

# Research to Practice Series

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## Family Foundations - an early intervention parenting support program

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Belconnen Community Service Family Foundations is a program for vulnerable families with children aged 0-5 years. Offered across the Australian Capital Territory (ACT), it provides targeted evidence-based parenting services, and delivers strengths-based parenting interventions and supports tailored to individual families.

In this issue of the Institute of Child Protection Studies (ICPS) Research to Practice series we present findings from an evaluation of the program.

We also provide recommendations to help those who work with families at risk support and enhance parents' and care givers' parenting capacity. As always, we are guided by the goal of contributing to overall positive outcomes for children.



## Introduction

Family Foundations is an early intervention therapeutic program delivered in the ACT. It was developed in 2016 by Belconnen Community Services to promote strong, secure and healthy relationships between parents/carers and their children aged 0-5 years.

The ACT Community Services Directorate (CSD) commissioned ICPS to conduct an evaluation of the process and outcomes of the program. Family Foundations is delivered by the Belconnen Community Services in Canberra, ACT and funded by CSD.

ICPS began this evaluation one year after it had been running. As part of this evaluation, in collaboration with Family Foundations staff, we developed a program logic outlining elements of the program such as aims and objectives, activities, resources and practices. The program logic also helped us identify the main intended outcomes.

We drew on current literature and findings from the ICPS report on the process evaluation and the report on outcome evaluation based on the Family Foundations program conducted in 2017-2019 (download: www.acu.edu.au/ICPS/Publications).

Family Foundations is for families with young children who are dealing with complex parenting needs. This definition of the target group allows the service to include a broad range of people from different socio-economic positions who exhibit difficulties but are not in crisis and are not necessarily involved in statutory systems.

The program provides face-to-face sessions with one or more family members. Most families receive 12 sessions over 12 months on a voluntary basis. Typically, the sessions include the primary carer for a child and a Family Foundations practitioner.

At the time of the evaluation the program mainly served families in the Gungahlin and North Canberra area who were self-referred or referred by community service organisations. Most of the families already had case management or other type of support in place before being referred to the program. Family Foundations practitioners identified an array of needs including:

- parenting knowledge (i.e., facts and information that can be gained from experience or education about parenting)
- emotional regulation
- attachment relationship
- routine and boundaries.

### Focus on child development

A significant component of the evaluation was understanding improvements in parenting capacity and child wellbeing through the perspective of child development and child needs. Focusing attention on child developmental needs is consistent with a 'child development master narrative' for how best to frame provision of parenting supports (L'Hote et al. 2018).

A typical practice strategy is to focus on parent effectiveness and skills rather than focusing on child development. The difference between the two narratives is subtle: one is about producing better parents, the other is about achieving healthy developmental outcomes for children. A childcentred approach, based on recent research evidence on parenting, Talking about the Science of Parenting (L'Hote et al. 2018), informed the evaluation of the Family Foundations program.

# Family characteristics

The composition of households and characteristics of the families who took part in Family Foundations from January 2017 to October 2018 was as follows:

Parents & care givers: 72 mothers; 6 fathers; 3 grandparents (all female) Age of parents & care givers: late teens to mid-fifties; mean & median age mid-thirties Age of child: 0 to 5 years; average age 3.36 years; median age 3.57 years Gender of children in families including siblings: 59 male; 40 females Family size: 62 families with 1-2 children

At the time of the evaluation, families were largely comprised of one or two children. Families with two parents had at least one parent earning a full-time income. In 66% of single parent families, the parent was unemployed.

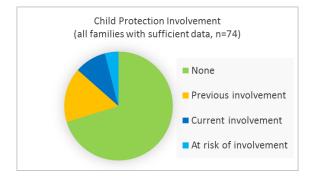
The relationship status of the parent seeking support was as follows:

- 35% married
- 22% single
- 20% partnered
- 18% separated
- 4% defacto
- 1% divorced.

Just under 25% families were identified as having a culturally and linguistically diverse background, including from Asia, Europe, Middle East and Africa. Eight families identified as either Aboriginal or Torres Strait Islander.

Data regarding involvement with child protection was as follows:

- 70% no child protection involvement
- 16% had previous involvement
- · 9% had current statutory involvement
- 4% were known to protective services but had no previous or current statutory involvement.



# Evaluation of outcomes

The program logic identified five short-term outcomes to help us assess parenting capacity for parents/carers, and five short-term outcomes for children. The following outcomes informed the key evaluation questions.

### Parent outcomes

To what extent did participation in Family Foundations program contribute to improved parenting capacity? We focused on the following behaviours:

- help seeking behaviours
- parenting knowledge
- confidence in their role as a parent/care giver
- emotional regulation
- community connectedness.

### Child outcomes

To what extent did parent participation in Family Foundations contribute to improved outcomes for their children? We looked at five domains:

- sense of safety
- help-seeking behaviours
- level of trust in their parents and others
- emotional regulation
- behaviour.

# Method

We used a mixed-methods approach that involved collecting, analysing and interpreting quantitative and qualitative data.

Practitioners administered three outcome measures or tools to collect the quantitative data from January 2017 to October 2018. Parents were invited to complete the tools before joining Family Foundations and when they exited. Typically, parents completed the tools around one year apart.

Parents (program participants), program staff (practitioners and managers) and stakeholders consented to interviews to discuss observed outcomes post-program participation in September to October 2018. The stakeholders represented organisations that had referred potential clients to Family Foundations, e.g. community-based health organisations. All interviews were one-on-one and either by phone or in person.



### Tools used to measure key outcomes

Parenting Empowerment and Efficacy Measure (PEEM) (Freiberg, Homel, & Branch, 2014)

Strengths and Difficulties Questionnaire (SDQ) (Goodman, 1997)

Family Foundations Questionnaire (FFQ) included following measures selected from Growing Up in Australia: The Longitudinal Study of Australian Children (2003):

- Parenting self-efficacy
   (PSE)
- Parenting warmth (PW)
- Parenting consistency (PC)
- Parenting irritability (PI)

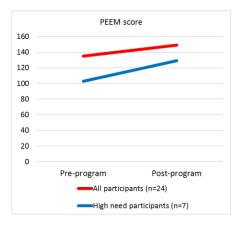
## Quantitative outcomes

Improvements in parenting capacity were evident across all scores for all outcome tools. The changes in PEEM and FFQ scores after participating in the program typically showed small, but statistically significant, improvements. Similarly, the SDQ test results revealed improved outcomes for children. The parent-reported total difficulties score dropped on average after the parent participated in the program.

### Parenting Empowerment and Efficacy Measure (PEEM)

Twenty-four parents had PEEM scores at both pre- and post-program interviews. The changes in PEEM after participating in the program showed small, but statistically significant, improvements (p<.05).

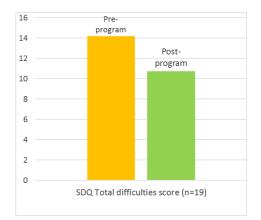
Overall, the PEEM scores improved for the whole group. Seven parents with scores in the 'poor' and 'very poor' bands (high-need participants) upon entry to Family Foundations showed even more substantial improvement in their post-program scores.



### Strengths and Difficulties Questionnaire (SDQ)

Similarly, the SDQ test results revealed improved outcomes for children as reported by the parent. Of the 19 parents who were administered the SDQ, the average Total Difficulties score at preprogram (14.2) fell into the 'moderate' range with a significant improvement at post-program interviews where the average (10.7) fell into the 'good' range and this difference was statistically significant (p<.01)

Overall, the program contributed to significant improvements in the child's emotional and behavioural difficulties as reported by the parent.

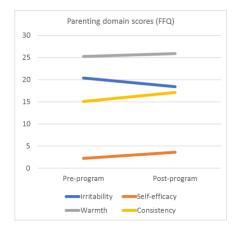


## Quantitative outcomes (cont.)

### Family Foundations Questionnaire (FFQ)

We had both pre- and post-program FFQ scores from 22 parents. Most domains revealed small but statistically significant improvements.

- The Parenting Self-Efficacy (PSE) domain score for parents who participated changed preand post-program participation.
- Parenting Warmth (PW) scores showed little change between test periods. The mean PW scores did increase very slightly between test periods, but this increase was not statistically significant.
- The Parenting Consistency (PC) domain scores significantly increased at post-program interview. Like the other outcome measures, parents with relatively low scores at preprogram interviews improved at follow up and parents with higher scores tended to show minimal improvement or decline in their PC scores.





# Qualitative outcomes

The quantitative outcomes were complemented with qualitative information about improvements and changes in parenting capacity and outcomes for children.

You can read the appendix for a more detailed description of the tools and evaluation.

### **Outcomes for parents**

Interviews with parents, practitioners and other stakeholders revealed positive changes to parenting capacity including: parenting knowledge, helping seeking behaviours, emotional regulation, increased confidence in role as parent and increased community connectedness.

#### Parenting knowledge

During post-interviews, practitioners encouraged parents to reflect on any new perspectives they might have gained and to reflect on what they learned about parenting and being a parent. Parents were also encouraged to reflect on what it is to be a child, including stages of child development. One parent expressed surprise at how much they had to re-learn, to shift attitudes and adopt new parenting practices:

I've learned to be more empathetic towards [my child] and try to understand what's going on in his head ... it's taught me ... not [to be] so ... closed-minded ... to acknowledge feelings ... I always thought children were manipulative but ... they're not ... It's just learning about their mindset and their brain development. (Parent)

One practitioner stressed how critical it is to work from a psychologically orientated position:

[Family Foundations helps parents] learn the skills to regulate their child ... We still have middleincome families locking their children in rooms, so [learning from a] psycho-education [perspective] in terms of the impact of human to human regulation versus leaving a child lying in their room [is critical]. (Practitioner)

#### Improved help-seeking behaviours in parents

Interviews with parents revealed a new attitude to help-seeking. Many parents seemed more willing to ask others for help. Some even gained enough confidence to seek practical or emotional support from people other than their practitioner. One parent was relieved to find that "don't have to do everything by yourself."

### Improved emotional regulation in parents

Parents spoke of Family Foundations supporting them to be aware of their own emotional state when relating to their children:

[It] made [me] more aware ... [of] just me as a person, how my child might perceive me ... being aware of my emotional state and ... understanding ... their emotional state ... There's a reason behind pretty much most things. (Parent)

## Qualitative outcomes (cont.)

### **Outcomes for children**

Parents and practitioners reported that children participating in Family Foundations displayed improved emotional and behavioural outcomes.

#### Improved safety and trust

An unintended—but positive—outcome of the program was that it enhanced the quality of parent-child attachment: that is, the relationship between them made the child feel safe, secure and protected (Benoit, 2004). While improved safety, trust and help-seeking behaviours were identified as short-term outcomes for children, reflections revealed a deeper level of attachment as one of the benefits of participating in the program. Most practitioners described the process of working with parents as a process of establishing or enhancing secure attachment:

We focus on developing ... a strong relationship [with the parent] because ... you're not going to open up with anyone unless you're completely safe. And then acknowledging that maybe the child is displaying a lot of difficult behaviours because of their experiences, and [possibly] insecure disorganised attachment. (Practitioner)

#### Improved parental awareness of children demonstrating a need

As a result of the program, parents had a better understanding that behaviours such as tantrums were demonstrations of need. The program also helped parents develop skills to recognise when their child was asking for help and to respond appropriately:

[I have] more of an understanding of what his needs might be, even though he might be having a meltdown or he's trying to get his point across ... instead of ... getting annoyed or upset or angry about it. Trying to be as calm as possible ... has definitely improved ... family ... time. (Parent)

#### Improved emotional regulation in children

Most parents gave evidence of improved emotional regulation in their children; that is, their child's ability to effectively manage and respond to an emotional experience (Rolston & Lloyd-Richardson, n.d.). One parent described a range of behavior, including that their child was calmer, was able to verbalise his feelings, and was not as violent. Another parent wrote:

It's just a matter of working to the point where you can tell him it's the end now. Telling him, "Story time's over. This is the end. Now we turn off the light." So, he's calmed and it's giving the strategies to just get him to that. (Parent)

#### Improved behavioural outcomes for children

Most parents felt that Family Foundations contributed to positive changes in their child's behaviour. The behaviours included better-quality sleep, fewer outbursts or tantrums, active listening and enhanced empathy.

# Summary

The Family Foundations Program evaluation examined to what extent the program improved outcomes for children and their parents. The quantitative and qualitative evidence suggested that Family Foundations contributed to improved parenting capacity in all domains and outcomes for children as intended by the program.

Changes in parenting capacity were evident in the test scores for outcome tools and the qualitative accounts of parents. The PEEM and FFQ assessed parenting dimensions of personal and child wellbeing, coping skills, relationship building and communication. Test scores typically showed small, but statistically significant, improvements post-program participation. The SDQ test results revealed improved outcomes for children at the conclusion of the program.

Parents, practitioners and stakeholders described how taking part in Family Foundations developed parents' knowledge and skills and improved their sense of self-confidence in their ability to meet their child's needs. Most parents also noted an improved ability to recognise and manage their emotions when caring for their child.

While only a few parents reported improvements in their help-seeking behaviours and community connectedness, their reflections suggested a new attitude to sharing problems and seeking support from others. Parents reported improvements in the emotional regulation and behavioural outcomes of their children. Practitioners reported improved safety and trust in children.



### Child Development Master Narrative

Evidence from the evaluation suggests that parenting capacity and child wellbeing improved through taking the perspective of child development and child needs that is consistent with the 'child development master narrative' (L'Hote et al. 2018). Findings from recent research in Australia found that the child development narrative is a highly effective strategy compared with a parent effectiveness narrative.

The effective parenting narrative resulted in a statistically significant decrease in participant's receptivity for the parenting strategy (Volmert, Kendall-Taylor, Coash & Lindland, 2016 in L'Hote, 2018).

Using a master narrative that has a child's individual developmental needs at the core can help parents feel less judged about their parenting skills and become more receptive to new skills and information about how to respond to their child. It is likely that these new skills translate to better outcomes for children, as was evident in this evaluation.

# A child's perspective

A practitioner who has a child's developmental needs at the forefront of their practice can tailor goals for the family, whatever their specific needs. Family Foundations practitioners are guided by a central principle to support parents to learn how to communicate with their children and to see how their child views the world.

Empirical evidence such as the Family Foundations Program evaluation can support moves to have the child development narrative applied more widely in government and community-based parenting programs. Applying effective strategies before the family reaches the threshold of needing child protective services is also consistent with the 4th Action Plan under the National Framework for Protecting Australia's Children 2009-2020.

Sometimes they might struggle to see it from the child's perspective, or ... they don't know how to have these conversations with their child. ... my job is to really support the family to see what the communication of behaviour is ... [to see what is] underneath all that anger or sadness or ... the big emotions ... [to see] that there's a little person with a need. (Practitioner)

## Practice tips for practitioners

Practitioners can use the following strategies to support parents and improve outcomes for children. These strategies are based on practice standards developed by ACT CSD Child and Youth Protection Services and build on the child development master narrative approach.

Children do better when parents are supported through:

- 1. Child and youth-centred practice: be flexible and support parents to learn how to listen to their child and respond to them appropriately using a child development master narrative
- 2. Relationship-based practice: focus on the child and their development when talking about positive parenting behaviours
- Holistic assessment and planning: combine universal and targeted parenting systems such as Family Foundations Program
- Collaboration: involve parents and children in decision making, and support frontline staff, managers, supervisors and practitioners to focus on children's social and emotional wellbeing
- Culturally responsive practice: reflect on cultural values, parenting practices and alternative care arrangements in the country of origin or culture, to identify strengths, supports available and culturally appropriate strategies.

## Resources

We recommend that practitioners use their practice knowledge to better support and equip parents and carer givers for their important role, keeping in mind the individual circumstances of each family. The following resources are also useful:

- Kids Central Toolkit: an ICPS toolkit that builds on child-centred practice
- <u>Keeping Kids Central</u>: a free online program to help individuals and organisations understand and apply child-centred approaches in their work with children and young people
- <u>Raising Children Network</u>: free, reliable, up-to-date and independent information for Australian
  parents ranging from nurturing a newborn to raising a confident, resilient teen. Also includes
  information to help parents look after themselves too
- <u>NAPCAN:</u> 'Safe Harbour for Families' video resources
- <u>Raising Children Network</u>: independent information for Australian parents ranging from nurturing a newborn to raising a confident, resilient teens; also includes information to help parents look after themselves
- <u>Emerging Minds</u> 'Six ways to support child-focused practice in adult services': examples of
  practice for adult service professionals to support child-focused practice that enable staff to
  focus on the social and emotional wellbeing of children, even if it is not their 'core focus'
- · Frameworks Institute 'Talking about the science of parenting'



References and further details about the measures are available in PDF format from the ICPS website

## About the Institute of Child Protection Studies

The Institute of Child Protection Studies (ICPS) at the Australian Catholic University aims to enhance outcomes for children, young people and families through quality research, evaluation, training and community education.

ICPS research strengths include promoting children's participation, strengthening service systems and informing practice, and supporting child-safe communities.

The ICPS Research to Practice Series is supported by a grant from the ACT Community Services Directorate. The grant assists to enhance outcomes for children, young people and families through enhancing the skills and practice of the workforce, increasing awareness in the community, and contributing to evidence-based policy outcomes.

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