

Parents Plus Parenting when Separated

Review: January 2019

Parents Plus Parenting when Separated is a parenting programme. It is a targeted selective programme for children between the ages of 0 and 18 whose parents are preparing for, going through, or have gone through, a separation or divorce. It is delivered in a variety of settings including children's centres or other early years setting, primary schools, secondary schools, community centres, outpatient/health centre and aims to improve mental health and wellbeing.

It is a six-week course that highlights practical steps parents can take to help their children cope and thrive as well as coping successfully themselves. Topics of the sessions include:

- Solving co-parenting problems in a positive way that focuses on the needs of children.
- Coping with the emotional impact of separation and learning stress management techniques.
- Helping their children to cope with the impact of the separation both emotionally and practically.
- Enhancing communication with their children and with their children's other parent.

Evidence
rating: **2+**

Cost rating: **2**

EIF Programme Assessment

Parents Plus Parenting when Separated 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.

Cost rating

A rating of 2 indicates that a programme has a medium-low cost to set up and deliver, compared with other interventions reviewed by EIF. This is equivalent to an estimated unit cost of £100–£499.

Cost rating: **2**

Child outcomes

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

Preventing crime, violence and antisocial behaviour

Improved child behaviour - based on **study 1**

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
- Preadolescents
- Adolescents

How is it delivered?

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

- 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
- Primary school
- Secondary school
- Community centre
- Out-patient health setting

How is it targeted?

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

- Targeted selective
-

Where has it been implemented?

Ireland, Northern Ireland, United Kingdom

UK provision

This programme has been implemented in the UK.

UK evaluation

This programme's best evidence does not include evaluation conducted in the UK.

About the programme

What happens during delivery?

How is it delivered?

- Parents Plus Parenting when Separated is delivered in six sessions of 2.5 hours' duration each over a six-week period, by two practitioners, to groups of 12 participants.

What happens during the intervention?

- The intervention combines education through manualised material containing research-based ideas with skills-building exercises using group discussion, role play, homework assignments and problem-solving.
- The activities will help parents to develop communication skills between parents, and between parents and children; conflict resolution skills; positive self-care skills; and parenting skills.
- The aim is to enhance parent and family functioning which promotes children's resiliency.

What are the implementation requirements?

Who can deliver it?

- The practitioners who deliver this programme are qualified health or education professionals with recommended QCF-6 level qualifications.

What are the training requirements?

- Practitioners have 17 hours of programme training. Booster training of practitioners is recommended.

How are the practitioners supervised?

Practitioner supervision is provided through the following processes:

- It is recommended that practitioners receive case management supervision from one host agency supervisor (qualified to recommended QCF-6 level).
- Host agency supervisors are not required to receive any further programme training.
- It is also recommended that practitioners receive clinical supervision from one programme developer/external supervisor (qualified to recommended QCF-7/8 level).
- Programme developer/external supervisors are required to receive 14 hours of programme training.
- Parents Plus have a detailed quality protocol that outlines the supervision process.

What are the systems for maintaining fidelity?

Programme fidelity is maintained through the following processes:

- Training manual
- Face-to-face training
- Fidelity monitoring.

Is there a licensing requirement?

There is no licence required to run this programme.

How does it work? (Theory of Change)

How does it work?

- Parental separation can have a detrimental effect on children's social and emotional functioning, particularly if there are high levels of parental conflict or if parents are experiencing difficulties with their own coping post-separation, which can lead to periods of less-effective parenting.
- Children benefit when parents are coping well and can establish a cooperative co-parenting relationship. Therefore, PPPWS supports parents to develop communication and conflict-resolution skills, positive self-care and parenting skills.
- In the short term, parents have more awareness of the impact of separation on children and have gained skills in self-care, communication and conflict resolution; which led to a decrease in conflict, an increase in their parental adjustment, and a decrease in child behaviour problems.
- It is hoped that these outcomes will lead to better social and emotional adjustment for children and parents in the longer term.

Intended outcomes

Supporting children's mental health and wellbeing

Contact details

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About the evidence

Parents Plus Parenting when Separated's most rigorous evidence comes from a cluster RCT which was conducted in the Republic of Ireland.

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

This programme is underpinned by one study with a level 2+ rating, hence the programme receives a level 2+ rating overall.

Study 1

Citation: Keating et al., 2015 | **Design:** Cluster RCT

Country: Ireland | **Study rating:** 2+

Sample: 16 sites (Child and Family Mental Health Services, and Child and Family voluntary care agencies), including 161 separated families, with children 3 years or older.

Timing: Pre-test; post-test (six weeks later)

Child outcomes:

Improved child behaviour

Other outcomes:

Improved parenting satisfaction

Improved parental adjustment

Reduced interparental conflict

Keating, A., Sharry, J., Murphy, M., Rooney, B., Carr, A. (2016). An evaluation of the parents plus-Parenting when separated programme. *Clinical child psychology and psychiatry*, 21(2), 240-254.

Available at

<https://www.parentsplus.ie/wp/wp-content/uploads/2015/06/Keating-PP-PWS-.pdf>

Study design and sample

The first study is a cluster RCT.

This study involved the random assignment of 16 sites in the Republic of Ireland. Sites included primary, secondary, and tertiary care Child and Family Mental Health Services in the Irish public health system (the Health Service Executive (HSE)), and Child and Family voluntary care agencies. Pairs of sites were identified in which groups of participants at each site were matched as closely as possible at Time 1. For each pair of sites, one site was randomized to the treatment group (n=8) and one to the waiting-list control group (n=8).

This study was conducted in the Republic of Ireland, with a sample of 161 separated parents and their children. Participants were included if they had been separated for at least a month and had children who were 3 years or older. The majority of the participants were female (71%) and single (79%).

Measures

The Kansas Parental Satisfaction Scale was used to measure parents' perceptions of the quality of their relationship with their child (self-report).

The total difficulties scale of the parent-report version of the Strengths and Difficulties Questionnaire was used to measure child behaviour (parent-report).

The interparental conflict subscale of the Quality of Co-parental Communications Scale (QCCS) was used to assess interparental conflict (self-report).

The Mental Health Inventory (MHI-5) is an instrument for screening common psychological problems such as anxiety and depression and was used to assess parental psychological adjustment (self-report).

Findings

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

This includes improved child behaviour (SDQ); improved quality of the parent-child relationship (The Kansas Parental Satisfaction Scale); improved parental psychological adjustment (MHI-5); and reduced interparental conflict (QCCS).

The conclusions that can be drawn from this study are limited by methodological issues pertaining to non-equivalence between the treatment and control group on baseline characteristics after attrition, and the treatment condition not being modelled at the level of assignment (i.e clusters), hence why a higher rating is not achieved.

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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