

Early Start

Incredible Years Toddler Programme Evaluation









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Contents

Acknowledgements	4
Executive Summary	5
Background	5
Methods	5
Findings	5
Conclusions	6
Recommendations	6
Chapter 1: Introduction	7
The Incredible Years Toddler Programme	7
Introducing IYT into Early Start	7
The Present Report	8
Chapter 2: Methods	9
Client Identification and Recruitment	9
Programme Delivery	9
Outcome Measures	10
Child Behaviour	10
Parenting/Family Functioning	11
Parental Feelings/Attitudes	12
Parental Mental Health	13
Parental Satisfaction with IYT	13
Statistical Analysis	14
Course Attendance	14
Comparison of Outcomes Pre to Post-IYT	14
Supplementary Analysis	15
Parental Satisfaction with IYT	15
Chapter 3: Results	16
Participation in the Incredible Years Toddler Programme	16
Impact of Programme Participation on Child Behaviour and Family Functioning	17
Child behaviour	17
Parenting and family functioning	18
Parenting attitudes, satisfaction and self-efficacy	19
Parental mental health	20
Supplementary analyses	21
Client Satisfaction	22
Chapter 4: Discussion and Recommendations	29

	Course Attendance	29
	Evidence of Programme Benefit	29
	Client Satisfaction	
	Limitations	
	Recommendations	31
	eferences	
	ppendix 1: Supplementary Tables	
Α	ppendix 2: Participant Comments on IYT Programme	38

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EARLY START PROJECT ~ BOARD CHAIRPERSON

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Outcome Evaluation of the Incredible Years Toddler Programme

John Horwood; Jan Egan; Jo Waddingham; David Fergusson

Executive Summary

Background: In 2012 Early Start implemented the Incredible Years Toddler (IYT) parenting programme as an adjunct to the Early Start service to assist families experiencing severe parenting difficulties. This report uses data gathered in the context of six IYT courses conducted over the period 2012-2015 to provide an outcome evaluation of the implementation of IYT focussing on three issues: course participation; evidence of benefit; and client satisfaction.

Methods: Data were gathered using a combination of (a) Early Start records of IYT course attendance; (b) parental interviews conducted before and after IYT course participation, assessing a range of outcomes spanning domains of child behaviour, parenting/family functioning, parental attitudes/self-evaluations, and mental health; and (c) client satisfaction questionnaires and weekly feedback on individual course sessions. The core analyses were based on a sample of 75 parents enrolled in one of the six courses and identified as the primary caregiver for the purposes of the study. The analysis used an intention to treat paradigm in which information on all participants was included regardless of the level of course participation.

Findings: The key findings of the analysis were:

Participation: There was considerable variability in course attendance, ranging from a small minority of parents who failed to attend any sessions through to those who attended all 12 sessions. The overall mean number of sessions attended was 8.7 and the rate of course completion (defined as attending a minimum of 9 sessions) was 65%. Attendance rates were slightly higher for Māori parents than for non-Māori (mean sessions 9.8 vs 8.4). Factors contributing to non-attendance included parental mental health issues, substance abuse, family crises, chaotic family environment and lack of motivation. Ongoing earthquake related disruption was also a contributing factor.

Benefit: Pre-post comparisons of mean scores on a series of 21 outcome measures in four outcome domains showed a pervasive pattern consistent with improvement in functioning following IYT participation. In all cases the change in test scores was in the direction suggesting benefit from

participation in IYT, and in the majority of cases (17 out of 21) the change was statistically significant (p<0.05). Effect sizes were in the small to moderate range. Values of Cohen's d ranged from .09-.48 with a median value of .28. Effects were strongest for the measures of child non-compliance and parenting self-efficacy, and weakest for the domain of parental mental health.

Client satisfaction: Overall there was very high client satisfaction with IYT programme content, teaching format and group facilitators. Ratings were overwhelming positive or very positive across all aspects of the programme. Māori participants were as positive or more positive in their ratings than non-Māori. Overall ratings were mirrored in participant feedback on the individual IYT sessions.

Conclusions: The findings of this analysis suggest that:

- IYT can be delivered to high risk Early Start families with an acceptable rate of participation (65% course completion).
- IYT delivered small to moderate effect size benefits across a wide range of measures of child behaviour, parenting and related outcomes.
- Satisfaction with the programme, its delivery and course leadership was generally high suggesting that the programme was seen in a positive light by those completing it.

The above findings provide more than adequate grounds for Early Start to continue to fund IYT as an adjunct to the service that can be offered to those families who are experiencing substantial problems with parenting and child behaviour management.

Recommendations

- 1. Given the generally positive findings of this evaluation, it is recommended that Early Start continues to support ongoing provision of IYT courses at a minimum of two courses per annum.
- Given the findings on participant retention, ES should continue to seek ways to maximise
 programme participation, with the aim to increase programme completion rates to 80%. In
 addition, consideration should be given to identifying potential barriers to participation
 amongst Māori families.
- 3. The ongoing delivery of IYT should be accompanied by continued monitoring of attendance statistics, and the before and after assessments used in this evaluation. This will make it possible to conduct ongoing evaluation of programme efficacy.

Chapter 1: Introduction

The Incredible Years Toddler Programme

The Incredible Years Toddler Programme (IYT) is a group based parent behaviour management training programme developed by the Incredible Years organisation (Webster-Stratton, 2011). The programme is targeted at improving parental skills in parent-child interaction and behaviour management. The programme is designed for children aged 1-3 years. The Incredible Years website describes the programme in the following way:

"The Incredible Years Parents and Toddlers Program supports parents and builds optimal parenting skills. The Parents & Toddlers program consists of an 8-part program focused on strengthening positive and nurturing parenting skills. Each program component builds on the previous.

The series includes:

- Part 1 Child-Directed Play Promotes Positive Relationships
- Part 2 Promoting Toddler's Language with Child-Directed Coaching
- Part 3 Social and Emotion Coaching
- Part 4 The Art of Praise and Encouragement
- Part 5 Spontaneous Incentives for Toddlers
- Part 6 Handling Separations and Reunions
- Part 7 Positive Discipline-Effective Limit Setting
- Part 8 Positive Discipline-Handling Misbehavior"

Programme components are typically delivered over a total of 12 sessions. Greater detail about the programme can be found at: http://70.40.220.26/programs/parent/toddler-curriculum/

Introducing IYT into Early Start

As part of a process of extending the services provided by Early Start (ES) and adding value to the programme of family support offered by ES, it was suggested that the service could be extended to offering the IYT programme to families experiencing significant parenting issues and whose children were at high risk of child abuse and neglect. This suggestion was motivated by preliminary evidence suggesting that Parent Behaviour Management programmes such as the Incredible Years and Triple P programmes may have positive benefits on parenting behaviours (MacMillan et al, 2009).

To follow up this suggestion, the Board of Early Start sought to implement IYT as an adjunct to the ES service. Initially funding was sought to develop of a pilot study of IYT. This process involved: (i) training three ES staff in the delivery and management of IYT; (ii) setting up an initial parenting group to establish the feasibility of delivering IYT to ES families. This pilot evaluation conducted in 2012 (Fergusson et al, 2012) demonstrated that IYT could be delivered in a manner that was acceptable to ES families, that produced changes in parenting and child behaviours consistent with programme benefit and that produced high levels of parent satisfaction with the programme.

Based on this initial pilot evaluation the ES Board committed to continue the implementation of IYT and sought funding to support further parenting groups over the following years. Over the period from 2012 to 2015 a total of six IYT courses were delivered (one in 2012, one in 2013, two in 2014 and two in 2015), involving a total of 75 ES families.

The Present Report

In this report we use data collected as part of these six courses to provide a detailed examination of the implementation of IYT in ES and the evidence for programme efficacy. Specifically, the report provides detailed analysis of the following issues:

- 1. The extent of programme participation by ES parents and the level of programme completion.
- 2. The extent to which there was evidence of programme benefits across outcome domains spanning child behaviour, parenting/family functioning, parental attitudes/efficacy, and parental mental health; and the relative size of these benefits.
- 3. The level of satisfaction with the programme components, teaching format and the staff who delivered the programme.

Chapter 2: Methods

Client Identification and Recruitment

A total of 75 ES families with a toddler in the right age range (1-3 years) were referred for participation in the IYT programme by their Family Support Worker (FSW) over the period 2012-2015. The principal grounds for referral were that the FSW and their supervisor saw the family as being in high need of parenting support and were of the view that attendance at the IYT programme could be beneficial.

A total of 84 parents (73 mothers, 11 fathers, including 9 couples) from these families completed the initial assessment for participation in IYT and were offered enrolment in one of the six IYT courses provided over the four year period.

For the purposes of this report one parent from each family was identified as the 'primary caregiver' and all core analyses reported below are based upon the primary caregiver sample. The primary caregiver was defined as the mother of the baby except in the case where only the father took part in the IYT programme. The primary caregiver sample comprised 75 parents (73 mothers and two fathers).

Programme Delivery

The IYT programme implemented by ES was delivered over a total of 12 teaching sessions, with an additional introductory session prior to the first teaching session and a final graduation session added at the end of the programme. Each course was delivered by two IY trained facilitators who worked together, sharing the preparation, facilitation, and follow-up tasks each week.

Enrolments were limited to a maximum of 20 participants for each course to ensure group size followed the Incredible Years Programme's recommendations. In practice the number of participants in each course never reached this maximum. The teaching/learning environment was designed to be comfortable and free of distractions, with comfortable seating and room to move into small group work, and with a kitchen for food sharing and informal connecting.

The following additional steps were taken to minimize disruption and maximize parent participation. FSWs built readiness with the families over the weeks prior to the beginning of each course. This included consideration of who would care for the children while parent attended, and how parents would get to and from the course. The introductory session was added the week before 'Session 1' for parents to meet each other and FSWs attended this with parents, who were often quite anxious about attending a group and had little experience of adult learning environments, and/or negative

experiences of school. To counteract some of these possible barriers, transport and childcare were provided where needed, and there was regular communication between FSWs and the IY facilitators to manage any challenges to attending.

When a participant missed a session, they were offered a 'catch-up', which involved a home visit from one of the facilitators, who would share the key learning from the missed session, and take out the resources and home activities for the parent to work on. The FSWs were kept aware of the parent's attendance, and weekly topics covered, to enable FSWs to further embed the learning and support parents to put the learning into practice in the home setting. Over time we decided to limit home visit catch-ups to a maximum of three to encourage group participation.

Outcome Measures

As part of the programme evaluation FSW group leaders interviewed participating parents on a standardised interview design to assess outcomes across a range of domains including child behaviour; parenting and family functioning; parental feelings, attitudes; and parental mental health. The interview was administered twice, once immediately prior to participation in the IYT programme, and again at the end of the programme. The questionnaire included a combination of standardised assessment tools supplemented by custom written survey items to assess outcomes in each domain pre- and post-IYT. The following measures were constructed using these data.

Child Behaviour

Parents were questioned concerning their child's behaviour over the previous 4-6 weeks using selected items from the Infant-Toddler Social and Emotional Assessment Scale (ITSEA, Briggs Cowan & Carter, 1998). The selected items were used to derive four measures of behaviour:

- (i) Attentional problems: this scale combined 13 items from the ITSEA attention and activity sub-domains to derive a measure of the extent to which the child was exhibiting restless, inattentive or hyperactive behaviours.
- (ii) Conduct problems: this scale combined 24 items from the aggression and peer aggression sub-domains of the ITSEA to derive an overall measure of the extent to which the child exhibited conduct disordered behaviours including aggression, fighting, bullying, temper tantrums and related symptoms.
- (iii) Non-compliance: this scale comprised the five items from the compliance sub-domain of the ITSEA and assessed the extent to which the child was prepared to follow rules, do as they were asked and be well-behaved.

(iv) Total behaviour problems: Finally a total behaviour problems score was constructed using all of the above items.

All items were scored on a 5-point scale reflecting the frequency of each behaviour over the previous 4-6 weeks, ranging from 1='never' to 5='most days'. Scale scores were constructed from an average of the items in each domain, and scaled so that higher scores implied greater behaviour problems.

Parenting/Family Functioning

A range of measures were used to assess parenting practices and family functioning.

The Parenting Scale (Arnold et al., 1993) is a 30-item self-report measure of parental use of dysfunctional discipline practices with young children. Each item is scored on a 7-point scale ranging from a highly effective response to misbehaviour to a highly ineffective response to behaviour. The present analysis utilised scale scores from two of the primary sub-domains of the scale. These domains were: (i) *Laxness* – this sub-scale comprises 11 items reflecting the adoption of an overly permissive parenting style characterised by failure to respond to misbehaviour in a timely and appropriate manner; (ii) *Over-reactivity* – this sub-scale comprises 10 items reflecting the adoption of an authoritarian parenting style characterised by anger, threats, swearing and use of physical punishment. In each case a scale score was constructed from an average of the item scores within each domain, with a higher score implying the use of less effective discipline practices. In addition, a *Total Parenting* score was calculated from an average of the 30 items in the total scale.

The Parent-Child Conflict Tactics Scale (CTS-PC, Strauss et al, 1994) is a widely used measure of parental use of psychologically aggressive and physically abusive behaviours. Parents were questioned on a series of 18 items from the CTS-PC to assess the frequency with which they engaged in a range of behaviours over the previous two weeks. These items spanned the CTS domains of psychological aggression (eg shouted, yelled or screamed at child; threatened to smack child) and physical assault (eg hit child with an object; slapped child on face or head). Each item was scored on 4-point scale ranging from 'never' to 'all the time'. Item scores were averaged over the 18 items to provide an overall measure of the use of abusive parenting practices, and scored so that a higher score implied more abusive parenting. Parental reports on the CTS-PC were supplemented by custom written items to assess the occurrence of inter-parental violence/conflict and partner violence toward the child. However, the rate of reported violence was too low to provide meaningful analysis for the purposes of the evaluation.

A combination of items from the Dunn scales of parental emotional responsivity (Dunn et al, 1999), the Caregiving Scale of Kunce & Shaver (1994) and custom written survey items used in the Early Start Field Trial outcome evaluation (Fergusson et al., 2005) was used to derive two measures of parental responsivity: (i) *Positive responsivity* was assessed on the basis of 13 items reflecting the extent to which the parent agreed with a series of statements about the experience of positive emotional responses toward the child (eg I really love <name>, I enjoy spending time with <name>); (ii) *Negative responsivity* was assessed using a similar series of 13 statements reflecting the extent of negative emotional responses (eg I expected to feel closer to <name> than I do, I get irritated by <name>). Each item was scored on a 4-point scale from 1 = 'disagree' to 4 = 'agree', and scale scores were constructed from an average of the item responses in each domain. For positive responsivity higher scores indicate more positive emotional responses, and for negative responsivity higher scores indicate more negative responses.

The extent of inter-parental disagreements about child management was assessed using a series of 16 items derived from the Parent Problem Checklist (Sanders & Dadds, 1993). Items spanned disagreements over child behaviour and behaviour management, parental inconsistency, parents undermining each other, arguing in front of the children, and related matters. Each item was scored on a 3-point scale reflecting the frequency of parental disagreements in the past four weeks, ranging from 1 = 'Not a lot' to 3 = 'A great deal'. A total scale score was constructed from the average item score over the 16 items, and scored so that a higher score implied greater disagreement. For analysis purposes parents without a current partner who reported no disagreements were scored 'Not at all' on all items.

Parental Feelings/Attitudes

The Parenting Sense of Competence Scale (Johnston & Mash, 1989) was used to assess participants' feelings about their success and competence as parents. This scale asks parents to report the extent to which they agree with a series of statements about their parenting. The items span two domains: (i) *Parenting satisfaction* — a nine item scale reflecting parenting anxieties, frustrations and motivations; (ii) *Parenting efficacy* — a seven item scale reflecting perceived competence and capacity to parent effectively. Each item was scored on a 6-point scale ranging from 1 = 'strongly agree' to 6 = 'strongly disagree'. Scale scores were constructed from an average of the item scores in each domain and scored so that higher scores implied higher satisfaction and perceived efficacy.

Parental attitudes and beliefs about child management/child development were assessed using on a combination of items from existing scales including the Parental Reward Scale (Fabes et al., 1989),

the Adult Adolescent Parenting Inventory (AAPI, Bavolek & Keene, 1999) and custom written items. Parents were asked to report the extent to which they agreed with a series of 28 statements spanning three domains: (i) *Attitudes to reward* – a series of seven items reflecting the perceived value of rewards as a mechanism to improve child behaviour; (ii) *Attitudes to physical punishment* – 12 items reflecting parental attitudes to physical punishment as an effective mechanism for controlling child misbehaviour; (iii) *Empathy with children* – nine items reflecting parental beliefs about the value of children and positive child development. All items were scored on a 3-point scale (1 = Agree/ 2 = Agree somewhat/ 3 = Definitely disagree). Scale scores were constructed from an average of the item scores in each domain and scored so that a higher score implied more positive attitudes to the use of rewards, more negative attitudes to the value of physical punishment and greater empathy with children.

Parental Mental Health

Parental mental health over the past fortnight was assessed using the Depression, Anxiety, Stress Scales (DASS, Lovibond & Lovibond, 1995). These scales assess the extent to which respondents report experiencing symptoms in each of three domains: (i) *Depression* (14 items); (ii) *Anxiety* (14 items); and (iii) *Stress* (14 items). The frequency of experiencing each symptom over the past fortnight is scored on a 4-point scale ranging from 0 = 'Did not apply' to 3 = 'Very much, most of the time'. Scale scores were constructed from an average of the items in each domain and scored so that higher scores implied poorer mental health.

Appendix Table A.1 summarises the reliabilities (Cronbach's alpha) for the above measures at the pre- and post-IYT assessments. Scale reliabilities ranged from .60-.95 with the great majority having values of coefficient α in the moderate to high range (>.75).

Parental Satisfaction with IYT

In addition to the above outcome measures, at the end of each IYT programme, participating parents were asked to complete a Parent Satisfaction Questionnaire. This questionnaire provided parents with the opportunity to offer feedback on the course and their reactions to the programme. The data collected included:

(i) Satisfaction with parenting techniques. For each of the 12 programme sessions parents were asked to record their impression as to how useful they found the information and teaching provided in the session. Ratings were made on a 7-point scale ranging from extremely useless to extremely useful.

- (ii) Satisfaction with the teaching format. Parents were also asked to rate the usefulness of various aspects of types of teaching used in the programme (eg group discussion, role play, video vignettes, use of handouts). Ratings were also made on a 7-point scale from extremely useless to extremely useful.
- (iii) Overall feelings about the programme. Parents were asked to respond to a series of items recording their overall impressions of the programme and the extent to which they considered the programme to be helpful or likely to improve their future parenting behaviours. Ratings were made on 7-point scales ranging from a strongly negative response to a strongly positive response, with the specific response categories varying depending on the item.
- (iv) Evaluation of group leaders. Participants were also asked to rate the programme group leaders' performance in terms of the quality of their preparation, teaching, interest in the participant and helpfulness. Ratings were made on a 7-point scale ranging from a strongly negative response (very poor, very dissatisfied, very unhelpful) to a strongly positive response (excellent, extremely satisfied, extremely helpful). Separate evaluations were obtained for each group leader.

Information from the parent satisfaction questionnaire was supplemented specific comments obtained as part of parental feedback at the end of each session they attended over the IYt course.

Statistical Analysis

As described above the main analysis for this report is based upon the sample of 75 participants identified as primary caregivers for the purposes of the study.

Course Attendance

Standard tabular methods and summary statistics (Ns, means, standard deviations, percentages) were used to summarise IYT course attendance for the six IYT courses and combined over all courses from 2012-2015.

Comparison of Outcomes Pre to Post-IYT

Analysis of the impact of IYT was conducted for outcomes across the four outcome domains: child behaviour; parenting and family functioning; parental feelings/attitudes; parental mental health. The changes in mean outcome test scores from pre to post-IYT for each outcome were tested for statistical significance using a paired t-test.

While all participants completed the initial pre-IYT interview, a small number (N=4) were unable to complete a post-IYT interview. The primary analysis was conducted using an Intention to Treat (ITT) paradigm in which the few participants who were unable to provide a post-IYT interview were treated as having unchanged scores on the outcome measures from their pre IYT status. This approach will provide a conservative estimate of the effect of IYT participation in the context where there is improvement on average in outcome scores from pre- to post-IYT assessments.

For each outcome a measure of effect size was estimated by Cohen's d (Cohen, 1988). The value of Cohen's d for a given outcome is calculated as the mean difference in test scores from pre- to post-IYT divided by the standard deviation of the pre-IYT outcome score. Cohen's d thus expresses the change in test scores in standard deviation units. This metric is consistent across outcomes and thus Cohen's d provides a standardised measure of effect size that is comparable across different outcomes. As a guide to the interpretation of effect sizes Cohen (1988) suggests that d values of .20, .50 and .80 can be taken to as indicative of small, moderate and large effect sizes respectively.

Supplementary Analysis

This analysis was then extended using repeated measures multivariate analysis of variance methods supplemented by visual inspection of the data to examine: (i) the extent to which the observed benefits varied with the level of programme participation; and (ii) whether the observed benefits participation were similar for Māori and non-Māori families.

Finally, to examine the robustness of the findings to alternative analytic approaches, the following additional analyses were conducted:

- (i) Expanding the analysis sample to include the full sample of 84 parents who were offered IYT. This sample included an additional 9 male partners of an identified primary caregiver. All ITT analyses were repeated using this sample, with allowance for potential clustering of effects within families.
- (ii) Restricting the analysis sample to those who provided both pre and post interview data. This analysis excluded the small number of parents (4 primary caregivers, 7 parents in total) who did not complete a post IYT interview.

Parental Satisfaction with IYT

Parental responses to the Programme Satisfaction Questionnaire were summarised using standard tabular methods, quoting the percentage of responses falling into each response category. Comparison of satisfaction levels for Maori and non-Maori parents was conducted using the chi square test of independence.

Chapter 3: Results

Participation in the Incredible Years Toddler Programme

Table 1 provides a summary of IYT course attendance for the 75 parents in the primary caregiver sample (see Appendix Table A.2 for a summary of attendance for the full parent sample). The table shows the frequency distribution of the number of teaching sessions attended, including any 'catchup' sessions delivered by a course facilitator at home. The number of sessions attended ranged from zero to 12. Six parents failed to complete any sessions: at the other extreme a total of 22 parents attended all 12 sessions.

The table also provides two summary attendance statistics: the mean number of sessions attended; and the percentage of parents completing the course, where completion was defined as requiring attendance at a minimum of 9 sessions. The mean number of sessions attended ranged from 6.2 to 10.3 over the six courses with an overall mean attendance of 8.7 sessions. Mean attendance for Māori parents (N=13) was slightly higher than for non-Māori (9.8 vs 8.4 sessions respectively). Course completion ranged from a low of 40.0% to as high as 90.9% with an overall rate of 65.3%.

Table 1. Incredible Years course attendance 2012-2015: frequency distribution of number of sessions attended (including catch-ups) and summary attendance statistics (Primary caregiver sample, N=75).

Number of sessions attended	2012	2013	2014 (Feb)	2014 (Aug)	2015 (Feb)	2015 (Aug)	Total
0	0	4	0	0	2	0	6
1-5	2	2	0	2	1	1	8
6 – 8	1	3	1	4	2	1	12
9 – 11	3	3	6	3	4	8	27
12	6	3	4	5	1	3	22
Total	12	15	11	14	10	13	75
Summary Attendance Statistics							
Mean (SD) sessions attended	10.0 (2.9)	6.2 (5.0)	10.3 (1.7)	8.9 (3.6)	7.2 (4.3)	10.2 (2.2)	8.7 (3.8)
% Completing course (9+ sessions)	75.0	40.0	90.9	57.1	50.0	84.6	65.3

It is clear from the above that despite the best efforts of FSWs and facilitators to support parents in attending the course, just over a third of parents were unable to complete the programme.

Consideration of the reasons for failure to attend or failure to complete the course identified a range of issues spanning: parental mental health (depression and anxiety), substance abuse, family crises (eg homelessness, parental separation, child illness), chaotic family environment and lack of parental motivation. Post-earthquake conditions in Christchurch were also a factor with many families living in temporary and changing living situations.

Impact of Programme Participation on Child Behaviour and Family Functioning

As part of the programme evaluation FSW group leaders interviewed parents on a standardised interview design to assess outcomes across a range of domains including child behaviour; parenting behaviours; parental feelings, attitudes; and parental mental health (see methods). The interview was administered twice, once immediately prior to participation in the IYT programme, and again at the end of the programme. This section examines the extent to which participation in IYT resulted in improvements in behaviour/family functioning by providing a comparison outcome measures prior to (pre) and following (post) programme participation.

As described in statistical methods the core analysis was conducted based on the sample of 75 parents identified as primary caregivers for the purposes of the study using an intention to treat (ITT) paradigm in which the small number of participants (N=4) who were unable to provide a post IYT interview were treated as having unchanged scores on the outcome measures from their pre IYT status.

Child behaviour

Table 2 shows a pre/post comparison of mean test scores on measures of child behaviour derived using items from the Infant Toddler Social Emotional Assessment scale (Briggs-Cowan and Carter, 1998). The scale provides assessments of problems in the areas of inattention/hyperactivity; conduct problems; non-compliance; and overall behaviour problems. Each comparison has been tested for statistical significance using a paired t-test and a measure of overall effect size (behavioural change) is provided by Cohen's d (see methods).

The table shows evidence of statistically significant (p<.05) improvements in behaviour across all measures. The values of Cohen's d range between .22-.48, reflecting the fact that mean test scores were approximately a quarter to a half standard deviation lower post-IYT compared to scores pre-IYT. These differences suggest effect sizes in the small to moderate range. The biggest change was reported in the area of child non-compliance, with a moderate effect size (d = 48).

Table 2. Pre/post comparison on measures of child behaviour (Intention to treat analysis, Primary caregiver sample, N=75).

Measure ^a	Pre IY	Post IY	n	Cohen's d
iviedsure	Mean (SD)	Mean (SD)	р	
Inattention/hyperactivity	2.54 (.64)	2.37 (.54)	<.05	.26
Conduct problems	2.15 (.56)	2.03 (.55)	<.01	.22
Non-compliance	2.70 (.58)	2.41 (.60)	<.001	.48
Total behaviour score	2.34 (.49)	2.18 (.48)	<.001	.32

^a All scales scored such that a higher score implies greater problem behaviour

Parenting and family functioning

Table 3 shows a similar pre/post comparison on measures of parenting behaviour including: the laxness, over-reactivity and total parenting scales of the Arnold & O'Leary Parenting Scale (Arnold et al., 1993); measures of verbal and physical aggression derived from the Parent-Child Conflict Tactics Scale (Straus et al., 1998); measures of parental responsivity (Dunn et al., 1999; Fergusson et al., 2005; Kunce and Shaver, 1994); and a measure of extent of parental disagreements over child management as described by Sanders & Dadds (1993) (see Methods for further description of these measures). As previously comparisons have been tested for statistical significance using the paired t-test and Cohen's d is provided as a measure of effect size.

The table shows evidence of statistically significant improvements in parenting behaviours across the majority of comparisons including: reductions in the use of lax parenting strategies (p<.05), reduced parental over-reactivity (p<.001) and improvement in overall parenting (p<.01) on the Arnold and O'Leary scales; reduction in parental use of verbal aggression (p<.001) as assessed by the CTS-PC; greater use of positive (p<.001) and reduction in the use of negative emotional responses to the child (p<.05). There also a marginally significant reduction in physically abusive behaviours on the CTS-PC (p=.05). Values of Cohen's d ranged from .21 to .35. These effect sizes are indicative of small to moderate improvements in parenting behaviours and family functioning with programme participation.

Table 3. Pre/post comparison on measures of parenting/family functioning (Intention to treat analysis, Primary caregiver sample, N=75).

Measure	Pre IY Mean (SD)	Post IY Mean (SD)	р	Cohen's d
Parenting behaviours (Arnold & O'Leary)				
Laxness	3.04 (1.10)	2.79 (.85)	<.05	.23
Over-reactivity	2.61 (.99)	2.26 (.90)	<.001	.35
Total parenting score	2.98 (.79)	2.74 (.74)	<.01	.30
Parent-Child Conflict Tactics Scales (CTS-PC)				
Verbal aggression	1.26 (.37)	1.16 (.26)	<.01	.28
Physical assault	1.05 (.08)	1.03 (.07)	.05	.21
Total	1.10 (.12)	1.06 (.10)	<.001	.30
Emotional responsiveness				
Positive ^a	3.84 (.18)	3.90 (.14)	<.01	.33
Negative	1.82 (.50)	1.69 (.44)	<.05	.25
Parental disagreement				
Disagreement over child management	1.32 (.38)	1.26 (.34)	.09	.21

^a Positive emotional responsiveness scored such that a higher score implies more positive parenting. For all other scales a higher scores implies poorer parenting/family functioning

Parenting attitudes, satisfaction and self-efficacy

Table 4 provides a pre/post comparison on measures of parental feelings and attitudes including: attitudes to the use of rewards, avoidance of physical punishment and fostering child development (see Methods for a description of these scales) and the Johnson & Mash (1989) scales of parenting satisfaction and self-efficacy. There were statistically significant (p<.05) improvements on all measures, indicating that programme participation was associated with the adoption of more favourable attitudes toward more positive/effective parenting strategies, greater overall satisfaction and improvement in perceived competence as a parent. Effect sizes were in the small to moderate range (Cohen's d = .30-.45).

Table 4. Pre/post comparison on measures of parenting attitudes, self-evalutions (Intention to treat analysis, Primary caregiver sample, N=75)

Measure ^a	Pre IY	Post IY	р	Cohen's d
Wedsure	Mean (SD)	Mean (SD)	۲	
Parenting attitudes				
Rewarding good behaviour	2.13 (.36)	2.27 (.36)	<.01	.38
Avoidance of physical punishment	2.54 (.32)	2.65 (.22)	<.01	.35
Fostering child development	2.76 (.28)	2.84 (.18)	<.01	.30
Parenting satisfaction/self-efficacy				
Satisfaction	4.06 (.79)	4.27 (.76)	<.05	.25
Self-efficacy	4.52 (.75)	4.85 (.59)	<.001	.45

^a All scales scored such that a higher score implies more positive parenting attitudes and greater satisfaction, self-efficacy

Parental mental health

Table 5 provides a pre/post comparison on measures of parental mental health, including feelings of depression, anxiety and stress as assessed by the Depression, Anxiety Stress Scale (DASS; Lovibond & Lovibond, 1995). Programme participation was associated with statistically significant (p<.05) reductions in reported feelings of depression but not anxiety or life stress. The values of Cohen's d ranged from .09 to .18 suggesting at best only modest impacts of programme participation on these outcomes.

Table 5. Pre/Post comparison on measures of parental mental health (Intention to treat analysis, Primary caregiver sample, N=75).

Measure ^a	Pre IY Mean (SD)	Post IY Mean (SD)	р	Cohen's d
Depression	0.48 (.60)	0.38 (.53)	<.05	.18
Anxiety	0.42 (.49)	0.37 (.53)	.43	.09
Stress	0.77 (.64)	0.65 (.67)	.10	.17

^a All scales scored such that a higher score implies greater mental health problems, higher stress

Overall, the findings of the intention to treat analysis summarised in Tables 2-5 suggest the following conclusions:

- 1. There was a pervasive pattern of associations such that for all outcomes the observed changes in mean test scores were in the direction suggesting improvements in child behaviour, parenting and family functioning following participation in IYT.
- 2. In the majority of cases (17 out of 21 comparisons) these differences were statistically significant.
- 3. Effect sizes were in the small to moderate range. Values of Cohen's d ranged from .09-.48 with a median value of .28. Effects were strongest for the measures of child non-compliance and parenting self-efficacy, and weakest for the domain of parental mental health.

Supplementary analyses

The above analyses were extended two ways in an attempt to examine the following issues: (i) whether the apparent benefits of programme participation varied with the extent of programme participation; (ii) whether the apparent benefits were similar for Māori and non- Māori parents.

Programme participation. As shown in Table 1, the parent sample varied widely in their extent of programme engagement, with only 65% of the sample receiving the minimum nine sessions required for programme completion. Simple eyeballing of the improvement in outcome scores by whether or not participating parents completed the IYT programme showed that for 15 of the 21 outcomes examined, the improvement on test scores for those who completed IYT was greater than for those who did not complete IYT. While this finding is suggestive of increasing benefit of IYT with increasing programme participation, multivariate tests for differences in the size of the benefits gained with programme completion/non-completion across outcomes in each domain were statistically non-significant. This suggests the analysis lacked the statistical power necessary to conduct an indepth examination of this issue.

Māori/non-Māori comparisons. Thirteen (17%) of the primary parent sample identified as Māori. Unfortunately this small sample size, in the context of small to moderate effect sizes observed for the total sample, precluded drawing any meaningful conclusions about the relative benefits for Māori and non-Māori families.

Finally, to examine the extent to which the above conclusions may have been influenced by the choice of modelling strategy or choice of sample for the intention to treat analysis, two additional series of analyses were conducted:

- (i) Expanding the analysis sample to include the full sample of 84 parents who were offered IYT. This sample included an additional 9 male partners of an identified primary caregiver. All ITT analyses were repeated using this sample, with allowance for potential clustering of effects within families. The results of this analysis are summarised in Appendix 1 Tables A3-A6.
- (ii) Restricting the analysis sample to those who provided both pre and post interview data. This analysis excluded the small number of parents (4 primary caregivers, 7 parents or partners) who did not complete a post IYT interview.

Both sets of analyses produced essentially the same set of results as the main analysis, with consistent evidence of small to moderate effect size benefits of programme participation based on pre/post comparison of outcomes.

Client Satisfaction

At the end of the IYT programme parents were asked to complete a Parent Satisfaction Questionnaire to gather information on parental perceptions of the value of various aspects of IYT programme. Fifty-six primary caregivers returned a completed parental satisfaction questionnaire, and 19 did not. These 19 were parents who did not attend the graduation session at the end of the course where the final satisfaction questionnaire was completed. However, all participants completed a weekly evaluation for any week they attended, including comments about each session. This means that all participants who attended at least one session provided feedback evaluations on some aspects of the programme. The tables below examine the responses of the 56 parents who returned a completed questionnaire.

Table 6 reports on levels of satisfaction with specific parenting techniques taught by the programme. These ratings are classified on a 4-point scale from Not Useful to Extremely Useful. (Although the satisfaction questionnaire allowed a 7-point response scale there were so few negative responses that ratings on the lowest three categories have been combined into a single "Not useful" category). The table shows a general trend for parents to describe the specific parenting techniques provided by IYT as being useful or extremely useful; negative or neutral responses were uncommon. These features of the table are summarised in the overall percentages at the foot of the table. These percentages represent the overall percentages reported for the 12 outcomes by the 56 respondents who completed the satisfaction questionnaires. The table shows that less than 5% of responses to the programme components were described Not Useful (0.7%) or Neutral (3.6%) and 95.7% of responses described the programme as Useful (52.5%) or Very Useful (43.2%). These findings suggest generally high levels of client satisfaction with specific components of the IYT programme.

Table 6. Satisfaction with specific parenting techniques (N=56)

Area		Not Useful	Neutral	Useful	Extremely Useful
1	Infant/toddler development & developmental milestones	0%	5% (3)	66% (37)	29% (16)
2	Providing physical, tactile and visual stimulation	0%	5% (3)	57% (32)	38% (21)
3	Promoting infant and toddler language development	0%	7% (4)	48% (27)	45% (25)
4	Child-directed play	0%	0%	54% (30)	46% (26)
5	Descriptive commenting/social, emotion and academic coaching	2% (1)	2% (1)	55% (30)	43% (24)
6	Praise and encouragement	0%	0%	37% (21)	63% (35)
7	Spontaneous rewards	0%	4% (2)	61% (34)	36% (20)
8	Routines, separation and reunions	0%	5% (3)	44% (25)	50% (28)
9	Ignoring	4% (2)	4% (2)	41% (23)	52% (29)
10	Positive discipline	0%	0%	57% (32)	43% (24)
11	Baby/toddler proofing at home	4% (2)	11% (6)	55% (31)	30% (17)
12	The overall group of techniques	0%	0%	55% (31)	45% (25)
	Overall	0.7%	3.6%	52.5%	43.2%

Table 7 shows client responses to various aspects of the teaching format of the IYT programme. In comparison to the highly positive responses to the programme components, there was slightly greater discontent with various aspects of programme delivery, with nearly 15% of responses overall in the Not Useful (3.5%) or Neutral (10.7%) categories. The areas which attracted most criticism were: role play during group sessions, "buddy calls" and reading chapters/listening to the CD. Nonetheless over 85% of the responses to the items in Table 3 were positive, suggesting clients were generally well satisfied with the teaching format.

Table 7. Satisfaction with teaching format (N=56)

Area		Not Useful	Neutral	Useful	Extremely Useful
1	The content of information	0%	0%	58% (32)	42% (23)
2	Demonstration of parenting skills through video vignettes	0%	5% (3)	67% (36)	28% (15)
3	Group discussion of parenting skills	0%	5% (3)	38% (21)	56% (31)
4	Use of practice/role play during group sessions	7% (4)	15% (8)	58% (32)	20% (11)
5	Use of "buddy calls"	13% (7)	38% (20)	32% (17)	17% (9)
6	Reading chapters from the IY book or listening to the CD	5% (3)	18% (10)	60% (33)	16% (9)
7	Practising skills at home with child	0%	2% (1)	57% (32)	41% (23)
8	Weekly handouts (e.g. refrigerator notes)	0%	5% (3)	61% (34)	34% (19)
9	Phone calls from the group leaders	5% (3)	7% (4)	59% (32)	29% (16)
	Overall	3.5%	10.7%	55.6%	30.2%

Table 8 reports parent ratings of their overall feelings about the programme and the extent to which they considered the programme to be helpful for their current or future parenting. The ratings are again classified into four levels ranging from those giving a non-positive response to those giving a very positive response. However, because the responses to each item vary somewhat within the questionnaire the actual descriptors of the four levels used for each response are listed separately for each item. The table again shows a very positive pattern of response with 95% of responses overall being either positive (57.3%) or very positive (37.5%). The one area in which there was a slightly more negative response was in parental evaluations of the extent to which participation in IYT had assisted with other personal or family problems not directly related to the child: 14% of parents gave a non-positive or neutral response to this item.

Table 8. Satisfaction with the overall programme (N=56)

Area		Not Positive	Neutral	Positive	Very Positive
1	The bonding I feel with my baby since I took the programme is worse/the same/improved/greatly improved	0%	7% (4)	48% (27)	45% (25)
2	My child's bonding with me using the methods in this programme is worse/the same/improved/greatly improved	0%	4% (2)	65% (36)	31% (17)
3	My feelings about my child's social, emotional, physical progress are that I am dissatisfied/neutral/ satisfied/very satisfied	0%	5% (3)	61% (34)	34% (19)
4	To what extent has IYT helped with other personal or family problems – hindered/neutral/helped/helped very much	5% (3)	9% (5)	57% (32)	29% (16)
5	My expectation of good results from IYT is pessimistic/neutral/optimistic/very optimistic	0%	7% (4)	54% (30)	39% (22)
6	I feel the approach used to enhance my child's development in this programme is inappropriate/ neutral/appropriate/greatly appropriate	0%	9% (5)	54% (30)	36% (20)
7	Would you recommend this programme to a friend or relative? not recommend/neutral/recommend/strongly recommend	2% (1)	0%	31% (17)	67% (37)
8	How confident are you with parenting at this time? unconfident/neutral/confident/very confident	0%	0%	75% (41)	25% (14)
9	How confident are you in your ability to manage future behaviour problems unconfident/neutral/confident/very confident	0%	2% (1)	67% (36)	31% (17)

10	My overall feeling about achieving my goals in this programme is negative/neutral/positive/very positive	0%	2% (1)	60% (33)	38% (21)
	Overall	0.7%	4.5%	57.3%	37.5%

Table 9 shows ratings of the group leaders' performance. This table is based on combined ratings for both of the group leaders. The table shows generally very high satisfaction with the performance of the group leaders, with 66% of responses describing their performance as excellent, 30% as above average and only 3.4% describing their performance as average.

Table 9. Evaluation of group leaders' performance

Area		Below Average	Average	Above Average	Excellent
1	The group leader's teaching	0%	3% (3)	30% (33)	67% (73)
2	The group leader's preparation	0%	6% (6)	21% (23)	73% (80)
3	The group leader's interest and concern in me and my child	0%	6% (6)	35% (37)	60% (64)
4	The group leader's helpfulness in the program	0%	0%	35% (37)	65% (69)
	Overall	0%	3.4%	30.2%	66.4%

The analyses in Tables 6-9 were extended to compare levels of satisfaction for Māori and non-Māori parents. Eleven of the 56 parents who completed a satisfaction questionnaire were Māori. Given the relatively small size of the Māori sample, examination of ethnic differences in satisfaction was limited to comparison the overall pattern of responses in each domain rather than the responses to individual items. Table 10 shows a comparison of the overall response patterns for Māori and non-Māori in each domain. Each association has been tested for statistical significance using the chi square test of independence.

Table 10. Comparison of overall satisfaction response patterns for Māori and non- Māori in each satisfaction domain

Satisfaction with specific parenting techniques	Not Useful	Neutral	Useful	Extremely Useful	p¹
Māori	0%	1%	60%	39%	00
Non-Māori	1%	3%	49%	47%	.09
	Not			Extremely	
Satisfaction with teaching format	Useful	Neutral	Useful	Useful	p ¹
Māori	0%	10%	54%	36%	
Non-Māori	5%	10%	53%	32%	.17
Satisfaction with the overall	Not			Very	
programme	Positive	Neutral	Positive	Positive	p^1
Māori	0%	4%	54%	42%	.75
Non-Māori	1%	5%	55%	39%	.,,
Evaluation of group leaders'	Below		Above		
performance	Average	Average	Average	Excellent	p ¹
Māori	0%	0%	21%	79%	.02
Non-Māori	0%	4%	31%	64%	.02

¹ Chi square test of independence

For the first three domains the table shows strong similarity in response patterns for Māori and non-Māori, with the great majority of responses in both groups falling into the useful/positive or extremely useful/very positive response categories. For the fourth domain (group leaders' performance) Māori response patterns were more positive overall, with 79% of responses rated as Excellent compared to 64% for non-Māori. This difference was statistically significant (p=.02).

Finally, consideration was given to the comments obtained from parents as part of the feedback on each session and on the overall programme. To illustrate the nature of the feedback received from

parents Appendix 2 to this report provides a sampling of the parental comments obtained from one of the IYT courses conducted in 2015. These comments are typical of parental feedback received over all six courses, and generally consistent with the results presented in Tables 6-9, suggesting broad satisfaction with the programme.

Chapter 4: Discussion and Recommendations

The core aim of this report was to present an evaluation of the implementation of the IYT programme as part of the service the ES offers its clients. The report integrates data on six IYT courses conducted over the period 2012-2015 to provide a detailed analysis of a series of issues relating to course attendance, evidence of programme benefit and parental satisfaction. The key findings and implications of this analysis are summarised below.

Course Attendance

There was considerable variability in course attendance amongst those enrolled in the IYT programme ranging from a small minority of parents who failed to attend any sessions through to those who attended all 12 teaching sessions. The overall rate of course completion (9+ sessions) was 65%.

While this rate of completion can be considered adequate given the high needs nature of the ES client population, it is also clear that despite the very considerable efforts of FSWs and IY facilitators to support parents in attending the course, a substantial minority of parents were unable to attain full benefit from course participation. This suggests the need for continued vigilance to support parents in attending IYT and identify mechanisms to improve attendance.

Examination of reasons for non-attendance identified a range of factors relating to parental mental health, substance abuse, family crises and individual motivation. The ongoing disruption in the aftermath of the Canterbury earthquakes may also have been a factor, not only for parents but also for the ES organisation, which has had to operate out of less than ideal premises for much of the period of this report. It might be expected that with the recent move to new facilities and the ability to better support parents engaged in group activities, rates of participation in future IY courses may be improved.

Evidence of Programme Benefit

Incredible Years provides an evidence based suite of parenting programmes tailored to different ages and stages of development (Webster-Stratton 2011). While originally designed as a programme to improve child behaviour and behaviour management the programmes have been shown to be of proven efficacy not only in terms of improving child behaviour but also for broader measures of parenting and family functioning (Webster-Stratton, 2011; Gross et al., 2003; see also www.incredibleyears.com).

The findings of this analysis of outcomes of IYT are entirely consistent with these expectations, with pervasive evidence small to moderate effect size benefits of programme participation across a series of outcomes spanning domains of child behaviour; parenting/family functioning; parenting attitudes/self-evaluation; and mental health. Pre-post IYT comparisons on a series of 21 outcomes showed that in all cases the change in outcome scores was in the expected direction of programme benefit, with the great majority of comparisons (17 out of 21) suggesting statistically significant change associated with course attendance. Effect sizes (Cohen's d) ranged from .09-.48 with a median value of .28. Effects were strongest for the measures of child non-compliance and parenting self-efficacy, and weakest for the domain of mental health.

Client Satisfaction

Overall there was very high client satisfaction with IYT programme content, teaching format and group facilitators. Ratings were overwhelming positive or very positive across all aspects of the programme. Māori participants were as positive or more positive in their ratings than non-Māori. While a minority (25%) of participants did not complete the final satisfaction survey at the end of the course, all participants provided feedback on the individual sessions they attended. To the extent that the comments on the individual sessions mirrored the overall positive ratings for the course as a whole, this suggests that the great majority of participants were satisfied with the IYT programme and found the experience beneficial.

Limitations

This evaluation is not without limitations. Only 13 (17%) of the 75 parents in the primary caregiver sample included in this evaluation were Māori. This raised two issues. First, the small number of Māori parents precluded detailed examination of the extent to which the IYT programme delivered similar benefits for Māori and non-Māori families. To address this question requires ongoing data collection on a much larger sample. Second, the proportion of Māori parents amongst those who attended IYT (17%) was lower than the proportion of primary caregivers who are Māori amongst ES clients (approx 25%). While this may simply reflect chance variability in the pattern of referrals to IYT over the period of the evaluation, it also suggests the possibility that there may be barriers to participation in IYT amongst Māori families. This suggests the need for further research to identify potentials barriers to engagement in IYT.

In addition, it was not possible to conduct in depth examination of programme benefit against the level of programme participation. Evidence of increasing benefit with greater programme

participation would provide stronger validation that the apparent benefits of the IYT programme. While there were indications of greater programme benefit amongst those who completed the course the data were insufficient to conduct a detailed analysis of this issue.

Finally, it would have been helpful if all participants could have completed a post-IYT interview and an end of course overall evaluation.

Nonetheless, within these limitations the findings of this analysis suggest that:

- IYT can be delivered to high risk ES families with an acceptable (65%) rate of participation.
- IYT has delivered small to moderate benefits across a wide range of measures of child behaviour, parenting and family functioning.
- Satisfaction with the programme, its delivery and course leadership was generally high suggesting that the programme was seen in a positive light by those completing it.

The above findings provide more than adequate grounds for Early Start to continue to fund IYT as an adjunct to the service that can be offered to those families who are experiencing substantial problems with parenting and child behaviour management.

Recommendations

- 1. Given the generally positive findings of this evaluation, it is recommended that ES continues to support ongoing provision of IYT at a minimum of two courses per annum.
- Given the findings on participant retention, ES should continue to seek ways to maximise
 programme participation, with the aim to increase programme completion rates to 80%. In
 addition, consideration should be given to identifying potential barriers to participation
 amongst Māori families.
- 3. The ongoing delivery of IYT should be accompanied by continued monitoring of attendance statistics, and the before and after assessments used in this evaluation. This will make it possible to conduct ongoing evaluation of programme efficacy.

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Appendix 1: Supplementary Tables

Table A1. Scale reliabilities (Cronbach's $\alpha\mbox{)}$ for outcome measures.

Measure	Pre-IYT	Post-IYT
Child Behaviour		
Attentional problems	.78	.75
Conduct problems	.90	.91
Non-compliance	.60	.64
Total behaviour score	.90	.92
Parenting/Family Functioning		
Laxness	.85	.76
Over-reactivity	.82	.83
Total parenting score	.86	.86
CTS-PC psychological aggression/physical assault	.66	.69
Positive emotional responsiveness	.64	.65
Negative emotional responsiveness	.79	.79
Parental disagreement over child management	.90	.89
Feelings/Attitudes		
Parenting satisfaction	.73	.74
Parenting self-efficacy	.78	.70
Attitudes to reward	.63	.60
Attitudes to physical punishment	.76	.65
Empathy with children	.79	.60
Mental Health		
Depression	.95	.95
Anxiety	.88	.93
Stress	.93	.95

Table A2. Incredible Years course attendance 2012-2015: frequency distribution of number of sessions attended and summary attendance statistics (All parents, N=84).

Number of sessions attended	2012	2013	2014 (Feb)	2014 (Aug)	2015 (Feb)	2015 (Aug)	Total
0	0	5	0	0	3	1	9
1-5	2	3	0	2	3	1	11
6-8	1	3	1	4	2	1	12
9 – 11	3	3	7	3	5	8	29
12	6	3	5	5	1	3	23
Total	12	17	13	14	14	14	84
Summary Attendance Statistics							
Mean (SD) sessions attended	10.0 (2.9)	5.8 (4.9)	10.4 (1.6)	8.9 (3.6)	6.3 (4.4)	9.5 (3.4)	8.3 (4.0)
% Completing course (9+ sessions)	75.0	35.3	92.3	57.1	42.9	78.6	61.9

Table A3. Pre/post comparison on measures of child behaviour (ITT analysis, all parents, N=84).

Measure ^a	Pre IY Mean (SD)	Post IY Mean (SD)	р	Cohen's d
Inattention/hyperactivity	2.61 (.64)	2.43 (.54)	<.01	.26
Conduct problems	2.19 (.56)	2.05 (.53)	<.01	.24
Non-compliance	2.77 (.64)	2.44 (.63)	<.001	.52
Total behaviour score	2.39 (.50)	2.22 (.47)	<.001	.34

^a All scales scored such that a higher score implies greater problem behaviour

Table A4. Pre/post comparison on measures of parenting/family functioning (ITT analysis, all parents, N=84).

Measure	Pre IY Mean (SD)	Post IY Mean (SD)	р	Cohen's d
Parenting behaviours (Arnold & O'Leary)				
Laxness	3.02 (1.07)	2.80 (.86)	<.05	.21
Over-reactivity	2.59 (.95)	2.29 (.88)	<.001	.32
Total parenting score	2.97 (.77)	2.76 (.73)	<.01	.26
Parent-Child Conflict Tactics Scales (CTS-PC)				
Verbal aggression	1.26 (.36)	1.15 (.25)	<.001	.30
Physical assault	1.05 (.07)	1.04 (.07)	.07	.19
Total	1.10 (.11)	1.06 (.10)	<.01	.30
Emotional responsiveness (HOME)				
Positive ^a	3.82 (.19)	3.88 (.16)	<.01	.32
Negative	1.84 (.52)	1.72 (.48)	<.05	.23
Parental disagreement				
Disagreement over child management	1.33 (.36)	1.23 (.31)	<.05	.28

^a Positive emotional responsiveness scored such that a higher score implies better responsivity. For all other scales a higher scores implies poorer parenting/family functioning

Table A5. Pre/post comparison on measures of parenting feelings, attitudes (ITT analysis, all parents, N=84).

Measure ^a	Pre IY Mean (SD)	Post IY Mean (SD)	р	Cohen's d
Parenting attitudes				
Rewarding good behaviour	2.12 (.35)	2.26 (.35)	<.001	.41
Avoidance of physical punishment	2.52 (.32)	2.63 (.27)	<.01	.34
Fostering child development	2.76 (.28)	2.84 (.19)	<.01	.29
Parenting (Johnson & Marsh)				
Satisfaction	4.09 (.81)	4.28 (.77)	<.01	.24
Self-efficacy	4.53 (.72)	4.85 (.59)	<.001	.44

^a All scales scored such that a higher score implies better parenting attitudes and greater satisfaction, self-efficacy

Table A6. Pre/Post comparison on measures of parental mental health (ITT analysis, all parents, N=84).

Measure ^a	Pre IY Mean (SD)	Post IY Mean (SD)	р	Cohen's d
Depression	0.47 (.58)	0.38 (.53)	.05	.16
Anxiety	0.43 (.51)	0.38 (.53)	.37	.10
Stress	0.75 (.64)	0.65 (.67)	.10	.15

^a All scales scored such that a higher score implies greater mental health problems, higher stress

Appendix 2: Participant Comments on IYT Programme

Comments from Weekly Evaluations and Parent Programme Satisfaction Questionnaire

Weekly Evaluations Aug – Dec 2015
1
Really enjoyed this session getting to know everyone here.
I am already learning a lot.
It's a lovely group so far.
2
Enjoyed learning and sharing with the group.
This course is amazing, learning new things each week.
I am finding this course wonderful I have learnt so much already.
3
In and out a lot – found today helpful (child unsettled in childcare)
Very enjoyable and helpful.
4
Due to arriving late I didn't get to go thru a lot.
Hearing other parents struggles helped me to feel like I'm not alone in my parenting battles.
Always learning new things – I love this course.
I'm loving it – just knowing I'm not alone is great.
5
Since doing this course Nico is like a different child. No more biting, uses a lot of manners and using his words, playing so nice, I get a lot of compliments on how well his behaviour is from his preschool, my parents – everyone is so pleased.
Great group stories and helpful tips.
Very awesome, always learning something new with this course.
Loving every moment, thank you ladies for all the info, advice, support.

Found the help emotionally from the group and leaders was very helpful.

Good to have group discussions $\ensuremath{\odot}$

Good discussion today. A little less over-talking from group members would be helpful. Bring back the rattle maybe?

I love learning new techniques.

I love it here. I gave Heather and Sharleen my number. This group has some amazing ladies, and is great to hear that I am not the only one going thru the same stuff.

7

Love this course ©

Loving every moment. Loving the honest, and loving the bond us ladies have.

N/A

8

Always learning new things at this course.

Very helpful leader tips and group discussion. I really missed being here last week.

I found that the whole group are awesome. I am appreciating the support of one of the team outside of the course.

9

I love this course.

Always love learning different ways to deal with situations.

I've enjoyed todays session because everyone has had good opinions that were good to try.

10

I enjoyed listening to everyone's positive feedback.

11

Enjoyed listening to things that everyone had experienced during the last week.

N/A

12

I am going to miss this place. I have learnt so much. Thank you Jo and Jenette.

Thank you everyone.

Parent Programme Satisfaction Questionnaire Dec 2015

1. What part of the programme was most helpful to you?

I really enjoyed being with this group. It has been really helpful.

When / then strategy. Creation of a mummy support network. Persistence coaching.

In all honesty the whole programme was great. Helped me so much.

Refreshing some skills.

Being able to discuss situations with the group, and getting feedback.

Every lesson of IY is amazing. Learnt so much.

Age appropriate discipline.

All of it.

All of it. Learning to be a better parent.

Everything.

Praise and encouragement.

Liked the videos (visual)

Everything.

2. What did you like most about the programme?

Everyone respected everyone's opinions.

The support from group members and leaders. That the group leaders don't correct us when we say how we've used the strategy not quite correctly. The half hour break to talk and even to have a meal when finances are tight at home.

Being able to have other girls to do the programme with and very understanding.

To talk about things.

The support from others.

TBH very spot on amazing course.

Everything ©

The learning techniques.

Meeting women with similar problems.

Group discussions, information, handouts.

The mum's I met that had the same problems as I did.

Learning new things, social coaching, manners etc.

The leaders and all the girls ©

3. What did you like least about the programme?

Nothing.

That it is ending.

I don't think there was anything.
Negative parenting comments.
Nil.
Nothing.
Nothing ©
N/A
My anxiety, time pressure.
The videos.
Nothing I can think of.
Lack of chicken rolls.
4. How could the programme have been improved to help you more?
Nothing.
Nothing. Inclusion of household members, eg. Family session to go over strategies.
-
Inclusion of household members, eg. Family session to go over strategies.
Inclusion of household members, eg. Family session to go over strategies. I think the group is A+ and doesn't need to be improved.
Inclusion of household members, eg. Family session to go over strategies. I think the group is A+ and doesn't need to be improved. Chicken rolls.
Inclusion of household members, eg. Family session to go over strategies. I think the group is A+ and doesn't need to be improved. Chicken rolls. Nil.
Inclusion of household members, eg. Family session to go over strategies. I think the group is A+ and doesn't need to be improved. Chicken rolls. Nil. Nothing.
Inclusion of household members, eg. Family session to go over strategies. I think the group is A+ and doesn't need to be improved. Chicken rolls. Nil. Nothing. Bring your partner.
Inclusion of household members, eg. Family session to go over strategies. I think the group is A+ and doesn't need to be improved. Chicken rolls. Nil. Nothing. Bring your partner. N/A
Inclusion of household members, eg. Family session to go over strategies. I think the group is A+ and doesn't need to be improved. Chicken rolls. Nil. Nothing. Bring your partner. N/A Everything was great.



Early Start Project

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