



INTERNATIONAL
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COMMITTEE

Measuring the Impact of Parenting Interventions in Low-Resource and Humanitarian Settings

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Why parenting interventions?

Improving Positive Parenting Skills and Reducing Harsh and Abusive Parenting in Low- and Middle-Income Countries: A Systematic Review

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Abstract Family and youth violence are increasingly recognized as key public health issues in developing countries. Parenting interventions form an important evidence-based strategy for preventing violence, both against and by children, yet most rigorous trials of parenting interventions have been conducted in high-income countries, with far fewer in low- and middle-income countries (LMICs). This systemat-

for most studies is unclear due to substantial or unclear risks of bias. However, findings from the two largest, highest-quality trials suggest parenting interventions may be feasible and effective in improving parent-child interaction and parental knowledge in relation to child development in LMICs, and therefore may be instrumental in addressing prevention of child maltreatment in these settings. Given



Before, the house is big and then it gets smaller and smaller when we fold the paper. If the house is big, we can live as we want. But when it gets small, we have to live united as a family.

- 38 year-old mother

Research questions

1. Can an evidence-based parenting and family skills intervention be implemented in a low-resource, conflict-affected setting?
2. Does the intervention have an impact on:
 - a) Parenting practices
 - b) Family functioning
 - c) Child behavior, psychosocial wellbeing and resilience
3. What are the processes through which participation in the intervention influences these outcomes?

Diverse Settings

- Conflict-affected **Burundi**,
- Post-conflict rural **Liberia**,
- Migration and displacement-affected **Thai-Burma border**



Intervention

Varying use of existing, evidence-based interventions versus context and culture-specific adaptation

- Locally developed (Burundi)
- Nurturing Parenting + adaptations (Liberia)
- Strengthening Families Program + adaptations

Target population

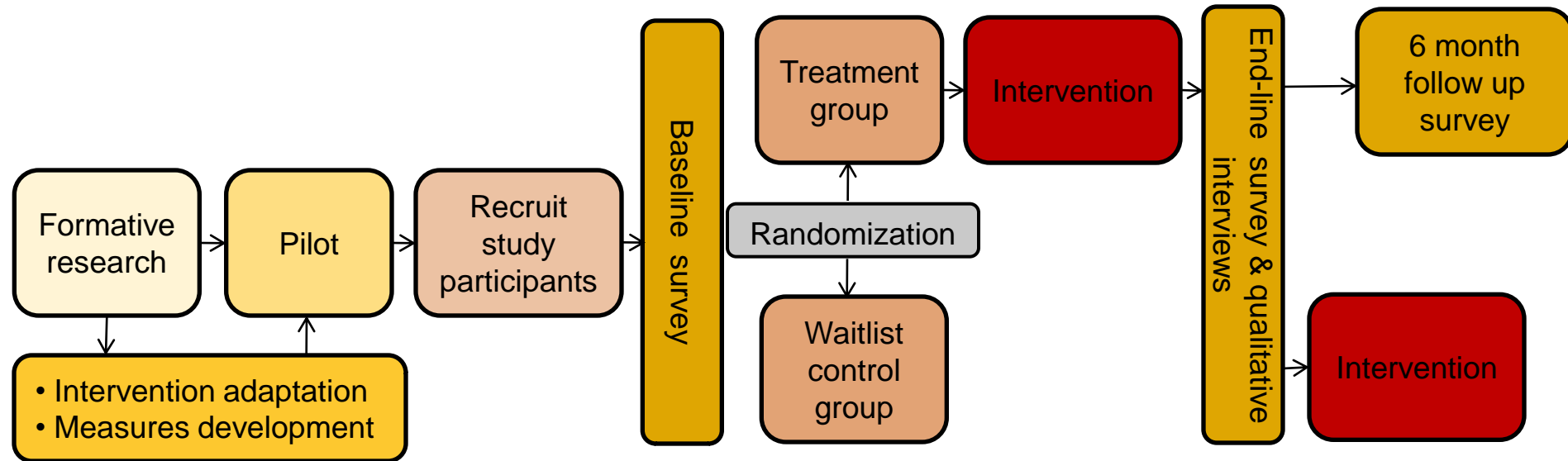
- Caregivers of children aged 10-14 (Burundi), 3-7 (Liberia) or 8-12 (Thai-Burma border)

Structure and content

- 10-12 weekly group discussion sessions
- 3 home visits (Liberia only)
- Topics included: anger and stress management; behavior management techniques; consequences of harsh punishment; communication and problem solving skills



Evaluation design and methodology

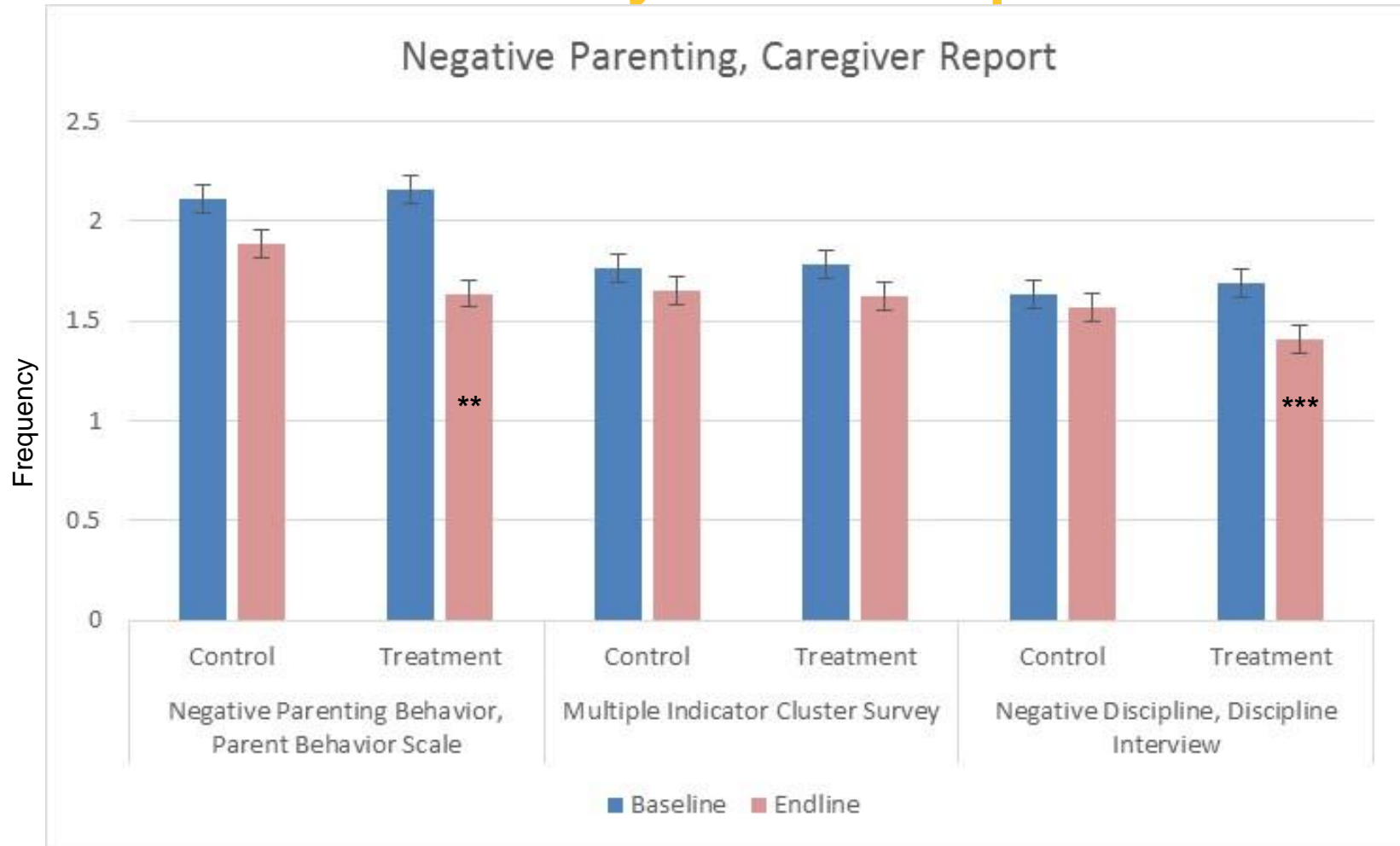


1. Measuring long term outcomes

2. Creating and adapting the best measures

Outcome of Interest	Measure
Parenting practices (positive and negative)	<ul style="list-style-type: none">• Parental Acceptance and Rejection Questionnaire (PARQ) (Rohner 2005)• Parent Behavior Scale (developed from qualitative research)
Discipline	<ul style="list-style-type: none">• Discipline Interview (Lansford et al. 2005)• Discipline Module of Multiple Indicator Cluster Survey (MICS) (Unicef 2006)
Family functioning	<ul style="list-style-type: none">• Burmese Family Functioning Scale (developed from qualitative research)
Child behavior, psychosocial wellbeing and resilience	<ul style="list-style-type: none">• Child Behavior Checklist/Youth Self Report (Achenbach 2001)• Child Resilience Scale (developed from qualitative research)
Unintended effects and pathways of change	<ul style="list-style-type: none">• Qualitative methods

3. Adapting and testing alternative forms of measurement beyond self-report



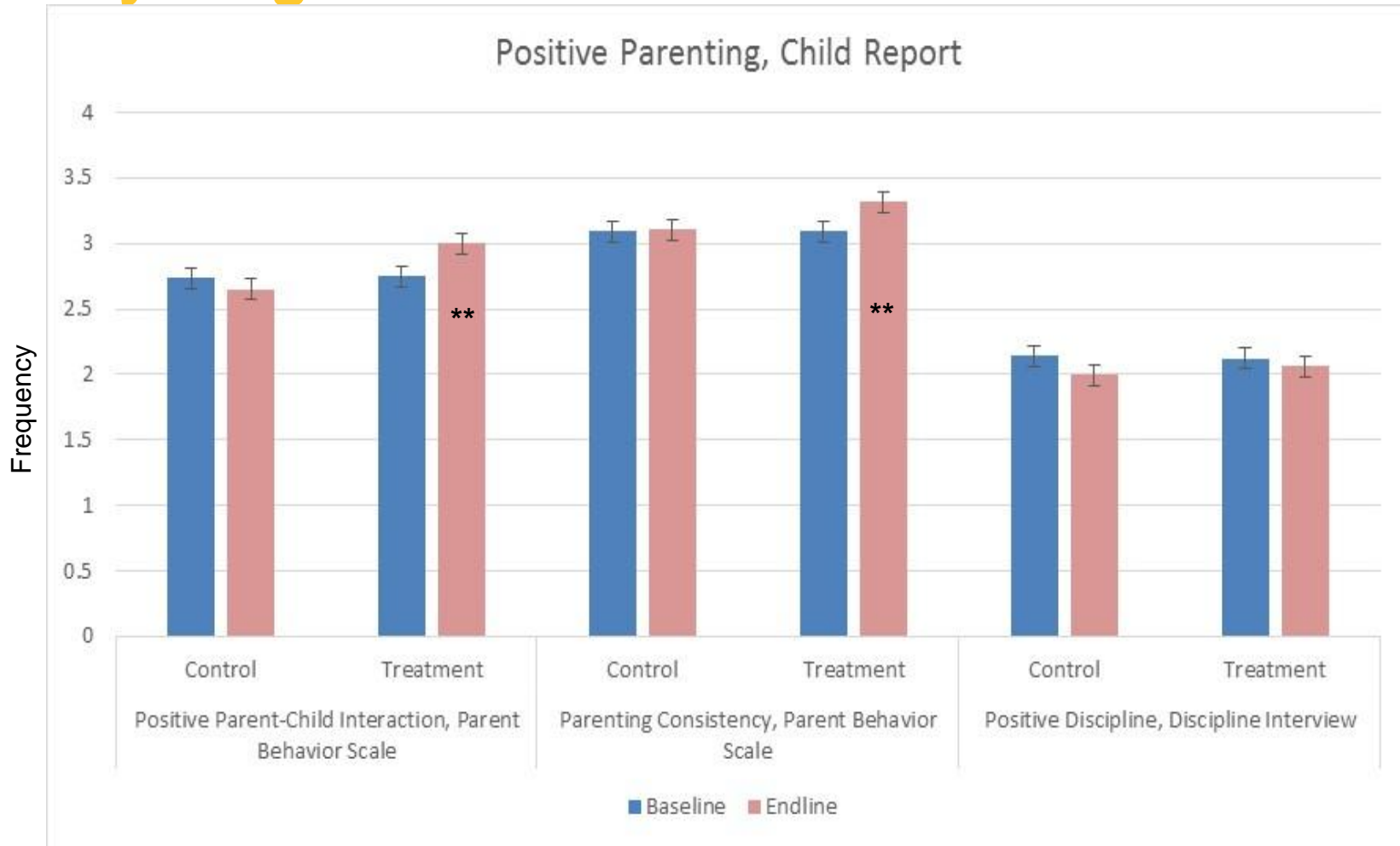
Confidence intervals: 95%
* indicates statistical significance

Alternative measures in Liberia

- Dyadic Parent-Child Interaction Coding System (DPICS) : allows for coding multiple types of parent verbalizations during 5-minute play interactions with their child: praise, negative statements, etc.
- Lessons: audio not enough. Now using video to see the interactions. and to add non-verbal codes such as physical touch, tone of voice..
- Also piloting discreet choice with pictures of parents. “Which one is more like you”

10 (Puffer, Chase & Green)

4. Improving child measures – particularly for young children



Confidence intervals: 95%
* indicates statistical significance

5. Measuring implementation variables and understanding pathways

Intervention was feasible and acceptable to program participants.

- 87% average attendance
- Over 60% completed intervention

Qualitative findings suggest two potential pathways of change

- Knowledge gained from intervention
- “Controlling the mind”



6. Measuring unintended consequences

Qualitative findings suggest potential unanticipated impacts on caregiver mental health, and relationships with family and community members.

➔ IRC current focus on

- links between IPV and child maltreatment
- parenting in emergencies with a component of trauma recovery

7. Understanding relative effectiveness and cost effectiveness

IMPROVING STUDENT LEARNING: COST-EFFECTIVENESS OF EDUCATION PROGRAMS



Thank you!

