

Last reviewed: July 2016

Intervention website: <http://www.parentsplus.ie/>

GUIDEBOOK INTERVENTION INFORMATION SHEET

Parents Plus Early Years

Please note that in the 'Intervention Summary' table below 'child age', 'level of need', and 'race and ethnicities' information is **as evaluated in studies**. Information in other fields describes the intervention as **offered/supported by the intervention provider**.

Intervention summary	
Description	Parents Plus Early Years (PPEY) is for parents with concerns about a preschool child. It is delivered by two practitioners to parents for eight to 10 sessions. Some sessions are offered to parents individually and some are delivered to groups of up to 12 parents. During each session, parents learn strategies for encouraging positive child behaviour and implementing age-appropriate discipline.
Evidence rating	2+
Cost rating	1
Child outcomes	<ul style="list-style-type: none">• Preventing crime, violence and antisocial behaviour<ul style="list-style-type: none">- Improved behaviour- Reduced hyperactivity.
Child age (population characteristic)	3 to 7 years old
Level of need (population characteristic)	Universal

Foundations Guidebook – Intervention information sheet

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Intervention summary	
Race and ethnicities (population characteristic)	Not reported
Type (model characteristic)	Group
Setting (model characteristic)	<ul style="list-style-type: none">• Outpatient health setting• Home• Children's centre or early-years setting• Primary school• Community centre.
Workforce (model characteristic)	Mental health professionals
UK available?	Yes
UK tested?	No

Model description

Parents Plus Early Years (PPEY) is one of eight Parents Plus interventions adapted specifically for families with concerns about the behaviour of a child between one and six years old.

It is delivered by two practitioners with a master's qualification or higher in mental health profession. Parents attend between eight and 10 group and individual sessions, each session lasts 2.5 hours. The group sessions involve eight to 12 parents.

The group session topics are drawn from two teaching DVDs with scenes involving real-life parent–child interactions filmed both at home and in the clinic. Topics covered in these DVDs include building a positive parent–child relationship, encouraging child cooperation, and responding to misbehaviour. The video input is backed up by group discussion, practice exercises, skills role-play, homework activities, and handouts.

The individual sessions, which include the parent, child, and therapist, are designed to give parents an opportunity to 'try out' the ideas raised in the group sessions, address specific parental concerns, and tailor the course to their child's individual needs. The use of video feedback created during the sessions is central to these sessions.

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Target population

Age of child	1 to 6 years old
Target population	Families with concerns about the behaviour of a child aged 6 years old or younger.

Please note that the information in this section on target population is as **offered/supported by the intervention provider**.



Theory of change

Why		Who	How	What		
Science-based assumption	Science-based assumption	Science-based assumption	Intervention	Short-term outcomes	Medium-term outcomes	Long-term outcomes
<ul style="list-style-type: none"> • Young children naturally exhibit challenging and non-compliant behaviours • Challenging child behaviours during preschool increase the risk of behavioural problems in later childhood and adolescence. 	<ul style="list-style-type: none"> • Effective parenting behaviours and a predictable family environment help children to learn how to regulate their own behaviour and reduce the risk of child behavioural problems becoming entrenched • Ineffective parenting behaviours occasionally increase the risk of child behavioural problems becoming entrenched. 	<p>Parents with a child exhibiting more entrenched behavioural problems during the early years often benefit from intensive support, specific to their needs.</p>	<p>Parents learn:</p> <ul style="list-style-type: none"> • Age-appropriate expectations for their child • Strategies for establishing predictable family routines • Strategies for promoting positive parent–child interaction through non-directive play • Strategies for reinforcing positive child behaviour through labelled praise • Strategies for discouraging challenging child behaviour through age-appropriate discipline. 	<ul style="list-style-type: none"> • Parents implement effective parenting strategies in the home • Parents’ confidence increases • Parent–child interaction improves. 	<p>Children’s self-regulatory capabilities and behaviour improves.</p>	<ul style="list-style-type: none"> • Children are at less risk of antisocial behaviour in adolescence • Children are more likely to engage positively with others.



Implementation requirements

Who is eligible?	Parents with concerns about the behaviour of a preschool child.
How is it delivered?	Parents Plus Early Years is delivered by two mental health professionals to groups of eight to 12 parents in nine sessions, lasting 2.5 hours each.
What happens during the intervention?	<p>Parents attend a combination of group and individual sessions.</p> <p>The individual sessions, which include parent, child, and therapist, are designed to give parents an opportunity to ‘try out’ the ideas in the course and raise specific concerns, as well as tailor aspects of the course to an individual child’s needs. Videos of parent–child interaction are created and then replayed and discussed in the individual sessions. The use of video feedback is central to these sessions.</p> <p>The group session topics are drawn from two teaching DVDs of videotaped scenes of real parent–child interactions that were filmed both at home and in the clinic. The video input is backed up by group discussion, practice exercises, skills role-play, homework activities, and handouts.</p>
Who can deliver it?	The two Parents Plus Facilitators who deliver Parents Plus Early Years are typically mental health professionals with a master’s qualification or higher.
What are the training requirements?	Practitioners receive 21 hours of initial intervention training. Booster training of practitioners is recommended.
How are practitioners supervised?	It is recommended that practitioners supervised by one intervention developer supervisor and one host-agency supervisor.
What are the systems for maintaining fidelity?	<ul style="list-style-type: none"> • Supervision • Booster training • A ‘Parent Plus quality protocol’ checklist for practitioners to complete after every session.
Is there a licensing requirement?	No



Implementation requirements (cont.)

*Contact details	<p>Contact person: John Sharry</p> <p>Organisation: Parents Plus</p> <p>Email address: admin@parentsplus.ie</p> <p>Website: http://www.parentsplus.ie/</p> <p>*Please note that this information may not be up to date. In this case, please visit the listed intervention website for up to date contact details.</p>
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Evidence summary

Parents Plus Early Years' (PPEY) most rigorous evidence comes from a single QED conducted in Ireland consistent with Foundations' Level 2+ evidence strength criteria.

This study identified statistically significant improvements in PPEY parent's reports of their children's behaviour immediately after intervention completion which were greater than parents not receiving the intervention.

Parents Plus Early Years has preliminary evidence of improving a child outcome, but we cannot be confident that the intervention caused the improvement.

Search and review

	Number of studies
Identified in search	5
Studies reviewed	1
Meeting the L2 threshold	1
Meeting the L3 threshold	0
Contributing to the L4 threshold	0
Ineligible	4



Individual study summary: Study 1

Study 1	
Study design	QED
Country	Ireland
Sample characteristics	117 parents and their children (aged 3 years to 6.8 years old) attending mental health services in Dublin.
Race, ethnicities, and nationalities	Not reported
Population risk factors	Families recruited from mental health services on the basis of pre-identified behavioural difficulties.
Timing	<ul style="list-style-type: none"> • Pre- and post-intervention • Five-month follow-up.
Child outcomes	<ul style="list-style-type: none"> • Reduced behavioural difficulties (parent report) • Reduced hyperactivity (parent report).
Other outcomes	None
Study Rating	2+
Citation	Griffin, C., Guerin, S., Sharry, J. & Drumm, M. (2010) A multicentre controlled study of an early intervention parenting programme for young children with behavioural and developmental difficulties. <i>International Journal of Clinical and Health Psychology</i> . 10, 279–294.

Brief summary

Population characteristics

This study involved 117 parents with concerns about the behaviour of a child between 3 and 7 years old recruited from four mental health clinics in Dublin, Ireland. 78% of the children were male.



34% of the children were referred on account of behavioural problems and 66% because of developmental delays. No further details were provided about the participants' ethnicity, income, or other key demographics.

Study design

This study employed a quasi-experimental design which incorporated both a repeated measures design and a comparative group design, evaluating the treatment effects of attending the Parents Plus Early Years intervention over time, and then against treatment effects of a Comparison group, which received treatment as usual (TAU).

65 families were assigned to PPEY and 52 to a wait-list control group involving treatment as usual (TAU). A sequential block design, based on date of referral, was used to determine assignment to PPEY or TAU over a two-year period.

Random assignment was not used, but the two groups were assessed as equivalent at baseline.

Measurement

Assessments involving both the treatment and control groups took place at baseline (pre-intervention) and post-intervention. Families completing PPEY also complete the parental report measures at a five-month follow-up.

Post-intervention

- **Parent report** measures included the Strengths and Difficulties Questionnaire – Parent Form, Preschool Version (SDQ), the Parental Stress Scale (PSS), and the Parent Defined Problems Goal form.
- **Researcher-led** assessments included coded videotaped observations of the parent and child interacting during a free play and tidy up session, using Forehand and McMahon's coding scheme. Coding was conducted by researchers blind to group assignment.

Five-month follow-up

- **Parent report** measures included the Strengths and Difficulties Questionnaire – Parent Form, Preschool Version (SDQ), the Parental Stress Scale (PSS), and the Parent Defined Problems Goal form.

The 'Parent Defined Problems and Goals Form' was developed by the provider and may have been used as part of the intervention. Therefore, this measure does not contribute to the study rating.

Study retention

Post-intervention

69% (81) of the study participants completed measures post-assessment, including 71% (46) of those assigned to PPEY and 67% (35) of those receiving TAU.

The Strengths and Difficulties Questionnaire Total Difficulties score was observed to be higher in families retained in the PPEY sample in comparison to the families retained in the TAU sample.



Five-month follow-up

63% (41) of the PPEY parents completed self-report measures five months after completing the intervention.

Results

Post-intervention

Data-analytic plan

Analysis of covariance (ANCOVAs) were conducted to compare group x time pre/post change, controlling for baseline scores and child difficulty (i.e. behaviour or development). The analysis was run twice: once with the retained group, and a second time with intent to treat, with the last observed score carried forward (i.e. baseline data) to impute any missing data. Pre/post comparisons involving the PPEY group were conducted with data created via coded observations.

Findings

The study observed statistically significant improvements favouring the PPEY group in parents' reports of their child's total behavioural difficulties, hyperactivity, behavioural problems, and behavioural goals. These findings remained significant (but the effect sizes were not reported) in the intent-to-treat analysis.

Statistically significant improvements were also reported for the pre/post changes observed in the coded videotapes for PPEY parents only. Pre/post change in the coded observations was not reported for the TAU group.

Five-month follow-up

Data-analytic plan

Pre/post comparisons involving PPEY parents self-report measures at baseline and the five-month follow-up were made with the 41 remaining parents.

Findings

The study observed that benefits in child behaviour reported by PPEY parents immediately post-intervention continued at the five-month follow-up. Additionally, statically significant improvements in PPEY parents' self-reports of parenting stress were also observed.

Limitations

The conclusions that can be drawn from this study are limited by methodological issues pertaining to the treatment and comparison groups not being generated through random assignment, hence why a higher rating is not achieved.



Study 1: Outcomes table

Outcome	Measure	Effect size	Statistical significance	Number of participants*	Measurement time point
Child outcomes					
Total Difficulties	Strengths and Difficulties Questionnaire (parent report)	d = .52	Yes	77	Post-intervention
Hyperactivity	Strengths and Difficulties Questionnaire (parent report)	d = .72	Yes	77	Post-intervention
Conduct Problems	Strengths and Difficulties Questionnaire (parent report)	Not reported	No	77	Post-intervention
Emotional Symptoms	Strengths and Difficulties Questionnaire (parent report)	Not reported	No	77	Post-intervention
Peer Problems	Strengths and Difficulties Questionnaire (parent report)	Not reported	No	77	Post-intervention
Parent Reported Problems**	Parent Defined Problems and Goals (Parent Report)	d = .97	Yes	77	Post-intervention



Outcome	Measure	Effect size	Statistical significance	Number of participants*	Measurement time point
Parent Reported Goals**	Parent Defined Problems and Goals (Parent Report)	d = .139	Yes	70	Post-intervention
Parent outcomes					
Parental stress	Parental stress scale (Parent report)	Not reported	No	77	Post-intervention
<p>*Values are reported for completed measures without further imputation for the comparisons involving the PPEY and TAU groups.</p> <p>** The 'Parent Defined Problems and Goals Form' was developed by the provider and may have been used as part of the intervention. Therefore, this measure does not contribute to the study rating.</p>					

Other studies

The following studies were identified for this intervention but did not count towards the intervention's overall evidence rating. An intervention receives the same rating as its most robust study or studies.

Gerber, S., Sharry, J., Streek, A. & McKenna, G. (2016) Parent training: Effectiveness of the Parents Plus Early Years programme in community preschool settings. *European Early Childhood Education Research Journal*. 24 (4), 602–614.

Hayes, N., Siraj-Blatchford, I., Keegan, S. & Goulding, E. (2013) *Evaluation of the Early Years Programme of the Childhood Development Initiative*. Centre for Social and Educational Research, Dublin Institute of Technology and Institute of Education, University of London.

Kilroy, S., Sharry, J., Flookd, C. & Guerin, S. (2010) Parenting training in the community: Linking process to outcome. *Clinical Child Psychology and Psychiatry*. 1–15.

Loneragan, A., Gerber, S., Streek, A. & Sharry, J. (2015) Parenting groups, how long is enough? The efficacy of a community-run Parents Plus Early Years Program as a preschool parenting intervention of modifiable duration. *Global Journal of Community Psychology Practice*. 6, 1–13.



Sharry, J., Suerin, S., Griffin, C., & Drumm, M. (2005). An evaluation of the Parents Plus Early Years Programme: A video-based early intervention for parents of pre-school children with behavioural and developmental difficulties, *Clinical Child Psychology and Psychiatry*, 10, 319-336

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Note on provider involvement: This provider has agreed to Foundations' terms of reference (or the Early Intervention Foundation's terms of reference), and the assessment has been conducted and published with the full cooperation of the intervention provider.