#### **GUIDEBOOK**

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Downloaded from https://guidebook.eif.org.uk/programme/easypeasy

# **EasyPeasy**

Reviews: January 2019; November 2019

Note on provider involvement: This provider has agreed to EIF's terms of reference, and the assessment has been conducted and published with the full cooperation of the programme provider.

EasyPeasy is an app-based parenting programme for parents & carers of children from birth to five. It can be delivered as an early intervention strategy, as a universal programme, or a targeted-selected programme (e.g. for low-income families). It is delivered in the home of the family, alongside early years settings including classrooms, clinics and community centres.

Parents are able to register to the EasyPeasy app for free and

Evidence rating: **2+** \*

can be connected to local cohorts (e.g. a Local Authority area, school, or nursery). The app offers personalised guidance and activity ideas to parents based on their individual profiles. A practitioner can provide support alongside the self-directed programme both through recommending content to parents via the app and through reinforcing activities and approaches with

Cost rating: 1

experiences via the EasyPeasy app providing a valuable opportunity for peer-to-peer support.

EasyPeasy aims to improve children's mental health and wellbeing including self-regulation, develop language &

children in professional settings. The programme supports parents to create and share their own parenting strategies and

communication skills, enhance school achievement & future employment, and support positive outcomes for couples, parents

and families.

# **EIF Programme Assessment**

EasyPeasy has **preliminary evidence** of improving a child outcome, but we cannot be confident that the programme caused the improvement.

Evidence rating: **2+** \*

# What does the evidence rating mean?

**Level 2** indicates that the programme has evidence of improving a child outcome from a study involving at least 20 participants, representing 60% of the sample, using validated instruments.

This programme does not receive a rating of 3 as its best evidence is not from a rigorously conducted RCT or QED evaluation.

# What does the plus mean?

The plus rating indicates that a programme's best available evidence is based on an evaluation that is more rigorous than a level 2 standard but does not meet the criteria for level 3.

#### What does the asterisk mean?

The asterisk indicates that this programme's evidence base includes mixed findings: that is, studies suggesting positive impact alongside studies that on balance indicate no effect or negative impact.

#### More detail on mixed findings for this programme

- 2 + reflects the fact that the programme has preliminary evidence from two UK studies of improving a child outcome (including Jelley, Sylva & Karemaker, 2016 and Sylva & Jelley, 2018).
- Mixed findings reflects the fact that there is also another, similar quality study with more equivocal findings. Particularly, we have reviewed one study conducted in the UK (Robinson-Smith et al. 2019) suggesting EasyPeasy had no impact relative to standard services.
- For more information on EIF's approach to mixed findings, see: What happens when the evidence is mixed?

# **Cost rating**

A rating of 1 indicates that a programme has a low cost to set up and deliver, compared with other interventions reviewed by EIF. This is equivalent to an estimated unit cost of less than£100.

Cost rating: 1

# **Child outcomes**

According to the best available evidence for this programme's impact, it can achieve the following positive outcomes for children:

**Enhancing school achievement & employment** 

Improved cognitive self-regulation

Based on study 1

Based on study 2

This programme also has evidence of supporting positive outcomes for couples, parents or families that may be relevant to a commissioning decision. Please see the 'About the evidence' section for more detail.

# **Key programme characteristics**

#### Who is it for?

The best available evidence for this programme relates to the following age-groups:

- Preschool
- Primary school
- Toddlers

#### How is it delivered?

The best available evidence for this programme relates to implementation through these delivery models:

- Online or app
- Group

#### Where is it delivered?

The best available evidence for this programme relates to its implementation in these settings:

· Children's centre or early-years setting

The programme may also be delivered in these settings:

- Home
- Primary school

# How is it targeted?

The best available evidence for this programme relates to its implementation as:

- Universal
- Targeted selective

# Where has it been implemented?

England, Ireland

# **UK** provision

This programme has been implemented in the UK.

# **UK** evaluation

This programme's best evidence includes evaluation conducted in the UK.

# **Spotlight sets**

EIF does not currently include this programme within any Spotlight set.

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# About the programme

# What happens during delivery?

#### How is it delivered?

- Parents discover the EasyPeasy app via health or education practitioners, for example health visitors, early years practitioner, or speech & language therapist, or through digital advertisements on social media and via local community sign-posting (e.g. libraries, word of mouth). Parents are able to register to the EasyPeasy app for free using codes that connect them to their local cohort (e.g. a Local Authority area, school, or nursery).
- Once registered, the app offers parents personalised guidance and activity ideas to parents based on their individual profiles. Content recommendations are pushed to parents every three days, with parents engaging with the app on average several times a week or weekly, and initial impact observed over a period of 6-10 weeks of use, with longitudinal impact observed after 12 months. There is no fixed 'end point' to the intervention.
- A practitioner can provide support alongside the self-directed programme both through recommending content to parents via the app and through integrating and reinforcing activities and approaches with children within professional setting contexts.

### What happens during the intervention?

- During registration, parents share information about themselves and their child that is used by the EasyPeasy app to generate a personalised parenting programme of activities, guidance, and tips that learns and evolves over time. Parents are able to use the app in a self-directed fashion, or email and push notifications can be tailored to support specific areas e.g. language development, or reducing parental stress.
- A practitioner can provide support alongside the self-directed programme both through recommending content to parents via the app and through integrating and reinforcing activities and approaches with children within professional setting contexts. The programme supports parents to create and share their own parenting strategies and experiences via the EasyPeasy app providing a valuable opportunity for peer-to-peer support.

# What are the implementation requirements?

#### Who can deliver it?

 Practitioners or EYFS lead and/or nursery and reception teachers with QCF-3 level qualifications can provide additional support to parents using the EasyPeasy app.

### What are the training requirements?

 Practitioners should attend EasyPeasy's basic training to gain an understanding of the app's functionality, quality assurance processes, content, and evidence base.

### How are the practitioners supervised?

Supervision is not required.

### What are the systems for maintaining fidelity?

Programme fidelity is maintained through the following processes:

- EasyPeasy's basic training for practitioners
- Real-time monitoring of reach, impact on parent & child (based on parent reporting), and reach to disadvantaged households using the Income Deprivation Affecting Children Index (England only
- Online support desk
- A free, content-limited version of the EasyPeasy app is available for parents to download and use in perpetuity. Annual licenses are available to Local Authorities, schools, nurseries and other partner organisations that provide unlimited content to parents, alongside customised features, monitoring and impact reporting for license holders.

#### Is there a licensing requirement?

Yes, there is a licence required to run this programme.

# How does it work? (Theory of Change)

#### How does it work?

- Parents have a significant influence on children's early developmental outcomes. Even a child in full time nursery education will still spend significantly more time with parents in and around the home environment.
- The EasyPeasy app and community provides connections, support and real-world inspiration that improve parent wellbeing, and help drive more positive interactions between parents and their children, leading to clear gains in children's early developmental outcomes.

#### **Intended outcomes**

Supporting children's mental health and wellbeing Enhancing school achievement & employment Preventing obesity and promoting healthy physical development

#### **Contact details**

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# About the evidence

EasyPeasy's most rigorous evidence identifying statistically significant positive impacts on child and parent outcomes comes from two RCTs which were conducted in the UK.

The 2+ rating reflects the fact that the programme has preliminary evidence from two UK studies (Jelly, Sylva, & Karemaker., 2016, and Sylva & Jelley., 2018) of improving a child outcome.

Study 1	
Citation:	Jelle

Jelley, Sylva, & Karemaker, 2016

Design: RCT

Country: United Kingdom

Sample: 150 families, with children between 2 years 4 months and 6 years old. Families were drawn from lists held by children's centres in disadvantaged

neighbourhoods.

Timing: Post-test

#### **Child outcomes:**

Improved cognitive self-regulation

#### Other outcomes:

Improved parenting self-efficacy (discipline and boundaries scale of the TOPSE)

#### Study rating: 2+

Jelley, F., Sylva, K., & Karemaker, A. (2016). EasyPeasy Parenting App: Findings from an efficacy trial on parent engagement and school readiness skills. University of Oxford, Department of Education.

#### Available at

https://www.suttontrust.com/wp-content/uploads/2019/12/EasyPeasy-Evaluation\_FINAL.pdf

### Study design and sample

The first study is an RCT.

This study involved random assignment of children to a treatment group and no treatment control group. Randomisation was conducted using the minimisation method with age of child, gender of child, and children's centre as factors.

This study was conducted in the UK, with a sample of children between 2 years 4 months and 6 years of age. The majority of children in the intervention and control group spoke English only at home (82.4% and 76.4% respectively) and were of White British ethnicity (82.1% in the intervention group; 77.8% in the control group). Most of the parents were female (94.3% in the intervention group; 95.9% in the control group). While about half of mothers were in employment (50% in the intervention group; 54.2% in the control group), the majority had partners who were in employment (89.6% in the intervention group; 96.4% in the control group).

#### Measures

- Child self-regulation and behaviour was measured using the Child Self-regulation and Behaviour Questionnaire (CSBQ) (parent report).
- Pareting self-efficacy was measured using the Tool to Measure Pareting Self-Efficacy (TOPSE) (parent report).
- Parental stress due to dysfunctional parent—child interactions was measures using the Parenting Stress Index (PSI) (parent report).

#### **Findings**

This study identified statistically significant positive impact on a number of child and parent outcomes.

This includes child self-regulation and behaviour (Child Self-regulation and Behaviour questionnaire), and parental self-efficacy (TOPSE).

The conclusions that can be drawn from this study are limited by methodological issues pertaining to high overall attrition, high differential attrition, and a small sample size.

#### Study 2

Citation: Sylva and Jelley, 2018

Design: Cluster RCT

Country: United Kingdom

Sample: 302 families, with children between 3–4 years old. Families were recruited from

children's centres in the London borough of Newham. Eight children's centres

were involved in the trial.

Timing: Post-test

#### **Child outcomes:**

Improved cognitive self-regulation

#### Other outcomes:

Improved parental self-efficacy (TOPSE)

#### Study rating: 2+

Sylva, K., Jelley., F. (2018). EasyPeasy: Evaluation in Newham: findings from the Sutton Trust Parental Engagement Fund (PEF) Project. The Sutton Trust.

#### Available at

https://www.suttontrust.com/wp-content/uploads/2018/05/EasyPeasyNewham-FINAL.pdf

#### Study design and sample

The second study is a cluster RCT.

This study involved random assignment of eight children's centres to a treatment group (four children's centres) and a waitlist control (four children's centres). Randomisation was conducted using minimisation, with groups balanced on certain factors thought to be important to the intervention: proportion of children in the setting with English as an additional language (EAL), proportion of children eligible for free school meals (FSM) and proportion of children with special educational needs (SEN).

This study was conducted in the UK, with a sample of children aged 3–4 years old. In the analysis sample, 51.9% of the children in the intervention group were girls, and 52.9% in the control group were girls. 88.2% of the intervention group had partners in employment, and 90% of the control group had partners in employment.

#### Measures

- Child self-regulation and behaviour was measured using the Child Self-Regulation and Behaviour Questionnaire (CSBQ) (parent report).
- Parental self-efficacy was measured using the Tool to Measure Parenting Self-Efficacy (TOPSE) (parent report).
- Parental stress was measured using the Parenting Stress Index (PSI) (parent report).

#### **Findings**

This study identified statistically significant positive impact on a number of child and parent outcomes.

This includes child self-regulation and behaviour (CSBQ) and parental self-efficacy (TOPSE). The conclusions that can be drawn from this study are limited by methodological issues pertaining to clustering not being taken into account in the analysis, hence why a higher rating is not achieved.

#### Study 3

Citation: Robinson-Smith et al., 2019

Design: Cluster RCT

Country: United Kingdom

Sample: 102 nurseries with 1,205 pupils aged 3 to 4 years. Nurseries were recruited from more disadvantaged areas; the majority of nurseries had over 30% of pupils ever eligible for free school meals.

Timing: Post-test

**Child outcomes:** 

#### Other outcomes:

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Robinson-Smith, L., Menzies, V., Cramman, H., Wang, Y. L., Fairhurst, C., Hallett, S., Beckmann, N., Merrell C., Torgerson C., Stothard S. & Siddiqui, N. (2019). EasyPeasy: learning through play. Evaluation report.

Available athttps://educationendowmentfoundation.org.uk/public/files/Projects/Evaluation\_Reports/EasyPeasy.pdf Study design and sample

The third study is a cluster RCT.

This study involved random assignment of 102 nurseries in equal proportions to a treatment group and a no treatment group. Randomisation was conducted using minimisation, with groups balanced on the number of children with parental agreement to participate within a nursery. This study was conducted in the UK, with a sample of children aged 3 and 4 years. The majority of children in the trial sample were of White British ethnicity (66.6% intervention group; 65.7% control group), followed by Asian (15.5% intervention; 18.2% control) and Black/Caribbean (4.4% intervention; 5.1% control). The trial sample was balanced on gender (49.8% male in the intervention group; 48.4% in control group) and the children were relatively disadvantaged: in the intervention group, around 14.5% of pupils were eligible for pupil premium and in the control group this rate was 28.2%.

#### Measures

- Child language and communication was measured using the Clinical Evaluation of Language Fundamentals (CELF) preschool 2 UK.
- Child self-regulation and social-emotional development was measured using the Child Self-regulation and Behaviour Questionnaire (CSBQ, teacher report).
- Home environment was measured using the Home Observation and Measurement of Environment (HOME).

#### **Findings**

This study identified no statistically significant impact on child outcomes.

The study benefitted from some key methodological advantages relative to the previous two studies, including low attrition, a much larger sample and analysis that takes into account clustering.

However, the conclusions that can be drawn from this study are limited by methodological issues relating to unequivalent groups at baseline.

#### Guidebook

The EIF Guidebook provides information about early intervention programmes that have at least preliminary evidence of achieving positive outcomes for children. It provides information based on EIF's assessment of the strength of evidence for a programme's effectiveness, and on detail about programmes shared with us by those who design, run and deliver them.

The Guidebook serves an important starting point for commissioners to find out more about effective early interventions, and for programme providers to find out more about what good evidence of impact looks like and how it can be captured. As just one of our key resources for commissioners and practitioners, the Guidebook is an essential part of EIF's work to support the development of and investment in effective early intervention programmes.

Our assessment of the evidence for a programme's effectiveness can inform and support certain parts of a commissioning decision, but it is not a substitute for professional judgment. Evidence about what has worked in the past offers no guarantee that an approach will work in all circumstances. Crucially, the Guidebook is not a market comparison website: ratings and other information should not be interpreted as a specific recommendation, kite mark or endorsement for any programme.

How to read the Guidebook

EIF evidence standards

About the EIF Guidebook

#### **EIF**

The Early Intervention Foundation (EIF) is an independent charity and a member of the What Works network. We support the use of effective early intervention for children, young people and their families: identifying signals of risk, and responding with effective interventions to improve outcomes, reduce hardship and save the public money in the long term.

We work by generating evidence and knowledge of what works in our field, putting this information in the hands of commissioners, practitioners and policymakers, and supporting the adoption of the evidence in local areas and relevant sectors.

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