

National implementation of an early parenting program: Effectiveness across diverse settings

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Evaluation context

Australian Department of Families, Housing, Community Services and Indigenous Affairs (FaHCSIA) funded the 'expansion' (dissemination) of "evidence-based" programs

Sing & Grow intervention for marginalised parents and their children aged 0-3 years

Requirement was an independent evaluation

Effectiveness study – conducted under the typical service delivery conditions from 2005-2007

Sing & Grow

Program:

10-week, group, music therapy program for parents marginalised by social, economic, cultural circumstances and their children aged 0-3 yrs

Aims:

to improve the quality of parent-child interactions and parents' emotional responsiveness to their children.

Music and song used as non-threatening, enjoyable media for teaching parenting skills.

Delivered by registered music therapists (masters trained).

Sing & Grow



Program Structure & Strategies – Playgroup context

Group activities structured to provide parents with practice in

- engaging in fun one-to-one activities with their child
- set format each week – songs and activities that promote
 - social and communication skills
 - following simple instructions
 - fine and gross motor skills
- responding to incidental opportunities to encourage their child's behavioural, social and communication skills in an age-appropriate manner
- using music and song for managing restless, inattentive or disruptive behaviour as appropriate.

Program Structure & Strategies

Specific parenting strategies modelled are

- positive non-verbal communication (eye contact, smiling and physical affection)
- the use of praise, modelling and positive reinforcement to shape children's verbal, social and motor skills
- the use of simple verbal instructions and limit setting
- the use of repetition and practice to extend children's developmental skills.

To aid in the transfer to the home environment

- participants are provided with a CD and song book.

National Implementation Trial

2005-2008

Service Structure

FaHCSIA had the contract with Playgroup Queensland

PG Qld employed 4.5 part/full time staff (in 3 main states)
and 35 sessional staff nation-wide

PG Qld has partnership agreements with Playgroup
Associations in each state & territory

Families referred from community service agencies

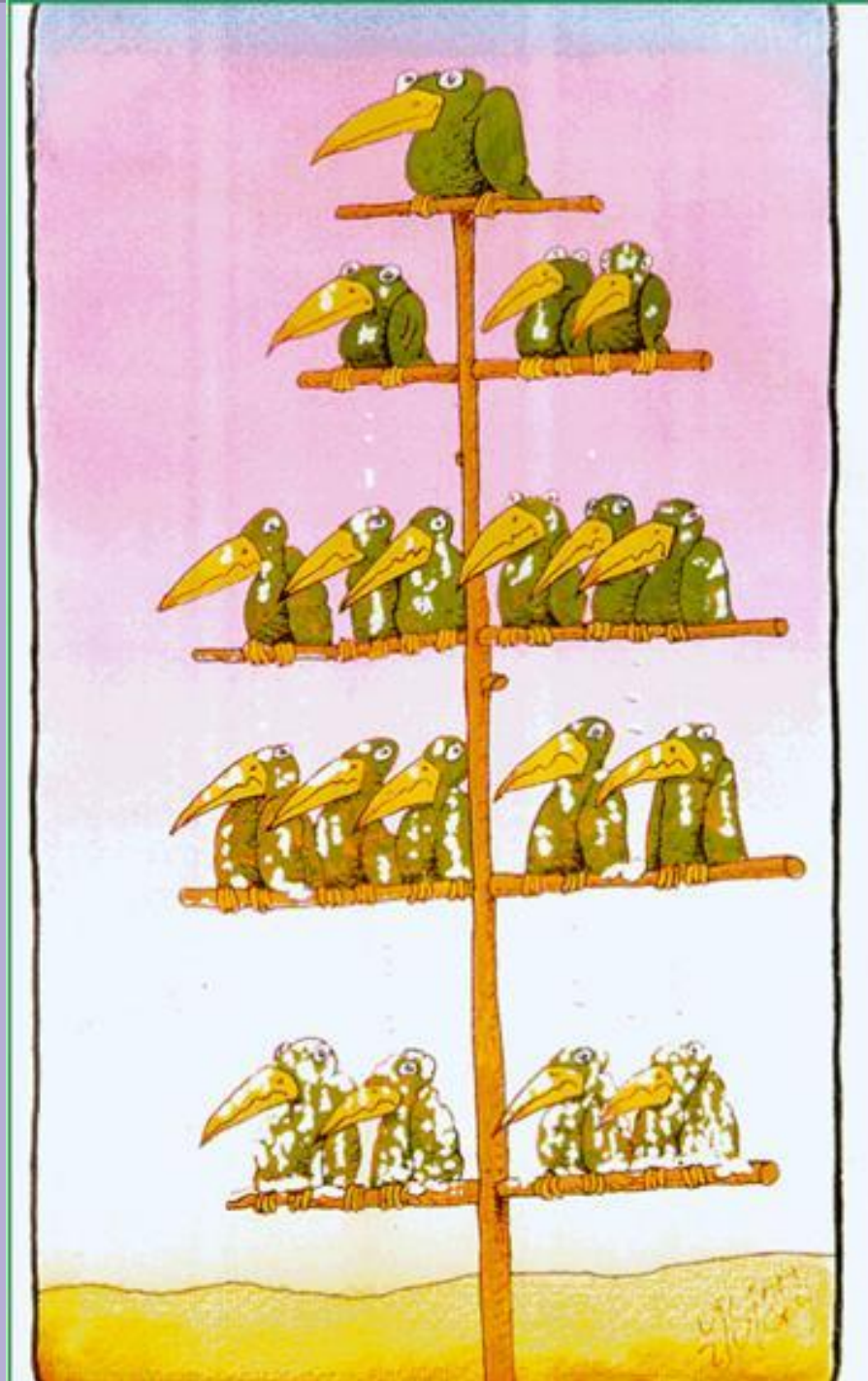
Programs were conducted in the agency settings

How effective was *Sing & Grow* when implemented nationally?

Were similar gains achieved across all implementation sites?

Organisational Chart

High level
support
matters ...



Site Comparison

Site A = Queensland, locally-based director (site of origin)

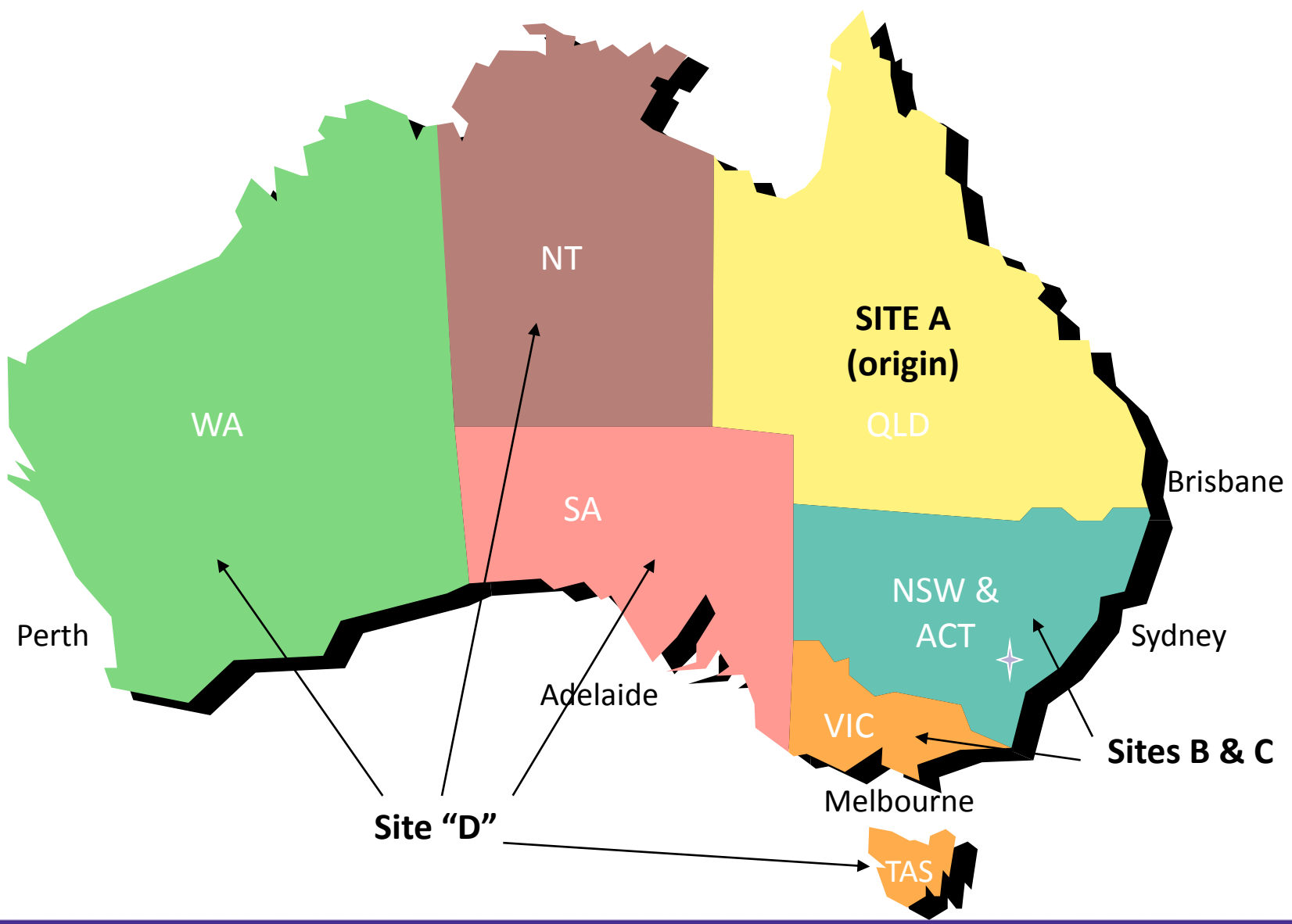
Site B = Major state 1, locally-based director, high support*

Site C = Major state 2, locally-based director, low support*

Site D = All other states & territories, no local director
("multi state")

** differed in terms of the level of support provided for the implementation*

based on qualitative interviews with senior SnG & Playgroup staff



Sample

1864 families attended 188 groups (2006-2007)

Data available for 1611 families attending 161 groups

- pre parent-report data for 1354 families (84.5%)
- post parent-report data for 850 families (62.8% of pres)

Programs were delivered by 39 RMTs

- 27 completed staff surveys (69.2%)

Did the participants and experiences of the program differ by site?

Differences by site

Participants

Children: 26.3 months (SD 12.9), 51% girls

Good reach for desired parents

**Good reach to the
target participants**

- 45% had not completed high school
- 37% main family income source from benefits
- 26% were single parents
- 18% had main language other than English
- 8% were Indigenous

In addition, at pre

- 40% reported depression in the last year

Parent characteristics by site

	A	B	C	D
	Origin	Hi supp	Lo supp	Multi
	N=220	N=280	N=118	N=232
Incomplete high school (%) *	31.8	36.5	42.7	47.3
Income from benefits (%)	35.4	31.3	40.4	27.6
Single parent (%)	25.3	20.4	29.7	20.8
Non-English speaking (%) *	13.3	26.3	15.3	11.3
Indigenous (%) *	9.1	4.3	0.0	5.2

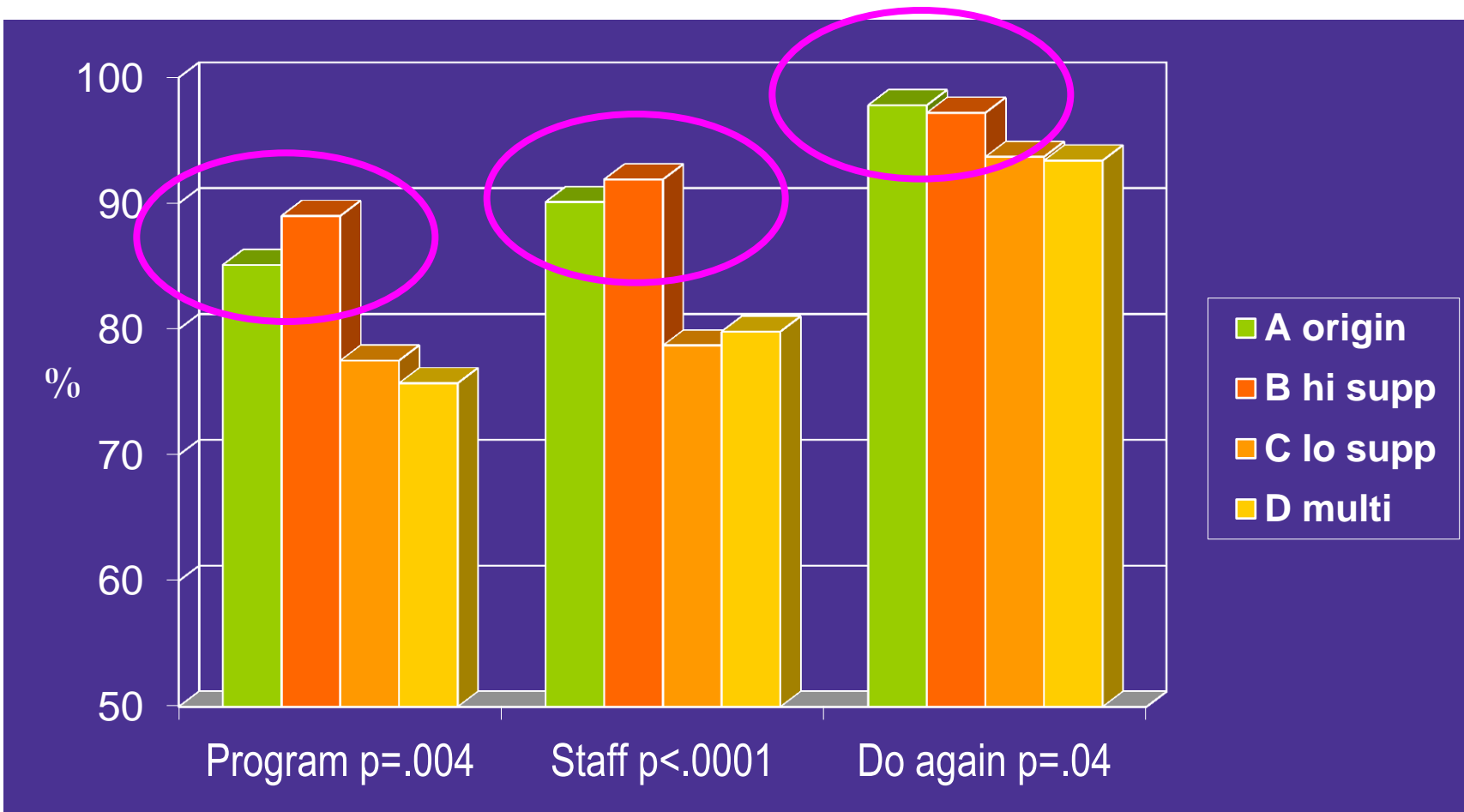
Staff satisfaction by site

	A Origin	B Hi supp	C Lo supp	D Multi
Satisfaction with training	3.4 (0.6)	3.2 (0.4)	3.2 (0.4)	2.7 (1.2)
Satisfaction with support	3.6 (0.6)	3.3 (0.5)	3.5 (0.6)	2.7 (0.6)

Parent satisfaction by site



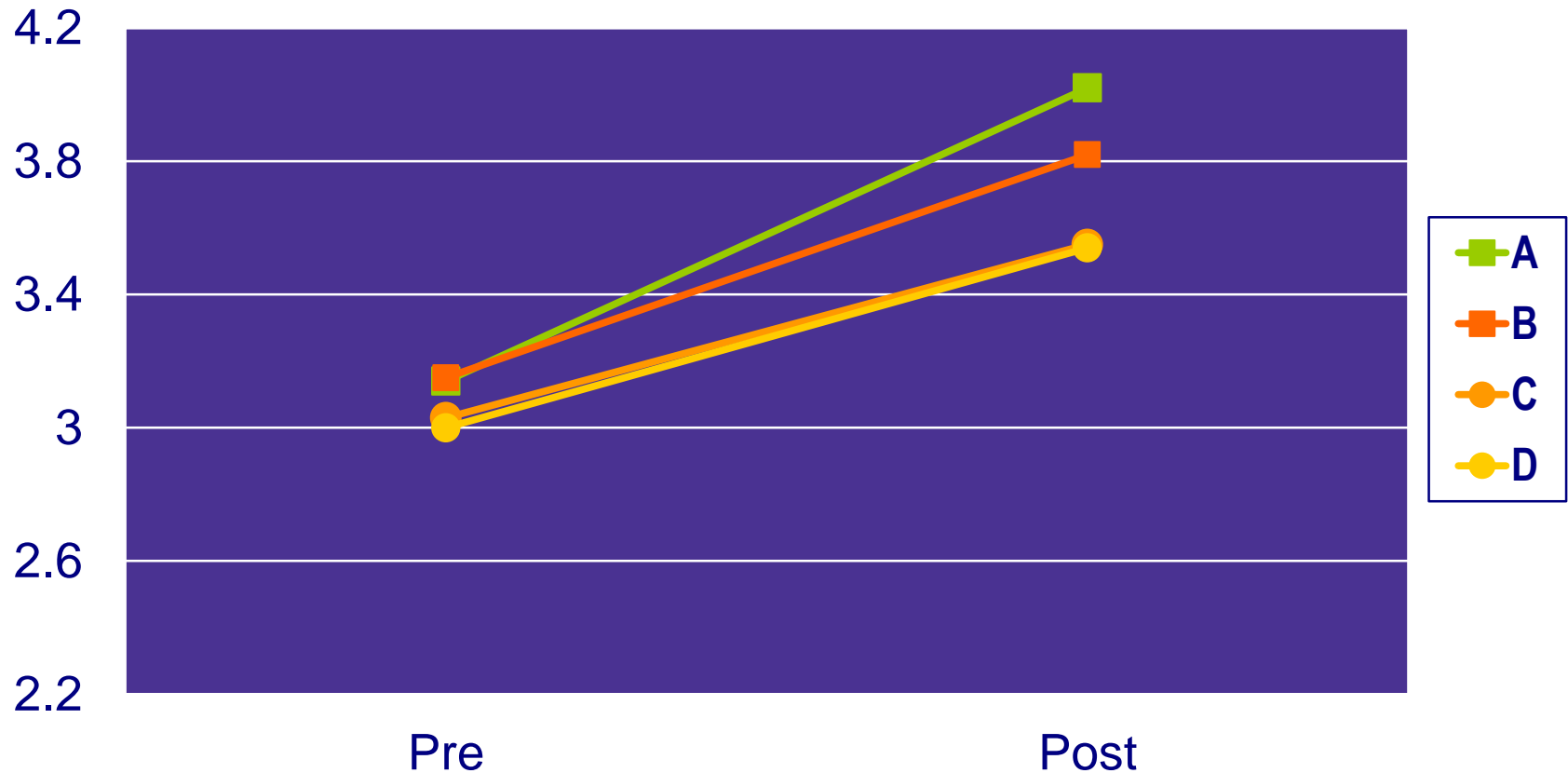
Parent satisfaction by site



Observed parent & child behaviours pre to post

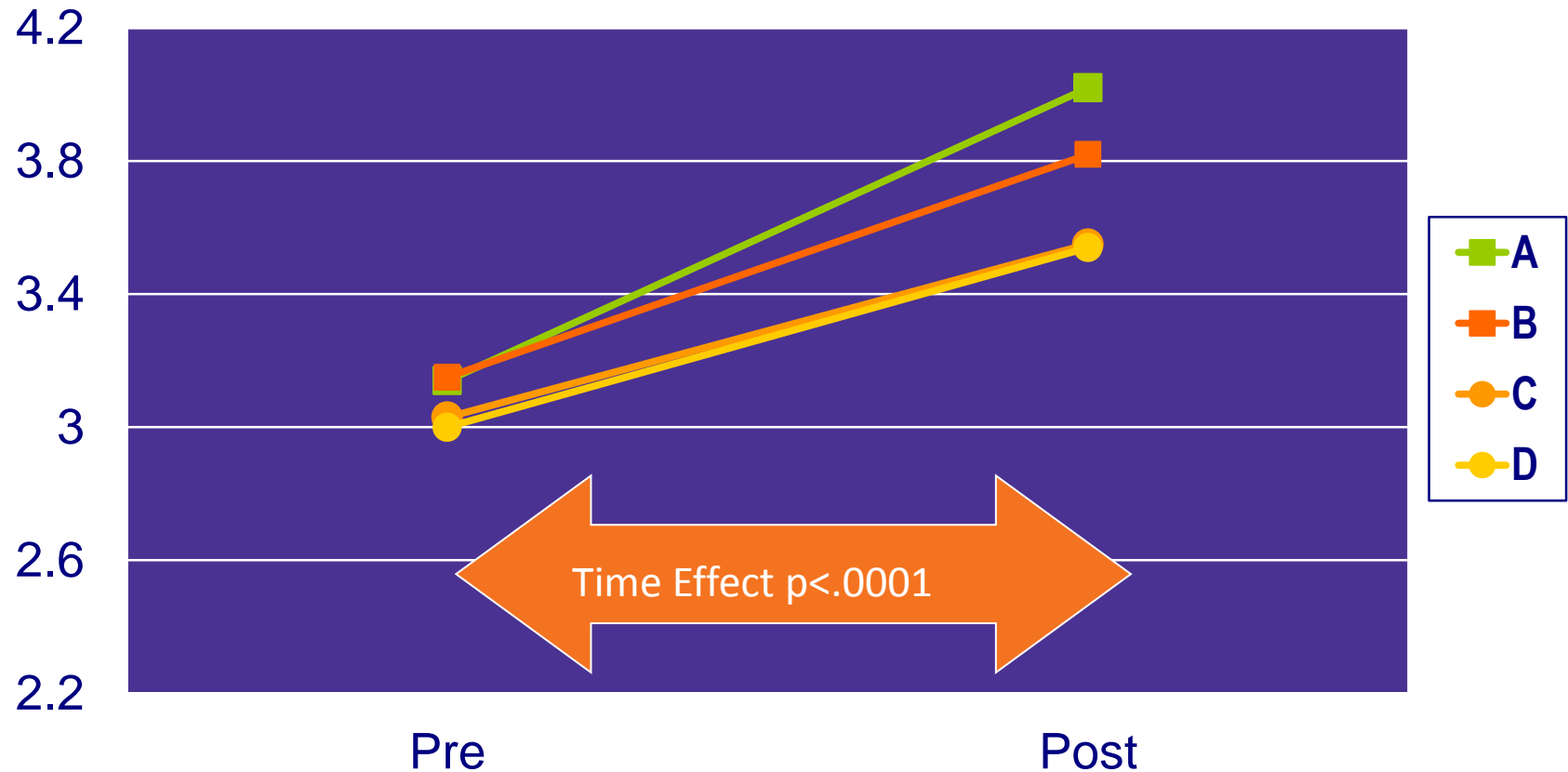
Differences by site

Observed parent sensitivity to child

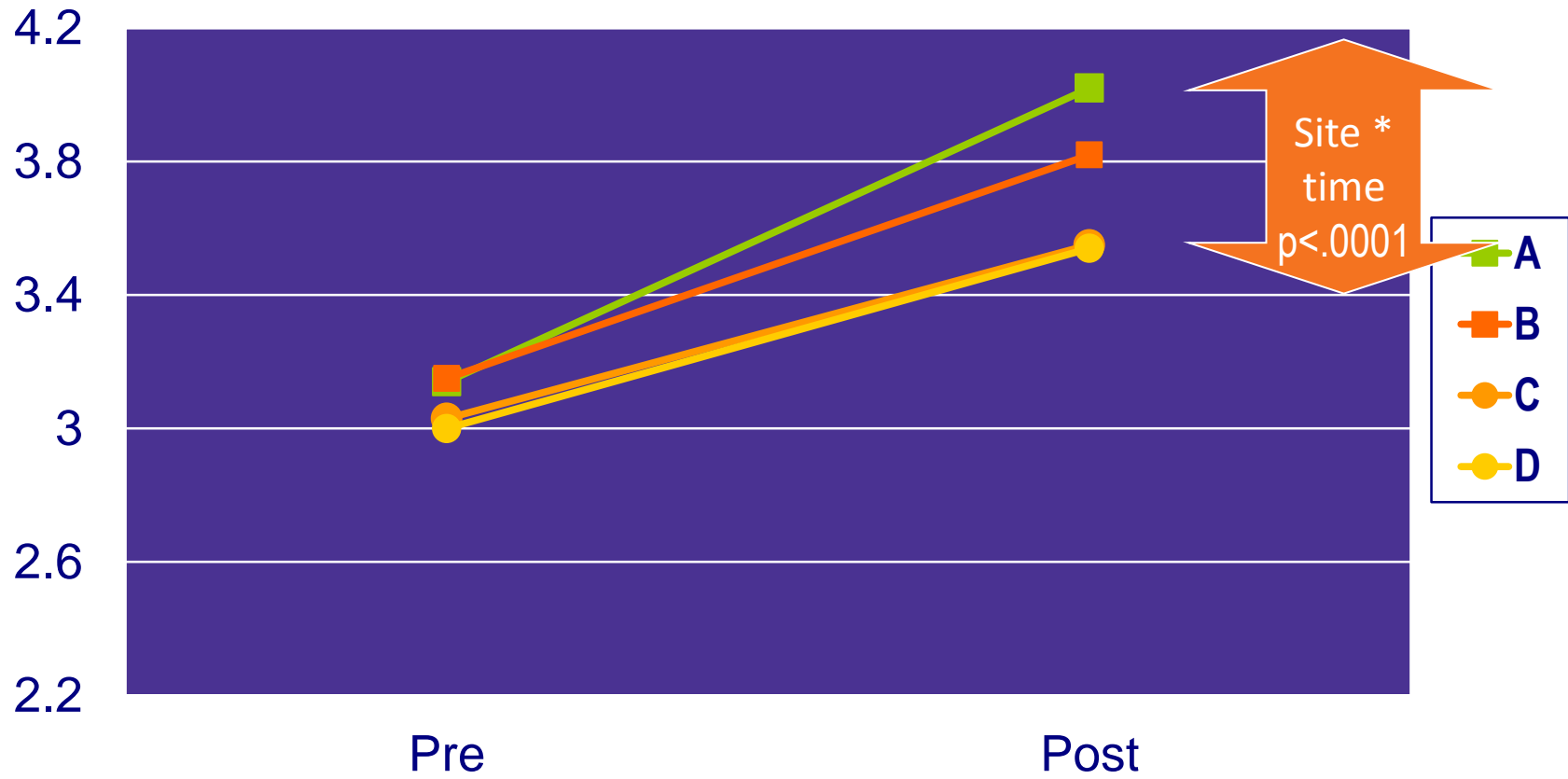


Rated on 1-5 scale

Observed parent sensitivity to child

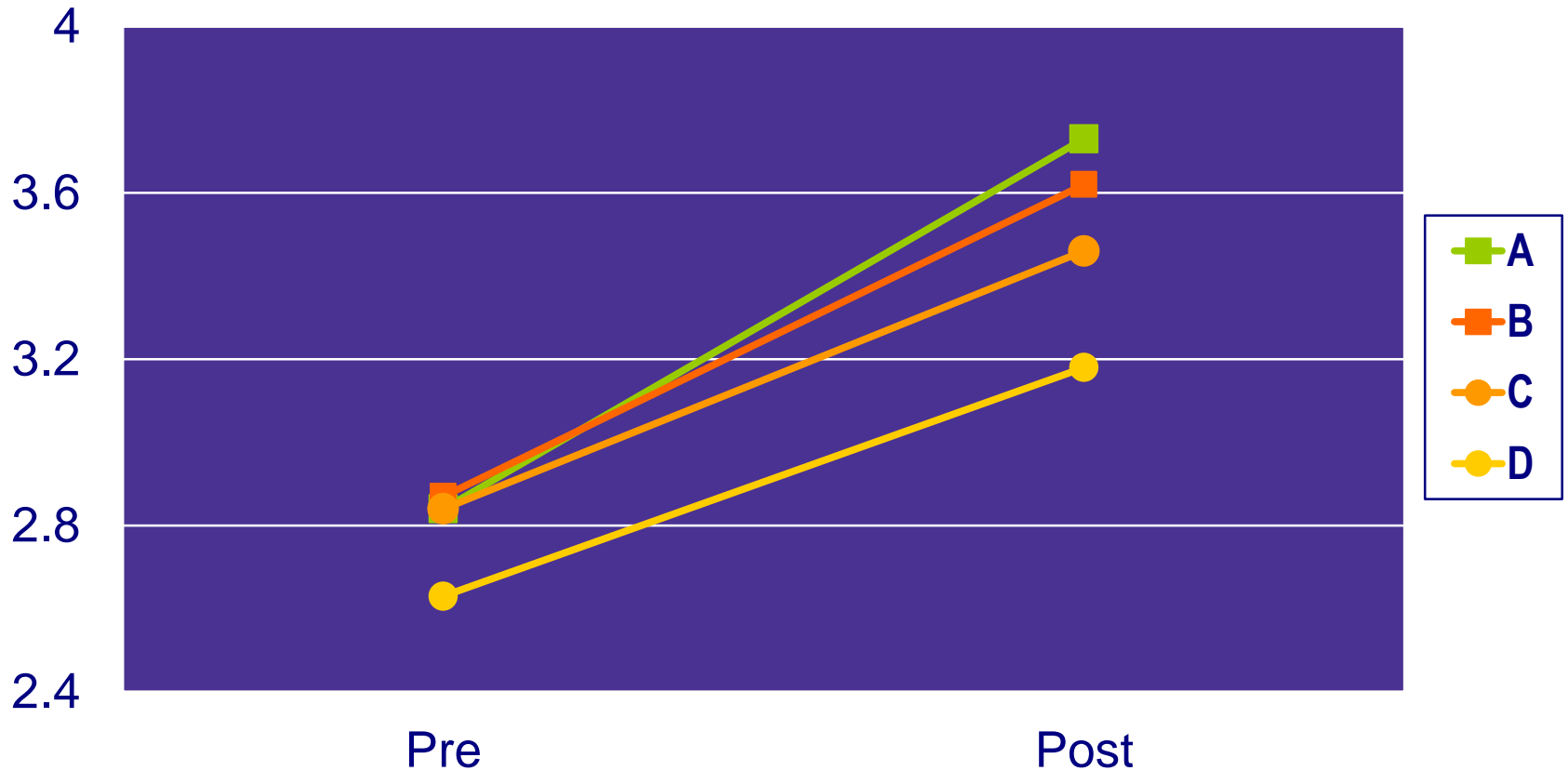


Observed parent sensitivity to child



A, B > C, D

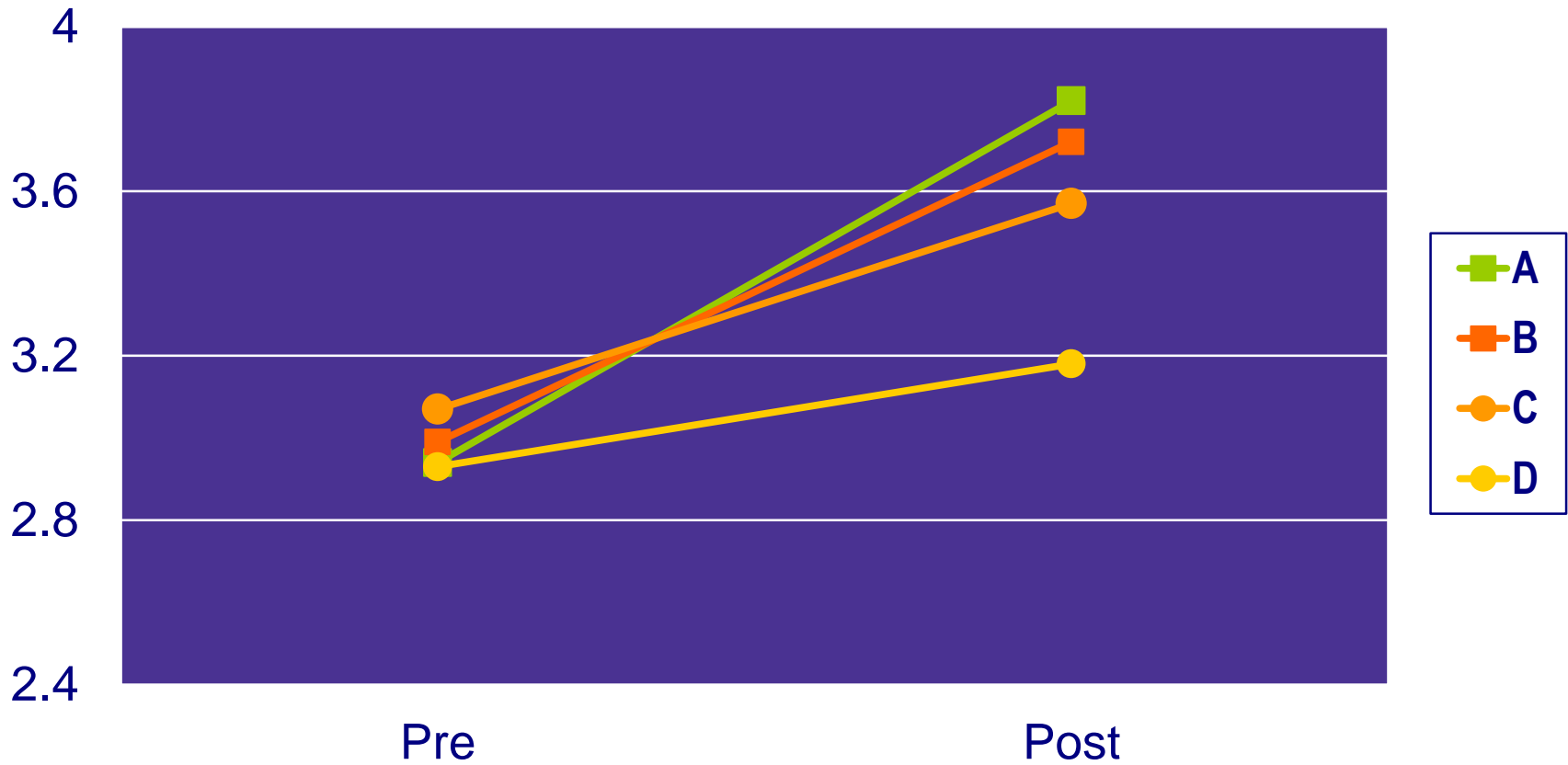
Observed parent engagement



Time $p < .0001$; Interaction $p < .0001$

A, B, C > D; A > C

Observed parent acceptance of child



Time: $p < .0001$; Interaction: $p < .0001$

A, B > D

Observed pre to post changes

Parent and child behaviours

- consistent, highly significant improvements

Site B (hi support) similar to Site A

- improvements were poorer for Site D (multi), and sometimes for Site C (low support).

Therapist observations of behaviour in session.

10% independently rated to check validity.

Parent-reported parent & child
behaviours pre to post

NO differences by site

Are differences in observed outcomes due to participant or implementation differences?

Multi-level Modelling

Separately for each outcome

- Level 1 = repeated measures, within individuals
- Level 2 = individual
- Level 3 = group

Participant characteristics entered first

Group and session leader characteristics entered second

Results:

Time effects remained after adjustment

Participant characteristics accounted for some site * time effects

Group and session leader characteristics largely eliminated the remaining site * time effects

Overall conclusions

MT program for parents & young children from highly disadvantaged backgrounds

- high levels of parent satisfaction
- improvements for observed outcomes for parents and children
- some improvements in reported parenting and child outcomes

Improvements were observed across all four implementation sites

But some sites showed relatively poorer outcomes

- for the observed measures, not parent-reported measures
- partially reflected differences in participants across sites
- partially reflected differences in implementation

Limitations

- Absence of control data, caution in attributing change to the program
- High level of missing data, caution in generalising findings
- Observational data are not independent

Publications include:

- Comparison pre-post for young parents, parents of child with a disability & parents facing socioeconomic disadvantage *J. Health Psychology, 2008*
- Implementation study *Prevention Science, 2010*



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