled and shown in the boxes around *Social value: learning and fellowship.*

Finally post course changes such as Positive view of child, parenting and the course itself are represented in the boxes towards the bottom of the diagram.

Figure 6.2 represents a further distilling down of the themes and the map in Figure 6.1 to what seem to be the key elements of the process as outlined above in the summary which is that when parents come to a group like this one with an expectation to learn and are welcomed into a containing environment with other people to discuss parenting issues with, they are able to make use of the material provided and leave the course feeling more confident due to becoming more aware of their own style of parenting and by viewing their child and themselves in a more positive light. The balance must be struck by the leader primarily between the environment being warm and welcoming and yet not just another coffee morning in order for parents to view the course positively. The presence of protective qualities that parents might bring with them to the group, such as their faith, their ability to analyse their past and internal world and their intentionality are summarised as Protective Factors and seen as contributing to the positive experience for the parents alongside the containing environment and are represented in the outer ring of the diagram.

The themes will now be described and illustrated in more detail in the following section.

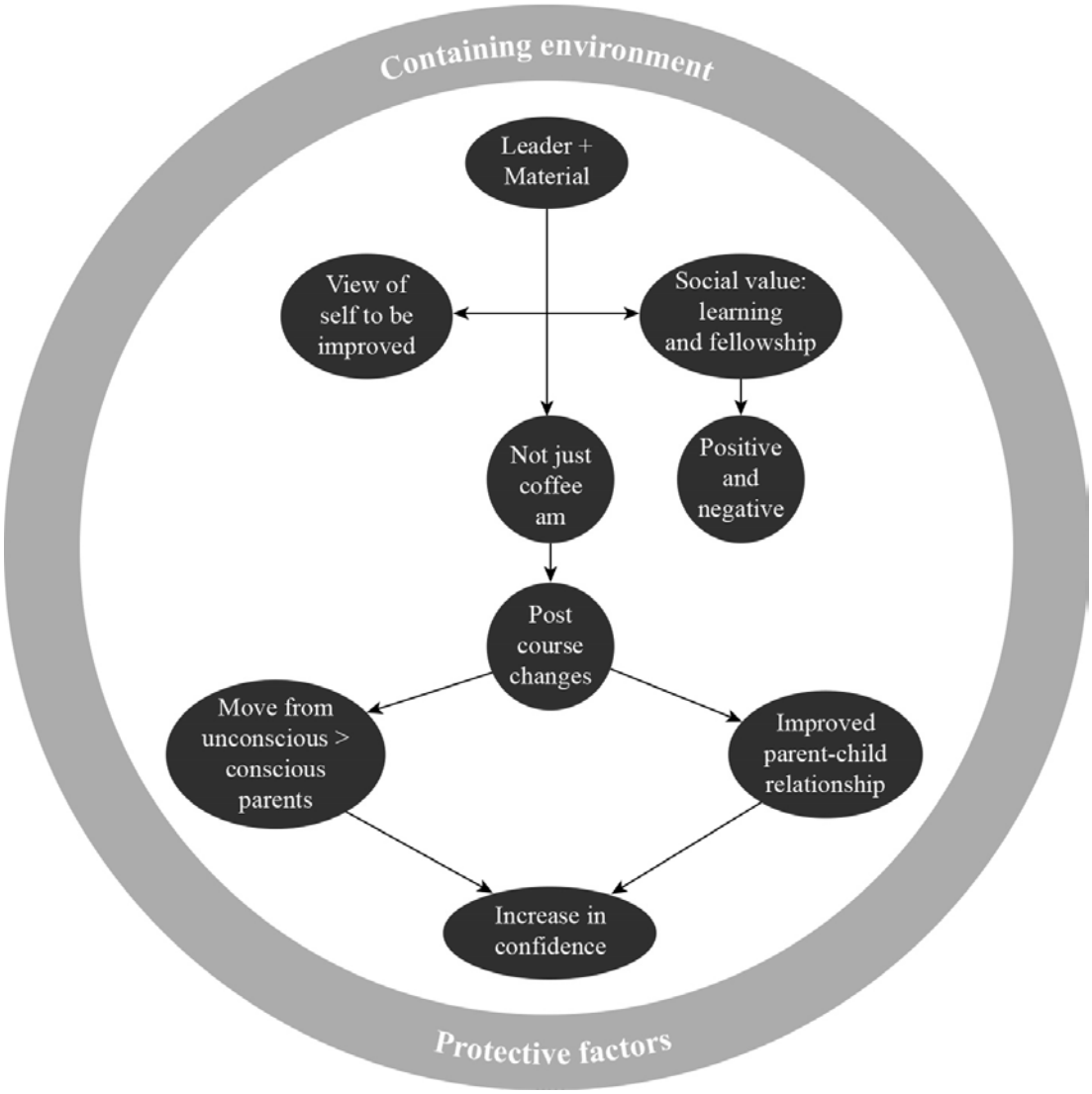

Figure 6.2. Condensed map showing connection between themes

6.2 The themes

As discussed earlier, themes in this study were identified in an inductive way (Frith & Gleeson, 2004). This means the themes identified are strongly linked to the data themselves (Patton, 1990).

Following the step by step process outlined earlier for Phases 4-5, the following themes were identified: Some themes are labelled ‘sub themes’ as they fit under an

overarching theme but were big enough in their own right to be named. For example: *Role of the leader* is labeled as a sub theme to *Role of the environment* as the role of the leader is very much part of what role the environment plays but is important and interesting enough in its own right to be named. The headings of the themes were chosen primarily by the researcher although in one case, it came out of a conversation with a supervisor. In all cases, when considering what name to give a theme, the researcher tried to look at what were the underlying assumptions parents were making or what the underlying processes were in order to make them explicit.

In addition, three large headings to loosely group the themes under are used to help make sense of how the themes fit together. These are: *Pre-course Themes*, i.e. those themes that relate to aspects of the participants beliefs and views before they started the course; *Course Process Themes* which holds those themes that relate to the active process of the course and *Post Course Themes* which relate to those themes addressing participants' experiences after the course. All names have been changed of the participants when they are quoted.

6.3 Pre-course themes

6.3.1 *View of self to be improved and learning*

This theme relates to beliefs participants had about whether they could improve themselves or whether the outcome of one's efforts was determined by outside factors such as God, luck or a child's temperament. This theme was born out of a conversation with my supervisor where we discussed how, in order to have hope about learning something from this programme, there must be a sense of a 'self' that can be improved in the first place. Participants talked about bettering themselves, learning and improving.

Most participants expressed a belief that they could improve themselves and their parenting in this case by going on courses:

> Hayley, p.251, L34-5 "I am the kind of person that likes to go on courses and likes to see if there's anything else to learn and umm better myself and umm the way I am with my kids'.

> June, p.269, L22: 'it was quite typical of me (to do the course) I'm quite interested in yeah doing different courses to either better myself or learning skills'

Maria said:

> 'anything that would help me umm.. and my family I can't see why not…you know this uh coz the way I look at it there always something to learn" (Maria, p. 201, L21-23)

For some, the value is in the trying to learn and do one's best even if the outcome is not tangibly better:

> June, p.283, L216: "you know if it's (the course) is sold as you know come it's an opportunity to just discuss you know ways of doing it you know coping techniques…and just realise you're not perfect and you're going to make mistakes but at least you're trying to you know do something about it and learn better ways of coping."

For most, parenting is viewed as another task for which tools can be acquired to help with and the course is viewed as a place to acquire those tools.

Praying and analysing things were attributes that fit under this theme as well as viewing their behaviour as something to be improved on in some way:

> "I find I over analyse things and I do worry a lot as well as pray.."(Maria, p.202, L57)
>
> "I mean at home I do analyse things and I look at things how I can improve.." (Maria, p.202, L63)

Sub theme: Intentionality behind doing the course

A sub theme here relates to what participants' intentions were going into the course. For example, for some it was for the express purpose of improving their parenting skills or to gain support and reassurance:

> "I think what I was hoping is that it was a place I could sit down for a moment well it was like two hours or so and just concentrate on parenting and nothing else and yeah, I just wanted a dedicated two and half hours of just looking at parenting" (Maria, p.202, L59).

Bobby said:

> "I'm like the strict one and the non strict one so I need to kind of have like a just a stable parenting thing (laughs) coz I'm all over the place yeah' (Bobby, p.228, L48)

She also said:

> ‘you know before I just didn’t really know what to do so everything I’ve done with my daughter I’ve just been wingin’ it seeing how if it works it works, no? okay, try something different!.. L40: you know so I wanted to come and see more what the actual way to do it, in the real way to do it right!’(Bobby, p.227, L36-40)

For others it was to follow the single parent ministry programme on a Thursday morning and went into it without clear intentions.

> “It’s just something I would always go on if it’s some weeks on a Thursday morning” (Maria, p.201, L35-39)

Some wanted specific help with certain problems:

> “I wanted to see whether other parents are going through the same thing as I was and that was for me one of the most important things, I wanted to see whether you know I was doing something wrong or whether it was normal for her to be playing up or whether you know, other parents could advise me on you know how they dealt with certain situations” (Hayley, p.250, L18)

and others viewed it more as a place to get advice or reassurance or an exercise in self improvement as discussed.

Sub theme: Pre-existing ideas/values on parenting

In relation to participants’ parenting values prior to starting the course, some seemed to be aware of their parenting goals and ideas and were there to build on them further. For others, their parenting style or values were more unconscious: This theme tried to capture those pre-existing ideas parents had before they went on the course.

For example, one parent had very clear ideas of what ideas from other parents she did want to adopt and others she was clear she did not:

> “I found okay, this is a behaviour I definitely don’t want to you know, I don’t want to have that in my life, you know behaving a certain way or saying certain things and I thought that’s something that gosh, you know I wouldn’t want my son to hear” (Maria, p.202, L65).

One parent talked about how before going into the course she had no idea of what her parenting skills were and attributed any positive behaviours in her child solely to her child:

> "I just thought it was all her, it was all my daughter like she's just magically become like this because she's so good and I have not done that because there's no way coz I don't know what I'm doing…I'm like I don't do anything, like I literally don't do anything, there's nothing I've done that ..like no it's not me (that made her so well behaved)" (Bobby, p. 229, L62-65)

Another said:

> "to be honest, we don't really try to like follow scripts we kind of just make it up as we go really (laughs)" (June, p.271, L44)

6.4 Course process themes

6.4.1 *Social value: learning and fellowship*

A key theme to note is that of the role played by the group in contributing to participants' overall experience and learning from the course. Open, honest sharing of one's own issues and questions in a confidential setting was viewed by all the participants as extremely helpful as was hearing other people do the same and share their stories. This theme makes explicit the value parents are placing on the social interaction and perceived support of being in a group.

> "I enjoyed sitting around with other parents and umm you know just really talking about what's been going on and they tell you what's been going on and then you might say 'oh God, she was screaming and shouting as we tried to do some shopping and refused to stop and the other parents and everyone would say 'ahh give her a lolly or something to keep her quiet'" and you know…one of the things I liked was just let it happen, let her cry, don't give in'. (Hayley, p.256, L108).
>
> "I felt okayish (*discussing her own parenting)* because there were some parents who were finding it harder to control their children so I didn't feel like okay I'm saying bad things about my children or you know I'm a bad parent maybe I don't know how to look after them you know so it was quite nice coz everyone spoke their own mind and you know there were some personal stuff …..so we all chipped in a bit of a personal stuff so it was quite nice as we all opened up …knowing that it's not gonna go any further." (Erin, p.293, L84).

Hearing parents at different stages with their children talk about their experiences was viewed as helpful even if not directly relevant:

> '..so there was teenager talk as well and she (the leader) gave lots of examples of her own child so that helped us as well so what to expect a bit later on so if they're a teenager how would you react with a teenager if you're you know 7-8 years old coz we all had different age groups of children and then some mothers had a just a six month old baby and a big gap with a ten year old so ..it's given me an idea of everything basically about the child" (Erin, p.291, L60).
>
> "I liked hearing how they dealt with certain things because even though I might not have been going through that like I don't have a son but one of the ladies has got a son who's like ten so she's going through all of the he wants to play games on the computer that are really violent and you know I have not got to worry about that at all coz my daughter is the most girly girl in the world so but it was still really interesting to see how she deals with it." (Bobby, p.233, L112).

Another parent said:

> "You know, it's always good to get together with other people and discuss this and also umm see how other people do things or their opinions.." (Maria, p.202, L63) Hearing other parent's issues or mistakes was also viewed as helpful as the same parent went on to say: 'Also like what I have found out was like there was one particular parent and I found okay this is a behaviour I definitely don't want umm you know I don't want to have that in my life" (Maria, p.202, L 63).

Receiving parenting advice from other parents was viewed as very valuable:

> "I think I picked up a lot of things and uhh what to expect from them, not to expect too much because you know at different stages you know.. I think I've become better with them because I've started to see them as kids" (Hayley, p.263, L226)

and the experience of supporting others in their struggles also had a positive effect on their own confidence and stress levels. One parent to this point commented:

> "The closeness and honesty of everybody that like every week someone was crying because they felt they was doing it wrong and then we had to like comfort people and you know it just while I would comfort somebody else it made me realise that actually I'm not that bad a mum like there's what I 'm saying to this woman I should take for myself (laughs) because I'm not doing the same thing so yeah.." (Bobby, p.233, L118).

> "I think it was nice hearing some of the challenges that other people faced and sometimes when people share that I think 'oh actually I don't have that problem' I feel pretty good about that whereas at other times I'm like yeah I'm having that as well and I actually or it's a bit worse for me or I 'm doing that….so it's nice saying that yeah okay that I feel confident with that or you know actually no I don't feel so confident or yeah, share your experience with that" (June, p.284, L220).

Another talked about how a woman in the group had come up to her several weeks after the end of the course and said

> "'oh my God, I've been meaning to see you and I just really wanted to thank you because you've helped us so much!" and I was like okay what did I do? And you know it's because I told her about maternity allowance" (Bobby, p.248, L2, pt.2).

The group was perceived unanimously as non-judgemental and accepting which were seen as crucial elements to the success of the group.

> "Everyone's really open and loving and they don't judge you like I could say that I batter my child and they probably wouldn't say anything…okay maybe like if I smack her they probably wouldn't say anything they'd be just like ok well you know have a think about it if she's in a vulnerable situation or something but they would they are like that loving that just really want to help you and they would probably try to talk you out of smacking and stuff but I think that's how open they are that no one judges you". (Bobby, p. 247, L332)

Whilst the material provided by the leader was seen as somewhat helpful, it was the discussion of it within the group that brought the material to life. When asked about whether they would have like to have had just the material on its own, one parent responded;

> "I would say no because it's like reading a book isn't it sometimes when you're reading something it goes through to your head but if you're acting it's a different thing or when you're talking to each other then you learn a bit more isn't it so I would say sitting down and talking goes through to my head rather than sitting down and reading in a piece of paper so I think umm the course itself was better than reading the handout I would say" (Erin, p.294, L104).

Simply having time with adults was a powerful draw as well.

> "to be honest (about what she enjoyed from the course) it's just having a bit of adult contact time with the kids kind of doing their

> own thing and just having like kind of sitting so that was really nice Monday event (laughs) for six weeks" (June, p.272, L60).
>
> "I really enjoyed the course and how the surrounding and getting the knowledge of each other and some of the mums were in the toddler group so we all go to know familiar faces even we're like next door neighbours which we didn't know so that actually got us going as well so it was a regular 7-8 people if not more some days so that's why it was more homely.." (Erin, p.292, L70).

The idea of not being alone with issues, and having camaraderie over for example partners that won't participate was flagged up as helpful in building support and confidence.

> "it was also fantastic to know that umm it wasn't just my husband that wasn't helpful with the kids and kind of jeopardized everything I was trying to do and make my parenting difficult so yeah it was good to know that." (Hayley, p.260, L180-181).

Friends were made that continued outside of the group that helped with feelings of isolation:

> "I really enjoyed that course and you know now I've become friends with A as well so you know we meet up in the park now and again so it's nice. "(Erin, p.300, L166)

In sum, the group was seen as a place to get new ideas and advice and reassurance as well as fellowship, camaraderie and fun in a non-judgemental atmosphere.

6.4.2 *Purpose and value of the course: not therapy or a lecture and not a coffee am*

One of the interesting themes that emerged was how important it seemed to participants that this group had a purpose and was not just another women's coffee morning. The heading of this theme reflects the observation made by the researcher that parents were clear what they did NOT want the group to be: i.e. not too informal like a coffee morning, nor too structured like a lecture and they did not want the conversation to become therapy for one person. It had its own purpose and value which was to be a parenting group to learn concrete skills and support one another. One parent put it like this:

> "I guess I feel in some respects I kind of thought at times it could have been like done with being a bit more formal umm….you know

> people kind of asked to kind of give their views and how they dealt with stuff and sometimes it would kind of go off on a tangent and people would kind of you know this is what I do and so and so is doing this now ..so you kind of lost track of where you were so kind of just became like yeah like a bit like you know like coffee, (laughs) coffee time. (June, p.272, L66)

She went on to say she found the exercises very helpful and the handouts useful and didn't like the conversation going off on a tangent or focusing on one needy person which would be like therapy:

> "I guess doing something practical like you know filling out the sheets and doing questionnaires like around you know the whole love languages thing was quite constructive in my opinion and I felt like I could actually take something away and actually get something out of it whereas umm sitting around where everyone was kind of chatting about their own..I don't know it was kind of a bit wishy washy well not wishy washy because it was nice to be able to share the experiences but because some people tend to kind of go off on tangents then you lose track where kind of the lime light gets hogged and you kind of lose track of where you are and what you are actually getting out of it because some people obviously like it's nice to talk about your problems but ..I don't know I guess if it kind of then goes off you lose the track of what you were actually there for in the beginning you know." (June, p.274, L84-88).

She did come back to this point at the end of the interview to say that even with the danger of going off on tangents, she would choose this informal way of learning over a more lecture style course as she learned the most from the group discussions:

> "I guess the more I remember and talk the course I hope it hasn't come across too negatively about the whole informal discussion thing. I think at the time sometimes you know people kind of go off on a tangent you know could..but now that I kind of remember and kind of go over stuff actually that I don't think I would of done it differently actually I think that I would keep the format the same cos as much as some people kind of go off on a tangent you know when it gets kind of brought back to the table it is quite important that you ummm that the discussions do take place and people do feel they're in a safe environment to share." (June, p.285, L236)

Other parents also talked about 'wanting to get something out of it" (e.g. Maria, p.204, L101) and how they were looking forward to spending that time 'just concentrating on parenting, nothing else" (Maria, p.201, L59) or how they had come

to learn specific skills or hear how other parents managed their children but without it turning into therapy for them for them or anyone else. For example:

> "..there was this one (woman) who sort of went on and on about umm her you know her childhood or whatever someone said to her or done, kind of made me feel like 'oh God!'…I think sometimes you just have to talk it out of your system so probably she needed this space and time to do it but I kind of just I was just tired you know, I wanted to just move on with the course" (Maria, p.212, L311-319).

This point seems an important one in that whilst participants are saying that a key component to enjoying the course was the social aspect, they were also saying that it was important the group had a focus which was for them to think about their parenting in an equal way, not as a therapy for one person.

Nor did most parents seem to want the group to be run as a lecture.

> "they never looked at you to say right how about you, it was kind of here's a subject and then you'd find yourself wanting to umm get involved and the parents to as well and it was in a friendly environment so it wasn't like a classroom where you just sit there and listen where it gets boring.." (Hayley, p.253, L62).

This is a delicate balance to strike: for the course to have purpose for learning and yet be relaxed enough to allow people to share and talk openly without it turning into therapy or serve as a lecture. The purpose of doing the course is to gain something for themselves in terms of their parenting. Going off on tangents too much is not viewed as valuable. Helping each other is seen extremely valuable however even at the cost of feeling irritated when one person took too much of the available time:

> "it would have been really unsensitive of us to just sit or just 'hush, let's move on'..I guess that's the good thing about that..very course was that umm people were able to get together coz not many people will go to umm you know go see Psychologists….so maybe you know for them that was yeah for that very person it was definitely needed and she needed to digest it and say it out loud.. and also hear us what we think and we're a great bunch of people if I may say so you know and we didn't sort of abandon her" (Maria, p. 213, L323-335).

6.4.3 *Internal world: self-analysis*

This theme addresses an underlying process that the researcher identified during interviews with the parents. It seems to the researcher that on one level parents are talking to one another and listening and learning from each other but alongside that, an internal dialogue is also taking place where they are analysing their own experiences in light of what they are learning.

Participants described different kinds of self-analysis that took place doing the course. For some, it appears that the process of doing the course triggered memories and thoughts of participants' own experience of being parented and this theme could have been entitled with a different heading that would reflect the focus on that. However, the more generic heading of 'self-analysis' was chosen as it reflects the process, rather than the content of what was taking place as parents reflected on different aspects of their own family lives, experiences of being parented and as they reflected on their current parenting practice.

For example:

> "I had to work through a lot to umm I had to forgive and forget certain things and look at my parents, that they are just human beings and I've actually found on this course that mm you know quite a few cos there was women at this very course they had this umm anger and bitterness towards um how their parents were, how they behaved or how they behave nowadays and we forget, I think we often forget that our parents are, you now they're just the same as us. They're just people and they do mistakes the way we do it and I mean God knows how their parents were towards our parents..you know why it is they behaved the way they behaved so it's a pattern you know and it's up to us and that was that, my thing when I discovered that you know, I can break the cycle okay if my dad was an alcoholic doesn't mean I have to be an alcoholic "(Maria, p.207, L189-193).

Another parent when talking about how she wanted to do the course to get some new ideas to put into practice with her children said:

> "I mean my parents always wanted us to do well umm and it was more in a forced kind of environment I just always thought maybe there's a more fun way of learning and something you know there's other ways of getting your kids to really enjoy and doing other tthings than you know.. learning.." (Hayley, p.252, L54-56).

This parent went on to talk about how she enjoyed the session on building traditions and how that resonated with her own memories of certain traditions:

> "You know you mentioned one about the table and they all sat around the table and it was nice it was kind of you know something like that how would they remember me also would they remember me as our mum used to do this like we think about our parents oh do you remember when we used to this? Mum used to get this ..and we used to sit around and have a big pot of tea and you know it's nice having breakfast together, those kind of things. "(Hayley, p.255, L98).

For others, some beliefs or behaviours that were until now unconscious were becoming conscious during the process of the course.

> "It felt like a reminder for myself cos I've always known that there's certain thing children shouldn't hear but it was a reminder." (Maria, p.202, L67) and "it was a reminder again that it's not really how I can change him its' how I can change myself" (Maria, p.220, L491-493)
>
> "It's just little things that I shouldn't really let her see what I don't think would make an effect and when we're talking about it I'm like 'oh my gosh! I really let her see all of that!' (gasps)" (Bobby, p.238, L192-194)

Some techniques in the course seemed to prompt deeper thought about themselves or their children or spouses:

> "The bit that I like the most was ways of expressing love which I hadn't really thought about umm there was ways of expressing love or feeling loved or something or rather…I think that was the best thing that I think that was the most important things I took away coz yeah..(*researcher prompted what was it about this that was useful*) I guess sometimes you kind of you get sucked into only thinking about you know me or how I feel and it was just interesting to think about it from my son's perspective or even my husband's perspective of you know how well you know they actually receive.." (June, p.273, L76-80)
>
> "It was like it wasn't just the parenting course it was like how to see our identity in as Christian women as well as Christian single women as well as not just being our identity being our child, so it was like its really good, yeah." (Bobby, p.234, L140).
>
> "It's like she acts the way that I want her to act because of the way that I act around her and then it's so someone might have said that and that's what's make me ohhh..ok.." (Bobby, p.241, L236)

Positive reframing of ones own parents mistakes was another form of self analysis:

> "I didn't have a great childhood I mean now when I look back I think I had the best childhood I could have had and I've learned a lesson I probably would not have learned if things were different". (Maria, p.206, L161-163)

A determination to do things differently was also evident for some. The parent quoted above went on to say:

> "but there were certain things that I didn't want to do what my parents did you know so I've always kind of had at the back of my head thinking umm you know that's is so not what I am going to do!" (Maria, p.206, L163-165).

In addition, talking with other parents about their experiences, helped make them feel less down on themselves and increase their confidence:

> "Cos sometimes when you're hearing about someone else their experience or ways of doing it often you can be hard on yourself and go oh I wish I did that and I think if you try and keep an open mind and just realize that you're not perfect and you're going to make mistakes and you know at least you are trying to you know do something about and learn better ways of coping" (June, p.283, L216).

> "I think I should rate myself more (*out of 10 in terms of confidence*) I think now that I'm actually trying I'm not just letting it just swing by." (Bobby, p.243, L278).

> "It did, having the time and the place doing that course and just going through parenting in it, made me umm helped me to refocus and you know look at my parenting, not just being a mother, being a busy mother doing things; it's about looking at how do how well do I do it, do I do well? But looking through umm truthful eyes, not just being bad to myself or you know pretending I'm the greatest" (Maria, p. 221, L515-523).

6.4.4 *Role of a containing environment in enabling intimacy*

A strong theme was picked up about how important the environment was. The heading describes the environment as 'containing' as the use of this word aims to convey the important psychological function played by the setting up of a warm, hospitable environment. That parents are likely to feel this is a psychologically safe place to learn in as well as physically appealing or pleasant. Participants used words like 'family' and 'relaxing' when talking about the provision of nice coffee and food

and a warm atmosphere. These words convey the underlying process of feeling contained psychologically as well as physically.

> "Do you know it was quite nice because there was like a regular 7-10 of us some days and we had a little lunch at the end and it was like a morning cup of tea with a bit of lunch as well so it was like a little family thing" (Erin, p.292, L68).
>
> "And just you know it's nice just sitting there with a coffee and just try yeah it makes it informal and a bit more relaxing" (Hayley, p.258, L138).
>
> "they had the tables all set up with refreshments and umm and then we pretty much chatted and it just felt quite informal and kind of banter like and yeah so it was that was quite nice umm and then you know lunch was provided afterwards and so it was just really nice" (June, p.272, L62)

The fact that the group was small was seen as a positive by most

> "I really enjoyed the small group and I think it would have been harder if it was a large group umm cos in this way yeah we got to know each other umm and kind of as real people not as this you know I can put a face on and be a happy kind of person" (Maria, p.211, L271).

Two parents had commented on the size of the group and manner in which it was run: one to say it could be bigger because it was so good and the other to say it could be more formal and less chatty. However, both of these parents at different points clarified their comments to say that in hindsight they wouldn't have wanted it any other way as the intimacy generated was the best aspect of the course and could not have happened in a more formal or large course.

Having child care provided near to the meeting place was seen as very helpful. Parents felt they can focus on themselves knowing their children were well taken care of:

> "It was a nice setting and you don't feel under pressure to you know just ignore your kids and stuff and you know you kind of felt you were getting something out of it" (June, p.273, L74)
>
> "I just think they were great. (*the leaders*) were fantastic and no they were great and P as well you know helping with the crèche and they were fantastic" (Hayley, p.268, L318).

Sub theme: Specific role of leader within the set up

Participants spoke of how important the role of the leader was in setting up the environment to be warm and welcoming and non-judgemental. Her personal style of being warm and inviting combined with providing coffee and treats contributed to an overall effect of feeling at home and welcomed and a place to look forward to coming to.

> "her general approach to the whole thing I think was really nice and it was you know very welcoming and you kind of wanted to kind of go back and be part of it." (June, p.278, L144)

Participants appreciated that the leader too was a mother and in fact was a single mother and it made if easier to relate to her and discuss their own issues more freely. Her tips and advice from her experience was valued highly.

> "you know Marika was very open about her relationship with her daughter as well and then she talked a lot about her personal life as well and I think that helped us to open up a bit more because she's sharing her personal thing and then it made us feel okay maybe we can talk about our personal thing.." (Erin, p.293, L90)

Her informal style of leading the group was compared favourably to other parent classes that were taught more didactically in a classroom style.

The leader was viewed as having a crucial role of providing a relaxed enough environment to share and talk in but also to move things along and stick to the task of working on parenting:

> "I quite liked you know the way she lead it because umm again she kind of gave it from a been there done that having not done it perfectly and I have a you know an adult child and you know these are my experiences so you know I thought it was good the way she tried to follow the format you know and you know recapped as she went along but also stopped to kind of share her experiences and give people the chance to share their experiences as well and so I thought that was quite good and I think you know she was quite encouraging each time." (June, p.278, L144).

She was seen as key to achieving that balance between free talk and 'work'.

6.4.5 *Usefulness of course materials*

For those that found the course hand-outs useful, it seems they offered a structure to the discussion which was valued and enabled the group to focus on the task at hand rather than just chatting.

> "Maybe it wouldn't have went through as much yeah you would of went there and had a bit of coffee.. a bit of gossip and then come out whereas with the paper (the hand-outs) its' a bit more official as well isn't it and then you're reading it while you're talking about as well so you're following you know the booklet so yeah definitely "(Erin, p.296, L132-134).

The leader was described as introducing an idea from the hand out and then leading a discussion around it. Some parents valued the formality of homework and exercises and many described finding one or other particular technique taught to be very useful which they were able to put into practice outside of the group time and which they described using even several months after the end of the course. Some expressed surprise at how useful certain ideas were in spite of initial scepticism.

The material itself was also valued for its usefulness in prompting self-reflection.

> "I really enjoyed like filling out the questionnaires and you know getting feedback and marking you know yourself on actually this what you know and that were the bits those kind of handouts that force you to kind of think about what you know your personality and how you influence others and you know is this a good way of doing things that you I know I thought that was quite helpful "(June, p.276, L116)

The final session that discusses religion was described as enjoyable and useful as it prompted discussion about values, faith and traditions.

> "even they had ..at the end they had one about religion and you know had the different religions talk and that was really interesting as well you just to see how the different religions similar and you know even that was great" (Hayley, p. 262, L220)

For others, the material itself was not viewed as particularly helpful although they could recognize it might be helpful to some. Other criticisms of it were that the theory was hard to put into practice in the 'heat of the moment' of parenting.

> "I mean I do try and you have in mind what you know the take away message and you know the love languages and stuff but you know when you're in the middle of it and are stressed it's very very difficult to implement you know it's so much easier said than done so I'm still working on it!" (June, p.279, L150)

It also does not appear to be the case that the material on its own was viewed as particularly valuable in its own right ie. outside of the group discussion. Handouts were left at the centre rather than taken home.

6.5 Post course changes

6.5.1 *Moving from unconscious to conscious parenting*

Another theme related to how the process of doing the course: the combination of discussion and learning from the material and the leader, led to an increased awareness of their own parenting; both what was working well and what was not working so well. The researcher named this theme 'moving from unconscious to conscious parenting' as this seemed to be the process parents were describing as they went through the programme and became aware of what they were doing in a way that previously was not conscious. The parent who said prior to the course she had no idea that she contributed in any way to her daughter's good behaviour said after the course:

> "But then like now it's more I'm starting to notice that it's more what I'm doing and how our relationship is that's making her the way that she is like that.."(Bobby, p.229, L66)

She later said:

> "Marika, (the leader) would give us homework and she said to like figure out what your child's love language is and it's really like you actually got there and you try to analyse your child right and then I noticed that she's really on me all the time like she always wants to sit next to me or she always wants to touch me and it's like I would notice it more. Before I would just let her hold my hand on the sofa….but I started to pay attention that she can't sit on her own on the chair or she has to sit right here….and I would sit there laughing cos I'd noticed it now so it was like that it's just it like a lot of stuff just makes you completely aware of what you're doing" (Bobby, p.232, L108)

Whether or not their children noticed changes or even if they didn't necessarily see tangible changes, there was high value placed on becoming aware of what one is already doing.

> "I think I'm more aware about my approach to dealing with my sons and the way I'm doing it whether or not I'm actually doing what I should be doing is another question entirely!" (June, p.279, L150)
>
> "if you're trying to sell it, that should be one of the key selling points: it's just a discussion getting you thinking about how well you know you parent and what works best and yeah I think it's more that really that umm I came out a bit feeling that I learned some bits and I had taken some bits away but more importantly it got me thinking about how I actually parent and that was more useful for me actually" (June, p.284, L228)

It was interesting that this parent said 'if you're trying to sell it' and suggests that she may have perceived the interview as information gathering for a sales pitch to new parents in spite of the researcher explaining that the purpose of the interviews is to learn more about what participants found useful and what was not so helpful and for us to learn more about how to improve the course as a result.

Some parents did describe tangible changes in terms of understanding their child better, seeing their child behave better, having new ideas and resolving to follow through more in terms of discipline.

> "M (her child) would say we don't shout no more because I don't do no more shouting before it was like 'go to sleep or this..' and now I would like I say I changed I do my tone of voice now I change it now there's a high tone and a low tone and then we have more cuddles together and then we do like read books" (Erin, p.298, L154)

Having clearer goals as a parent was also a positive outcome and a decrease in shouting as well. Bobby described people around her noticing that she was not shouting so much anymore and described herself as:

> "not floating along anymore and seeing what happens. I'm more like although that worked, paying attention to what she wants…" (Bobby, p.241, L244)

6.5.2 *More positive outlook*

These theme headings relate to the comments made by parents that seemed to reflect positive changes, relating to their child, their own parenting and also the course.

More positive view of the child:

One of the changes described by parents was their increased empathy, understanding and overall positive regard for their children having completed the course.

> "I think it made me stop yet again…and I feel like really privileged to be umm my son's parent or a parent and he's such a precious little kid, I mean not only because he's my child and you know he's made out of gold obviously but yeah it made me stop and not worry about the day to day things and umm who he's going to be in ten years time…it made me stop and look what I got where I am." (Maria, p.218, L455)

Positive reframes of bad behaviour were more possible and a positive adjustment of expectations.

> "I think I'm understanding her more and again remembering that she is just two and umm it's expected that she has tantrums and stuff although she doesn't have the tantrums anymore which is fantastic but you know it's only if she hasn't had enough sleep which you know I understand her more now I think and observing her more now" (Hayley, p. 266, L284)

More positive view of parenting

In addition to viewing the child more positively, parents rated themselves higher on a scale for confidence and were more able to see what they were doing that was working well rather than feeling negative about their parenting skills.

Hayley went on to say:

> "I think I have become better (laughs) and you know I try, it's so easy to kind of get you know start shouting at them and stuff and then I always feel bad but umm so I try not to do that I try to go to the next room lock myself in the bathroom or something you know for 30 seconds and then go back out" (Hayley, p.266, L286)

A higher appreciation of what they have was expressed and of their ability to be doing as well as they were, considering their circumstances. A notion of 'surviving is to be congratulated' emerged from their comments as well.

> "I also felt like it was okay for myself to give a pat on my shoulder and say' you know what (Maria) well done you! You are still standing here, you've survived whatever you needed to survive." (Maria, p. 218, L457)

Positive view of the course

Some parents did the course twice and all said they would recommend it to a friend. The course was described as helpful and enjoyable and without any downsides by all participants.

> "you'll have a great breakfast, fresh coffee and umm you definitely it's good to have the time and place to look at things in depth I think and there's always room for improvement you know. Even if you don't learn anything you'll definitely make friends so that's good!" (Maria, p. 223, L589-591)

Those that did it twice expressed disappointment that the course used the same material second time round and most parents expressed a desire for the course to continue with new material being added each week.

The purpose of the group was seen as a place to learn and reflect but not necessarily as a place to get all the answers or find instant solutions to problems, to do so would be disappointing:

> "it's probably good to go in with an open mind and not expecting it to fix all your problems. I think there's a danger in going in thinking okay well you know I'm gonna be a wonderful parent and it's you know I'm gonna implement a thing for everything and it's going to work coz you know it doesn't and I think if you in with the impression it's gonna solve all my problems then I think you'd… come out quite disheartened afterwards thinking what a rubbish course that was, it was a complete waste of time. "(June, p.283, L216).

6.5.3 *Value given to single parent status within wider church*

This theme is mentioned here because it is important in the context of this course being part of The Parenting Children Course run Live and as DVD versions but does not really fit or interact with the other themes in that it is not about process. It therefore is not represented on the diagram but still important to mention. This particular version of The Parenting Children Course was run as part of a programme

for single parents at the church. Participants were aware of the purpose of the weekly programme which included other activities as well. Some participants were also aware that another version of the parenting course was run at the main church in the evening by the originators themselves. This was viewed by one participant as being 'the big course' and for catering to those families who had a partner or who could afford childcare.

> "I've always wanted to do the big one (*course*) at HTB with Nicky and Sila but it's more catered for people that can have childcare at seven o'clock in the evening on a week night "(Bobby, p.226, L8-10)

and later referring to why she didn't feel comfortable going to the 'big course' she said:

> "..it's you know they've got a nice typical family and a nice house and you know, everything's perfect" (p.227, L26). She said she thought she might always feel a 'tiny bit special" there (Bobby, p.247, L332)

She did go on to say however that she was happy to go to the course organised by Marika the leader as Marika was a single parent herself and

> "it was really good to have a talk by Marika cos you can see exactly what has happened in her life and she's so open and..I would love my like my relationship with my daughter to be like hers. (Bobby, p.227. L28-30).

She felt a lower value was put on single parents within the church in that they were excluded from attending the 'big course' due to their financial and marital status and that if the church were more inclusive, they would enable them to be able to go instead of re-routing them to the smaller day-time course:

> "I don't think that it would be that much for them to you know maybe get a car to drop people back home or you know arrange like cos there's so many of my friends that come to church would say they all babysit and I'm sure if they done some advertisement that we said we really want single parents to come to church to the parenting course umm would anyone who's CRB'd which is every…so anyone there's like hundreds of volunteers that are CRB'd that can do and would do it, would you be able to do it "(Bobby, p.246, L316-317).

This view was noteworthy as it can provide important feedback to the church and came from a participant who was a volunteer at the church for several other

programmes but it was not widely held in the group. Two other participants felt grateful for the course being in the daytime and being part of the single parent programme. One parent described being delighted to find out there was a daytime course she could attend as 'the logistics are not there' for attending the evening one. "I thought, brilliant, yeah!" (Maria, p.204, L110-112). Having childcare on site and within view of the group was cited as the main reason for choosing to attend this course and feeling that it was tailored to their needs unlike the bigger evening course:

> 'You know, having the kids there with you when they could have fun and you kind of felt like okay now I can they're there, I can relax but I can still see what's going on" (June, p.286, L262)
>
> "It was great that they had a crèche and it was also nice for me to kind of just let them play. You could see them play and you knew they were in good hands and you could get on and just umm enjoy your bit of time you know for coffee and just it was like being amongst friends almost" (Hayley, p. 253, L64)

A discussion of these findings will follow in the ensuing chapter.

Chapter 7

Discussion of Qualitative Findings

7.1 Implications of the findings in relation to the research questions

The research questions for this part of the research were about:

1. Gaining a deeper understanding of the experience of participating in a parenting course and possible social and psychological processes associated with this;
2. Understanding if taking part in this small group version of the course was experienced by parents to be helpful to them in their parenting and in improving their relationships within their family.

In relation to the first question, the findings described above offer a fairly detailed picture of how parents experienced the course and the model suggested offers a framework around what possible social and psychological processes might be associated with this. However, given the small size of the study, the findings are limited in their scope in terms of drawing large scale conclusions for all parents doing such courses elsewhere.

Nonetheless, some insight is gained from these interviews into the processes at work that we can learn from. In summary, the findings suggest that when the parents signed up to do such a course, they may have already had a view of themselves as learners and that the course could help them improve in some way. Their ability to self analyse or not also had a bearing on what they got from doing the course. The containing environment created by a skilled leader of the provision of child care, nice food, regular meeting time, allowed for the participants to relax and open up and benefit from the collected wisdom of the group to which they were actively contributing and benefitting from the positive feedback they received from others. Learning from others' negative examples or from negative feedback also took place.

The input of the Leader's own experiences and the formal learning material offered a structure to the discussions and kept the group to task which parents appreciated.

Post course changes included increased insight into the process of parenting, as well as increased empathy for their child and increased confidence in their parenting. Overall improvements in their relationship with their child were also noted.

These changes address the second research question. All five of the participants reported that the group was incredibly helpful and four out of the five said they wished to do it a second time. One of those four in fact went on to do it again. All reported that they would recommend it to a friend. There were no negative comments made or criticisms of the course other than one person saying they didn't like it when another parent 'hogged' the group time with her problems. No one had any suggestions to make for improving the course or changing any aspect of it. One additional consequence not discussed above is that for three out of five of the women, friendships were made in the group which then continued after it ended. In all cases, ratings on a scale for confidence in ones' abilities as a parent increased by at least three points.

7.2 Implications of the findings in relation to the literature

As discussed in the Introduction chapter, at the time of writing, there are still relatively few rigorously evaluated qualitative studies. However, there is considerable overlap between these findings and those of previous studies and the following section will highlight those themes that do resonate with existing literature.

7.2.1 *Social Value: learning and fellowship*

This discovery of this theme replicates previous findings from previous research; Smith (2000), from a study of family centres in the UK showed that disadvantaged parents had a preference for having 'other adults to talk to' over and above the availability of expert advice (Smith, 2000). Furlong & McGilloway, (2011) also found similar themes mentioned in their trawl of qualitative research of parents' experiences of the *IYP* including: new found parental confidence obtained through group support (Morch et al., 2004); the acquisition of new parenting skills, (Patterson, Mockford & Stewart-Brown, 2005) and the use of group process to

reflect on the experience of being parented in order to develop empathy for the child (Levac, McCay, & Merka & Redoon-D'Arcy, 2008).

Byrne et al (2010) used qualitative methods for their pilot study on the impact of a home based parenting intervention: Parents Plus and similar to the current study, found that 97% of parents who were interviewed following the intervention had found it helpful and that the course offered parents a valuable source of support, in terms of confidence boosting, providing reassurance and encouraging reflections on their roles within the family unit. As in the current study, this study found that the parenting course provided mothers with contact that widened their social network and increased social cohesion.

An additional insight gained from the present study is that actually achieving the optimal tone for the group is quite complex: needing a balance to be struck between having informal talking time, that is not a lecture, and yet keeping to task and 'learning something'. This is a fine tuning on previous findings that relate to the importance of the group as a vehicle for bringing about change.

7.2.2 *Post course changes: more positive view of parenting and of their child*

One of the post-course themes was 'more positive outlook' which included 'more positive view of parenting' and 'more positive view of the child'. Parents described feeling much more confident as a parent and appreciating their own efforts much more as a parent. They described how this led to better management of their children and better relationship with them. Similarly, Patterson, Mockford and Stewart-Brown (2005) in their qualitative study of parents perceptions of the value of the Webster-Stratton Parenting Programme in a general practice found, as the present study did, that following the course, parents reported increased confidence, better relationships with their children, successful use of new behaviour management techniques and improvements in their children's behaviour.

Kane et al. (2007) carried out a systematic review and synthesis of the qualitative research relating to parenting programmes and also found that studies showed that prior to taking part in a parenting programme, many parents experienced feelings of powerlessness and felt that they had inadequate knowledge in relation to their children's behaviour. They found, as did the current study, that programmes helped

in the acquisition of knowledge, skills and understanding. They were able to feel more in control with the aid of the support and acceptance from other parents which relates to the previous theme discussed above. This led to a reduction in feelings of guilt and social isolation, increased empathy with their children and confidence in dealing with their behaviour. These findings are very similar to those presented here.

The current study however did not find a theme relating to reduction in guilt and isolation, but more that having the group support enabled them to analyse their own responses more and be more aware of the reasons behind some of their own parenting behaviour. That process also seems to lead to increased empathy for their children and confidence in dealing with their behaviour, but a slightly different process was identified to bring those positive changes about.

Byrne et al.(2010) also found as in the current study and in previous literature, that from an increased sense of self–esteem and parental competence, coupled with the tips and techniques gained from following the programme, grew the confidence to stand up to their children. This process was characterised by an increase in parenting self-efficacy or the perception of one's own parenting ability, which contributes to parental satisfaction (Bandura, 1977).

Similar to other qualitative research (e.g Patterson et al., 2005), Furlong & McGilloway, (2011) found that parents also emphasised increased personal confidence as being important in removing guilt and isolation and instilling self-efficacy beliefs – factors that are likely to be important in maintaining positive outcomes over time (Hutchings, Lane & Kelly, 2004).

In the current study two important post course changes were an increase in feelings of empathy and an increased ability to identify with their children that came from the often painful process of looking at their own experience of being parented and gaining increased understanding of why they parented they way they did. Benzies, Harrison and Magill-Evans (2004) also found in their study of parents' views on their children's problem behaviours, that experiences in the family of origin, particularly abuse, may relate to later parenting.

The authors suggest that given that parental empathy and understanding improved alongside managing their children more effectively, there is evidence to suggest that

courses that combine behavioural and feelings-based strategies will be more effective than those that are behaviourally based alone.

Reflecting on childhood experiences of being parented may be important for some parents in overcoming cultural and personal barriers to implementing play and praise skills. (Furlong & McGilloway, 2011).

In sum, the post course changes described in the current study of increased parental confidence and empathy are echoed in the literature and the process by which such changes come about can be understood in a number of ways as discussed above. Group support, increased awareness, a reduction in guilt and isolation and the ability to reflect on one's own experiences all appear to be key mechanisms of change both in this study and in previous studies reported in the literature.

7.2.3 *View of self to be improved and intentionality*

This study also highlights an important point described in some detail by Miller and Sambell (2003) regarding parents' intentionality before starting the course and the theme in this study described as *View of self to be improved* and its sub theme *Intentionality behind doing the course.*

Miller and Sambell (2003) were interested in how parents viewed the various parenting support they received, what their intentions were and how this reflected their individual beliefs, attitudes and assumptions.

They claim that 'The importance of these conceptions of learning relates to the intention of the learners, who set out either to recall the information and apply it as a 'solution' or 'answer', or to understand the ideas, thus putting themselves in the position of being able to apply the ideas in other contexts and relate them to the real world… It is important to identify and illuminate parents' conceptions of learning within the phenomenon of parenting education in order to fully understand the processes involved and the potential impact of programmes." (Miller & Sambell, 2003; p. 33). The authors suggest parents can have three distinct views of parenting support and learning which provide an interesting framework within which to view current findings relating to the theme of viewing themselves as able to learn.

For some of the parents (e.g. Hayley), the prime motivation for seeking support was to find how to deal with the child, i.e. their learning outcome was determined by what Miller & Sambell (2003) refer to as the *dispensing model:* others have information which the parents rely on them to give. Having said that, those same parents also noted with some surprise as well as pride that it felt good to be helpful to others in the group in terms of offering advice that was gratefully received. The *reflecting model* views parenting support as helping the development of the parent. The extent to which parents were able to reflect on their own experiences of being parented and examine how this related to the way they parented their child impacted how helpful some of them found the course to be. In addition, parents were able to come to new understandings about how their role in the relationship with their child impacted their child's behaviour and vice versa which fits with the *relating model:* Effective parenting education develops in the parent an understanding of the interactional nature of the parent–child relationship and the reasons that might underpin this.

This framework offers a useful structure to understand the processes underpinning the success of such parenting interventions. As in this study, each parent may be motivated differently and find the course helpful for different reasons. Miller & Sambell's, (2003) study also expands on the process of how the group is helpful to the participants and how important it is that the meetings are not purely social in nature but have some structure and a goal for learning. As discussed in the previous chapter, having the group be welcoming and informal but at the same time structured enough to be useful, was a theme that emerged clearly from the current study.

7.2.4 *Role of a containing environment in enabling intimacy*

This theme relates to the importance of creating a warm, safe, inviting space for parents to meet in. The importance of the environment is also mentioned by others (Benzies et al., 2004) but the findings from the present study go further in terms of suggesting that the role of the setting is crucial in enabling the other processes of reflection, group learning and understanding of the material being presented to take place.

Similarly, Koerting, Smith, Knowles, Latter….& Sonuga-Barke, (2013) in their review of published qualitative evidence relating to factors that block or facilitate access and engagement of parents with such programmes found situational factors to be important (e.g. transport and childcare problems), alongside psychological factors (fear, stigma and distrust), and issues with poor interagency collaboration. They claim programme leaders need to be skilled, able to adopt a non-judgemental, empathetic and empowering approach to foster good relationships with vulnerable parents. The fact that the groups in this study took place in a familiar community setting for the parents, rather than in a clinic and that extra effort was made to make parents feel welcome and comfortable, seems to be a key factor in the success of the intervention and the retention of the parents to the programme. As discussed in this study, this review would suggest that in order for the important psychological processes to take place, facilitators need to ensure situational factors are carefully thought through as well in terms of making the courses accessible to parents and inviting and welcoming to create an environment of safety and warmth.

7.3 Implications of the findings in relation to application in the field

The findings from this study have implications for the field of parenting interventions. Many of the themes echo those found in existing literature thereby boosting confidence in the findings. In addition, this piece of work sheds light on some interesting areas: the role of the leader is shown to be crucial in achieving a balance between creating on the one hand a warm and inviting atmosphere that facilitates sharing and conversation that is not too formal or resembles a lecture and on the other, a place for learning to take place so that the meeting does not become just another social coffee morning. Understanding clearly this role is very helpful for those planning parenting interventions. The role of the environment is also made clearer in this study, showing how important it is to prepare a setting to welcome people and invite them to participate. The addition of nice food and coffee, a pleasant table and some flowers is not expensive and can make a big difference to how willing people are to join such a group.

For clinical purposes, assessing people's beliefs about the possibility for change and improvement may be an important step before assigning people to parenting courses, Miller and Sambell's (2003).

The findings from this study relating to beliefs about the Self to be improved upon, and Self Analysis add weight to Miller and Sambell's (2003) assertions that identifying these beliefs and intentions are important in terms of matching programmes to participants. This study does offer some preliminary evidence that providing both an opportunity to learn formally as well as to share informally is valued by parents. In addition, the finding that participants found increasing their awareness of their parenting style to be useful is not new to the literature but is noteworthy for practitioners as being a positive result in and of itself even if outwardly no real changes are visible. For parents, understanding themselves and their children better had a positive knock on effect to feeling better about their parenting and family life even if they didn't change anything in concrete terms. That process is seen to be beneficial in and of itself.

Finding that the course allows for feelings to be expressed and emotions discussed as well as practical tips and techniques offers support to Miller and Sambell's (2003) suggestion that courses that offer both will be more effective than those that offer one or other.

In addition, that this course seems to be helpful to parents in an inner-city setting could be of interest to commissioners of services for families as it is easily replicable in settings where community services are offered to families such as Sure Start settings, GP practices, community centres, schools and churches. Leaders need to be experienced in running groups but not necessarily experts in mental health. The material from the course is not difficult to teach and is non threatening and non judgemental in nature. Bringing together potentially isolated parents in deprived areas can have an added benefit of fostering community and friendship and impacting parents on a number of levels. There is a potential advantage to the course being run by community workers rather than clinicians in that it is less expensive therefore to run, can be run with even two or three parents at any one time, and lends itself to the model of the leader sharing alongside the participants more than a clinician would typically do.

7.4 Validity, reliability and limitations of the study

Qualitative methods are usually undertaken, as in this case, with small, unrepresentative samples which means that the external validity of the data is not usually as good as that of quantitative data. However, the richer collection of data that qualitative studies such as this one allows for, means that the internal validity of the data is on the whole, better than that of quantitative data (Braun & Clarke, 2013).

It has been suggested that validity of qualitative findings rests on the trustworthiness of the data that can be assessed using the following criteria: credibility, transferability, dependability and confirmability (Guba & Lincoln, 1989, Braun & Clarke, 2013).

Credibility of the data refers to the extent to which it is possible to have confidence in the truth of the finding. The participants in this study were drawn from a group of parents who attended the parenting group. The researcher went about the collection and analysis of data in a rigorous and ethical manner. Interviewees were not coerced, consent was elicited, effort was made to provide a warm, welcoming atmosphere for the interview to take place in and all interviews were recorded and accurately transcribed.

Possible areas of weakness in the study are the small number of parents interviewed (n=5) and the fact that they were self-selected. It is possible that given that all participants volunteered to be interviewed that they were likely to be the ones that found the course helpful and were eager to give their feedback. In addition only those participants who could speak English and were thought to be competent at thinking and answering questions about the process of the course were approached. This means we do not know how participants who are not as expressive or fluent in English found the course.

Having said that, of the three groups represented by the interviewees, only one parent was non-fluent in English and therefore the selection of participants that were interviewed can be said to be credible representatives of the parents who attended the groups.

Transferability refers to the extent to which the results are 'context bound' (i.e. whether they adequately represent a particular cultural or social group). The parents in this study were drawn from a mixture of social, religious and ethnic backgrounds but in fact a white, British participant was not represented. Further research will be needed in order to assess if white, British parents might have a different set of responses to those from ethnic minorities. In addition, all the interviewees were mothers so it seems likely that further research will be needed to establish the views of fathers who take part in parenting programmes and ideally talking to children whose parents attended the courses to see if they can identify positive changes would also be very valuable and not carried out yet.

The fact that participants who were interviewed came from different courses and finished at different times may also have had a bearing on the findings. To get a more consistent snapshot it might be better to interview ALL parents from one course rather than parents from different courses that might self select in the way discussed above. Four out of the five participants spoke of valuing learning and improving and therefore chose to do the course as they believed it would be useful. What we cannot do is generalise this finding to all parents as we do not know if parents who are sent on such courses by the courts for example and do not approach the course with such a positive expectation would find the course as helpful as those that do.

An important gap in this study is that no fathers were interviewed or indeed attended the course. This gap in our knowledge of what works for fathers in parent education has been documented by others (Miller & Sambell, 2003). At this point it simply isn't possible to say whether the current findings generalise to fathers.

Dependability refers to the extent to which the coding of the data was undertaken reliably, and confirmability refers to the extent to which it is possible to conduct a formal audit of the study procedures. In terms of analysis, careful attention was paid to follow the protocol for thematic analysis outline by Braun and Clarke (2006) and to elicit themes that were genuine, not merely answers to questions asked.

Categories of coding and initial themes were discussed and reviewed with the primary supervisor and the themes described in the study echoed those in the published literature as discussed in the section above.

Although, no formal assessment by an independent reviewer was undertaken of the dependability and confirmability of the data obtained in this study, the data are consistent with the findings of other studies (Barlow & Stewart-Brown, 2001) and add to it with additional themes and the offering of an overall thematic framework for understanding the relationship between themes and therefore the processes at work to better answer the research questions.

On the basis that the data is likely to be trustworthy and that the results reflect those of other researchers, these findings are likely to be valid and generalisable.

7.5 Suggestions for future research

In spite of an increased focus on parenting interventions by the government and mental health services in recent years, (Every Child Matters, 2004; Choosing Health, 2004) and numerous literature reviews and a growing research tradition of impact evaluation, there is still a sense that that we have more to learn about what it is that makes parenting interventions meaningful or helpful (Moran et al., 2004). Qualitative studies are beginning to find their place in helping answer those questions alongside the larger quantitative studies (Barlow & Stewart-Brown, 2001; Dixon-Woods & Fitzpatrick, 2001) but Kane et al., (2007) were only able to find four qualitative studies evaluating parenting interventions that met their minimum quality standards for studies to be included (Barlow & Stewart-Brown, 2001; Spitzer, Webster- Stratton & Hollinsworth, 1991; Kilgour & Fleming, 2000; Stewart-Brown, Patterson, Mockford, Barlow, Klimes & Pyper, 2004). It is clear that more high quality, qualitative studies are needed to fill in the gaps left by quantitative studies to help us understand in more detail what works in parenting and for whom (Kane et al., 2007).

This study does contribute to deepening our understanding of what contributes to the effectiveness of parenting groups however given the small number of participants, it is limited in its scope.

There is still plenty to learn to further drill down into how the psychological processes described here impact family life and even more detailed, deeper interviews with parents would be welcomed. For example, it would be interesting to know more about those parents who don't come to a course with an expectation that they can improve (perhaps because they believe change is located purely within the child or God) in terms of whether this is a crucial mindset or whether simply being with other adults in conversation would be enough to bring about beneficial change.

In terms of furthering the use of this particular parenting course, it would be useful for it to be replicated in a variety of settings around the country. The groups did take place in a community setting but were known to be run by the church. Therefore, it remains to be seen if a secular facilitator could lead the course in a secular setting or indeed if the fact that the group is offered by the church is an essential part of breaking down the barriers to engagement as discussed previously. In addition, this study has shown the course to be helpful to parents of many ethnic backgrounds but would benefit from being repeated with other minority as well as majority ethnic groups.

This study only interviewed mothers and as has been said before the voices of fathers are still very much unheard. Mockford and Barlow (2004) say; 'further effort to involve fathers in parenting programmes is required if there is to be a shift in family ideology and if the government's vision of increased parental involvement in the raising of their children is to be realised." (Mockford & Barlow, 2004; p. 225)

Thematic analysis does seem to be an excellent method of choice for such studies, alongside other methods such as grounded theory which can build on the framework of how themes fit together as described here.

7.6 Research reflections

Reflecting on the process of carrying out a piece of qualitative research is part of executing good methodology (Willig, 2008).

As I mentioned in the Preface, what was particularly impactful, when I helped lead this course prior to starting the research, was the environment that the leader created: one of warmth and welcome and of invitation to share. Sitting around a kitchen table talking and learning with other mothers was a very powerful experience and the

impact of the environment and leadership style on the quality of the discussion and the seeming outcome for parents was noticeable.

Carrying out the research by interviewing mothers who had done this same course, was exciting as it gave me a window into understanding at a deeper level why this format seemed to work so well. I found that I replicated the model the leader had shown in the group by ensuring my interviews were relaxed and took place in nice settings and that I prefaced and ended each interview with pleasant, humorous conversation.

I found I was impressed with each participant's willingness to be open and vulnerable with regards to their fears and concerns as parents and was particularly interested, as a clinician, in the process of self analysis that went on: how doing a course that focused on helping one's children, triggered reflections and memories from childhood sometimes for the first time and had a positive effect on their relationships with their own children.

In terms of the analysis and write up, I found I very much enjoyed the process of discovering the themes and thinking about how they fit together. I strayed slightly into the terrain of Grounded Theory by looking at what the relationships might be between themes. Thematic Analysis does suggest diagrammatically representing the themes but the models are somewhat simpler and don't suggest causal relationships between the themes in the way that a Grounded Theory model might. It begs the question whether Thematic Analysis goes far enough in answering my research question about what psychological processes are at work and it seems to me that I found I had to go slightly beyond its scope to connect the dots and make more meaning out of my data.

7.7 Concluding remarks

To conclude, this is a small piece of work that adds its voice to the qualitative literature so far and attempts to answer the question posed about what we can learn about the psychological processes at play when parents take part in a parenting course as well as whether this particular course is found to be helpful for parents. This study offers a model to describe the processes at work namely: that each parent brings with them their own beliefs about their ability to learn and improve as well as their own experiences from the past and through sharing with others in a warm,

accepting environment coupled with learning specific parenting techniques, they can benefit significantly in terms of feeling more confident in their parenting, feeling that they are achieving a better relationship with their child, becoming more aware of their own parenting and feeling their child's behaviour has improved.

No parent interviewed found the course unhelpful and the findings show once again that parenting courses such as these can benefit parents in a short space of time and the beneficial effects are still present some weeks or months later. Future research is needed to extend the results to larger numbers of participants and perhaps to drill down deeper into the psychological processes at work such as the impact of parents' beliefs about change and improvement and the extent to which their own past impacts on their ability to change.

In terms of answering the second research question about whether this particular course is found to be helpful to parents, it seems very clear that parents appreciate it for its attempt to meet the need of single or isolated parents, for its warm, informal setting and non judgemental leadership, for its opportunity to share with other parents and to learn some useful techniques. All parents felt they learned something that was useful and that it illuminated what they are already doing, both right and wrong and that that process was useful in and of itself. One key advantage of this course is that it can be used with even very small numbers of parents as part of what makes it effective is its intimate setting. This way smaller groups can be run without having to wait for a significant mass of parents to make the course cost effective to run.

What we do not know is whether there is objective improvement in their family life or children's behaviour as no measures were taken. We also do not hear the voices of any fathers that are active in their children' s upbringing in one way or another as they were not interviewed and did not attend the course.

Future research will need to attend to these gaps by interviewing fathers and perhaps the children too to complete the picture which for now adds to the growing one we have of how primarily mothers experience these groups. Running this particular parenting course in clinical settings as well as multiple community settings would be helpful in terms of understanding if this is a model that can be replicated outside of a church context.

Chapter 8

Linking Qualitative and Quantitative findings: a final Discussion and Conclusion

8.1 Introduction

This study set out to evaluate the effectiveness of the Parenting Children Course in all three of its formats: Live, DVD and the inner city version of the course. The latter course was evaluated using qualitative methodology and its method, findings and discussion are reported in Chapters 5-7. The Live and DVD courses were evaluated using quantitative methods and their findings and related discussion are reported in Chapters 2-4.

Going back to the research questions outlined at the end of the Introduction, Chapter 1, the researcher was interested not only in evaluating the effectiveness of the course in each of its formats but also in seeing if using qualitative methods of semi-structured interviewing and subsequent thematic analysis might reveal something of the underlying group process factors for parents signing up for such a course. Chapter 7 discusses the findings in relation to the inner city version of the course, and this Chapter will discuss whether those findings might apply to some aspects of the other two formats as well, thus bringing together the qualitative and quantitative aspects of the study before drawing the study to a close.

8.2 Summary of findings across whole study

Both the qualitative and the quantitative studies reported in this research found that parents improved in their confidence and self-efficacy, decreased their use of negative parenting techniques, reported better behaviour from their children and better general family functioning. In addition, the qualitative analysis revealed that the environment provided by the leader and the qualities of the leader herself were significant to their enjoyment of and learning from the course as was the experience of learning in a group with other people. The quantitative study looked at one aspect

related to leadership which was whether having different leaders affected outcome and found that it did not. Other elements such as parents viewing themselves as being able to change and increasing their understanding of themselves and their children were also revealed in the qualitative study but not looked at in the quantitative study. The quantitative study found that the DVD version of the course was as effective as the Live for the outcome measures used, with the exception of the general family functioning measure and that length of the course did not affect change where it occurred. These factors were not addressed by the qualitative study. Below is a discussion of some of the overlap between the findings from the two studies. What is clear is that this study revealed both important process factors as well as important environmental factors but only tentative links can be made to connect the two.

8.3 Group process factors

8.3.1 *Parental confidence and self-efficacy*

Some clear similarities in findings include the positive impact of participating in a parenting course on parental confidence. Large effects were found on measures of parental efficacy and confidence in the quantitative analysis and likewise, a theme revealed in the qualitative analysis was that parents reported increased confidence in their parenting skills which in turn led to their children responding better to them.

The qualitative findings extend the quantitative findings in terms of showing how parental self-efficacy might be an important influence on child behaviour outcome as parents reported a direct link between the two. The quantitative analysis showed that both child behaviour and parental self-efficacy improved but was not able to establish causal links.

8.3.2 *Role of the leader*

The role of the leader was revealed to be crucial to the success of the intervention in the qualitative analysis. The leader plays a key part in terms of providing the right atmosphere, time keeping, moving discussion on and being warm and empathic. Facilitator effect was examined in the quantitative analysis and no significant differences were found between the leaders where change was reported, which could

mean a number of things: It may be that in the Live and DVD setting, the small group facilitator had that role rather than the main leader of the course who was teaching from the front (or on the DVD). It is also likely that the role of even the small group leader facilitating the discussion on the Live and DVD group, was relatively small compared to the role of the leader in the inner city setting. In the former, the leader's role is simply to ask the questions listed in the manual as well as time keep and serve coffee. The teaching component is held by the main leader up at the front. In the latter group, the leader holds the group in every way: practical, emotional and is the main teacher of the material as well. This is perhaps the biggest difference between that format and either of the other two.

It is difficult therefore to draw many conclusions about the role of the small group leader in the process of running the DVD and Live group as the role is quite different. Scott (2008) suggests that the facilitator does indeed play a significant role in contributing to the success of an intervention, a suggestion that is supported very much by the qualitative analysis but less emphasised in the quantitative study. Fidelity to the manual quite possibly accounts for the lack of differences found between different leaders in the quantitative study, which highlights another important factor for courses run more formally, which is fidelity. This element is still important in the informal, discussion based, inner city version of the course as, although facilitators are likely to add much more of their own personalities and views to the group than facilitators of the DVD or Live courses can, the core material they are facilitating is kept as close to the original curriculum as possible.

8.3.3 *Social support*

Likewise, a key process component revealed by the qualitative analysis was the support and connection between parents. This was a crucial element in the success of the group and supported by the literature (Barlow & Stewart-Brown, 2001). In the DVD and Live courses, the discussion time forms only a small part of the process where the bulk of the time is taken up by a talk given by the main leaders punctuated by video clips from parents and experts illustrating a point made in the teaching. It is therefore not clear if the positive outcomes found in the evaluation of these formats were as much related to support from other parents, as clearly found in the qualitative analysis, as much as learning from the material itself. There was not a

strong emphasis on the role the material played for the parents in the inner city group. They said it was important to be learning rather than having a coffee morning, but it was not emphasised in the way the group support or the role of the leader was.

8.3.4 *Environmental factors*

As discussed in some detail in the previous chapter, the qualitative study revealed how the setting of the group in terms of it being welcoming and non-judgemental and not too formal was important for enabling parents to benefit from the group. The parents on the Live and DVD versions of the course are also seated in small groups with attractive food and table settings although the method of delivery of the course is more formal and distant. We do not have reports from those parents directly but can assume from how important it was for the inner city parents, that setting is essential to get right for any parenting course in order for parents to feel relaxed and accepted. Other studies have also supported this view of the importance of the environment as discussed in previous chapters (e.g. Benzies et al., 2004).

8.3.5 *Demographic factors*

The demographics of the formats were very different: the DVD and Live courses were made up of predominantly Caucasian parents whereas there were no white parents represented in the qualitative study of the inner city course. In addition, only one Christian parent was interviewed for the qualitative analysis, whereas the majority of parents in the quantitative study were Christians. Whilst it was not possible to collect data regarding SES, it is possible to assume that the demographics of SES were quite different certainly between the Live and the inner city course. The latter course was solely attended by mothers from an estate local to the church, living in a very disadvantaged area and mostly parenting alone. The Live course parents attended the main church in Knightsbridge and attended primarily as couples. A limitation of each is their limited demographic representation. One could argue that the two studies complement each other, showing that both ethnic minorities as well as white majority groups benefit from doing the course in some format and likewise that non Christians as well as Christians found it helpful.

Given that the groups participated in different formats, direct conclusions about the suitability of one format for the other demographic sample should be avoided. As

discussed in previous chapters, it is important that the study be replicated with a wider demographic sample for all formats to properly evaluate their effectiveness in reaching all demographic and cultural groups. However, one might also conclude that one reason the demographics may be so distinct is that the different formats cater to different communities of people. Some preference was expressed for the inner city version of the course as they preferred this style of delivery to the 'main course' and said that they did not feel comfortable in that setting. One benefit therefore of the different formats is that leaders can choose which format fits best for their community rather than trying to find one size to fit all.

8.4 Future research

Taken as whole, this study is amongst very few studies that used mixed methodology in an attempt to provide a comprehensive evaluation of a parenting course that is offered in three formats. The evaluation of the DVD format and the evaluation of the small inner city version are of particular value to the field as to date there have been very few studies of such formats.

Scott (2008) asserts that in addition to adding to the field of evaluating parenting programmes, researchers need to be exploring the 'why' underlying their success. Therefore it would be a useful next step with regards to this study, to build on its findings and further explore what mediates its success in all its formats.

A future study could add interviews of the parents on the Live and DVD courses in addition to interviewing those on the inner city course in order to understand if there are different processes at work in those formats or whether there are universal factors that impact outcome across all formats. For example does the material itself play a larger role for the more formal learning environments than it does in the informal context where group connection seems to be a very important element?

In addition, the researcher supports Miller & Sambell's (2003) assertion that we need to answer the questions: 'What are those of us who are seeking to support parents hoping to achieve? Do we want parents to develop as independent reflective practitioners able to find their own understandings of their parenting situations? Are there benefits to be gained from equipping parents to understand the why of their parenting situations? Do we know why parents are coming for parenting support? Is

the support we are offering a suitable fit for their needs? Are we successfully meeting needs for factual information, but not giving sufficient attention to reflection? What are the conditions necessary to develop reflective responses? Are we delivering parenting education in a context which allows for the development of trust and confidence…?. '(Miller & Sambell, 2003; p.42).

Answering these questions will help research and practice in this field to be more effective and potentially increase attendance and engagement of even hard to reach parents.

8.5 Impact and dissemination

These findings have exceeded expectation from the literature in terms of the quantitative findings of large effects on several of the outcome variables for a universal course run in a faith based, voluntary sector context as well as in terms of the qualitative findings showing marked change in parents taking part in an inner city version of the programme.

The course meets the NICE guidelines for parenting interventions (NICE, 2006; 2013) and all three key elements determined by NAPP: eligibility, fidelity and intensity can be identified. The course is very much grounded in a church context and has included parents from the wider community as well as from its own congregation thereby providing an alternative setting for parents to explore parenting skills without the stigma of being in a mental health service.

Having the three formats: DVD and Live and the inner city version means that church leaders, or other community service providers, have options to choose from in terms of what might work best for their congregation and community. The DVD course does not require any prior training and so offers greater flexibility to lay people in the congregations to run courses from their homes for small groups or large groups in the main church or indeed for service providers in other community settings. The Live course comes with a full leaders pack which, if adhered to, is found to be as effective as if carried out by the developers of the course. The finding that running the course as five or as ten weeks appears not to significantly affect outcome also adds a greater degree of flexibility for course providers. Having the inner city version means that leaders can run courses for parents that are harder to

reach or who would not attend a programme in a church but rather attend at their local community centre.

Finally, The Parenting Children Course originates from Holy Trinity Brompton, a large, vibrant Anglican church in London. This church not only runs the Live course three times a year but has 'planted' churches in a number of different settings all over the UK which run the course both Live and using the DVD's. The community outreach of this church is probably the widest of any church in the UK at present. Having an evaluation that reaches at least the minimum standards of excellence, that shows the course is effective in all three formats will add even more credibility to it and it is likely that charities and community services local to HTB or one of its plants, will be interested in running it. In fact, this is already beginning to happen, (see Appendix A21). This will mean that the voluntary sector will be meeting more of the community's needs than before which in turn will ease pressure on government funded services and more parents' needs will be met.

8.6 Conclusion and final reflections

The aim of this study was to provide a rigorous evaluation of a voluntary, faith based, universal parenting intervention. The previous chapters have documented the design, methodology, findings and discussion of those findings for both the quantitative part of the study as well as the qualitative. Looking at the study as a whole, it seems to have met its main objective of offering this previously unevaluated, yet frequently attended, course some sense of its effectiveness in bringing about real change for parents attending it. The methodology for the quantitative part was appropriate and yielded excellent results for pre and post results although, as discussed earlier, its follow up numbers were too small and therefore must be treated with caution. Whilst it did attempt to analyse whether the leader of the programme had an impact on change or whether the length of the DVD programme did, overall it is unable to say more about what are the active ingredients at work in bringing about the significant changes in parenting skills, child behaviour, parental confidence and overall family functioning. Embedding routine outcome monitoring into the programme and therefore having access to that data would have also shed much more light on what parents were finding helpful and why.

It therefore stops short of answering the current questions in the field, namely *why* does the programme work and also for *whom*. In a follow up study, having much better demographics would be essential as the study was very limited in its ability to present data on who the participants were. Without a clear picture of who is attending this programme, it is hard to generalise beyond these findings to the wider population and makes it hard to respond to Miller & Sambell's (2003) exhortion to match parents to the right programme for them. However, it was surprising to learn that a third of parents reported significant problems with their child and over a third of them improved by the end of the course, although not necessarily to within non clinical levels. More analysis into the relationships between the different variables would be well worth considering in the future in order to help untangle the mystery of why these interventions work, how and for whom as Scott (2008) urges us to do.

However, what this study *does* do is provide proof of concept that the Live and DVD progamme has some validity and were there an interest in doing so, would be worth considering for a larger or more in depth study, as these preliminary results are very encouraging, especially for a universal programme in the voluntary sector.

Having the qualitative part of the study was very useful in terms of getting a glimpse of what are the underlying processes at work in small groups like the inner city version of this programme. There was a rather naïve hope at the start of the study that exploration and analysis of the data gleaned from the five participants of the small group might yield valuable insight into the processes at work in the larger groups of Live and DVD participants, in order to again address how these programmes work. However, it became obvious that the processes involved in the inner city group cannot be generalised across to speak for those of the other groups. Firstly, the format of that group is so different as to make comparisons impossible, and also we have only the five voices of the inner city parents and nothing to compare them to in the other groups as no routine outcome monitoring data was collected and no interviews carried out with those parents. It would be very interesting indeed to interview many more parents from all versions of the course and see if there are common themes or if the format and style of each version makes a significant difference.

So, in conclusion, the researcher believes this study has managed to achieve its primary aim: to offer The Parenting Children Course some external validation and to that end, these initial findings will be very useful to the programme developers as their programme can now be considered to have had some external validation that previously it lacked. It can also add its voice, albeit small, to the literature on parenting interventions in the community, in particular those in the voluntary sector. It cannot compete with the larger, better funded studies that have control groups and much larger numbers with longer follow up periods, but nevertheless, in spite of its limitations, it still reaches a good recognised standard by evaluating bodies such as NAPP. Its qualitative findings resonate very much with current literature and although many more parents would need to be interviewed to further generalise the findings, they provide us and the programme developers with helpful insight into what parents find helpful about such interventions.

It is the researcher's hope that future studies will continue to build on these findings and that more voluntary based parenting programmes will be evaluated to provide evidence based community services to parents all over the UK.

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PART B:
CRITICAL LITERATURE REVIEW

What is the impact of Social Media (SM) use on adolescents' existing friendships?

This review aims to examine the psychological literature published in the last nine years that explores the impact of online communication or social media (SM) on adolescents' existing friendships. As technology and use of SM have changed so rapidly and dramatically in the last decade, and even at the time of writing, only those studies published since 2006 are considered relevant. Any earlier findings will most likely be out of date. 2006 is also the year that Facebook opened to individuals over the age of 13 who had a valid email address (Abram, 2006).

Establishing interpersonal connections, such as friendships with peers, is one of the most important developmental tasks of adolescence. We know that forming and maintaining close friendships in adolescence is imperative to healthy cognitive, emotional and social development (Bagwell, Schmidt, Newcomb, & Bukowski, 2001; Newcomb & Bagwell, 1995). In addition when adoloescents perceive a greater sense of belonging in school they place more value on the academic material they are learning (Gillen-O'Neel and Fuligni, 2013). Therefore psychologists, philosophers, anthropologists and sociologists have considered it important to deliberate over the essence of young people's friendships.

Using the computer for socialising has become the norm in the lives of most adolescents. A vast majority of adolescents indicate using the computer with friends either in person or online on a regular basis.

In 2006 the Pew Internet & American Life Project reported that 77% of 12-17 year olds had sent or received an instant message (Lenhart & Madden, 2007). Three years later, in 2009, the Project conducted a random digit-dialing survey of 800 adolescents between the ages of 12 and 17, and found that 93% of teens in the US use the internet. Of these, 73% reported having a social networking profile (Lenhart, Purcell, Smith, & Zickuhr, 2010). Compared with the 2006 prevalence rate of 55% for use of social networking sites (SNS), this represents a rapid increase in

adolescents' use of sites such as Facebook. Reports from the UK show that almost 50% of all 11 year olds and over 70% of 13 year olds have a profile on at least one SNS (Livingstone, Olafsson & Staksrud, 2011). Given the rapid rate of increase in teenage SM usage, these statistics are likely to be out of date even at the time of writing (Shapiro & Margolin, 2014).

Given the pervasive social interaction now widely associated with computer use, it seems that studying the impact of such technology use on the quality of adolescents' friendships, and on their well being, is a timely task for mental health professionals to undertake. Research in this area is still in its infancy (Allen, Ryan, Gray, McInerney & Waters, 2014). It tends to be primarily cross sectional in nature and include members of clinical populations such as children with learning disabilities (e.g Sharabi & Margalit, 2011) or convenience samples of university students (e.g Ryan & Xenos, 2011). There are also reviews of social media in teaching and learning (e.g McInerney, 2014) but few papers connecting SM to friendships. Popular media has published on the topic of social media and yet empirical research is scarce.

As the focus here is on adolescents' use of SM and the impact it has on their friendships, this review concentrates on studies that involved young people between the ages of 11-18. Therefore studies looking at clinical populations, adults, college students and younger children will not be considered.

In addition, studies that consider the impact of SM on other aspects of adolescents' lives such as their identity, education, family life or romantic relationships are also excluded for the purpose of this review.

In terms of methodological criteria, both quantitative and qualitative studies are included, given the paucity of research in this area. Studies conducted outside the UK are included as well for the same reason. Review papers were consulted to gain an overview of the literature and to be confident that this review covers the main studies.

The key papers quoted in the most up to date reviews (Allen et al., 2014; Koutamanis, Vossen, Peter & Valkenburg, 2013; Reich, Subrahmanyam & Espinoza, 2012; Valkenburg & Peter, 2011) will be examined in order to evaluate the current literature on the impact of SM use on adolescents' existing friendships. An attempt to

draw conclusions from these studies, taking into account their limitations, will be made at the end.

Although this review will examine recent papers, it is important to understand the history and context of this area of study. Early studies from the 1990's presented a mainly negative picture of the impact of technology use on adolescent friendships (Kraut, Patterson, Lundmark, Kiesler, Mukophadhyay & Scherlis, 1998). Results showed that increased internet usage was associated with a decline in participants' interactions with family members within the household, a reduced social circle and a rise in levels of loneliness and depression. The conclusion drawn and later replicated by Nie and Ebring (2000) was that, despite all the social components promoted by the internet such as chat rooms and newsgroups, internet use led to a decline in the social lives of users. The media then picked up on these findings and continued to present a predominantly negative picture of what was happening to young people as a result of their use of SM. (BBC, 2009; Pilieci, 2012; Sweeny & Curtis, 2012). This caused parents and educators great concern.

More recent studies, however, have suggested that the relationship between technology use and relationships is more complex than proposed by earlier works. This is especially as the technology itself has dramatically changed. Also, adolescents are engaged in quite different online activities now than they were ten years ago.

Communication technologies that were popular among adolescents in the 1990's, such as public chat rooms or Multi User games, were typically used for communication between strangers. However, in recent years, several communication technologies such as Instant Messaging (IM), and social networking sites like Facebook and Instagram, have been developed. These encourage adolescents to communicate with existing friends and family.

European and American studies have shown that between 84% (Gross, 2004) to 88% (Valkenburg & Peter, 2007) of adolescents use IM for communication with existing friends. Ahn (2011) states that approximately 91% of youth who use SM report that they utilise the sites to communicate with known friends. Qualitative studies also

converge with this finding that American youth mostly use SM to interact with friends rather than to meet strangers (Agosto & Abbas, 2010; Boyd, 2008).

In a 2008 qualitative study of SM users, Livingstone found that posts and messages provided a way to keep in touch and sustain a 'constant connection with peers' (p.404). Similarly, Reich's (2010) mixed method study of community on Social Networking Sites (SNS) revealed that youth use these spaces to share important information and stay connected to others.

Studies have also found that teenagers are less likely to experience unwanted sexual solicitations or harassment using SM sites, while being more likely to experience these dangers in chat room environments (Ybarra & Mitchell, 2008). Initial research suggests that the fears about SM creating opportunities for predators to solicit children are overstated. Nevertheless, these and other detrimental behaviours such as cyber-bullying, are real issues and worth mentioning even if beyond the scope of this review. Even if dangerous or negative experiences of SM only account for a small percentage of online activity, each instance represents a significant concern for adults, parents and educators. Good reviews on the subject can be found elsewhere (e.g Strom and Strom, 2005; Tokunaga, 2010; Bazelon, 2013).

Research on the effects of online communication on *existing* friendships among adolescents revolves around two hypotheses: The *displacement* hypothesis states that online communication impairs the quality of adolescents' existing friendships, because it displaces the time that could be spent in more meaningful interactions with offline friends (Kraut et al., 1998; Mesch, 2003; Nie, 2001). Because online contacts are seen as superficially weak-tie relationships that lack feelings of affection or commitment, the internet is believed to reduce the quality of existing friendships among adolescents. As discussed, most of the studies in support of this hypothesis were conducted in the internet's early days.

In contrast, the *stimulation or increase* hypothesis emphasizes that more recent internet-based communication technologies are designed to encourage communication with existing friends. As a result, much of the time spent on online communication is used to maintain and deepen existing friendships, which

eventually enhances their closeness (Bryant, Sanders-Jackson & Smallwood, 2006; Valkenburg & Peter, 2007).

Valkenburg & Peter (2009b) comment that the majority of internet-effects studies in the last few years seem to point towards positive effects (Blais, Craig, Pepler & Connolly, 2008; Boase, Horrigan, Wellman & Rainie, 2006; Bryant et al., 2006; Valkenburg & Peter, 2007). However, this research is limited by the fact that most conclusions about the consequences of internet use for the quality of existing friendships are based on correlational studies. A number of issues should therefore be considered.

Firstly, these studies cannot give a decisive answer about the direction of the relationship between types of internet use and the quality/quantity of friendships. They cannot rule out the possibility that people with higher-quality friendships more often turn to the internet to communicate with these friends rather than vice-versa.

Secondly, independent variable internet use has been underspecified. Several early studies have treated it as a one-dimensional concept, operationalised by weekly or daily time spent on the internet (Kraut et al., 1998). While Valkenburg and Peter (2009b) argue that only the use of Instant Messaging should be looked at to understand the impact of Social Media on existing friendships, technology has developed further and many adolescents are using mobile phones or Instagram to communicate rather than IM.

Thirdly, the authors note that most studies have investigated direct relationships between types of internet use and one or more dependent variables such as the quality of existing friendships. With a few exceptions, hardly any study has hypothesised regarding possible mediating variables that may explain a stimulating effect of SM use on the quality of adolescents' friendships (Valkenburg & Peter, 2007).

Building on their earlier works (Valkenburg, Schouten & Peter, 2005; Valkenburg & Peter, 2007), Valkenburg and Peter conducted a study in 2009 on the impact of IM on adolescents' friendships (Valkenburg & Peter, 2009b). This work has several strengths. It was a longitudinal study carried out with a large representative sample of Dutch adolescents. The 30% attrition rate they got between Time 1 and Time 2 was examined with no significant findings. The authors hypothesised that one

particular variable, self–disclosure, would be the main mediating variable between SM use and a positive impact on friendships. They adopted highly reliable measures they had used in previous studies to assess online self-disclosure and quality of friendships (Schouten, Valkenburg & Peter, 2007; Buhrmester, 2002). The authors conducted thorough statistical analyses on their hypothesised model between use, quality of friendships and self–disclosure by carrying out multiple tests. However, the authors do not say whether they carried out a Bonferroni correction, which would be advised given the number of tests and may render their results insignificant.

Nevertheless, this paper stands alone in its time for carrying out a rigorous analysis in a longitudinal study. The authors' findings were that virtually all adolescents used IM to communicate with their existing friends and that IM use increased the quality of existing friendships. The quality of friendships did not influence IM use. These results suggest that the positive relationships found in earlier research cannot be explained by arguing that adolescents with high quality friendships more often turn to IM. Rather, these results suggest that adolescents seem to use IM successfully to maintain existing friendships.

The authors also found support for their assumptions of internet-enhanced self-disclosure hypothesis, but examining those goes beyond the scope of this review. However they do acknowledge the possibility that many other communication or psychological processes such as understanding, investment, liking, uncertainty management, breadth of interaction and commitment can account for potential positive effects of SM use.

Whilst this study is quoted repeatedly throughout the literature and stands out as one of the few longitudinal as well as robustly designed studies, it is nevertheless limited by its narrow focus on the impact of IM on adolescent friendships. It is not possible to generalise its findings to all forms of SM use and there is some evidence that different SM vehicles have different effects on friendships. For example, Ahn, (2011) found effects differed according to whether adolescents were engaged with MySpace or Facebook. To their credit, the authors do recognise that future research is necessary to differentiate between varying uses of online communication technologies as well as other potential mediators that may explain the social consequences of the internet.

To this point, Blais, Craig, Pepler & Connolly (2008) found that different ways of using SM had different corresponding effects on a friendship. Replicating earlier work (Valkenburg & Peter, 2007) Blais et al. (2008) found a stimulation effect if adolescents used SM to communicate with existing friends, but a reduction effect if they used SM to communicate with strangers.

Whilst this study attempted to tease out statistical differences between different uses of SM, and was notable for being one of the few large longitudinal studies of its time, it is seriously flawed in that its data was collected eight years earlier and therefore it is questionable whether its conclusions can be applied today. In addition, the data was collected through single source self-report questionnaires: it is difficult to determine the validity of adolescents' self-reporting without other sources. Nonetheless, although these findings may not directly apply today, it is reasonable to assume that, although the SM tool may have changed, adolescents' behaviour towards using it may not have. Also, it is not possible to say for sure that those who said they used IM were doing so with known friends and that those in chat rooms were talking to strangers. However, research shows that is likely to be the case (Subrhamyam, Smahel & Greenfield, 2006; Gross, 2004). Finally, it may not be easy to generalise the results as participants came from rural Canada.

Lee's (2009) study, with a representative sample of 1,312 American adolescents, also lends support to the increase hypothesis. The study used primary caregiver interviews as well as a child interviews and time diaries. Amongst other things, the author measured each type of social relationship as an outcome using time-based measurement (e.g time with friends) and quality-based measurement (e.g closeness with friends). The results were analysed separately. Time diary data was used to test the displacement hypothesis of online time and social time, as this was considered to be more reliable than global estimates. Parent interviews were used at Wave 1 to measure early sociability, whereas child interviews and diary data collection were conducted at Wave 2.

The findings support the increase/stimulation hypothesis and show that, for friendships, time using a computer for study and recreation was negatively related to time with friends. On the other hand, frequent online communication with friends was associated with cohesive friendships. As Valkenburg and Peter (2009a) and

others argue, these findings suggest that adolescents use online communication as an additional communication modality to enhance the quality of friendships, while time in face-to-face interaction with friends is not decreased or increased. For school connectedness, adolescents who more frequently used online communication were more likely than less frequent users to feel connectedness to school, by having friendships that were more cohesive.

This study's strengths include its large, representative sample based on the US population and its rigorous statistical analysis. The authors provide detailed notes about the good fit of each of their models and deal with any inconsistencies with their hypotheses in an appropriately transparent and rigorous manner.

The study did attempt to tease out the time spent on various online activities, although Subrahmanyam & Greenfield (2008) point out that it is very difficult for subjects to provide a realistic estimate of the time they spend on different activities. The rapidly shifting nature of adolescent online behaviour also complicates time-use studies. Adolescents tend to multi-task and switch social media sites so quickly that data on time usage quickly becomes outdated.

However, there are other concerns about this study's findings in that the longitudinal data with only two time points have limitations in developing longitudinal structural equation models. That is, while the present study identified the longitudinal relationship between earlier sociability at Time 1, and internet use at Time 2, the associations between internet use and cohesive social relationships were examined by the data collected at the same time. Therefore, its design of being partly cross-sectional and partly longitudinal appears somewhat messy. Additionally, its use of interviews with parents regarding their child's early sociability does not seem a totally valid measure of the child's later friendships: parents are limited in their knowledge of their adolescents' relationships, and there may have been significant changes since early childhood. Moreover, measuring general online communication on only one weekday and one weekend day may be unrepresentative.

In sum, this study does have some merits but is flawed in the ways described above. This means that whilst its results can be taken to be an indication of the stimulation effect, they are not entirely conclusive.

Studies that have attempted to understand the variables involved in the stimulation effect of using SM on adolescents existing friendships include Ahn's (2012) study looking at patterns of SM use in an urban, teenage sample in the US. This study tests the hypothesis that use of SMS is related to higher levels of bridging and bonding social capital and therefore would support the stimulation hypothesis.

Bridging refers to those relationships where a person acts as a bridge between two social groups, which is a beneficial structural position in the network. Bridging relationships arise among acquaintances who know each other but are not deeply invested in the relationship. Researchers have found that bridging relationships bring benefits such as new information and connections to the individuals so related and also to the larger community (Kavanaugh, Reese, Carroll, & Rosson, 2005; Putnam, 2000).

Bonding ties arise out of close-knit relationships. They are likely to lead to benefits such as social and emotional support and access to scarce resources.

Ahn's (2012) study was conducted using a self-report questionnaire with a similar size sample to Blais et al.'s 2008 study, although out of the original sample of 852, only 620 cases had complete data. To her credit, the author examined the missing data and found that data were not missing completely at random (NMCAR). A statistical package was then used to account for the missing values in the data set, thus strengthening the robustness of the findings.

Ahn's (2012) findings show that teenagers who were members of Facebook and Myspace reported both higher bonding social capital and bridging social capital in their school community.

The amount of time spent online, however, was only related to bridging social capital: it had no influence on bonding relationships. Such results mirror recent studies that find intensity of Facebook interactions is related to bridging social capital but not bonding (Burke, Kraut & Marlow 2011). These contrasting relationships suggest that perhaps youths who spend a longer time in social network sites also have more exposure to benefits related to weak ties (i.e., information). In general the results show that the relationship between spending time in SNSs and social capital is not a simple one. Teenagers who spend more time online in social network sites report higher connection to weak ties. However, the relationship

between Facebook and Myspace membership and strong ties was also significant. Time spent online may instead be a proxy for different types of social activities. Using Facebook to share status updates and information, and using Myspace to check in about where a party is being held this weekend, offer different ways of developing bridging versus bonding relationships among teenagers.

The convenience sample of this study limits the generalisability of the findings, and Ahn, too, states that the findings can only be taken as exploratory. In addition, aside from being another cross sectional study in which causality cannot be established, the questions asked in the survey may cause inconsistencies in the results. For example, asking, "If I needed $500 is there someone at school I could turn to?" may seem an unusual question to ask if over a third of a school population is on free school meals. Such a circumstance indicates low social and economic status (SES), and that the children would be unlikely to turn to their peers for that sum of money. In addition, not being able to ask a friend for such an amount does not necessarily indicate a lower quality of friendship, but rather more likely the friend's inability to meet the request.

Another serious flaw in this study is that it looks at bonding only in relation to school relationships and bridging in relation to online relationships. This seems to muddy the findings, as they are not comparing the bridging and bonding effects in the same friendship category. The blurring of friendship groups for youth nowadays is also not acknowledged in this artificial separation of online/offline friendships. In addition, given that we know the vast majority of youth engage in some kind of SM (Jones & Fox, 2009), a group of youth that do *not* use SM is unlikely to be a valid 'control' group as they are likely to be too different from their SM using peers in significant ways.

The study does make a good attempt to examine the differences between diverse SM vehicles, as well as whether intensity of use has an impact on friendships. The social factors that lead teenagers to choose Myspace, and the interactions they have in Myspace versus Facebook, are likely reasons that teenagers developed more bonding relationships there. In order to enhance these understandings, future studies are needed that finely tease out the self-selection effects of different SNS communities and classify how the experiences of individuals differ in respective SNSs. Other researchers (Valkenburg & Peter, 2011) have echoed this.

Apoalaza, Hartmann, Medina, Barrutia and Echebarria (2013) also found an increase in social capital amongst 344 Spanish adolescents using a popular Spanish SM site called Tuenti. This study was also a cross sectional study carried out using self-report surveys. It was therefore subject to the same limitations as previous studies. It used the same design, namely that causality cannot be established and teens may not correctly report their average daily use of SM.

It was found that teens' use of Tuenti is positively related to a degree of socialising on SM, implying an increase in social capital. However, the survey questions are questionable in terms of their internal validity: it is reasonable to wonder how well questions asking about friends who live far away or friends from the past measure sociability especially as they account for over 50% of the questions. Again, although the findings from this study add to the body of research that suggests that SNS use may overall be positive (Dunne, Lawlor & Rowley, 2010; Lee, Lee & Kwon, 2011; Valkenburg, Peter & Schouten, 2006), no mention of a Bonferroni correction has been made and so positive results have to be accepted cautiously.

Two final quantitative studies to consider look at the impact of SM on adolescents from ethnic groups other than those in Europe or North America.

Liu, Yin and Huang (2013) carried out a survey study of 674 Taiwanese adolescents addressing whether, depending on how much time the adolescents spent on Facebook, there were any differences in quality between real life and virtual relationships with peers and parents/teachers.

Liu et al. (2013) found that more frequent users of Facebook had better quality relationships with their peers, both on and offline, than less frequent users (Surbrhamyam & Greenfield, 2008). However, the frequent users had weaker relationships with their parents in real life (a concern that was raised by Martusewicz in 2010). Their virtual relationships with their parents were also the weakest of all. Nevertheless, their real life relationships with both peers and parents/teachers were stronger than their virtual ones.

Liu's paper possibly suffers from errors due to a language barrier. For example, questions translated as, 'I am willing to make a self discourse to my online friends' probably don't fully reflect the original meaning. Therefore, it is hard to lean on the

findings of such clumsy questions. In addition, questions were asked as to how many days a week respondents used Facebook, which is not necessarily an accurate measure of usage: it could be a two minute check or a five hour session. The assumption the authors make that 'it is reasonable supposed that more days Taiwanese adolescents use Facebook for, the higher frequency they interact with others online' is not only difficult to understand due to its poor translation but also entirely unsupported by evidence that it this is indeed the case.

Reich, Subrahmnayam & Espinoza (2012) were interested in using an ethnically diverse sample to compare how the uses of SN sites and peer networks may differ for Latino teens compared to their European American peers.

In recent years it has been found that there are differences in how minority youth access the internet, which online applications they use and the media content they consume (Lopez & Livingstone, 2010; Valadez & Duran, 2007; Watkins, 2010). As a result, researchers have begun to explore how minority adolescents use online spaces such as SN sites and instant messaging (Lopez & Livingston, 2010). To date, little has been known about Latino youth's specific activities online, or how their peer networks from face to face settings connect with their online networks. Latinos are often viewed as being more connected to relatives than are their European American peers (Sanchez & Reyes, 1999). Therefore Latino teens may use SN sites more for staying connected to relatives rather than peers.

This survey study with 251 adolescents from three high schools in California, involved a two-part data collection (in person and online). In addition to questions exploring teens' relationships, daily activities and their use of SNS, respondents were also asked to name up to ten people with whom they interacted the most in person, on a SNS and via IM. All open-ended responses were coded and reviewed by the authors. The three authors had 100% agreement on the coding of responses into themes.

The findings of this study (as determined by other studies, Valkenburg & Peter, 2007; Subrahmanyam & Greenfield, 2008), suggest that adolescents tended to interact online with people they know in their offline contexts. This study found that participants reported a mean of 176 social networking friends. The authors suggest

this ability to use newer online tools to interact with a wider circle of friends may be very beneficial for adolescents.

In regards to the limitations of this study and its findings, the sample was considerably smaller than most of the other survey studies. It also suffered a low response rate on half of its collection procedure, namely the online survey portion. The lower completion rate limited the authors' ability to compare data from both sources, and yielded an even smaller sample size. This reduced the study's power to identify potential predictors of overlap in the sample. Further, these findings may not be generalisable to other high school populations in non-urban settings.

However, a unique feature of this study was having a largely Latino sample to examine whether this group differs from its European American counterparts. In fact this study showed no difference between the ethnic groups in terms of who the youth interacted with online, or in terms of how SNS were used. However, we cannot conclude they do not exist: it is possible that ten was not a sufficient number of friends to capture differences in network composition between Latino and non-Latino teens.

Having both an in-person and online survey is also a potential strength of this study in that it helps with verification of age and gender. That participants can answer detailed questions online by checking their profiles rather than relying on memory; a problem encountered in previous survey studies of online activity, (Surbrahmanyam & Lin, 2007) is also a strong element of this study.

The overall results of this study, which lend support to the increase hypothesis, can be considered useful to a degree, bearing in mind that limitations to generalisability add to the growing body of literature corroborating this view as seen above. This paper does contribute to the field in that it addresses the activities of a non-European American population. In future, using a larger sample, asking for more than ten friends to be listed and observing what youth do online rather than relying on self-report would bolster these initial interesting results.

Three qualitative studies have been highlighted recently that address the impact of SM use on adolescent friendships. They follow on from earlier qualitative studies (Boyd & Ellison, 2007; Boyd, 2008; Hodkinson, 2007;Livingstone, 2008; Stern, 2007).

Clarke (2009) carried out a qualitative study looking at young adolescents aged between 10 and 14 years old. The aim of the study was to carry out a longitudinal design over two years with 28 children in the UK in order to consider the impact of digital technology on young adolescents' friendships. A rigorous qualitative methodology was used with over 30 hours of filmed observation, diaries, friendship maps, individual interviews, friendship focus groups and on online bulletin board.

Although the research was not representative of the UK (it took a convenience sample rather than a random sample), it was diverse in that it included children from different socioeconomic backgrounds and ethnicities. This study, like others, does not attempt to tease out the possible different effects of using diverse SN vehicles, but groups them together as 'digital technology.' The study includes use of mobile phones, email, SNS such as Facebook, MySpace and Bebo. It also considers IM and online website that incorporate games with multiplayers and games consoles that involve live chat.

Clark argues that the widespread adoption of digital technology by early adolescents is deeply embedded in the social context of their lives and may be beneficial to them. While the mental processes and the developmental stages of early adolescence have not changed, it may be that digital technology is being used to process some of the tasks of early adolescence. Indeed, the author claims her findings support the concept that friendships are enhanced and extended through their digital communication, and not reduced or displaced. Her paper gives many examples to support this claim, looking at adolescents' comments on trust and sharing online, and how it positively enhances their off-line relationships.

The paper also supports others (Valkenburg & Peter, 2007) that found that adolescents use digital technology mainly to communicate with existing friends, and that online communication encourages social ties rather than weakening them. This is as Subrhmanyam and Greenfield (2008) suggested. In addition, Clarke (2009) reported that most of the respondents were aware of the 'dark side' of the internet and seemed equipped with knowledge about what to do if harassed or contacted inappropriately.

Unfortunately, whilst this study initially appeared very impressive with its large qualitative sample, longitudinal design and multiple methods of collecting data, there are no details at all given on the design or analysis of the study.

The quotes given and the assumptions made from the responses do not seem to be related to any established method of analysing qualitative data such as thematic analysis, grounded theory or even content analysis. Therefore, although the paper makes for very interesting reading, we cannot take its claims beyond an initial exploration of young adolescents' experiences. In addition, the sample is not representative, although Clarke does recognise this. In any event, it is the assumption that 'digital technology' can be considered as a single entity that is possibly more serious, and there is no acknowledgement by the author of this limitation.

Clarke does make some helpful suggestions for policy makers and media reporting but these findings cannot be considered to be rigorous research to back those suggestions up.

In contrast, Davis' (2012) qualitative study exploring the role of SM in adolescents' experiences of friendship and identity was far more rigorous in its design and analysis. It used a well thought out thematic analysis (Boyatzis, 1998) following audio recorded and transcribed interviews with 32 adolescents aged 13-18 across seven schools in Bermuda.

The youth were asked questions relating to the nature of their online communication and the value they ascribed to these conversations. The author also used a research assistant to simultaneously code the data until excellent interrater reliability was achieved around the coding scheme. Two main codes emerged: one related to the casual or lightweight online exchanges and the other to more intimate online exchanges. This reflects previous research indicating that intimate self-disclosure is facilitated by digitally mediate communication (Davis, 2010; Subrahmnayam & Smahel, 2011; Valkenburg & Peter, 2011).

However, the sample were adolescents from Bermuda, a small, affluent country, findings could be seen to be limited to that population: a far higher percentage of youth in Bermuda have mobile phones and access to SM than youth in most other

countries. Nonetheless, the study does offer deeper insight into the impact of SM on adolescent friendships given the in depth interviews.

Awan & Gauntlett (2013) has taken the view that traditional quantitative and qualitative research methods only give us a partial understanding of people's experience and that we need new forms of empirical research to better understand the everyday experience of living and participating in a complex media world.

Awan & Gauntlett's study tried to do what Gauntlett, (Gauntlett, 1997; Gauntlett & Holzwarth, 2006; Gauntelett, 2007) suggests by giving participants a task to create an artifact and reflect upon it. A hundred and thirty-eight pupils from all over the UK aged 14-15 years old participated from a range of ethnic and SES backgrounds. The project was carried out over a period of five months. Students were told the project concerned their understandings of their relationships with the media. Researchers showed them how to use objects to represent metaphors and then asked them to make an identity box to represent their identity using visual metaphors. Interviews were carried out after the construction phase for participants to discuss personal self-reflexive explanations of their identity boxes.

In spite of concerns that some kids might find this hard, all managed to do it within the seven days they were given and they reported that they were able to be much more thoughtful than just answering a survey. Interviews were coded and a number of related 'interpretive repertoires' (Potter & Wetherell, 1987), defined as 'recurrently used systems of terms for characterising and evaluating actions, events and other phenomena'(p. 149), provided the framework for the final analysis.

Findings showed young people did not use these tools to establish new relationships but to augment existing relationships, especially with people who were far away, and as an aid to better understand their friends and enhance closeness to them, as found in previous research (Valkenburg & Peter, 2007; 2009; 2011). They limited their engagement to a wider peer group to people they knew but hadn't spoken to. This finding is in support of other studies e.g. Boyd (2008): "Despite the perception that social media is enabling teens to reach out to a new set of people online, the majority of teens define their peers and friendships by the relations fostered in school' (p. 177).

Participants said the value of SM was that it could facilitate self-expression and interaction, and communication with friends in a private place. The different mode of interaction enabled a 'safer' kind of communication environment, in which anxieties and personal information could be shared with less of the fear of humiliation present in face-to-face conversations. SM was seen as not simply an extension of, or alternate forum for, their friendships, but it also enabled users to develop layers of emotional bonding which would otherwise be considered difficult.

However, the participants did not place high value on online relationships that could not become face-to-face. SNS websites were seen to have value if they acted as a platform for developing social relationships that could then be built upon and established in the real world. The young people also described the ease of organising everyday activities using SM and so maintaining social relationships.

For all of them nothing could beat face-to-face friendships.

It seems, too, that the youth's participation in SM was essentially a result of ambient social pressure to do so and not wanting to feel excluded if they didn't (Boyd, 2008). This finding undermines the notion that such services are indispensable to young people. In addition it was clear, as reported in previous studies (Lenhart & Madden, 2007), that young people were aware of dangers of talking to strangers or engaging in cyber-bullying and were taking measures to protect themselves.

This study benefitted from the more in depth discussions facilitated by the process of making a 3D model. It was able to highlight some richer details about the character and perceived value of the online interactions between offline friends and provide support for quantitative studies with similar findings.

For a qualitative study, the sample size was large and its longitudinal nature also allowed for increased reliability and validity of the findings. Given that the study supports previous work and offers a much richer description of the processes examined, it does seem to offer a way forward for researchers to further explore the impact of social media on adolescent friendships. Perhaps it could also be expanded to tease out some of the underlying processes that existing research has so far uncovered.

Looking at the key papers that have been outlined and critiqued above, we can see that the merit of the existing recent research is that it has moved us away from a global, negative picture portrayed by the media and based on obsolete technologies, claiming that adolescents' friendships, amongst other essential aspects of their development, are being seriously threatened by the rise in online communication via SM.

The literature, whilst flawed and as yet limited, does seem to point overwhelmingly towards a conclusion that SM has a positive impact on existing friendships as long as it is being used to communicate with known people and not with strangers. As this conclusion is supported by more in-depth qualitative studies as well as large surveys, in spite of the limitations, it would seem that we can cautiously accept this premise.

Clearly, there is still much more research to be done; so far the literature can only be described as exploratory. Not enough rigorous longitudinal studies have been done either quantitatively or qualitatively to date.

Subrhamanyam and Greenfield (2008) make the valid point that ideally the adolescent population would be studied before the technology is introduced and then assess its effects on relationships. However, given the statistics for SM use for adolescents all over the world as being the vast majority, this is now impossible. One route might be to look at pre-adolescents, but emerging research shows that the age of children using these technologies is dropping more each year (Subrahmanyam & Greenfield, 2008).

Even at the time of writing this review, these conclusions may be out of date as pointed out by Shapiro & Margolin, (2014). New technologies such as Instagram and Twitter may herald a reversal in the trends of social media communication, as youth are more likely to follow people that they do not know, and post publicly on their profiles. Such a trend would be in contrast to well-established SM platforms such as IM or Facebook where the tendency, as shown above, is to communicate with existing friends. Time on SM may soon be spent 'stalking' acquaintances or celebrities rather than connecting with friends. For this reason, in-depth qualitative interviews are needed to unpack the nature of online activity.

Researchers need to take an integrated approach to exploring the effects of SNS. The technology alone is not likely to cause social outcomes. Adolescents bring existing social, psychological and emotional characteristics into the online environment (Ahn, 2011). It is possible that there are generational differences for today's young people that are not related to SM use but are being attributed to the coinciding rise in online communication. Such human factors interact with the SM platform to influence how adolescents network and communicate. Further studies must attempt to model these interactions to develop finer theories of how using SM affects adolescents and their friendships.

It is worth mentioning in concluding this review that there are two frequently discussed hypotheses in the wider literature, (see Desjarlais & Willoughby, 2010 for a recent study), which go beyond the scope of this review but are worth mentioning as they offer suggestions regarding what other mechanisms are at work regarding the impact of SM on adolescents friendships. These suggest that the relation between friendship quality and using computers with friends may differ for adolescents depending on their level of social anxiety. The first is the *social compensation hypothesis* which suggests that adolescents with high levels of social anxiety may report more positive friendship quality if they use SM than those that who also have high social anxiety but don't. (Cambell, Cumming & Hughes, 2006; Gross 2004; Kraut et al., 2002; Peter, Valkenburg & Schouten, 2005). In contrast, *the rich-get-richer hypothesis* posits that socially adept individuals may used SM to seek out additional opportunities to socialise (Gross et al., 2002; Kraut et al., 2002; Peter et al, 2005).

In addition, there is preliminary evidence pointing to the fact that different SM platforms bring about varying effects on young people's relationships. For example, Quinn and Oldmeadow (2013) focus on the impact of the use of the mobile phone as a platform for SM. The ability to connect with friends 'anywhere, anytime' (Quinn & Oldmeadow, 2013) may further complicate the relationship between SM and friendships for those with mobile phones compared to those who only access SM on a fixed device. Clearly, more systematic, rigorous research is required to compare and contrast these different SM platforms and their impact on adolescent friendships.

Examining the impact of SM on adolescent friendships is particularly challenging. Research on the effects SM is a relatively new academic field. This, together with the speed of technological change, means most studies are hopelessly out of date by publication. In addition the challenges of conducting research in the field of online adolescent friendships are significant. These include finding appropriate representative participants in terms of their age and developmental stage and the stage of their friendship. Research on younger children requires the co-operation of parents, caregivers and teachers, which adds complexity. Moreover, it is quite difficult to attract adolescent participants. Added to all this is the need to find ways of motivating participants to remain on task over significant time periods. Adolescents are very likely to drop out if they lose interest in participation or tire of the need to frequently report on their on-line activity. Time based measures are also likely to be unreliable due to the multitasking nature of most adolescents' online communication.

In addition, it is clear that a specific definition of the term friendship is essential going forward. It is necessary to differentiate between offline friends who also interact online and friends who are ''totally online.'' There are also friendships that start online and move to offline. There are also ''Facebook friends:" people the user may have not seen in decades, or friends of friends. Therefore it is vital to delineate the term in research.

In order to understand such factors as what happens over time to a friendship that started online, and how online friendship affects long-term wellbeing compared to offline friendship, it is important that future research on friendships be longitudinal.

Further research is also needed to identify those adolescents who might be prone to risky online behaviour in order to learn why they might participate in such activity even though we can see from the bulk of the literature, that most are not involved in questionable activities. The role of intensity of use has not been extensively examined thus far either. There may be an extent to which engaging in social media breeds diminishing returns. (Allen et al. 2014).

For the minority that do get caught up in risky situations, it is important to understand which social, emotional and behavioural characteristics relate to their seeking or experiencing negative behaviour in online communication.

Age, gender, experience level and personality traits may influence the level of risk to a youth (e.g. Peter, Valkenburg and Schouten (2006) found younger adolescents were more likely to speak to strangers online than older adolescents were. Also, those that sought new friends to overcome shyness spoke to strangers more often). Technology may lead down a risky avenue, but that does not mean it is the cause of risky behaviour.

Much of the work on adolescents' use of SM fails to distinguish between early, middle and late adolescence (see Davis, 2010; Livingstone, 2008; Valkenburg et al., 2011), thereby limiting insight into the connections between SM and adolescent development and relationships (Subrahmanyam & Smahel , 2011).

Finally, whilst there are few empirical studies that examine SM effect on adolescents' friendships, researchers now have the opportunity to build a new area of study, extend previous internet research and apply a variety of new theoretical perspectives that have not yet been explored. Research on SM effects on adolescent friendships is vital to inform the societal debates and concerns about new technology and youth.

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PART C:
CASE STUDY