The Group Component of a Group Parenting Programme: Exploring Parents' Perceptions.

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Jean McPherson

Part One: Introduction and Literature Review
Part Two: Empirical Study
Part Three: Reflective Summary

Abstract

A qualitative approach was adopted to explore parents' perceptions of the group component of a group parenting programme, delivered by an educational psychology service in Wales. Semi-structured interviews and questionnaires were utilised in order to gather the views of seven parents who attended a group parenting programme. Additionally, semi-structured interviews were employed to explore the perceptions of twenty parents who chose not to attend the parenting programme, related to perceived facilitators to, and barriers of, attending. Thematic analysis identified key themes related to the perceptions of the group component and to perceived changes in relation to the group component. Themes were also identified related to the perceived facilitators of, and barriers to, attending a group parenting programme. Overall findings suggested that the group was perceived positively by attending parents. Findings indicated an interrelationship between group and individual factors in relation to perceived change. Perceived facilitators to, and barriers of, attendance at a parenting programme related to practical, programme and personal factors, and, factors related to proficiency of English language. Tentative suggestions are made regarding how the group component contributed to parents' perceived changes and how EPs might apply further knowledge of psychology working within group parenting programmes.

Summary

This thesis is formed of three parts: a literature review; an empirical research study; and, a reflective account.

Part One, a literature review, explores and critically discusses the research evidence in relation to parenting programmes and parental engagement in programmes. Theories of individual and group change are considered related to the common principles of parenting programmes. The rationale for the current study is presented.

Part Two, an empirical study, provides further exploration of parents' perceptions of the group component of a group parenting programme and of the ways in which perceptions of group factors relate to perceived change. Semi-structured interviews and a questionnaire were the methods used in order to gather the perceptions of parents that attended a group parenting programme. The study also explores the perceived facilitators of, and barriers to, attendance at a group parenting programme. Semi-structured interviews were utilised in order to gather the perceptions of parents who did not attend a parenting programme. Findings are discussed in relation to the key themes identified and to the role of the educational psychologist.

Part Three, a reflective summary, details the reflections of the researcher in relation to the current research. It provides a critical account of the researcher and of the research process and considers the ways in which the current study contributes to knowledge.

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Abbreviations

APs	Attending parents
DfE	Department for Education
DCSF	Department for Children, Schools and Families
EAL	English as an Additional Language
EP	Educational psychologist
NAPs	Non-attending parents
NAPP	National Academy of Parenting Practitioners
NICE	National Institute for Health and Care Excellence
PEIP	Parenting Early Intervention Programme
PPET	Parenting Programme Evaluation Tool
RQ	Research Question
TFI	Therapeutic Factors Inventory
TPB	Theory of Planned Behaviour
UK	United Kingdom
WAG	Welsh Assembly Government

The Group Component of a Group Parenting Programme: Exploring Parents' Perceptions.

Part One: Introduction and Literature Review
9342 words
(Excluding tables and references)

1. Introduction

1.1 Rationale for parenting programmes

Group parenting programmes have been established nationally and internationally as a means to support parents and their children (Boddy *et al.,* 2009; Lindsay & Strand, 2013). Parents are fundamental to their children's development (Park, 2011; Pugh, De'Ath & Smith, 1994); social, emotional and neurodevelopmental (Allen, 2011). The UK government has recognised the importance of investing in parenting programmes, at universal and targeted levels, as a way to provide prevention and intervention strategies to help parents to develop and enhance effective parenting skills (Lindsay *et al.,* 2011). An estimated 20% of parents in the UK participate in programmes during their parenting career (Bunting, 2004).

1.2 Research in to parenting programme effectiveness

Systematic reviews have supported the claims of effectiveness of group based parenting programmes in improving the emotional and behavioural adjustment of children (Barlow, Parsons, & Stewart-Brown, 2005; Barrett, 2010). Parenting programmes have demonstrated positive outcomes related to children's social and emotional competence (Webster-Stratton & Reid, 2004) and educational attainment (Desforges & Abouchaar, 2003). From an economic perspective, parenting programmes have been recognised as preventative and cost-effective short-term interventions (Lindsay *et al.,* 2011), impacting upon reduced future costly problems in society, such as, anti-social behaviour (Scott, 2001a, 2001b) and use of public services (Bywater *et al.,* 2009). Group parenting programmes are recommended as a psychosocial intervention for children aged 3 to 11 at risk of, or diagnosed as having, conduct disorder or oppositional defiant disorder (NICE, 2013).

1.3 Group versus individual parenting programmes

Group approaches have been reported to be more successful long term than individual approaches (Barrett, 2010). Findings consistently demonstrate that group parenting programmes are more successful in terms of parent attendance (Prinz & Miller, 1994;

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Webster-Stratton & Hancock, 1998), parent satisfaction (Kazdin, 1997) and rate of positive change (Pevsner, 1982).

1.4 Aims of group parenting programmes

The majority of group parenting programmes have a core aim to help parents develop their parenting skills (Dretzke *et al.,* 2005) and change parents own parenting behaviour (Smith & Pugh, 1996). Through the application of theoretical principles, such as Social Learning Theory (Bandura, 1977) and Attachment Theory (Bowlby, 1953), parenting programmes aim to positively influence changes in parenting behaviour in order to positively impact upon outcomes for children.

1.5 Perceptions of parenting programmes

Despite the plethora of research investigating and evaluating the outcomes of parenting programmes, less research has looked qualitatively at parental perceived changes as a result of attending group parenting programmes (Kane, Wood & Barlow, 2007). Qualitative methods that have sought to explore perceived changes for parents report perceived improvements in parental competence (Spitzer, Webster-Stratton & Hollinsworth, 1991), relationships between parents and their children (Stewart-Brown *et al.,* 2004), the acquisition of new parental behaviour management techniques (Barlow & Stewart-Brown, 2001) and improved child behaviour (Patterson, Mockford & Stewart-Brown, 2005). Understanding parents' experiences of programmes is important in order to enhance the benefits of attending programmes (Zeedyk, Werrity & Riach, 2008) and improve services offered to parents in order to facilitate greater parental inclusion.

1.6 The group component

Conwill (1986) states that group processes are the powerful group dynamics that evolve during the training of several participants. Within group parenting programmes less research has examined the impact of the group itself (Borden, Schultz, Herman & Brooks, 2010). The limited findings indicate the role of the group to be perceived positively by parents, particularly in relation to feeling supported (Levac, McCay, Merka & Reddon-D'Arcy, 2008; Miller & Sambell, 2003), sharing common experiences (Levac *et al.,* 2008), mirroring concerns (Barlow & Stewart-Brown, 2001) and facilitating

learning (Spitzer *et al.,* 1991). The interactive, interpersonal nature of the group within group counseling provides unique and powerful mechanisms of change (Barlow & Burlingame, 2006; Burlingame, Fuhriman, & Mosier, 2003; Payne & Marcus, 2008). The group component of parenting programmes has been identified as an important vehicle for change (Barlow & Stewart-Brown, 2001) and underlying group processes have been suggested as mechanisms that enhance the curriculum content and lead to positive outcomes (Borden *et al.,* 2010).

1.7 Relevance to the role of the educational psychologist (EP)

In the knowledge that parenting can influence the developmental trajectories of children and young people (Hoeve *et al.,* 2008), arguably, EPs are in a position in which to effect the outcomes of children and young people by working with parents through parenting programmes to facilitate change. The current debate within the EP profession of a shift from a purely school based EP role to one that is more community based (Stringer, Powell, & Burton, 2006) offers alternative supporting opportunities of working with parents and children. Yalom (1995) acknowledges the skills of the leading practitioner in fostering an atmosphere conducive to group work. Asgary-Eden and Lee (2011) advocate the use of EPs as facilitators owing to their understanding of group dynamics, behaviour and organisational factors. Knowledgeable (Korfmacher, O'Brien, Hiatt & Olds, 1999) in psychological theory (Hutchings, Bywater & Daley, 2007) and interpersonal expertise, skilled practitioners can contribute to greater positive changes in parenting behaviour (Forgatch, Patterson & DeGarmo, 2005). Thus, the EP role and skills are suggested as intrinsically linked to creating these positive outcomes.

1.8 Overview

This paper begins with a review of the literature relevant to the key areas after which the rationale and research questions (Part One) for the current study are presented. Part Two summarises the literature and outlines the research design in relation to the epistemological position adopted. The results are presented using themes and, following this, the findings are discussed cautiously in light of the literature reviewed. The limitations of the study are discussed and areas for future research highlighted. Part Three of this paper is a critical reflection of the entire research process.

2. Literature Review

2.1 Overview

This literature review presents and critically discusses theory and research relevant to the current study. The focus of the review is on the following:

- An overview of parenting programmes
- An overview of factors effecting engagement in parenting programmes
- An overview of common principles related to parenting programmes
- Discussion of key theoretical perspectives related to change, group processes and change mechanisms.
- Application of these theoretical approaches to parenting programmes.

The rationale for the current study will be presented at the end of the chapter.

2.1.1. Description of key sources and terms

The key sources used to conduct the literature review included searching electronic databases, including, PsycINFO, Sciencedirect, and ERIC. Official research reports related to national and government policy were also searched. Relevant journals, for example, those related to group processes, were directly searched for articles related to the topic area. Reference lists of identified articles also provided a key source from which to search and identify articles. The literature search was based around parenting programmes, parents' experiences of parenting programmes, theories of change and group processes. Due to the limited scope of this study, only selected literature relevant to these key areas was reviewed. Literature searches were conducted regularly.

3. Parenting Programmes

This literature review begins with a brief overview of parenting programmes and locates them within the national UK context.

3.1 Definition

Terminology within the literature regarding parenting programmes is wide ranging. There are many ways in which authors and programme developers use terms to denote a programme. Alternative terms for parenting programmes include parent: training; skills training; management training; education; and, parenting support and parenting intervention. Authors have recognised that parenting support includes interventions that address promoting social, physical and emotional well-being protective factors for children and reducing risks for parents (Cotton, Reynolds & Apps, 2009; Moran, Ghate & van der Merwe, 2004). In the National Evaluation of Family and Parenting Support in Sure Start Local Programmes, Barlow and colleagues define parenting support as: "Services which aimed to enable parents to enhance their parenting. These included formal and informal interventions to increase parenting skills, improve parent/child relationships, parenting insight, attitudes and behaviours, confidence in parenting…" (Barlow, Kirkpatrick, Wood, Ball & Stewart-Brown, 2007, p.5)

Formal interventions through group parenting programmes involve parents receiving input as a group at the same time in an interactive context (Moran *et al.,* 2004). Smith and Pugh's (1996) decision to use the term 'parenting programme' in their review was upon the basis that 'programme' implied a formal group structure. They consider parenting to be more than a set of skills acquired through 'training' (Smith & Pugh, 1996).   The current research uses Kane and colleagues' definition of group parenting programmes as: "interventions that utilise a structured format, working with parents in groups aimed at improving parenting practices and family functioning" (Kane *et al.,* 2007, p.2).

A brief overview of types of parenting programmes is provided in the next section.

3.2 Types of parenting programmes

As an overview of the literature, a vast range of parenting programmes exists nationally and worldwide. Parenting programmes are designed to address the different needs of populations of both children and parents. An overview of the extensive research reviewed is presented below.

Barrett's (2010) review notes the range of parenting programmes encompassing parents of children from pre-birth through to teenager years. Some parenting programmes have been tailored to meet the needs of certain groups of children and young people, for example, those with learning disabilities (Schultz, Schultz, Bruce & Smyrios, 1993), Attention Deficit Hyperactivity Disorder (ADHD; Webster-Stratton & Reid, 2014) and social, emotional and behaviour problems (Webster-Stratton & Hancock, 1998). Greatest attention has focused upon children and young people with conduct disorder and externalising behaviour problems (Hutchings, Gardner & Lane, 2004; Kazdin, 1993, 1997; Moran *et al.,* 2004). Certain risk factors associated with parenting behaviour have been suggested to influence child outcomes (Baydar, Reid & Webster-Stratton, 2003). Consequently, some parenting programmes have aimed to address the needs of parents, such as, parenting interventions for mothers with difficulties with substance abuse (Suchman, Pajulo, DeCoste & Mayes, 2006).

Differences between parenting programmes range from being: universal or targeted; voluntary or mandatory; and, delivered by professionals, para-professionals or volunteers (Barlow *et al.,* 2007; Moran *et al.,* 2004). Programmes also differ in: design; approach as preventative or responsive; theoretical underpinnings; context; programme objectives, for example, targeting certain parent or child behaviours (Barrett, 2010; Moran *et al.,* 2004; Smith & Pugh, 1996) or child literacy skills (Sylva, Scott, Totsika, Ereky-Stevens & Crook, 2008); and, format, being individual, group or self-administered, for example, video-based programmes (Webster-Stratton, Kolpacoff & Hollinsworth, 1988).

3.3 Breadth of parenting programmes
Such is the breadth of parenting programmes, over 90 different named parenting programmes were identified as part of this literature review. Allen's (2011) 'Early Intervention' research report identifies 72 types of parenting support programmes alone. In 2010, the United Nations Office on Drugs and Crime (UNODC) compiled a list of 23 types of evidence based parenting programmes from a 150 wide search, ranked in order of effectiveness (UNODC, 2010). Evidence-based parenting programmes can be said to be those with strong evaluation evidence to attest to the quality of their outcomes (Asmussen, Matthews, Weizel, Beblroglu & Scott, 2012). More recently, in the

UK, 51 evidence based parenting programmes have been identified as part of the development of an online database, designed to assist commissioners and parents when selecting a parenting programme. Programme effectiveness has been measured against international standards of best practice using the Parenting Programme Evaluation Tool (PPET) according to four evaluation criteria, summarised here as: the matching the programme to the target population for whom the programme is designed; the quality of programme content; the quality of practitioners involved in programme delivery; and, quality of evaluations measuring programme effectiveness (Children's Workforce Development Council [CWDC], 2010; Scott, 2010a).

These 51 programmmes are listed in Table 1 in order of evidence-base rating in accordance with the PPET ratings (strong; promising; preliminary). The parenting programmes are categorised by individual or group. The parenting programmes listed below have been adapted from the Commissioning Toolkit database created by the National Academy of Parenting Research in England and as displayed on the Department for Education website (DfE, 2014). The current author recognises that this is by no means the only or the best list of evidence-based parenting programmes and does not necessarily endorse it, but, it is deemed to be the most current information to date about evidence-based parenting programmes implemented in the UK.

Table 1: Evidence-based individual and group parenting programmes (N = 51*) adapted from the Commissioning Toolkit (data correct at time of print – April 2014) *Nine parenting programmes cut across both individual and group formats.*

Evidence-base	Individual	Group
Strong	Family Nurse Partnership (FNP)	Families and Schools Together (FAST)
	Functional Family Therapy (FFT)	*Multidimensional Treatment Foster Care – Adolescent (MTFC-A)*
	Multidimensional Treatment Foster Care – Adolescent (MTFC-A)	*Standard Triple P*
	Multisystemic Therapy (MST)	*Stepping Stones Triple P – Standard and Group*
	Multisystemic Therapy – Problem Sexual Behaviour	The Incredible Years Early Years (IYEY) BASIC and ADVANCE
	Parent Management Training, Oregon Model (PMTO)	
	Standard Triple P	
	Stepping Stones Triple P – Standard and Group	
Promising	Helping the Noncompliant Child (HNC)	Family Foundations
	Multisystemic Therapy for Child Abuse and Neglect (MST-CAN)	Keeping Foster and Kinship Parents Trained and Supported (KEEP)
	New Forest Parenting Programme (NFPP)	Lifestyle Triple P
	Parents Plus Adolescent Programme (PPAP)	Multidimensional Treatment for Foster Care – Prevention (MTFC-P)
	Parents Plus Children's Programme (PPCP)	New Beginnings
	Parents Plus Early Years (PPEY)	*Parents Plus Adolescent Programme (PPAP)*
	Pathways Triple P	*Parents Plus Children's Programme (PPCP)*
	Primary Care Triple P	*Parents Plus Early Years (PPEY)*
		Pathways Triple P
		The Incredible Years Toddler – BASIC and ADVANCE (IY Toddler)
		The Strengthening Families Programme 10-14 (SFP 10-14)
Preliminary	Anna Freud Centre Parent Infant Project (PIP)	A Supportive Programme for Parents of Teenagers (STOP)
	Holding Hands	ADHD PEST
	Mentalisation-based Treatment for Families	Family Links Nurturing Programme (FLNP)
	Parent-Child Relationship Enhancement Approach (PCREA)	Family Transitions Triple P
	Parenting Positively	Fostering Changes
	Parents as First Teachers (PAFT)	Fun and Families
	Standard Teen Triple P	Living with Children (LWC)
	The Scallywags Programme	Mellow Parenting

		Noughts to Sixes – From Pram to Preschool
		Parenting Effectiveness Training (PET)
		Parenting Positively
		Raising Children
		Selected Triple P
		Solihull Approach Parenting Group (SAPG)
		Standard Teen Triple P
		Strengthening Families, Strengthening Communities (SFSC)
		Take 3
		The Five Pillars of Parenting
		The Incredible Years School Age (IYSA) – BASIC and ADVANCE
		The Scallywags Programme
TOTAL	**24**	**36**

The Munro Review of Child Protection (Munro, 2011) considers evidence-based interventions to be central to supporting practitioners working with children and families. Whilst Scott (2010a) advocates for the benefits of evidence-base parenting programmes, he also acknowledges that: "...the many parenting programmes used in England vary greatly in theoretical orientation, quality of written materials, and sophistication of training available for practitioners and evidence of effectiveness" (p.2).

Evidence-based parenting programmes are those that consistently result in improved child and parent outcomes (Asmussen & Weizel, 2010; Fixsen, Blasé, Naoom & Wallace, 2009), offer assurance that positive results will be obtained (UNODC, 2010) and, arguably, should be embedded within policy in order to better support parents (Moran *et al.,* 2004). Key outcomes of parenting programmes are further considered below, followed by a critical discussion of the studies reporting outcomes.

3.4 Key outcomes

Dishion & Andrews (1995) present evidence that changing parenting practices can significantly impact upon child functioning. Key reported outcomes have been gathered from reviewing quantitative and qualitative studies and are outlined below. Firstly, outcomes for children are summarised and, secondly, outcomes for parents.

The key outcomes for children are related to: behaviour (Bywater *et al.,* 2009; Field, 2010; Hutchings *et al.,* 2007; Kazdin, 1997; Letarte, 2010), emotional and behavioural adjustment (Barlow *et al*., 2005; Barrett, 2010; Gardner, Burton and Klimes, 2006) reduced child antisocial behaviour (Scott, Spender, Doolan, Jacobs & Aspland (2001c); improved educational attainment (Sylva *et al.,* 2008); improvements in positive parent child interactions (Stewart-Brown *et al.,* 2004; Webster-Stratton, 1984; Webster-Stratton & Hammond, 1997); and, improved child mental health and well-being (Patterson, Barlow, Mockford, Klimes & Piper, 2002).

The literature indicates positive outcomes for parents that relate to: an increased knowledge of child development and acquired new parenting practices (Barlow & Stewart-Brown, 2001; Lindsay *et al.,* 2008; Patterson *et al.,* 2005; Scott *et al;* 2010b; Spitzer *et al.,* 1991); improved ability to manage children's behaviour and an increased

awareness of the influence of their own behaviour (Zeedyk *et al.,* 2008); confidence to parent (Levac *et al.,* 2008; Patterson *et al.,* 2005; Zeedyk *et al.,* 2008); improved parenting resourcefulness and competency (Chislett & Kennett, 1997; Spitzer *et al*, 1991) to respond to children's emotions (Havighurst, Wilson, Harley & Prior, 2009); increased ability to cope (Spitzer *et al.,* 1991); increased sense of control (Barlow & Stewart-Brown, 2001); feeling less guilt (Kane *et al.*, 2007); increased empathy with their children and increased capacity to think about matters calmly (Barlow & Stewart-Brown, 2001); changes in their social networks (Lindsay *et al.,* 2011; Zeedyk *et al.,* 2008;); an improvement in the parent-child relationship (Barlow & Stewart-Brown, 2001); and, improvements in maternal psychopathology (Kazdin, 1997), including reduced parental stress and depression (Baydar *et al*., 2003).

Long-term effectiveness of parenting programme outcomes have also been reported related to: social emotional adjustment of adolescents (Webster Stratton, Rinaldi & Reid, 2001); reduced health and social service use of parents (Bywater *et al.,* 2009); maintenance of treatment gains; and, maternal mental health (Kazdin, 1997).

3.4.1 Unintended outcomes

Important to note is that not all parents who participate in a parenting programme report positive changes. Mockford and Barlow (2004) found unintended outcomes of parenting programmes to be associated with difficulties applying newly learned techniques to the home setting and conflict regarding new parenting practices with the other parent (Mockford & Barlow, 2004). In a follow up study, Zeedyk *et al.'s* (2008) findings indicated that some positive outcomes of programmes had not been sustained.

3.5 Critical discussion

Closer examination of research within the context it was conducted is suggested to be a helpful way in which to better understand reported findings. Smith and Pugh's (1996) review of group parenting programmes claimed that few robust evaluation studies existed to support the mass of anecdotal evidence of the positive benefits of parenting programmes. Since then, a wide range of evaluation studies and reviews are evident within the literature (Allen, 2011; Barrett, 2010; Boddy *et al.,* 2009; Lindsay *et al.,* 2008; Lindsay *et al.,* 2011;

Moran *et al.,* 2004). Randomised control trials to evaluate the effectiveness of programmes are advocated by many researchers in the field (Bywater *et al*., 2009; Moran *et al.,* 2004), however, Davis and colleagues, warn against generalising parenting programme outcomes across differing needs of groups of parents (Davis, McDonald & Axford, 2012). As Virgo (2009) identifies, different agencies and different parenting programmes often use different methods of evaluation, making comparisons across programmes and findings more difficult. The role of independent research is highlighted within evaluating effectiveness (Wiggins, Austerberry & Ward, 2012).

Scott (2010a) posits that most evaluations only include data related to the evidence of effectiveness of parent and child outcomes and ignore the content, the theoretical basis, the manualisation and the way in which the programme is delivered. In accounting for a wider evaluative system factors influential to parenting programme outcomes are suggested to include the role of the facilitator in the delivery of a programme (Barrett, 2010; Lindsay *et al.,* 2011) and the fidelity of programme implementation (Asmussen *et al.*, 2012).

3.5.1 Sample

Differing rates of engagement in programmes by different cohorts of parents have implications for research findings reported by studies. If the majority of programmes are mostly attended by a limited group of parents (Smith & Pugh, 1996) then the research field may be narrow in terms of its basis, and thus, research findings reported must be interpreted with due caution. The sample from which outcomes are reported may be skewed. For example, parents who agree to participate in studies may also be the parents to have had more positive experiences of a parenting programme (Patterson *et al.,* 2005) and, thus, participants may not be representative of the total sample of parents. Limited in diversity, findings reported less often reflect those related to parents who choose not to participate in a parenting programme or those who do not complete a parenting programme. Further consideration of parental engagement in programmes is discussed in Section 5 of this review.

3.5.2 Qualitative approaches

More recently the value of including qualitative research into systematic reviews has been increasingly recognised (Dixon-Woods & Fitzpatrick, 2001). As well as reporting, and often supporting claims of effectiveness, qualitative studies have elaborated on understanding the ways in which programmes are perceived to be effective by parents (Borden *et al.,* 2010; Levac *et al.,* 2008; Patterson *et al.,* 2005). In a synthesis of qualitative research Kane and colleagues identified factors that parents perceive to be of value in parenting programmes (Kane *et al.,* 2007). As these authors suggest, knowledge of how parents experience programmes to be meaningful and helpful is important in order to assist the provision of appropriate programmes (Kane *et al.,* 2007). Smith & Pugh (1996) highlight that it is not only important to understand whether or not a programme has an effect, but also the process by which this effect is brought about. Spitzer and colleagues posit the advantage of qualitative methodology in being able to understand the reasons behind success or failure in treatment and view the ongoing processes of change for parents (Spitzer *et al.,* 1991).

Qualitative research designs are able identify how parents 'see' the programme they have experienced (Miller & Sambell, 2003), an aspect restricted within quantitative methods (Barrett, 2010). However, the smaller sample sizes common to qualitative research designs and the variation in what individuals report (Kane *et al.,* 2007) pose associated limitations in relation to generalisability of the results. Interviews are commonly employed methods within qualitative research used to elicit the perceptions of individuals. When interview methods are employed, the time lapse between programme completion and the conducting of parent interviews is suggested as an important factor in relation to the accuracy of data collected. Significant variation has been noted in relation to time span within the research field, with some studies reporting the conducting of interviews up to three months (Patterson *et al.,* 2005) after programme completion. In eliciting perceptions of parents, outcomes reported in relation to minority ethnic or socially disadvantaged parents within the findings is relatively limited (Kazdin, 1997).

4. National Context

In recent years support services for families in the UK have grown. Zeedyk and colleagues report an increase in the availability of parenting programmes over the past two decades (Zeedyk *et al.,* 2008). The UK government has identified support for parents as a key aspect of policy. Agendas, such as, Every Child Matters (ECM, DfES, 2004), Every Parent Matters (DfES, 2007), and the introduction of Sure Start Local Programmes providing evidence-based parenting programmes as part of their core offer (DCSF, 2010), serve to highlight the centrality of parenting support and parenting programmes at a national level. Initiatives have been aimed at training parenting practitioners, through the establishment of the National Academy of Parenting Practitioners (NAPP; Asmussen *et al.,* 2012*)*, and at developing systematic implementation of evidence-based parenting programmes throughout local authorities in England, through the Parenting Early Intervention Programme (PEIP; 2008-2011; Lindsay & Strand, 2013). The Welsh Assembly Government (WAG) acknowledges that during the course of parenting life, the majority of parents will, at some point, experience difficulties (Moran *et al.,* 2004; WAG, 2005). The Parenting Action Plan (WAG, 2005) was created in order to raise the profile of parenting programmes in Wales and to increase the support available to parents.

Authors within the field recommend that parenting support should be made available at a universal level across the UK (Lindsay *et al.,* 2008). Policy, such as the Extended Schools initiative, has suggested that parenting programmes be accessible through schools (DfES, 2005) or through community settings (Bell, 2007). A contrasting view comes from authors who question the extent to which parenting should be taught (McGraw & Lewis, 2002). Smith (1997) cautions that programmes may act as a form of social control, encouraging parents to conform to a parenting stereotype.

With the increasing investment in and availability of parenting programmes, factors influencing engagement in parenting programmes are now examined.

5. Engagement in parenting programmes

5.1 Participation

Bunting (2004) reports findings that up to 20% of parents in the UK may take part in parenting programmes, although 60% of parents express an interest in participating in programmes. Less is known about the reasons why parents join, why they drop out and why they decide not to enroll (Smith & Pugh 1996). Studies have begun to explore parents' perceptions of attending parenting programmes and have investigated the barriers to, and facilitators of, parent attendance (Dash, 2012; Hutchings *et al.,* 2007). Authors have called for more research exploring parents' experiences of parenting programmes and reasons for engagement (Kane *et al.,* 2007; Katz, La Placa & Hunter, 2007; Mytton, Ingram, Manns & Thomas, 2013) and for qualitative measures to explore and describe these parent experiences of the group and their perceptions of the usefulness of the group (Levac *et al.,* 2008). Understanding parental engagement is crucial in order to ensure inclusion of a greater range of parents.

Smith and Pugh (1996) identified three main groups of parents who attend parenting programmes. The first group was parents who wanted to ensure their parenting was 'good enough'. The second group was parents of children that displayed behavioural difficulties and, the third group was parents who were experiencing many complex problems and low sense of self-esteem (Smith & Pugh, 1996). Authors have also identified that the majority of parents participating in parenting programmes are white, middle-class mothers (Hutchings & Webster-Stratton, 2004; Smith & Pugh, 1996). As noted previously, the sample of parents from which findings are drawn and outcomes are reported may be extremely limited.

5.2 Factors effecting engagement

An extensive range of factors are reported within the literature as impacting upon parental engagement in parenting programmes. These factors are briefly discussed in relation to five areas: Practical; Structural; Cultural and Contextual; Relational; and Individual. These areas have been adapted from those of Forehand and Kotchick (2002) and the international review of parenting programmes evidence conducted by Moran and colleagues (Moran *et al.,* 2004).

5.2.1 Practical

Practical factors associated with engagement in parenting programmes are: convenient timing of the programme (Gross, Julion & Fogg, 2001; Scott, Connor & Futh, 2006; Spoth & Redmond, 1995); offering transport to reach the programme (Katz *et al.,* 2004; Morris, 2004); no incurring of cost (Forehand & Kotchick, 2002); provision of childcare (Gross *et al.,* 2001; Forehand & Kotchick, 2002); and, knowledge of services (Katz *et al.,* 2007). Community locations can facilitate attendance (Kazdin, 1997) and the development of social networks within a local area (Cunningham, Bremner & Boyle, 1995). However, the presence of individuals from the same community may lead to concerns regarding the confidentiality of information (Bell, 2007).

5.2.2 Structural

Structural and programme factors impacting engagement may include: the programme format as group or individual (Gross *et al.,* 2001), task demands (Kazdin, 1997); language (Mytton *et al.,* 2013); length (Snell-Johns, Mendez & Smith, 2004); mode of delivery (Moran *et al.,* 2004); objectives (Gross *et al.,* 2001); a targeted or universal approach (Cunningham *et al.,* 1995; Prinz & Sanders, 2007), and, stigma (Katz & Pinkerton, 2003; Sanders, 2000; Smith & Pugh, 1996).

5.2.3 Cultural and Contextual

This group of factors refers to the wider contextual aspects that have an impact upon parents' engagement in parenting programmes. The need to address family stressors and conflict alongside parenting programmes has also been recognised (Forehand & Kotchick, 2002) and is associated with enhanced retention at programmes (Hutchings & Webster-Stratton, 2004). O'Brien (2004) suggests that fathers perceive available parenting services as not relevant to them. Programme content and delivery may be culturally unacceptable to some cultural groups (Catalano *et al.,* 1993). Findings show that the need for parenting services for this group is high yet engagement in services is low (Katz *et al.,* 2007), or parents from an ethnic minority drop out early in treatment (Kazdin & Mazurick, 1994). Short and Johnston (1994) identify language, fear of stigmatisation, and differences in child-rearing practices as the three main barriers to participation for parents from ethnic minority groups. Attitudes towards receiving

external support differ across cultures and these impact upon engagement (Kazdin & Mazurick, 1994).

5.2.4 Relational

Good relationships between parents and providers have been identified as major factors influencing parental engagement in services (Forehand & Kotchick, 2002; Morris, 2004). Collaborative relationships can help parents feel involved and valued (Ghate & Hazel, 2002). Findings based upon parental experiences indicate that facilitator knowledge (Korfmacher *et al*., 1999; Lindsay *et al.,* 2011) and qualities are associated with engagement (Matthews *et al.,* 2011; Mytton *et al.,* 2013). Relational aspects of engagement have been recognised within NICE guidelines stating that group facilitators should be able to engage in a "productive therapeutic alliance with parents" (2006, p. 4).

5.2.5 Individual

Individual factors are posited to be crucial to engagement in parenting programmes. Level of parent education (Spoth & Redmond, 1995); parent mental health (Baydar *et al.,* 2003); and, self-efficacy (Jones & Prinz, 2005; Sanders & Woolley, 2005) have all been factors associated with parental enrolment and attendance at parenting programmes. Morrissey-Kane and Prinz (1999) suggest parental attributions influence the early stages of engagement, particularly help-seeking, as well as retention at programmes. Perceived programme benefits have been associated with an inclination to enroll (Spoth & Redmond, 1995). Internal motivation of individual parents has been found to be associated with engagement in parenting programmes (Miller & Prinz, 2003).

5.3 Critical reflections

In light of examining the reasons why parents may or may not engage in parenting programmes, Staudt (2007) offers alternative views for parents dropping out prior to programme completion. Parents may leave the programme prematurely to seek support elsewhere, either formally or informally or, parents may leave the programme prematurely because the programme was not helpful for them (Staudt, 2007). Gross and colleagues invite yet another alternative perspective: "…parents drop out for the same reasons they enroll: they want to be good parents" (Gross *et al.,* 2001, p.252). These

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authors highlight that 'real life' issues may impact upon parents' ability to attend (Gross *et al*., 2001). Additionally, Staudt (2007) indicates that there is limited evidence that parents who leave treatment prematurely have worse outcomes than parents who complete a programme. In addition, the current author feels it important to highlight an assumption made in much of the literature, that all parents require additional support. It might be that parents who do not engage in parenting programmes may not do so because they do not need or do feel they do not need support with their parenting.

Important to note is that the full extent of engagement failure and dropout rates may not be fully known as many researchers do not collect or report this type of data (Moran *et al*., 2004). Assemany and McIntosh (2002) highlight that as many as two fifths of parents who continue to experience problems with their children's behaviour following attendance at a parenting programme, but, it is suggested that findings such as these are rarely reported. Political influence over publications and of the impact of funding are reported as potential explanations for misreporting of data (Moran *et al*., 2004).

6. Parenting programmes: common principles

Parenting programmes share a common goal to bring about a change in parenting behaviour. Despite the range of types of parenting programmes (Table 1), and the differences in programme content and number of sessions delivered, common principles exist within the theoretical and operational underpinnings of programmes.

6.1 Common theoretical principles

Parenting programmes differ in the extent to which they are explicit in their theoretical basis. Within the literature reviewed, common theoretical principles have been identified from those theoretical underpinnings explicitly stated within the literature and from the evidence-based parenting programmes (Table 1) examined.

Most parenting programmes draw upon a mix of theoretical frameworks with the most frequent suggested to be Social Learning Theory (Bandura, 1977) and Attachment Theory (Bowlby, 1953). Kazdin (1997) refers to parenting programmes as "based on social learning principles that are used to develop positive, prosocial behaviours and to

decrease deviant behaviours" (p. 1349) in children. NICE (2013) states that group parenting programmes should "be based on a social learning model, using modelling, rehearsal and feedback to improve parenting skills" (p.24). Other common theoretical frameworks identified are: Experiential Learning (Kolb, 1984); Developmental Psychology (Piaget 1963); Behaviourism (Skinner, 1965); Social Ecological Theory (Brofenbrenner, 1979); Attribution Theory (Weiner 1985); Self-efficacy (Bandura, 1997); Empowerment (Zimmerman, 2000); and, frameworks related to building protective factors and resilience.

6.2 Common operational principles

From reviewing literature in the field, common principles related to the aims of parenting programmes (Figure 1) and how they operationally achieve these aims (Figure 2) are outlined in below. These common operational principles are based upon parenting programmes with an evidence-base.

Figure 1: An overview of common aims of effective parenting programmes

Common Aims (what)

(Based upon reviewing literature by the following authors: Barlow et al., 2007; Chislett & Kennett, 1997; Forgatch et al., 2005; Hutchings& Webster-Stratton, 2004; Kazdin, 1997; Patterson et al., 2005; Smith & Pugh, 1996).

Parenting programmes aim to:

- Teach the rehearsal of new parenting skills
- Support parents and enable them to gain coping skills
- Build positive parent-child relationships
- Teach parents to identify, define and observe problem behaviours in new ways
- Increase knowledge and understanding of child development
- Promote effective child management
- Help parents regulate their children's emotions
- Increase positive child behaviour
- Enhance parental confidence in parenting skills
- Decrease parental anxiety
- Encourage new ways of parenting
- Change parents own parenting behaviour

Figure 2: An overview of common operational principles of effective parenting programmes

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Common Operations (how)

(Based upon reviewing literature by the following authors: Chislett & Kennett, 2007; Hutchings, Gardner & Lane, 2004; Forgatch et al., 2005; Levac et al., 2008; Lindsay & Strand, 2013; Patterson et al., 2005; Scott, 2010a; Webster-Stratton, 1998).

Parenting programmes operationally:

- Provide opportunities to practise acquired new skills both within programme sessions and the home setting
- Have group discussions/share information with group members
- Help parents to set goals
- Provide childcare, good-quality refreshments and transport provided if necessary
- Teach appropriate discipline and positive communication strategies
- Provide time to address parents' difficulties
- Adopt a collaborative approach
- Acknowledge parents' feelings and beliefs
- Teach behaviour management strategies, eg. clear commands; specific praise
- Normalise difficulties
- Provide situation specific skill building
- Provide (non-judgmental) support
- Offer homework tasks
- Use video-tape modelling and role play

As explicitly stated by some authors (Asmussen *et al.,* 2010; Barlow *et al.,* 2007), parenting programmes are designed to bring about a change in parenting behaviour. Subsequently, theoretical approaches to change are examined in the next section.

7. Theoretical approaches

The current author proposes that there are two broad areas of the change theory literature: theories related to individual factors and theories related to group factors. Theories will be discussed, firstly, in relation to individual factors, and in a later section, (Section 9) in relation to group factors.

7.1 Theories of change: individual

Key theories related to individual change have been identified from the literature and are briefly discussed below. These include: the stages and processes of change from the Stages of Change model (DiClemente & Prochaska, 1998); Motivation; the Theory of Planned Behaviour (Ajzen, 1991); Experiential Learning (Kolb, 1984); and, Social Cognitive Theory (Bandura, 1986).

7.1.1 Stages of change

DiClemente and Prochaska (1998) propose the Stages of Change model as an "integrative framework for understanding and intervening with intentional behaviour change" (p. 3). The model has often been applied within the field of public health and addiction to predict and understand changes in health-related behaviours (Jackson, 2007; Jepson, Harris, MacGillivray, Kearney & Roaw-Dewar, 2006). The Stages of Change model proposes a continuum of behaviour change along which individuals experience different levels of readiness to change (Armitage, Sheeran, Connor & Arden, 2004). Six stages of change are proposed: Precontemplation; Contemplation; Preparation; Action; Maintenance; Termination (DiClemente & Prochaska, 1998). The authors posit that "the stages represent the dynamic and motivational aspects of the process of change over time" (DiClemente & Prochaska, 1998, p. 4). Relapse is noted as a common feature of the change process.

7.1.2 Processes of change

Processes of change "facilitate movement through the stages of change" (DiClemente & Prochaska, 1998, p. 4). Ten change processes have been identified: consciousness raising; self-re-evaluation; environmental re-evaluation; dramatic relief; social liberation; self-liberation; counterconditioning; stimulus control; reinforcement management; and, helping relationships (DiClemente & Prochaska, 1998). These processes are deemed to be stage-specific in being maximally effective (Carr, 2004). Change processes have been described by Prochaska and Norcross (1994) as "the covert and overt activities that people engage in to alter affect, thinking, behaviour or relationships related to a particular problem or more general patterns of living" (p. 12). Although the model is highly individual Prochaska & Norcross (1994) acknowledge the limits that the environment can place upon individual change.

7.1.3 Motivation

Motivation is defined as the: "probability that a person will enter and continue to adhere to a specific change strategy" (Miller & Rollnick, 1991, p. 19). Motivation is an internal state that serves to activate behaviour and give it direction (Kleinginna & Kleinginna, 1981). Intrinsic motivation, often aligned with the notion of 'free choice',

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states that an individual will perform an action out of natural curiosity or inclination (Deci & Ryan, 1985).

Aspects of motivation relate to those of attribution theory, whereby the ways in which individuals perceive their own success (Grant & Dweck, 2003) can determine future motivation. Attributions can be classified according to three causal dimensions: locus of control, stability, and controllability (Weiner, 1985). The causal dimension an individual attributes their own behaviour to will impact whether causes of behaviour are perceived to relate to internal (own skills) or external (situational) factors (Weiner, 1985). Ryan and Deci (2000) propose a sense of autonomy and perceived internal locus of causality are central to enhance and maintain intrinsic motivation. Individuals must also experience their behaviour as self-determined in order to feel intrinsically motivated (Ryan & Deci, 2000).

Self-determination theory recognises that social and environmental factors can facilitate or undermine intrinsic motivation. Positive performance feedback enhances intrinsic motivation by reinforcing a sense of competence and satisfying the psychological needs of competence and autonomy (Ryan & Deci 2000). Hence, attributions made can link emotional and motivational elements of behaviour change (Kleinginna & Kleinginna, 1981).

As a "positive motivational state" (Snyder, Irving & Anderson, 1991, p. 287), hope can be situated within a motivation framework in relation to individual change. Hopeful individuals are those who have the perceived agency and perceived ability to plan pathways towards achieving a highly valued goal (Snyder, 2000).

7.1.4 The Theory of Planned Behaviour (TPB; Ajzen 1991)

According to the Theory of Planned Behaviour, behavioural achievement is a joint function of behavioural intention and perceived behavioural control (Ajzen, 1991). Intention to perform a behaviour is central (Ajzen, 1991). Within the Theory of Planned Behaviour three independent antecedents to intention have been proposed: attitudes, subjective norms and perceived behavioural control (Ajzen, 1991; Figure 3).

Figure 3: Diagrammatic representation of the Theory of Planned Behaviour (adapted from Ajzen, 1991).

Attitude towards the behaviour

Subjective norm

Perceived behavioural control

Intention
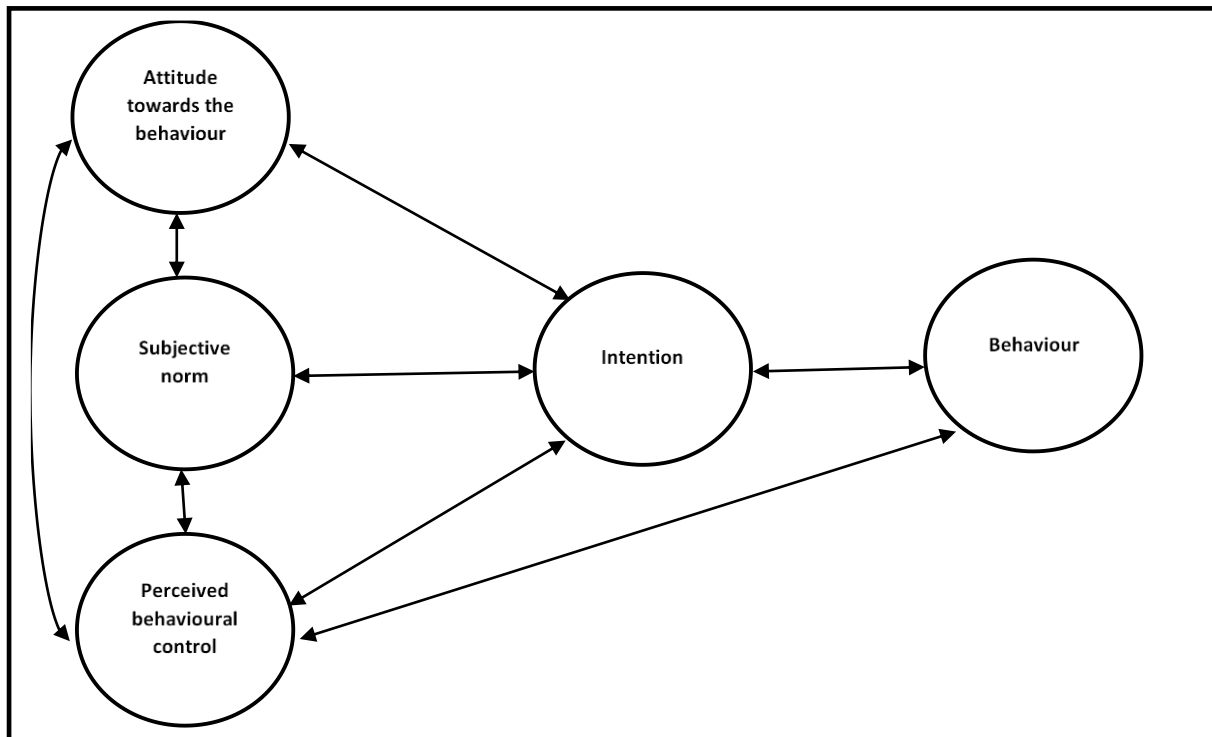
Behaviour

According to the Theory of Planned Behaviour, the variable of attitude has been related to the overall evaluation of a behaviour, including the appraisal of the perceived consequences of a particular behaviour (Ajzen & Fishbein, 1977). Subjective norms are suggested to relate to the perceived social pressure an individual feels to perform a behaviour (Ajzen & Fishbein, 1977). Perceived behavioural control is proposed to relate to an individual's perception of the ease or difficulty of achieving a behaviour within a situation. Perceived behavioural control is situation-specific and variable across situations (Ajzen, 1991). In accordance with the concept of self-efficacy (Bandura, 1997), perceived behavioural control is suggested to encompass the belief in one's own ability to successfully perform a particular behaviour as a prerequisite to confidence to actual performance of a behaviour (Ajzen, 1991). Cognitions of personal efficacy will influence the choice of activity, the expense of effort during activity and the resulting emotional responses from performing that activity (Bandura, 1997). Ajzen (1991) posits that intervening events may produce changes in intentions or in perceived behavioural control, thus, highlighting the role of environmental influences upon individual change.

7.1.5 Experiential Learning

From an experiential perspective, learning is viewed as a process in which individual growth and discovery are emphasised alongside the development of knowledge and skills through concrete personal and meaningful experiences (Kolb, 1984). Knowledge is a transformation process that is continuously created and recreated through interactions with the environment (Kolb, 1984). Learning is viewed as an active, reflective and self-directed process (Kolb, 1984) important to individual change.

7.1.6 Social Cognitive Theory

Built upon Social Learning Theory (Bandura, 1977), Social Cognitive Theory (Bandura, 1986) proposes human functioning as consisting of a triadic interaction of behaviour, personal and environmental factors (Bandura, 2001).

Figure 4: Diagram to illustrate the triadic interaction of behaviour, personal and environmental factors within Social Cognitive Theory (based upon Bandura, 1986, 2001).
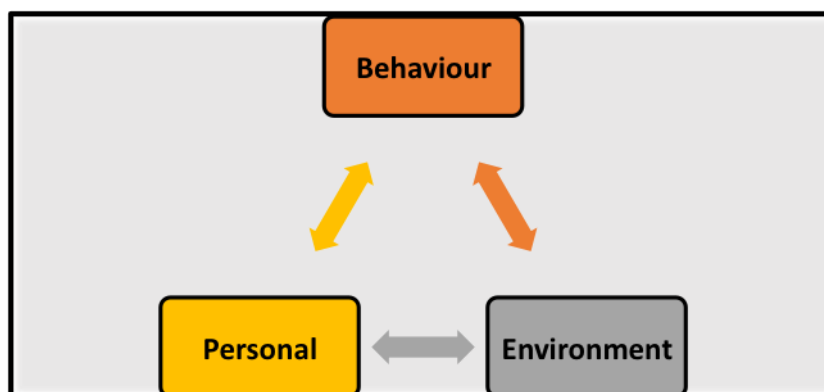
Social Cognitive Theory (Bandura, 1986) proposes the importance of reciprocal determinism whereby "internal personal factors...behavioural patterns and environmental influences all operate as interacting determinants that influence one another bidirectionally" (Bandura, 2001, p. 14).

The theory comprises of a core set of determinants: knowledge and behavioural capacity; observational learning; reinforcements and perceived barriers; outcome expectations; goals; and, self-efficacy (Bandura, 2001, 2004). The theory proposes that

an individual's knowledge base influences his or her ability to perform a behaviour. The determinant of knowledge is a suggested precondition for change (Bandura, 2004). Through observational learning the modeling of alternative behaviour is witnessed and can be learned and repeated (Bandura, 2001). Within Social Cognitive Theory outcome expectations relate to the anticipated consequences of engaging in the behaviour, and are based upon personal experiences or environmental influences. The influence of the environment and responses to behaviour patterns can serve to reinforce or impede the desired behaviour (Bandura, 2004). Bandura (2001) considers self-efficacy beliefs to occupy a central role as they impact upon the behaviour and environmental determinants.

Bandura (1989) proposes that individuals "make a causal contribution to their own motivation and action within a system of triadic reciprocal causation" (p. 1175). From a change perspective, it is important to consider the dynamic interplay between these environmental, behavioural and personal factors within the process of individual change.

8. Theories of change: Individual - Application to parenting programmes

The theories of change that have been considered will now be discussed in relation to parenting programmes.

8.1 Stages and processes of change

The change processes identified within the Stages of Change model (DiClemente & Prochaska, 1998) that help individuals make and maintain changes can be applied to group parenting programmes. The most relevant processes to individual change within group parenting programmes are suggested to be: consciousness raising, whereby individuals are made aware of information related to themselves and their parenting difficulties; self-reevaluation involving assessment of core values in relation to an individual's own environment; and, helping relationships, whereby individuals receive group support (Smith & Pugh, 1996). Aligned with this change process of helping relationships are findings from Barlow and Stewart-Brown (2001) that parents identified support from other parents as the most influential factor to helping them

change. Another application of the Stages of Change model to parenting programmes relates to the recognition of the similarities of change processes within specific stages of the model. Individuals at the same stage may benefit from similar programmes *(*Armitage *et al.,* 2004*).*

8.2 Theory of Planned Behaviour

A positive attitude towards the need for change can be an important indicator of successful outcomes for parents (Lindsay *et al.*, 2011), a finding reflective of the determinant of attitude as an antecedent to intention as proposed by the Theory of Planned Behaviour (Ajzen, 1991). Findings that addressing the expectations and motivations of parents can facilitate engagement and behaviour change (Ingoldsby, 2010) are also suggested to relate to the intention determinant of behaviour. Enabling the appraisal of the perceived consequences of engaging in a particular behaviour, reflects the antecedent of attitude as proposed within the Theory of Planned Behaviour (Ajzen & Fishbein, 1977).

Gaining a sense of control is reported across the findings as a change-related behaviour for parents participating in parenting programmes (Barlow & Stewart-Brown, 2001; Kane *et al.,* 2007). The concept of perceived behavioural control (Ajzen, 1991) is reflected in Spitzer and colleagues' findings that parents perceived problems as less severe when they believed they understood how to cope with them (Spitzer *et al.,* 1991). In terms of change, NICE (2007) highlights that individuals are more likely to attempt actions that they feel are controllable and they feel able to perform. The way in which individual parents perceive situations and perceive their own ability within situations may therefore impact upon their intention to engage in a change-related behaviour.

8.3 Motivation

Findings indicate that parents attributing success to their own efforts to be positively related to treatment outcome (Morrissey-Kane & Prinz, 1999). From a motivational perspective parenting programmes may influence individual attributions by creating environments beneficial to facilitating intrinsic motivation (Ryan & Deci, 2000).

Consistent with self-determination theory (Deci & Ryan, 1985), appropriate challenge and effective positive feedback provided by parenting programmes can also be related to facilitating intrinsic motivation, through the satisfying the psychological need of feeling competent. Consistent with Morrissey-Kane and Prinz (1999), it is suggested that parents who attribute success as a result of their own efforts may be more likely to remain motivated to achieve individual change.

8.4 Social Cognitive Theory

As previously highlighted (Section 6.1), Social Learning Theory (the foundations of Social Cognitive Theory) is a frequently cited theoretical framework underpinning many parenting programmes. Programmes increase knowledge of different parenting practices, teach skills and provide opportunities for to practise new behaviours, enhancing feelings of capacity (Hutchings & Webster-Stratton, 2004). Within parenting programmes individuals engage in observational learning, of group leaders, other parents and video-modelling content (Webster-Stratton, 1998), serving to demonstrate ways of achieving desired behaviours. The reciprocal determinism between the programme environment, patterns of individual behaviour and personal factors permit the influence of the programme environment to positively reinforce desired behaviours. Authors have reported the difficulties some parents have reproducing this desired behaviour in the absence of reinforcement (Mockford & Barlow, 2004; Patterson *et al.,* 2005). Within the proposed triad of interaction, the group progamme environment can be framed as an integral part of the process of individual change.

To summarise, individual change that occurs within parenting programmes has been discussed in relation to individual theories of change. There is evidence that individual behaviour change may be related to both internal and external influences, and that within group parenting programmes the group environment may be part of facilitating individual change. The next section explores theories of change in relation to groups and group processes.

9. Theories of change: Group

This section explores theories of change in relation to groups. The application of group factors within a theoretical framework of change is considered in relation to parenting programmes in a later section (Section 10).

9.1 Groups

Groups differ with respect to goals, techniques used, the role of the leader and the individuals involved (Schneider Corey, Corey & Corey, 2010). Groups are used in training and in therapeutic capacities (Ratigan, 1989). A therapeutic group increases individuals' knowledge of themselves and others and helps them clarify the changes they most want to make in their lives (Schneider Corey *et al.,* 2010).

9.1.2 Group function in relation to change

As a snapshot, the research encapsulates the group as; having healing properties (Pratt, 1922), being closer to the real world than individual work (Ettin, 2000) and as a social microcosm (Yalom, 1995). Groups have been studied within a change capacity within the clinical fields of group therapy (Bion, 1980), counseling (Corey, 2008), and patient rehabilitation (Erdman, 2009). Conwill (1986) states that group processes are the powerful group dynamics that evolve during the training of several participants and describes these processes as forces at play when several individuals form a group. Ratigan (1989) suggests the power of the group to enhance acquiring personal knowledge, best done through interaction with others.

Although every group is unique (Yalom, 1975), according to Wright (1989) common processes and phenomena occur in all groups. The mirroring of concerns is a group process that helps the normalisation of problems and reduces feelings of uniqueness (Yalom, 1975). Group membership enhances a sense of belonging, a basic need as described by Maslow (1954), and can reduce feelings of isolation (Yalom, 1995). Positive relationships between group members is associated with enhanced well-being and resilience (Ratigan, 1989). Feeling valued and accepted is part of group cohesion (Bloch, Reibstein, Crouch, Holyroyd, & Themen, 1979) and enables individuals to feel secure and supported (Wright, 1989). Wright (1989) also suggests that members of a group must feel trust in the unity of the group, believe that change is possible and that

others are subject to the same feelings as them. As a function of these group factors, groups can create hope and encourage self-exploration (Schneider Corey *et al.,* 2010).

Hill (1990) draws parallels between the therapeutic group process and the therapeutic alliance (Green, 2009). Authors posit the interactive, interpersonal nature of the group within group counseling as providing unique and powerful mechanisms of change (Barlow & Burlingame, 2006; Burlingame, Fuhriman, & Mosier, 2003; Payne & Marcus, 2008; Yalom & Leszcz, 2005). "Exchanges between group members are viewed as instrumental in bringing about change" (Schneider Corey *et al*., 2010, p. 15). Ratigan (1989) suggests that the process of change is enhanced by the group experience.

9.2 Change mechanisms

Yalom and Leszcz (2005) refer to the underlying mechanisms of change as therapeutic factors, defined by Yalom (1975) as: "the actual mechanisms of effecting change" (p. xi) in individuals. These change mechanisms are based upon Yalom's (1975) identification of 11 categories of therapeutic factors: universality; instillation of hope; imparting information; altruism; imitative behavior; group cohesion; interpersonal learning; development of socialising techniques; recapitulation of the family; catharsis; and, existential factors. Research findings have demonstrated the significant effects of therapeutic factors upon the process of group change (Bloch *et al.,* 1979; Yalom, 1975; Yalom & Leszcz, 2005).

Whilst Yalom (1975) acknowledges that therapeutic factors are interrelated, he considers group cohesion and interpersonal learning to be the two most important therapeutic factors. Cohesion and interpersonal learning are discussed in detail below (Sections 9.2.1; 9.2.2), following which the therapeutic factors of instillation of hope, imparting information, and universality are described. Together, these five therapeutic factors are considered to be most relevant to the common principles of parenting programmes in accordance with the literature reviewed.

9.2.1 Therapeutic factor: Cohesion

Bollen and Hoyle (1990) define cohesion as: "an individual's sense of belonging to a particular group and his or her feelings of morale associated with membership in the group" (p. 482). Figure 5 illustrates the concept of cohesion.

Figure 5: Diagrammatic representation of the concept of cohesion (adapted from Bollen & Hoyle, 1990, and, Hoyle & Crawford, 1994).
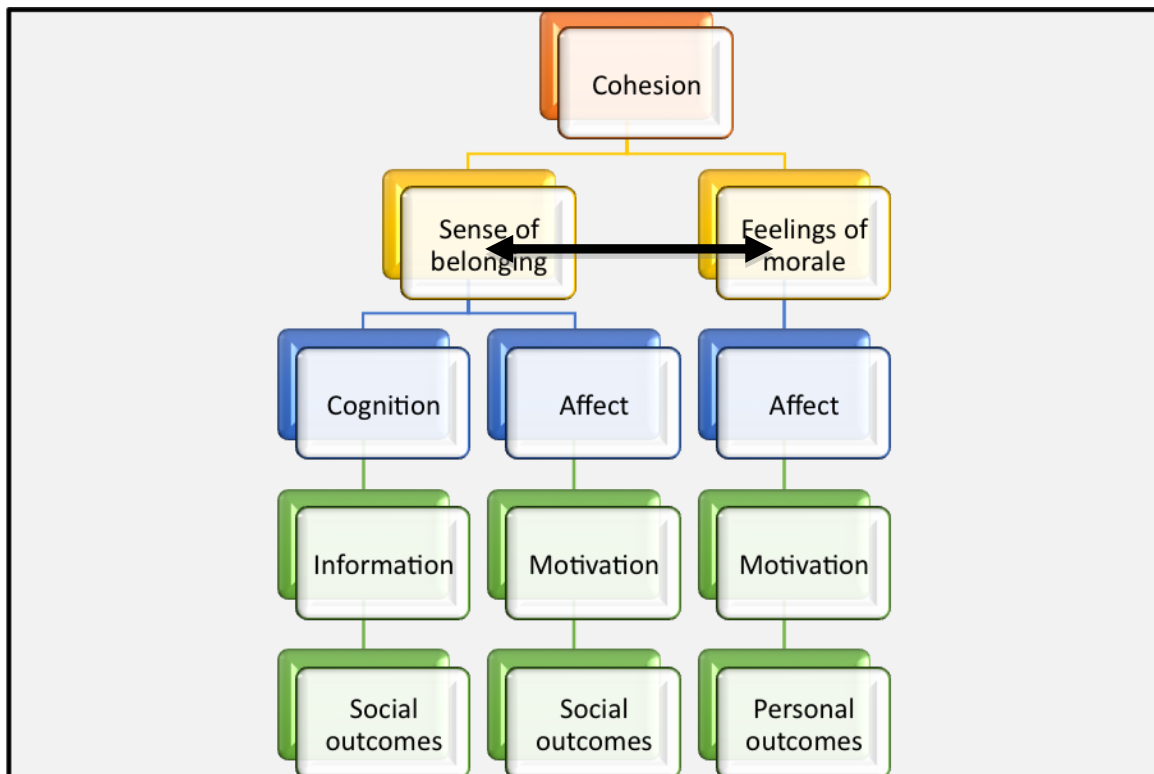
Webster & Swartzberg (1992) suggest that individuals value group cohesion above other therapeutic factors. Group cohesiveness has been associated with: member attendance, retention and participation (Joyce, Piper & Ogrodniczuk, 2007); self-disclosure and reflection (Yalom, 1995); feeling valued, accepted and understood (Bloch *et al.,* 1979), and empathy (Johnson *et al.,* 2005). Leszcz and Kobos (2008) state: "group cohesion is to group therapy as the relationship is to individual psychotherapy and in its absence the prospects for meaningful work are diminished" (p. 1243). Resonating with the concept the therapeutic alliance (Green, 2009), it is considered a core mechanism of change (Yalom, 1975).

9.2.2 Therapeutic factor: Interpersonal learning

Yalom (1975) suggests the group as able to provide opportunities for individuals to better understand themselves and understand how others perceive them. Group members gaining insight is an important aspect of interpersonal learning as a mechanism of change (Ratigan, 1989; Yalom, 1975). The group experience as a social microcosm relates to the interplay between the group members and the group environment (Yalom & Leszcz, 2005) and can be a significant source of learning.

9.2.3 Therapeutic factor: Instillation of hope

In psychotherapy instillation and maintenance of hope is crucial to keep clients in therapy, thus, mediating the possible effects of therapeutic factors. Hope in a treatment itself is suggested as being therapeutically effective (Yalom, 1975), reflecting concepts of possible placebo effects where high hopeful expectations pre-therapy are significantly correlated with positive outcomes (Goldstein, 1962). The process of hope is sustained through observing the improvement of others within the group and is associated with optimism about the group's potential for help (Bloch *et al.,* 1979).

9.2.4 Therapeutic factor: Imparting information

Imparting information may involve guidance, suggestions or instruction (Erdman, 2009). Yalom (1975) suggests that direct advice-giving from members occurs in every therapy group and is most common in early stages of group formation. Conveying mutual interest and caring can often be more important than the content of the advice (Yalom, 1975). Within a group, individuals will seek and impart advice to different extents (Yalom, 1975).

9.2.5 Therapeutic factor: Universality

Universality can be defined as a significant learning experience whereby members of groups learn they are not alone in their experiences or concerns (Ratigan, 1989). Yalom (1975) suggests that hearing disclosures made by other group members that are concerns similar to one's own are a powerful source of relief and can function to normalise problems. Universality can remove feelings of uniqueness and isolation and create perceived similarity to other group members (Bloch *et al.,* 1979; Yalom, 1975).

Universality has been linked to other factors namely cohesion (Yalom, 1975) and hope (Erdman, 2009).

Within the literature it is apparent that groups and group therapeutic factors impact upon change. As groups are an essential part of group parenting programmes it is suggested that they are an important component to consider in relation to the process of change.

10. Theories of change: Group - Application to parenting programmes

Similarities are drawn between the nature of therapeutic groups (Schneider Corey *et al.*, 2010) and the principles underlying the group component of group parenting programmes. Relating group theoretical perspectives of change, as previously discussed, to group parenting programmes, may offer some insight into understanding the change processes that occur within the group. Studies investigating the group aspects of parenting programmes are discussed below, with a focus upon the group function related to perceived changes as reported by parents.

10.1 The group related to perceived change

Authors have suggested that the group component may be a contributing factor to the effectiveness of parenting programmes, suggesting that "powerful group dynamics enhance the effectiveness" (Borden *et al.*, 2010, p.233) of the curriculum of a parenting programme. The value parents place upon the opportunity to work with and feel supported by other parents has been reported upon as a common group function within parenting programmes (Barlow & Stewart-Brown, 2001; Kane *et al.,* 2007; Lindsay *et al.,* 2008; Mockford & Barlow, 2004). The group has been perceived to provide support through decreasing parents' feelings of isolation (Borden *et al.,* 2010). Levac *et al.,* (2008) suggest that the supportive group context allows parents to express themselves, which acts as an enabler of change for parents, a finding reminiscent of the suggested importance of exchanges between group members (Schneider Corey *et al.*, 2010).

Borden *et al.* (2010) have highlighted that the group may function as a source of encouragement, enabling parents to take risks in their parenting practices. Findings by Smith (2000) highlight parents' preference to talk to other parents over receiving

expert advice. Smith & Pugh (1996) suggest that the processes of sharing and learning from other parents are part of the processes involved in bringing about change for parents, a notion reflected by Ratigan (1989) of the group experience as enhancing change.

Spitzer and colleagues propose the group as facilitating parents' learning of how to generalise principles through collaborative discussions and real life problem-solving (Spitzer *et al.,* 1991), implicating the group as a tool for learning. In support of this notion, Lindsay and colleagues postulate findings of parents as co-learners (Lindsay *et al.,* 2008). This idea is reminiscent of Yalom's (1975) therapeutic factor of interpersonal learning.

Parental reports indicate the empowering and validating functions of the group in relation to facilitating change (Levac *et al.,* 2008). Findings that the group enabled parents to make changes in other aspects of their lives (Barlow & Stewart-Brown, 2001) echo findings that the group has been associated with enhanced communication in parents' relationships with their child and family (Levac *et al.,* 2008). Self-reflection (Barlow & Stewart-Brown, 2001; Levac *et al.,* 2008) and regaining control were other aspects associated with the group as enabling change (Barlow & Stewart-Brown; 2001; Kane *et al.,* 2007).

Barlow and Stewart-Brown (2001) within their study of parenting programmes, suggest that the mirroring of concerns by other parents played an important role in facilitating change. Reflective of this notion of normalising parents' experiences is Yalom's (1975) therapeutic factor of universality. Group facilitators that engage with parents in a collaborative, non-judgmental manner (Kazdin, 1997; Levac *et al.,* 2008) and within a spirit of partnership have been associated with creating successful group parenting programmes (Grimshaw & McGuire, 1998)

10.2 Summary

The theories of change that have been discussed relate to individual and group change. The group component of parenting programmes is implicated as being part of bringing about individual change for parents. The role of the group is related to the theoretical and operational common principles of group parenting programmes. Theoretically the group facilitates social and observational learning, modeling, and it enables parents to learn experientially from each other whilst addressing parenting difficulties. Group programme sessions also provide a learning function at an operational level in relation to the content of the programme (Kazdin, 1997). Despite the plethora and variety of group parenting programmes, "there is still a sense that we do not quite know what it is that makes parenting programmes meaningful and helpful to parents" (Kane *et al.,* 2007, p. 785). The group component is suggested as instrumental in being both meaningful and helpful.

11. Rationale for current study

Current research within the literature has evidenced the benefits of group parenting programmes in terms of changes for both parents and for children. Current research has also evidenced that the group and group factors can play a fundamental role in facilitating change for individual members of a group. Less research has been conducted investigating the role that the group component plays within group parenting programmes.

As is apparent from the literature relatively little is known about the mechanisms underpinning the changes resulting from participating in group parenting programmes (Barrett, 2010; Kane *et al.,* 2007). Although some qualitative studies have captured parents' perceptions of parenting programmes and of the perceived changes for parents as a result of attending a programme, few have specifically explored parents' perceptions of the group component itself, particularly in relation to how factors within the group may function as mechanisms for change. The current study builds upon findings implicating the role of group processes within group parenting programmes (Borden *et al.,* 2010) and the group as a mechanism of change (Barlow & Stewart-Brown, 2001; Levac *et al.,* 2008).

This study aims to understand the ways in which the group acts as a mechanism of change for parents and to explore the prevalence of group therapeutic factors. It seeks to explore the perceived facilitators of, and barriers to, attending a group parenting programme. In addition, it seeks to explore parents' perceptions of the group component within a group parenting programme.

12. Research Questions

Based upon the rationale discussed above and the review of the literature presented, this study aims to answer the following three research questions:

1. To what extent does the group act as a mechanism of change for parents participating in a group parenting programme? How?
2. What are parents' perceptions of the group component of a group parenting programme?
3. What are the facilitators of, and barriers to, attending a group parenting programme?

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The Group Component of a Group Parenting Programme: Exploring Parents' Perceptions.

Part Two: Empirical Study

5927 words

(Excluding abstract, figures, tables, references and appendices)

Abstract

A qualitative approach was adopted to explore parents' perceptions of the group component of a group parenting programme, delivered by an educational psychology service in Wales. Semi-structured interviews and questionnaires were utilised in order to gather the views of seven parents who attended a group parenting programme. Additionally, semi-structured interviews were employed to explore the perceptions of twenty parents who chose not to attend the parenting programme, related to perceived facilitators to, and barriers of, attending. Thematic analysis identified key themes related to the perceptions of the group component and to perceived changes in relation to the group component. Themes were also identified related to the perceived facilitators of, and barriers to, attending a group parenting programme. Overall findings suggested that the group was perceived positively by attending parents. Findings indicated an interrelationship between group and individual factors in relation to perceived change. Perceived facilitators to, and barriers of, attendance at a parenting programme related to practical, programme and personal factors, and, factors related to proficiency of English language. Tentative suggestions are made regarding how the group component contributed to parents' perceived changes and how EPs might apply further knowledge of psychology working within group parenting programmes.

1. **Introduction**

Parenting programmes are perceived nationally and internationally as preventative and cost-effective approaches to support parents and their children (Barrett, 2010; Boddy *et al.,* 2009; Lindsay & Strand, 2013; Moran, Ghate & van der Merwe, 2004). In the UK, an estimated 20% of parents may take part in programmes (Bunting, 2004). The UK government has invested in parenting (Every Child Matters, DfES, 2004; Every Parent Matters, DfES, 2007; National Academy for Parenting Practitioners [NAPP] 2007 -2010; Parenting Early Intervention Programme [PEIP], 2008-11) by training parenting practitioners (Asmussen, Matthews, Weizel, Beblroglu & Scott, 2012) and increasing the availability of parenting support at a national level (Zeedyk, Werrity & Riach, 2008).

A vast range of parenting programme types exists, along with a range of definitions. The current research uses Kane, Wood and Barlow's (2007) definition of group parenting programmes as: "interventions that utilise a structured format, working with parents in groups aimed at improving parenting practices and family functioning" (p.785).

1.1 Previous research related to parents' perceived changes
Qualitative explorations of parents' perceptions of group parenting programmes have demonstrated parents' reports of positive changes related to; acquired new parenting practices (Barlow & Stewart-Brown, 2001; Patterson, Mockford & Stewart-Brown, 2005); improved ability to manage children's behaviour and an increased awareness of the influence of their own behaviour (Zeedyk *et al.,* 2008); increased confidence (Levac, McCray, Merka, Reddon-D'Arcy, 2008) and competence (Patterson *et al.,* 2005); changes in their social networks (Zeedyk *et al.,* 2008); and, an improvement in the parent-child relationship (Stewart-Brown *et al.,* 2004).

Despite these positive outcomes, there are many practical, cultural and individual barriers to engagement in parenting programmes (Katz, La Placa & Hunter, 2007; Mytton, Ingram, Manns & Thomas, 2013). Less is known about the reasons why parents may or may not participate (Smith & Pugh, 1996). Attitudes towards receiving support differ across cultures (Kazdin & Mazurick, 1994). Short and Johnston (1994) identify

language, fear of stigmatization, and differences in child-rearing practices as the three main barriers to participation for parents from ethnic minority groups.

1.2 Common principles of group parenting programmes

Despite the breadth of types of parenting programmes, programmes are suggested to share common aims (Figure1), common operational principles (Figure 2) and common theoretical underpinnings (for example, Social Learning Theory - Bandura, 1997; Attachment theory - Bowlby, 1988).

Figure 1: An overview of common aims of effective parenting programmes

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Common Aims (what)

(Based upon reviewing literature by the following authors: Barlow et al., 2007; Chislett & Kennett, 1997; Forgatch et al., 2005; Hutchings & Webster-Stratton, 2004; Kazdin, 1997; Patterson et al., 2005; Smith & Pugh, 1996).

Parenting programmes aim to:

- Teach the rehearsal of new parenting skills
- Support parents and enable them to gain coping skills
- Build positive parent-child relationships
- Teach parents to identify, define and observe problem behaviours in new ways
- Increase knowledge and understanding of child development
- Promote effective child management
- Help parents regulate their children's emotions
- Increase positive child behaviour
- Enhance parental confidence in parenting skills
- Decrease parental anxiety
- Encourage new ways of parenting
- Change parents own parenting behaviour

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Figure 2: An overview of common operational principles of effective parenting programmes

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Common operations (how)

(Based upon reviewing literature by the following authors: Chislett & Kennett, 1997; Hutchings, Gardner & Lane, 2004; Forgatch et al., 2005; Levac et al., 2008; Lindsay & Strand, 2013; Patterson et al., 2005; Scott, 2010; Webster-Stratton & Hancock, 1998).

Parenting programmes operationally:

- Provide opportunities to practise acquired new skills both within programme sessions and the home setting
- Have group discussions/share information with group members
- Help parents to set goals
- Provide childcare, good-quality refreshments and transport provided if necessary
- Teach appropriate discipline and positive communication strategies
- Provide time to address parents' difficulties
- Adopt a collaborative approach
- Acknowledge parents' feelings and beliefs
- Teach behaviour management strategies, eg. clear commands; specific praise
- Normalise difficulties
- Provide situation specific skill building
- Provide (non-judgmental) support
- Offer homework tasks
- Use video-tape modelling and role play

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Parenting programmes are designed to bring about a change in parenting behaviour (Asmussen & Weizel, 2010; Barlow *et al.,* 2007). Subsequently, theoretical approaches to individual and group change are useful to examine.

1.3 Theories of Change: Individuals

The Stages of Change model proposes six stages (Precontemplation; Contemplation; Preparation; Action; Maintenance; Termination) involved in the dynamic process of change (DiClemente & Prochaska, 1998). Change processes enable individuals to change problem behaviours (Prochaska & Norcross, 1994), and are deemed maximally effective when stage-specific (Carr, 2004). Increasing awareness of relevant information (consciousness raising), assessment of personal core values (self-re-evaluation) and receiving support from others (helping relationships) are examples of change process facilitating individual change.

Motivation is an internal state that activates behaviour (Kleinginna & Kleinginna, 1981) and influences adherence to a change strategy (Miller & Rollnick, 1991). Self-determined behaviour (Deci & Ryan, 1985), autonomy (Ryan & Deci, 2000) and a perceived internal locus of causal attributions (Weiner, 1985) are proposed as integral to intrinsic motivation (Deci & Ryan, 1985). Environmental factors, such as feedback, can facilitate or undermine intrinsic motivation. As a "positive motivational state" the concept of hope is related to perceived agency and ability to plan pathways towards achieving highly valued goals (Snyder, Irving & Anderson, 1991, p. 287).

Intention is central to the Theory of Planned Behaviour (TPB) whereby attitudes, subjective norms and perceived behavioural control act as antecedents to intention (Ajzen, 1991). Perceived behavioural control of the perceived ability to successfully perform a behaviour is proposed as a pre-requisite to behaviour change. Environmental influences can impact upon intentions or perceived behavioural control (Ajzen, 1991).

Social Cognitive Theory (Bandura, 1986) proposes the importance of reciprocal determinism whereby "internal personal factors…behavioural patterns and environmental influences all operate as interacting determinants that influence one another bidirectionally" (Bandura, 2001, p. 14). The core determinants of: knowledge; observational learning; reinforcement; outcome expectations; goals; and, self-efficacy are all proposed as influential to behaviour change within this triadic interaction (Bandura, 2001).

From an experiential learning perspective interactions with the environment and meaningful experiences underpin the active process of learning and change (Kolb, 1984).

1.4 Theories of Change: Groups

Powerful group dynamics (Conwill, 1986) and group processes (Wright, 1989) enhance the process of change (Ratigan, 1989). Yalom and Leszcz (2005) refer to the underlying mechanisms of change as therapeutic factors. Findings have demonstrated the impact of Yalom's (1975) 11 therapeutic factors upon change in groups (Bloch, Reibstein, Crouch, Holyroyd & Themen, 1979; Erdman 2009; Ratigan, 1989). Five of Yalom's (1975)

therapeutic factors (Table 1) are considered to be most relevant in accordance with the literature reviewed and the common principles of parenting programmes identified.

Table 1: Outline of five therapeutic factors (based upon Yalom, 1975).

Therapeutic Factor	Description
Cohesion	Members feel a sense of belonging, membership and commitment to the group.
Interpersonal learning	Members learn from other members in the group. Members gain a better understanding of themselves and of how others perceive them.
Instillation of Hope	Members have continuous contact with others in the group who have improved and can observe the improvement of others.
Universality	Members feel they have problems similar to others.
Imparting information	Members give and receive advice within the group.

Group cohesiveness has been associated with: member attendance, retention and participation (Joyce, Piper & Ogrodniczuk, 2007); self-disclosure and reflection (Yalom, 1995); feeling valued, accepted and understood (Bloch *et al.,* 1979), empathy (Johnson *et al.,* 2005); and, support (Wright, 1989). Interpersonal learning facilitates insight (Yalom, 1975). The interplay between group members and the group environment is proposed as a significant source of learning (Yalom & Leszcz, 2005). Universality reduces feelings of isolation through perceived similarity to others (Yalom, 1975). Hope can itself be therapeutic and can mediate adhering to a change strategy (Yalom 1975).

1.5 Group component of parenting programmes

Group processes enhance the parenting programme curriculum (Borden, Schultz, Herman & Brooks, 2010; Stewart-Brown *et al.,* 2004) and parents learning to cope (Spitzer, Webster-Stratton & Hollinsworth, 1991). Group cohesion supports parents to take risks with parenting practices (Borden *et al.,* 2010; Yalom, 1995). Collaborative

discussions facilitate self-reflection (Levac *et al.,* 2008) and the mirroring of concerns (Barlow & Stewart-Brown, 2001), both of which are group factors that contribute to individual change.

1.6 Relevance to Educational Psychologists (EPs)

EPs may be named as professionals involved in parenting programme: delivery (Smith & Pugh, 1996); training and supervision (Hallam, Rogers & Shaw, 2004); or evaluation (Rait, 2012). The role of EPs as programme facilitators is advocated owing to their understanding of group dynamics, behaviour (Asgary-Eden & Lee, 2011) and knowledge of psychological theory (Hutchings, Gardner & Lane, 2004).

1.7 Rationale for the current study

The literature indicates that group parenting programmes can create positive changes for parents and their children, though less is known about the mechanisms underpinning these changes (Kane *et al.*, 2007; Smith & Pugh, 1996). Less research has explored parents' perceptions of the group component itself, particularly in relation to how group factors may function as mechanisms of change. The current study builds upon findings that implicate the group as underpinning changes in group parenting programmes (Borden *et al.*, 2010; Levac *et al.*, 2008; Stewart-Brown *et al.,* 2004) and explores how Yalom's (1975) group therapeutic factors may act as mechanisms of change within a group parenting programme.

1.8 Research Questions

Based upon the rationale discussed above and the review of the literature presented, this study aims to answer the following three research questions:

1. To what extent does the group act as a mechanism of change for parents participating in a group parenting programme? How?
2. What are parents' perceptions of the group component of a group parenting programme?
3. What are the perceived facilitators of, and barriers to, attending a group parenting programme?

2   Methodology

2.1 Epistemology and study design

The framework for grounding the current research was from a social constructionist position. A qualitative research design was employed. Qualitative methods allow for flexibility in design and the exploration of individuals' own experiences and perceptions in a real world context (Robson, 2011), thus, were deemed to fit the exploratory nature of the current study. A critique of the methodology, the researcher and the overall research process is discussed in further detail in Part Three.

2.2 Participants

The study sample included a total of 27 participants (parents), recruited from two mainstream primary schools (School A and B). All participants were parents of children attending Nursery or Reception at School A or B where a parenting programme had been offered. The sample comprised of 7 parents who attended the parenting programme (APs), and 20 parents who did not attend the parenting programme (NAPs). All 7 attending parents were female; 3 of the 20 non-attending parents were male (Table 2).

Table 2: Summary of participants in relation to first language

Language	Participants			
	Attending Parents		Non-Attending Parents	
	School A	School B	School A	School B
English speaking (1st language)	1	3	7	6
English as an additional language (EAL)	3	0	7	0
English as an additional language (EAL) – translator required	0	0	6	0
Male	0	0	3	0
Female	4	3	11	6
Total in sample	7		20	

Ethical approval was gained from Cardiff University Ethical Committee. Research was conducted in line with the British Psychological Society's (2009) ethical guidelines. Permission was sought from the Principle Educational Psychologist (PEP; Appendix A) of the educational psychology service delivering the parenting programme and headteachers of School A and B (Appendix B). All participants were informed of the true aims of the study and their right to withdraw. Informed consent and debrief forms for participants were available in English, Urdu, and Bengali to be inclusive of the local population of parents (Appendices C-J). These were translated by a professional translator. Translated content was checked by two different native speakers in order to confirm accuracy. All information was held confidentially.

2.3 Programme

The group parenting programme was aimed at supporting parents of pre-school aged children enhance their children's academic and social skills in preparation for starting school. The programme was delivered at a local community centre, and consisted of 4 sessions in total, plus an introductory information session and a follow-up session. Sessions had a short break during which refreshments were provided and parents were able to socialise. The programme was facilitated by two educational psychologists in accordance with the programme guidelines in a structured, yet informal manner. Facilitators used video scenes of different parenting scenarios to stimulate group discussions, group problem-solving and the sharing of parenting ideas and experiences. Other aspects of the group related to: practical learning tasks, such as role-play, in pairs; interactive small group tasks; and, self-reflection. Weekly homework tasks were based upon session content. Parental attendance at the programme was entirely voluntary and the programme facilitators and parents who attended had no prior involvement. The trainee's role was to provide general support to the EPs delivering the programme by assisting with demonstrations of tasks and supporting parents when working in pairs and in small groups.

2.4 Procedure

2.4.1 Data collection

Table 3: A summary of data collection in chronological order

Order of data collection	Procedure	Measure	Relationship to research questions	Source
1.	Pilot semi-structured interviews on APs & NAPs.	Semi-structured interviews (1) and (2).	RQ1 RQ2 RQ3	Semi-structured interview schedule (1) questions 13-19 adapted from Levac *et al.* (2008). Semi-structured interview schedule (1) and (2) created using interview schedule guidance of Cohen, Manion & Morrison (2007) and Robson (2011).
2.	Conduct semi-structured interviews (1) with APs.	Semi-structured interview (1).	RQ1 RQ2 RQ3	Cohen *et al.,* (2007) and Robson (2011): creation of interview schedule guidance. 12-19 adapted from Levac *et al.,* (2008: Appendix K).
3.	Administer Therapeutic Factors Questionnaire (APs).	Therapeutic Factors Questionnaire (adapted).	RQ1	Adapted from the Therapeutic Factors Inventory (TFI; Lese & MacNair-Semands, 2000).
4.	Conduct semi-structured interviews (2) with NAPs.	Semi-structured interviews (2).	RQ3	Cohen *et al.,* (2007) and Robson (2011): creation of interview schedule guidance.

2.4.2. Data collection methods

Semi-structured interviews

Semi-structured interview schedules (1), for attending parents (APs) and (2), for non-attending parents (NAPs) were developed (Cohen *et al.,* 2007; Appendices K & L) and designed to capture all parents' perceptions. In accordance with Robson (2011), language was kept simple and unambiguous. With parents' permission, interviews were audio-recorded. Reliability of the interview schedule was problematic to establish as the questions were newly constructed (Robson, 2011). All semi-structured interviews were conducted within two months of the parenting programme finishing. All attending parents (APs) were interviewed within 1 month of programme completion.

Semi-structured interview (1; APs)

Interviews lasted approximately 45 minutes and took place at a location of parents' choosing. The researcher was known to parents having been involved in supporting the delivery of the parenting programme.

Semi-structured interview (2: NAPs)

Interviews lasted approximately 10 minutes and took place onsite at School A or School B. The researcher was not known to parents prior to interviewing.

Therapeutic Factors Questionnaire (APs)

The therapeutic factors questionnaire (Appendix M) was adapted from the Therapeutic Factors Inventory (TFI; Lese & MacNair-Semands, 2000), an empirically based measure designed to determine the presence or absence of therapeutic factors (Yalom, 1975) in a particular group by assessing the degree to which group members perceive factors to be present (Lese & MacNair-Semands, 2000).

During the development of the therapeutic factors questionnaire, 10 items of the 99 items of the TFI were adapted (Lese & MacNair-Semands, 2000) and the guidance of Cohen *et al.,* (2007) was followed. Pairs of statements for each of the 10 items on the questionnaire were used. They focused upon the five therapeutic factors of: cohesion; interpersonal learning; imparting information; hope; and, universality. This decision was twofold: group cohesion and interpersonal learning are considered as the two most important therapeutic factors (Yalom, 1995); and, the remaining three were deemed relevant in accordance with previous research findings related to group processes and parenting programmes.

A Likert-rating scale (1; strongly disagree to 4; strongly agree) was used and adapted in accordance with the original TFI and Cohen *et al.* (2007), who suggest rating scales to be particularly useful for exploring perceptions and opinions of respondents. The shorter, adapted version was deemed more appropriate for the level of English language of some participants. It is acknowledged that the use of an adapted version restricts establishing reliability and validity (Robson, 2011). The questionnaire was

administered post-parenting programme. One participant (AP7) declined to complete the questionnaire.

2.4.3 Pilot

The pilot study revealed that a translator would be required for some interviews with non-attending parents. The first interview (1) conducted with one attending EAL parent (AP1) was classified as a pilot study to assess the accessibility of the language. The pilot study confirmed that the language of the interview schedule was appropriate. No changes were made to the schedule and this participant was included in the final sample.

2.4.4 Data analysis

Analysis of the interview data was conducted in accordance with Braun and Clarke's (2006) recognised six stages of thematic analysis: becoming familiar with the data; generating initial codes; searching for themes; reviewing themes; defining and naming themes (Appendices N-P); and, producing the report.

A deductive, top down approach to thematic analysis was adopted in order to identify themes relevant to the theoretical underpinnings of therapeutic factors (Yalom, 1975) group processes and parental engagement. An inductive approach was also adopted to allow themes to emerge that were not initially predicted. This approach was deemed to allow greater understanding of participants' perceptions and experiences of different aspects of the parenting programme.

Transcripts were analysed by the researcher (Appendix Q). A psychologist colleague read through transcripts to determine the reliability of identified themes. All interviews were transcribed verbatim (Appendix R).

Descriptive statistics were used to analyse the therapeutic factors questionnaire data.

3. Results

3.1 Research Question 1: To what extent does the group act as a mechanism of change? How?

Section 1

The findings for this research question are presented in three parts:

    Section 1.a: Descriptive Statistics for therapeutic factors questionnaire (adapted)
    data
    Section 1.b: Thematic analysis of interview data
    Section 1.c: Diagrammatic representation of relationships between data

Section 1.a

Figure 3: Graph to show total combined subscale scores (range: minimum 12 – maximum 48) for each therapeutic factor subscale (adapted from the TFI, Lese & MacNair-Semands, 2000; Appendix M) as rated by parents (N=6).
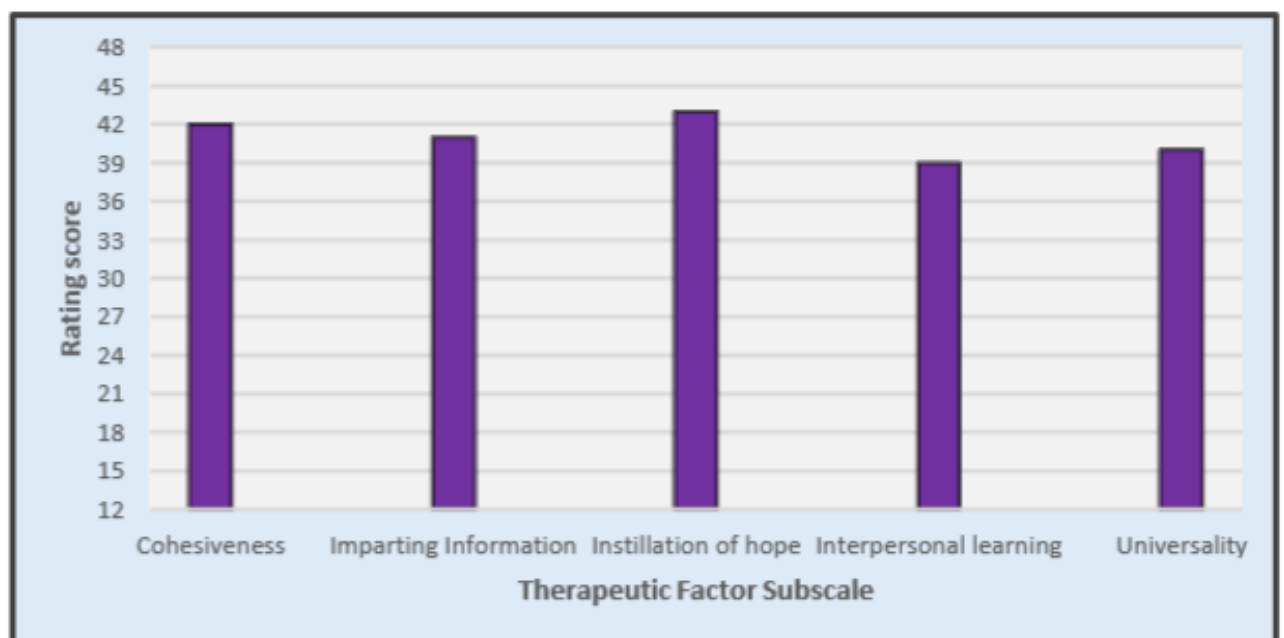
The findings suggest that these five therapeutic factors were perceived to be present in the group, albeit to differing degrees. The results suggest that there are differences in

parents' (N=6) ratings for each therapeutic factor subscale. 'Instillation of hope' was rated by the group most highly overall, suggesting that members of the group felt a strong sense of this therapeutic factor within the group. Parents' ratings also demonstrate that there was a strong sense of perceived group cohesiveness (42). Of note is the degree of difference able to be reflected as dependent upon the number of response alternatives available. The current rating scale provided four response alternatives. The use of a more sensitive rating scale may indicate parents' perceived differences in greater detail.

Section 1.b

Thematic analysis revealed relationships between therapeutic factors and themes related to group factors and individual factors (Table 4). These are discussed in more detail in Section 1.b.2.

Section 1.b.1

Table 4: Table to illustrate themes and sub-themes: therapeutic factors, group factors and individual factors.

Theme (Therapeutic Factor)	Sub-themes Group factors	Sub-themes Individual factors
Cohesion	*Acceptance and attendance* *Participation* *Relationships between members* *Positive value of the group* *Unity and development*	**Motivation** **Support**
Imparting Information	*Advice giving/seeking* *Acquiring new knowledge*	**Meaningful learning**
Instillation of hope	*Witnessing improvement*	**Hope** **Motivation**
Interpersonal learning	*Increased awareness* *Shift in thinking* *Learning from other group members* *Social development*	**Meaningful learning** **Self-awareness and awareness of others** **Initiate and facilitate a personal journey**
Universality	*Perceived similarities to others* *Mirroring of concerns* *Reduced feelings of uniqueness* *Relief*	**Normalising problems and parenting behaviour** **Support**

Section 1.b.2

Group factors related to individual motivation

Cohesion
Parents felt that the group acted as a motivator.
"The group were motivated. It was sort of like they all had their reasons" [*sic*] (AP2,
P5:L126).

The group factors of unity and acceptance were reported related to parents' individual
motivations.
"Cos when we sit by each other everyone's got something they want to change" [*sic*] (AP2,
P5:L128).

The group factors of participation and attendance were related to the individual factor
of motivation.
"*Everyone was very committed…*" (AP6, P17:L258)
"I think it's quite dis-spiriting if every week people are missing" (AP6, P17:L260).

Instillation of Hope
The group factor of witnessing the improvement of others also influenced group
attendance and personal motivation.
*"I think I felt that everyone was getting something out of it and I think if they didn't they
probably wouldn't have kept going either"* (AP5, P11:L199).

Group factors related to individual support

Parents' responses indicated that the therapeutic factors of cohesion and universality
were related to a perceived sense of support. All seven parents made reference to the
group as providing a space in which to talk. One parent described the group as
"*empathetic*" (AP5, P11:L199) and another parent as "*therapeutic*" (AP3, P8:L226).

Cohesion

The group process of participation was related to individual parents feeling personally supported.

"No one was afraid to speak or hiding anything and then when somebody was explaining a problem everybody was nodding and saying 'I understand'" [*sic*] (AP3, P10:L274).

All seven parents commented upon the positive relationships between group members.

"The group we had really nice to each other. Everyone have a nice relationship with each other" [*sic*] (AP7, P5:L116).

Universality

Parents' responses revealed that the therapeutic factor of universality was also related to the supportive function of the group. The group factor of reduced feelings of uniqueness was related to an individual feeling of support.

"*She's going through the same as me. It was almost like an encouragement*" [*sic*] (AP3, P10:L276).

Group factors related to normalising individual problems and parenting behaviour

Normalising problems and parenting behaviour

The group factors of mirroring of concerns and perceived similarities to others helped to normalise individuals' parenting problems and behaviour.

"I think what was even better was to hear from the other parents, the other mothers - their experiences. It was more useful, more informative because they were actually going through the same thing as you. Cos I sometimes think 'am I being too harsh on my children?' or 'am I not doing the right thing?' but then it turns out that everyone is more or less the same, you know. You know, all the mothers are the same we just use maybe different tactics but we all have the same problems and I'm not the only one" [*sic*] (AP4, P2:L38).

Group factors related to individual meaningful learning

The two therapeutic factors, imparting information and interpersonal learning, were particularly related to ways in which the group factors facilitated meaningful learning for parents.

Imparting information
The group process of advice giving was reported as meaningful for parents.
"*There were like a couple of instances where you know somebody was struggling with something and somebody came up with, well this is kind of what works for me, or I've tried this again or why not go back to the sticker charts or whatever it is*" [*sic*] (AP5, P14:L263).

One parent reported advice seeking from other parents in the group as particularly meaningful.
"*Like whatever you don't know you can get explained from the other parents*" [*sic*] (AP7, P4:L100).

Parents reported acquiring new knowledge and *"different tips from different parents"* (AP7, P5:L104) through working with group members.
"*The bit that I found really helpful was actually reading a book with another parent and um…yeh we were practicing and I think we were just in pairs and we were choosing a book and then yeh, one of us being the child and the other one of us being the parent and that I think that was the thing I found most helpful because…uh…because somebody had a completely different reading style from me*" (AP6, P14:L230).

Interpersonal Learning
All seven parents gave positive responses with regard to the group process of learning from other group members in fostering meaningful learning for individuals.
"*I learnt a lot actually, I, I like, even…when we were doing the discussions about what everyone, about their personal situations and how they handled it, I learned things from that*" [*sic*] (AP3, P7:L192).

The group factors related to individual self-awareness and awareness of others

Interpersonal Learning

Three of the seven parents directly reported that their awareness had increased. This increased awareness was reported regarding personal reflection.

"I think the opportunity to sort of re-visit, just the opportunity to kind of think about what I've been doing and how I've been doing it really" [*sic*] (AP2, P11:L254).

Parents' responses revealed that the group factor of increased awareness also related to their own understanding of cultural issues.

"I'm just going back to having the different cultures and stuff and I suppose open your eyes a bit more to that cos you get so focused within your own life and within your own you know insular setting I suppose, just being aware of that and everyone's different lifestyles and how that affects how you do things... obviously the sisters in one family, you know, you can't really imagine that. You know it happens but until it thrown right directly in your face you kind of think, 'oh, ok then" [*sic*] *(AP5, P10:L181).*

Group factors related to initiating and facilitating a personal journey

Interpersonal learning

The group served to initiate a personal journey for each individual parent related to individual changes in a sense of purpose and perceptions of situations. The group factor related to social development was particularly related to one parent's own level of confidence.

"I thought no. I'm going to get involved and I, that boosted my confidence a lot, personally, in my personal life because, like I said, I'm quite a shy person and you know, don't usually speak up so that's given a...the session itself has given me a confidence boost"[*sic*] (AP4, P8:L157).

For one parent, through increased exposure to other ideas, a shift in thinking related to making changes to her own perceptions.

"And you need to be exposed to all these different ideas so that you, so that you can think again about whether your way of doing things actually might not be the most

productive…for example these other people who've got slightly more divergent views…maybe we should absorb a little bit of some of those things or just watch out for certain things" [*sic*] (AP6, P12:L185).

Group factors related to individual hope

Instillation of hope

Parents' responses indicated that witnessing improvements of others' in the group served as encouraging and as hopeful for individuals.

"I liked the fact that everyone seemed to be getting something out of the course" (AP6, P15:L236).

Section 1.c: Relationships between therapeutic factors, group factors and individual factors in relation to change

Analysis showed an interrelationship between therapeutic factors, group factors and individual factors (Figure 4). Analysis revealed a reciprocal influence between group factors and individual factors. The interrelationships between therapeutic factors also influenced the reciprocal influences of group factors and individual factors.

Figure 4: Diagrammatic representation of the interrelationships between therapeutic factors, group factors and individual factors
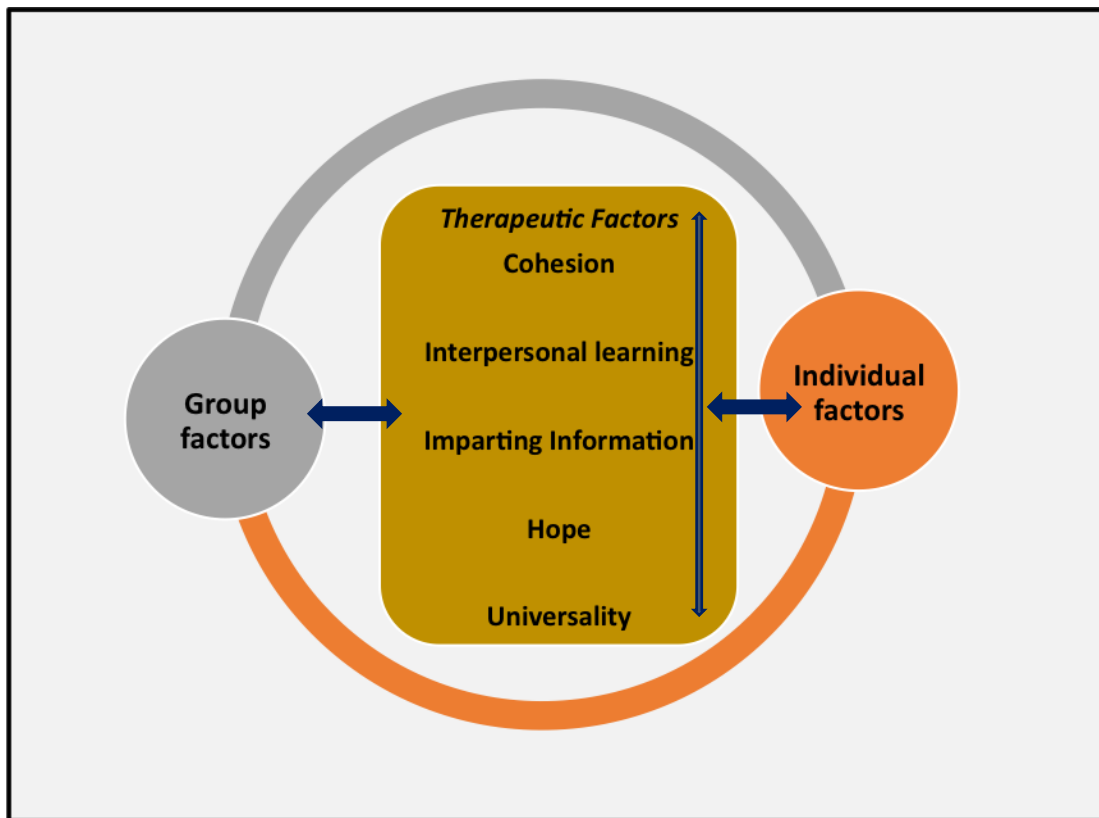
3.2 Research question 2: What are parents' perceptions of the group component of a group parenting programme?

Thematic analysis yielded themes related to individual, group, and cultural and community level factors.

Table 5: Summary of themes and sub-themes yielded from thematic analysis

Themes	Sub-themes
Individual	Social
	Well-being
	Equality
	Personal outlook
Group	Facilitator
Cultural/Community	Understanding of cultural issues
	Cultural differences
	Diversity

Individual

Social

Parents' responses were mixed in relation to their perceptions of the social experience of the group. All parents reported they enjoyed the social aspect of the group, with one parent (AP3) commenting: "*it was like making new friends*" (P3:L89). Three parents reported that they had no continued social contact with parents upon programme completion. Three parents reported changes in social contact with parents from the group.

"By attending the course me and [name of AP1] at least say hi on a regular basis. And sometimes we speak, we stand there and we talk to each other, whereas before we never" [*sic*] (AP4, P9:L183).

Well-being

For one parent (AP1) her perception of the group was related to her well-being.

"It changed my mind about…I don't get out, I don't go out, I don't meet people, with people often, only when I go to the gym to do my exercise and go out, that's it. But it's nice for me. It's a nice experience for me" [*sic*] (AP1, P8:L283).

Equality

Three of four ethnic minority parents in the group commented upon a feeling of perceived equality.

"It was equality amongst everyone" (AP4, P9:L195).

Personal outlook

Two parents (AP3, AP6) directly reported a difference in how they perceived situations as a consequence of being part of the group.

"It's made me realize and think about my own faults…and we don't do that. We always, we point our finger and we don't realise the four fingers pointing back" [*sic*] (AP3, P11:L296).

Group

Facilitator

Group facilitators were perceived as a positive part of the group component related to the delivery of the programme.

"It wasn't like we're the experts and we're here to preach to you or teach you a whole host of things" (AP2, P9:L221).

Cultural/Community

Understanding of cultural issues

Two of the three non-ethnic parents commented upon developing a greater understanding of different cultural issues.

"Family setups are all so different. The idea that you're living with your, you know, you're living with your mother-in-law and so having the two sister-in-laws there as well was really interesting as well cos then you kind of understand what other parents are kind of, what other parents are dealing with, what their issues are" [*sic*] (AP6, P9:L165).

Addressing cultural issues

One parent (AP3) commented upon the cultural differences between parents attending the group. This parent was herself from an ethnic society.

"Cos you know some parents they don't have, well maybe with the ethnic society, they don't have, they don't have much of a social meeting place. Not as much. Especially for women" [*sic*] (AP3, P8:L220).

Diversity

One parent (AP6) expressed that the diversity of the group fulfilled a wider purpose in providing a service to the community by developing a greater appreciation of diversity.

"I think that's doing a really good service for the community - to try and mix people up a bit" (AP6, P9:L163).

3.3 Research Question 3: What are the perceived facilitators of, and barriers to, attendance at a group parenting programme?

Thematic analysis of interview data yielded four overarching themes related to facilitators of, and barriers to, attendance: Practical, Programme, Personal, and Proficiency of Language. These are summarised in Table 6 below with illustrative quotes.

Table 6: Table to summarise the perceived facilitators of, and barriers to, attendance at the group parenting programme.

Theme	Sub-theme Facilitator	Illustrative quote	Sub-theme Barrier	Illustrative quote
Practical	Childcare availability	*"The offer of childcare so that he could do the soft play and be supervised whilst I was doing the course. That was amazing and otherwise it wouldn't have been possible"* (AP6, P1:L4).	Childcare restrictions	*"There was no facility to look after young child for 2 hours. Community [centre] is not allowed"* [sic] (NAP1, P1:L6).
	Timing	*"The time is perfect for me"* (AP1, P3:L87).	Work commitments	*"I couldn't go because I work on a Monday"* (NAP18, P1:L4).
			Family commitments	*"I've got in-laws as well and my mother in-law's disabled as well"* (NAP9, P1:L10).
			Health	*"My wife she's supposed to go there but she couldn't going because she wasn't well"* [sic] (NAP14, P1:L2).
			Commitment level	*"… maybe if it was just one or two it might have been easier. It's difficult to commit to four"* (NAP4, P1:L20).
Programme	Perceived relevance	*"How to maybe help him get past being so shy. Getting ready for school a little bit, socialising a little bit"* (AP2, P1:L10).	Lack of advertising	*"I didn't know anything about it"* (NAP20, P1:L2). *"It doesn't sound familiar to be honest"* (NAP20, P1:L8).
	New learning	*"I think the one thing that really interested me was the emotional part of it"* (AP5 P3:L45).	Unclear advertising	*"If, maybe if the message had been more targeted I guess or clearer"* (NAP11, P1:L30).
			Terminology	*I thought well I've got her school uniform and she can do bits and pieces so what else is there to be ready for? I didn't know what else they*

				were going to tell me" (NAP10, P1:L22).
			Format	*"I'm going to go there and I don't know anyone and I'm going to be discussing my personal issues and um... you know I don't know who's going to be listening"* (AP3, P6:182).
Personal	**Support child**	*"For their education I want to be able to help them as much as I can"* (AP4, P1:L6).		
	Achievement	*"First reason why was that there was a certificate at the end and you're achieving something"* (AP3, P1:L4).		
	Intention to change	*"I thought that might be quite, quite useful to sort of think about that I was doing and how it might, how I could change some of the behaviours that were a problem for me"* (AP2, P2:L44).		
	Help-seeking	*"To be honest...I don't know how to deal with it. My kids..."* (AP1, P1:L4).		
Proficiency of Language	**Proficient in English**	[Translator not required to communicate]	**Non-proficient in English**	[Translator required to communicate]

Factors related to logistics were the most commonly perceived barriers reported by non-attending parents, with 11 out of 20 reporting such reasons. Another barrier to attendance was related to the advertising of the programme. Responses revealed that the terminology used in the name of the programme ('School Readiness') was unclear (NAP10; Table 6). This resulted either in parents' perceiving the programme as irrelevant or misunderstanding the aims of the programme.

Many of the perceived facilitators of attending parents were perceived as barriers by non-attending parents. The main differences between the two groups of parents were noted within the Personal theme. Attending parents reported four perceived personal facilitators: support child; achievement; intention to change; help-seeking, whereas non-attending parents did not provide responses related to this theme. This could suggest that perceived facilitators related to personal circumstances are important factors in relation to attending a parenting programme.

4. Discussion

Overall, findings of the current study indicate that parents' perceived a high presence of the five therapeutic factors explored (Yalom, 1975: cohesion, instillation of hope, universality, imparting information and interpersonal learning), with cohesion, interpersonal learning and instillation of hope rated as highest. The high prevalence of the five therapeutic factors within the group, as perceived by parents, could suggest that these therapeutic factors acted as the underpinning mechanisms of change within the group parenting programme.

Perceived changes reported by parents related both to group and to individual factors. Findings suggest that the group impacted upon individual change. Equally, a reciprocal influence was identified between individual factors impacting upon the group. This interrelationship is reflective of the interplay between group members and the group environment (Yalom & Leszcz, 2005) and of findings that individual factors may permit the presence of group therapeutic factors (Kivlighan & Goldfine, 1991). This reciprocal influence also reflects the concept of reciprocal determinism between environmental, behavioural and personal determinants of change as proposed within Social Cognitive Theory (Bandura, 1986).

All parents' responses indicated that they felt positive about the group and accepted within the group, aspects that resonate with Bloch and colleagues' theory of group cohesion (Bloch *et al.,* 1979) and with previous group parenting programme findings (Levac *et al.,* 2008; Patterson et al., 2005). Group cohesiveness has been positively correlated with member attendance (Joyce *et al.,* 2007) and participation (Yalom, 1975). A high level of commitment and willingness to participate in group discussions was reported in the current study. The commitment of parents may reflect adherence to a change strategy, suggested as integral to motivation (Miller & Rollnick, 1991).

Motivation as an individual change factor was related to the therapeutic factor of cohesion which corresponds with findings that associate group cohesion with individual motivation (Bollen & Hoyle, 1990). Reports that parents within the group were open in sharing personal information echo findings of group cohesiveness promoting self-

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disclosure (Erdman, 2009; Yalom, 1995). Support from other parents within the group has been suggested as one of the most influential aspects to helping parents change (Borden *et al.,* 2010; Levac *et al.,* 2008). Current findings imply cohesion and universality may operate as the change mechanisms underpinning support.

Unity and acceptance were group factors reported in relation to parents' own individual motivations to change. Similarities in parents' motivations to change reflect ideas from the Stages of Change model (DiClemente & Prochaska, 1998) that individuals at the same stage of change may benefit from similar programmes (Armitage *et al.,* 2004*).* These individual factors may have reciprocally influenced upon group motivation.

Parents perceived a strong sense of the therapeutic factor of instillation of hope within the group, although discrepancies between interview and questionnaire data collection methods were seen. The therapeutic factor of instillation of hope was rated most highly overall by parents on the questionnaire, yet the coding of interview data did not yield results reflective of these ratings to the same extent, perhaps suggesting that this therapeutic factor is harder to articulate than to score. An alternative interpretation is suggested whereby as progress was made by parents, self-efficacy displaced hope (Erdman, 2009). Speculatively, parenting programmes could be viewed as a pathway to achieving parenting goals (Snyder, 2000) to which hopeful individuals might be more inclined to attend.

Interpersonal learning was a mechanism of change highly related to changes in parenting behaviour. In accordance with the literature, findings highlighted increased awareness of others' perspectives, personal reflection and insight (Levac *et al.,* 2008; Yalom, 1975). Consciousness raising within the Stages of Change model (DiClemente & Prochaska, 1998) and an increased knowledge base upon which to act (Bandura, 2004) are considered important aspects of the change process. Meaningful learning was a highly prevalent individual factor associated with interpersonal learning. Meaningful experiences and self-reflection are two aspects suggested as important for individual change (Kolb, 1984). Parents reported that group factors related to interpersonal learning enabled self-reflection and increased self-awareness echoing findings that collaborative discussions facilitate self-reflection, which may enable personal change

(Barlow & Stewart-Brown, 2001; Levac *et al.,* 2008). Owing to the cultural diversity of the group, when re-evaluating their own core values, parents may have been mindful of "more divergent views" (AP6). The notion of parents as co-leaners (Lindsay *et al.,* 2008) fits with the current findings in relation to the therapeutic factors of interpersonal learning and imparting information.

Scott (2010) posits that normalising difficulties is a key role of the group within parenting programmes. The current findings support this, and consistent with literature (Bloch *et al.,* 1979; Yalom, 1975) suggest universality as the therapeutic factor related to normalising parents' parenting problems. Parents' mirroring of concerns resonates with previous studies of parenting programmes (Barlow & Stewart-Brown, 2001) and from the group therapy literature (Wright, 1989) of this group process as facilitating change.

A major finding of this research exploring parents' perceptions of the group component of a group parenting programme was that parents' perceived the group component to positively contribute to their own individual perceived changes and to the overall experience of the parenting programme.

Perceptions of the group differed for individual parents. Some parents perceived the group as providing social benefits consistent with Zeedyk *et al.* (2008) who report extended social networks as an outcome of parenting programmes. Perceived changes in confidence and well-being have been documented in the literature as commonly perceived changes for parents (Levac *et al.,* 2008; Spitzer *et al.,* 1991). Within the current findings these were perceived changes for two parents.

The current findings show perceptions of the group related to changes in personal outlook associated with cultural understanding, reflecting findings suggesting the benefits of ethnically mixed groups (Patterson *et al.,* 2005). A shift in thinking was perceived in relation to the diversity of the group and also group factors associated with interpersonal learning. Findings indicate that perceived feelings of equality related to some parents' perceptions of the group, namely parents of ethnic minority. The perceived similarity of being a 'parent' may have served to foster feelings of equality within a multicultural group, aligning with the therapeutic factor of universality.

Positive reports of the group facilitators were related to some parents' perceptions of the group. The warm characteristics of the facilitators and their collaborative approach to delivery were reported by parents. The findings reflect those suggesting that skilled practitioners can contribute to positive changes in parenting behaviour (Forgatch, Patterson & DeGarmo, 2005) by fostering an atmosphere conducive to change (Asgary-Eden & Lee, 2011).

The main reported perceived barriers to attendance were practical, consistent with those cited in the literature, such as, childcare (Forehand & Kotchick, 2002) and programme timing (Spoth & Redmond, 1995). Findings indicate that proficiency of English language was a barrier to attendance for some non-attending parents, who were seemingly less engaged and more isolated (Frost, Johnson, Stein & Wallis, 1996). This has implications for wider social inclusion (Davies *et al.,* 2012). Research findings that highlight cultural differences in parenting practices (Katz & Pinkerton, 2003; Short & Johnston, 1994) and attitudes (Kazdin & Mazurick, 1994) may have related to perceived barriers in the current study, although these were not directly reported by non-attending parents.

Perceived facilitators or barriers reported by parents were not directly related to the group component, although one attending parent did express concerns regarding privacy of information within a group format. Concerns regarding confidentiality within community settings has been suggested as a potential barrier to engagement (Bell, 2007). Perceived facilitators related to personal factors were the most apparent difference between attending and non-attending parents. Internal motivation has been associated with engaging in parenting programmes (Miller & Prinz, 2003) and may have been a facilitator within the current findings. Perceived programme relevance was a facilitator, which may imply that attending parents positively appraised the anticipated consequences of attending the programme (Ajzen & Fishbein, 1977). Programme factors related to advertising, terminology and language were all perceived barriers. Ajzen (1991) highlights limited availability of information as inhibiting to an individual's perceived behavioural control, an antecedent to intention and behaviour change.

4.1 Limitations

The current findings relate only to a small sample of parents who engaged in a group parenting programme and therefore, must be interpreted cautiously. Further research may determine whether findings are evident in larger samples or across other group parenting programmes. Although this study employed dual methods (questionnaires and semi-structured interviews) in order to investigate therapeutic group factors and perceived changes, both these measures were limited in terms of validity and reliability. Future research may utilise different data collection methods, such as observational methods or alternative questionnaires, related to perceived group factors. Future research could explore a wider range of therapeutic factors in relation to the group component and perceived change. As group members' perceptions of therapeutic factors have been associated with outcomes (Lieberman, Yalom & Miles, 1973) enhanced knowledge of change mechanisms may serve to strengthen how groups can be most effectively employed to bring about positive changes for parents.

4.2 Implications for the EP role

This study highlights a potential role for EPs to employ psychological knowledge about operational aspects of the group within group parenting programmes. The findings imply that the group component can influence parents' perceived changes, and therefore, is an important factor to consider in facilitating change within group parenting programmes. Smith and Pugh (1996) recognise a role for EPs in the design and delivery of parenting programmes. The role and skills of the facilitator delivering parenting programmes has been demonstrated as pivotal both to the engagement and positive outcomes of parents (Asmussen & Weizel, 2010; Korfmacher *et al.,* 1999). Implications of the current findings suggest that EPs should be mindful of group processes and psychology and theories of group learning and change when developing and facilitating group parenting programmes. The present findings indicate that the five therapeutic factors explored may act as change mechanisms in group learning and, thus, it is important for EPs to facilitate groups in a way that enables the facilitation of these five therapeutic factors. Given the psychological underpinnings of parenting programmes, arguably, EPs are suggested as possessing the skill set to manage and supervise parenting programmes ensuring they are high quality and, as Rait (2012) suggests, have a role in reviewing programme effectiveness. Independent evaluation

research of parenting programmes is suggested as important to develop the evidence-base of programmes (Scott, 2010). EPs also offer the skill set to utilise knowledge of and undertake high quality psychological research.

4.3 Conclusions

Reflective of the subjectivity of individual member's experiences of the group (Yalom, 1975) the current findings suggest the group component may act as a mechanism of change in different ways and to differing degrees for individual parents. The perceived high prevalence of five therapeutic factors (cohesion, instillation of hope, universality, imparting information and interpersonal learning) suggests that these therapeutic factors may operate within a group parenting programme and may act as the underpinning mechanisms of change of the group component of a group parenting programme. Findings suggest that therapeutic factors, group factors and individual factors cannot be divorced as they are interrelated and reciprocally influential to the process of change. The findings implicate that it is important to account for both the psychology of individuals and of group processes within group parenting programmes. The role of the EP is suggested as key to the design and delivery of group parenting programmes, in which both group and individual factors must be considered. Overall, the current findings suggest the group component to be perceived as highly-valued and positively influential to a group parenting programme and to parents' individual perceived changes. Furthermore, the perceived presence of the five therapeutic factors explored may implicate the role of these five factors in acting as change mechanisms operating within a group parenting programme and has implications for facilitating change in group parenting programmes.

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List of Appendices

Appendix A

Address
Date

Dear ***Principal Educational Psychologist***,

I am a trainee educational psychology student in the School of Psychology, Cardiff University. As part of my degree I would like to carry out a study exploring parents' perceptions of the Incredible Years School Readiness parenting programme and of their perceptions of being part of a group.

I am writing to enquire whether you would be willing to permit the parents who took part in the Incredible Years School Readiness programme delivered by members of your educational psychology service to participate in this research.

This research project is based around exploring parents' perceptions of the Incredible Years School Readiness programme and of their perceptions of the group experience. In addition the study aims to understand parents' motivations for attending or not attending the Incredible Years School Readiness programme and to explore the factors which can facilitate or hinder attendance. Dr. Jean Parry is my research supervisor at the School of Psychology, Cardiff University.

The parents involved in the programme will be asked to complete a short questionnaire and be interviewed by the researcher. Parents who did not attend will be asked to take part in a short interview with the researcher. All data collected will be coded and stored anonymously in a safe and secure place. On completion of the study, the data will be destroyed.

Many thanks in advance for your consideration of this project. Please let me know if you require further information.

Regards,

Jean McPherson

Jean McPherson	Dr. Jean Parry
Trainee educational psychologist	Research Supervisor
School of Psychology	School of Psychology
Cardiff University	Cardiff University
Tower Building	Tower Building
70 Park Place	70 Park Place
Cardiff	Cardiff
CF10 3AT	CF10 3AT
02920 874007	02920 874007
mcphersonjf@cardiff.ac.uk	parryj@cardiff.ac.uk

For complaints:
Simon Griffey
Ethics Committee
School of Psychology
Cardiff University
Tower Building
70 Park Place
Cardiff
CF10 3AT

Appendix B

Address
Date

Dear *Headteacher,*

I am a trainee educational psychology student in the School of Psychology, Cardiff University. As part of my degree I would like to carry out a study exploring parents' perceptions of the Incredible Years School Readiness parenting programme and of their perceptions of being part of a group.

This research project is based around exploring both parents' perceptions of their experiences of the Incredible Years School Readiness programme and of their perceptions of the group experience. In addition the study aims to understand parents' motivations for attending or not attending the Incredible Years School Readiness programme and to explore the factors which can facilitate or hinder attendance. Dr. Jean Parry is my research supervisor at the School of Psychology, Cardiff University.

I am writing to enquire whether you would be willing to permit the recruitment of parents who chose not to attend the School Readiness programme and for a short interview to be conducted by myself on your school site. All data collected will be coded and stored anonymously in a safe and secure place. On completion of the study, the data will be destroyed.

Many thanks in advance for your consideration of this project. Please let me know if you require further information.

Regards,

Jean McPherson

Jean McPherson	Dr. Jean Parry
Trainee educational psychologist	Research Supervisor
School of Psychology	School of Psychology
Cardiff University	Cardiff University
Tower Building	Tower Building
70 Park Place	70 Park Place
Cardiff	Cardiff
CF10 3AT	CF10 3AT
02920 874007	02920 874007
mcphersonjf@cardiff.ac.uk	parryj@cardiff.ac.uk

For complaints:
Simon Griffey
Ethics Committee

School of Psychology
Cardiff University
Tower Building
70 Park Place
Cardiff
CF10 3AT
029 208 70360
psychethics@cardiff.ac.uk

Appendix C: Informed consent APs- English

School of Psychology, Cardiff University

Consent Form

I understand that I am being asked to take part in this project which aims to explore parents' perceptions about the Incredible Years programme and the experience of being part of a group.

I understand that my participation in this project will involve me completing a questionnaire after I have completed the Incredible Years programme. This questionnaire will take no longer than 20 minutes to complete.

I understand that my participation in this project will also involve me being interviewed by the researcher about my experiences. This interview will last approximately 45 minutes.

I understand that my participation in this study is entirely voluntary and that I can withdraw from the study at any time without giving a reason.

I understand that I am free to ask any questions and discuss my concerns with the Jean McPherson at any time.

I understand that the information provided will be held totally confidentially, such that only the researcher can trace this information back to me individually. I understand that my data will be anonymised at the end of the study and that after this point it will be impossible to trace my information back to me. I understand that I can ask for the information I provide to be deleted/destroyed at any time up until the data has been anonymised and I can have access to the information up until the data has been anonymised. I understand that this data will be destroyed after transcription is complete.

I also understand that at the end of the study I will be provided with additional information and feedback about the study.

I, _____(NAME) give consent for my child to participate in the study conducted by Jean McPherson School of Psychology, Cardiff University with the supervision of Dr. Jean Parry.

Signed:

Date:

Appendix D: Debrief form APs – English

Study Title: Exploring parents' perceptions of a parenting programme and the group experience

Thank you very much for your participation in this study.

About this Study: The intention behind the proposed study was to explore the perceptions of parents in relation to the Incredible Years programme and in relation to the group experience of taking part in the programme.

The perceptions were obtained by participants completing a questionnaire, asking about aspects of the group experience. Participants' completed an individual interview discussing experiences of different aspects of the Incredible Years programme and of the group experience.

The data in this study will be held confidentially. You have the right to withdraw your data without explanation and retrospectively up until DATE at which point the interview data will be anonymised.

If you have any questions, please contact the researcher or supervisor as below:

Jean McPherson	Dr. Jean Parry
Trainee educational psychologist	Research Supervisor
School of Psychology	School of Psychology
Cardiff University	Cardiff University
Tower Building	Tower Building
70 Park Place	70 Park Place
Cardiff	Cardiff
CF10 3AT	CF10 3AT
02920 874007	02920 874007
mcphersonjf@cardiff.ac.uk	parryj@cardiff.ac.uk

Thank you again for your participation.

If you have any complaints please use the contact details below:

Secretary of the Ethics Committee

School of Psychology

Cardiff University

Tower Building

Park Place

Cardiff

CF10 3AT

Tel: 029 2087 0360

Appendix E: Informed consent NAPs- English

School of Psychology, Cardiff University

Consent Form

I understand that I am being asked to take part in this project which aims to explore parents' perceptions about the Incredible Years School Readiness programme, the group experience, and the reasons behind parents' decisions not to attend.

I understand that my participation in this project will also involve me being interviewed by the researcher about my decision not to attend the Incredible Years parenting programme. This interview will last approximately 10 minutes.

I understand that my participation in this study is entirely voluntary and that I can withdraw from the study at any time without giving a reason.

I understand that I am free to ask any questions and discuss my concerns with Jean McPherson at any time.

I understand that the information provided will be held totally confidentially, such that only the researcher can trace this information back to me individually. I understand that my data will be anonymised at the end of the study and that after this point it will be impossible to trace my information back to me. I understand that I can ask for the information I provide to be deleted/destroyed at any time up until the data has been anonymised and I can have access to the information up until the data has been anonymised. I understand that this data will be destroyed transcription is complete.

I also understand that at the end of the study I will be provided with additional information and feedback about the study.

I, _____(NAME) give consent for my child to participate in the study conducted by Jean McPherson School of Psychology, Cardiff University with the supervision of Dr. Jean Parry.

Signed:

Date:

Appendix F: Informed consent NAPs- Bengali

<div align="center">

স্কুল অফ সাইকোলজি, কার্ডিফ ইউনিভার্সিটি

সম্মতি পত্র

</div>

আমি বুঝতে পারছি যে আমাকে এই প্রকল্পে অংশ নিতে অনুরোধ করা হচ্ছে যা ইনক্রেডিবল ইয়ারস স্কুল রেডিনেস প্রোগ্রাম সম্পর্কে বাবা-মাদের ধারণা ও অনেক বাবা-মা কেন অংশ নিচ্ছেন না তার কারণ খুজবে।

আমি বুঝতে পারছি যে আমার এই প্রকল্পে অংশগ্রহণের মধ্যে গবেষক আমার অভিজ্ঞতা সম্পর্কে প্রশ্ন করা পারবে। এই সাক্ষাতকার প্রায় ১০ মিনিট চলবে।

আমি বুঝতে পারছি যে আমার এই অধ্যয়নে অংশগ্রহণ সম্পূর্ণ স্বেচ্ছামূলক এবং আমি এই অধ্যয়ন থেকে কোন কারণ ব্যাখ্যা না করেই নিজেকে সরিয়ে নিতে পারি।

আমি বুঝতে পারছি যে আমি যে কোন প্রশ্ন করতে পারি এবং আমার উদ্বেগ নিয়ে জিন ম্যাকফারসনের সঙ্গে যে কোন সময়ে কথা বলতে পারি।

আমি বুঝতে পারছি যে আমার প্রদান করা তথ্য সম্পূর্ণ গোপন রাখা হবে এমন ভাবে যেন শুধুমাত্র গবেষকই ব্যক্তিগতভাবে এই তথ্য আমার সঙ্গে মেলাতে পারেন। আমি বুঝতে পারছি যে অধ্যয়নের শেষে আমার তথ্য নামহীন রাখা হবে এবং তারপর আমার সঙ্গে এই তথ্য মেলানো অসম্ভব হবে। আমি বুঝতে পারছি যে আমি তথ্য নামহীন করা দিন পর্যন্ত যে কোন সময়ে আমার দেওয়া তথ্য মুছে ফেলতে/ নষ্ট করে ফেলতে বলতে পারি এবং তথ্য নামহীন করা দিন পর্যন্ত আমি আমার তথ্য দেখতে পারি। আমি বুঝতে পারছি যে প্রকল্প শেষ হলে এই তথ্য নষ্ট করে ফেলা হবে।

আমি আরও বুঝতে পারছি যে অধ্যয়নের শেষে আমাকে এই গবেষণা সম্পর্কে নতুন তথ্য ও মতামত দেওয়া হবে।

আমি, _____ (নাম) আমার সন্তানকে জিন ম্যাকফারসন স্কুল অফ সাইকোলজি, কার্ডিফ ইউনিভার্সিটির ড° জিন প্যারীর তত্ত্বাবধানে করা অধ্যয়নে অংশগ্রহণের অনুমতি দিচ্ছি।

স্বাক্ষরিতঃ
তারিখঃ

Appendix G: Informed consent NAPs- Urdu

اسکول آف سائیکالوجی، کارڈیف یونیورسٹی

منظوری فارم

میں سمجھتا ہوں کہ مجھ سے اس پروجیکٹ میں شرکت کے لیے پوچھا جارہا ہے جس کا مقصد ناقابل یقین سال اسکول ریڈی نیس پروگرام کے بارے میں والدین کے تصورات کا پتہ لگانا اور ان وجوہات کو تلاش کرنا جن کے سبب والدین اس میں شرکت نہ کرنے کا فیصلہ کرتے ہیں۔

میں سمجھتا ہوں کہ اس پروجیکٹ میں میری شرکت میں، محققین کے ذریعے میرا انٹرویو کرنا بھی شامل ہے۔ یہ انٹرویو تقریباً ۱۰ منٹ تک چلے گا۔

میں سمجھتا ہوں کہ اس مطالعہ میں میری شرکت مکمل طور پر رضاکارانہ ہے اور میں کسی بھی وقت بغیر کوئی وجہ بتائے اس سے دستبردار ہوسکتا ہوں۔

میں سمجھتا ہوں کہ مجھے کوئی بھی سوال کرنے کی آزادی ہے اور میں کسی بھی وقت جین میکفرسن سے اپنی تشویشات پر تبادلہ خیالات کرسکتا ہوں۔

میں سمجھتا ہوں کہ فراہم کردہ معلومات مکمل طور پر رازداری میں رکھی جائے گی، اتنی خفیہ کہ صرف محقق ہی اس معلومات کو مجھ سے منسلک کرسکے گا۔ میں سمجھتا ہوں کہ مطالعہ کے اختتام پر میرا ڈیٹا گم نام کردیا جائے گا اور اس وقت کے بعد سے اس معلومات کو مجھ سے منسلک کرنا ناممکن ہوجائے گا۔ میں سمجھتا ہوں کہ میں اپنی فراہم کردہ معلومات کو اس وقت تک کبھی بھی حذف کرنے/ضائع کرنے کے لیے کہہ سکتا ہوں تاوقتیکہ اسے گمنام نہ کردیا جائے اور مجھے اس وقت تک اس معلومات تک رسائی حاصل ہوگی تاوقتیکہ اسے گمنام کردیا جائے۔ میں سمجھتا ہوں کہ پروجیکٹ کے بعد اس ڈیٹا کو ضائع کردیا جائے گا۔

میں یہ بھی سمجھتا ہوں کہ مطالعہ کے اختتام پر مجھے مطالعہ کے بارے میں اضافی معلومات اور تاثرات فراہم کیے جائیں گے۔

میں،_____(نام) جین میکفرسن اسکول آف سائیکالوجی، کارڈیف یونیورسٹی کے زیر اہتمام ڈاکٹر جین پیری کی نگرانی میں منعقد ہونے والے مطالعہ میں اپنے بچے کی شرکت کی منظوری دیتا ہوں۔

دستخط:

تاریخ:

Appendix H: Debrief NAPs- English

Study Title: Exploring parents' perceptions of a parenting programme and the group experience

Thank you very much for your participation in this study.

About this Study: The intention behind the proposed study was to explore the perceptions of parents in relation to the Incredible Years programme and in relation to the group experience of taking part in the programme. It was also to explore parents' reasons for choosing to attend or not attend the programme.

The perceptions were obtained by asking participants to take part in a short interview about their decision to choose to attend or not attend a parenting programme. Perceptions were also obtained by asking parents who attended the programme to complete a short questionnaire and an interview asking about participants' experiences of the group.

The data in this study will be held confidentially. You have the right to withdraw your data without explanation and retrospectively up until [DATE] at which point the interview data will be anonymised.

If you have any questions, please contact the researcher or supervisor as below:

Jean McPherson	Dr. Jean Parry
Trainee educational psychologist	Research Supervisor
School of Psychology	School of Psychology
Cardiff University	Cardiff University
Tower Building	Tower Building
70 Park Place	70 Park Place
Cardiff	Cardiff
CF10 3AT	CF10 3AT
02920 874007	02920 874007
mcphersonjf@cardiff.ac.uk	parryj@cardiff.ac.uk

Thank you again for your participation.

If you have any complaints please use the contact details below:

Secretary of the Ethics Committee

School of Psychology

Cardiff University

Tower Building

Park Place

Cardiff

CF10 3AT

Tel: 029 2087 0360

Appendix I: Debrief form NAPs – Bengali

অধ্যয়ন শিরোনামঃ বাবা-মার প্যারেন্টিং প্রোগ্রামে অংশ নেবার ইচ্ছার পরিবর্তন কতটা প্রোগ্রামের বিষয়বস্তুর উপর নির্ভরশীল বা কতটা একটি গ্রুপের সঙ্গে অংশগ্রহণের জন্য স্বস্তিদায়ক বিষয়ের উপর নির্ভরশীল সে বিষয়ে গবেষণা।

এই অধ্যয়নে অংশ নেবার জন্য ধন্যবাদ।

এই অধ্যয়ন বিষয়েঃ এই অধ্যয়নের উদ্দেশ্য হল ইনক্রেডিবল ইয়ার স্কুল রেডিনেস প্রোগ্রাম সম্পর্কে এবং গ্রুপে অংশগ্রহণ করার বিষয়ে বাবা-মাদের চিন্তাভাবনা। এমন কি বাবা-মারা যদি অংশ না নিতে সিদ্ধান্ত নেন তার পিছনের কারণও এতে খোঁজা হবে।

ধারণা নেওয়া হয়েছে যারা এই প্রোগ্রামে অংশ নিয়েছেন তাদেরকে দুটি সংক্ষিপ্ত প্রশ্নাবলী সম্পূর্ণ করে, যাতে ইনক্রেডিবল ইয়ারস স্কুল রেডিনেস প্রোগ্রামে অংশ নেবার বিভিন্ন ক্ষেত্রে অভিজ্ঞতা ও গ্রুপে অংশ নেবার বিষয়ে প্রশ্ন করা আছে। গবেষক দ্বারা যারা অংশ নিয়েছেন এবং নেন নি উভয় প্রকার বাবা-মাদের একক সাক্ষাৎকারের মাধ্যমে ধারণা করা হয়েছে।

এই অধ্যয়নের তথ্য গোপনীয় ও নামহীন রাখা হবে। আপনার এই গবেষণা থেকে আপনার প্রদত্ত তথ্য কোন ব্যাখ্যা না করে এবং ভূতাপেক্ষভাবে সরিয়ে নেবার অধিকার আছে ২০শে জুন ২০১৩ পর্যন্ত যতদিন সাক্ষাৎকারের তথ্য নামহীন রাখা হবে।

যদি আপনার কোন প্রশ্ন থাকে, অনুগ্রহ করে নিচের গবেষক অথবা সুপারভাইজারের সাথে যোগাযোগ করুনঃ

জিন ম্যাকফারসন
ট্রেনি শিক্ষামূলক মনোবিদ
স্কুল অফ সাইকোলজি
কার্ডিফ ইউনিভার্সিটি
টাওয়ার বিল্ডিং
৭০ পার্ক প্লেস
কার্ডিফ
সিএফ১০ ৩এটি
০২৯২০ ৮৭৪০০৭
mcphersonjf@cardiff.ac.uk

ড॰ জিন প্যারী
গবেষণা সুপারভাইজার
স্কুল অফ সাইকোলজি
কার্ডিফ ইউনিভার্সিটি
টাওয়ার বিল্ডিং
৭০ পার্ক প্লেস
কার্ডিফ
সিএফ১০ ৩এটি
০২৯২০ ৮৭৪০০৭
parryj@cardiff.ac.uk

আপনার অংশগ্রহণের জন্য আবার আপনাকে ধন্যবাদ জানাই।
যদি আপনার কোন অভিযোগ থাকে নিচের ব্যক্তির সাথে যোগাযোগ করুন

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Appendix J: Debrief form NAPS – Urdu

مطالعہ کا ٹائٹل: بچوں کی پرورش کے پروگرام میں شرکت کرنے والے والدین کے خیالات میں تبدیلی کی حدوں کی
تلاش کرنا جو کہ کسی پروگرام کے مخصوص متن کا نتیجہ ہو یا گروہی شرکت سے منسلک معالجاتی عوامل کا۔

اس مطالعہ میں شرکت کے لیے آپ کا شکریہ۔

اس مطالعہ کے بارے میں: اس مطالعہ کے پس منظر پشتہ ناقابل یقین سال اسکول ریڈی نیس پروگرام کے بارے میں والدین کے
تصورات کی تلاش اور اس پروگرام میں شرکت کے گروہی تجربات کی دریافت کا مقصد کارفرما ہے۔ اس کا مقصد والدین کے اس
پروگرام میں شرکت نہ کرنے کے فیصلے کے اسباب بھی تلاش کرنا ہے۔

شرکت کرنے والوں کے ذریعے دو مختصر سوالنامے مکمل کروا کے تصورات حاصل کیے گئے، جن میں ناقابل یقین سال اسکول
ریڈی نیس پروگرام کے مختلف پہلوؤں پر شرکاء کے تجربات کے بارے میں اور ان کے گروہی تجربات کے بارے میں بھی
دریافت کیا گیا تھا۔ پروگرام کے بارے میں تصورات کا حصول شرکت کرنے والے اور شرکت نہ کرنے والوں کے محقق کے ذریعہ
منعقد کردہ انٹرویو سے کیا گیا تھا۔

اس مطالعہ میں ڈیٹا رازدارانہ طور پر اور گمنام طریقے پر رکھا جائے گا۔ آپ کو یہ حق حاصل ہوگا کہ آپ ۲۰ جون ۲۰۱۳ تک بغیر
کسی وضاحت پیش کیے اپنا ڈیٹا واپس لے لیں، جس کے بعد یہ انٹرویو ڈیٹا گمنام کردیا جائے گا۔

اگر آپ کے کوئی سوالات ہوں تو محقق یا نگراں کار سے درج ذیل کے مطابق رابطہ کریں:

جین میکفرسن	ڈاکٹر جین پیری
آموزکار تدریسی ماہر نفسیات	تحقیقی نگراں کار
اسکول آف سائیکالوجی	اسکول آف سائیکالوجی
کارڈیف یونیورسٹی	کارڈیف یونیورسٹی
ٹاور بلڈنگ	ٹاور بلڈنگ
۰۰ پارک پلیس	۰۰ پارک پلیس
کارڈیف	کارڈیف
CF10 3AT	CF10 3AT
02920 874007	02920 874007
mcphersonjf@cardiff.ac.uk	parryj@cardiff.ac.uk

آپ کی شرکت کے لیے ایک بار اور شکریہ۔
اگر آپ کو کوئی شکایات ہوں تو برائے مہربانی ذیل کی رابطہ تفصیلات کا استعمال کریں:
سائمن گریفرے
اسکول آف سائیکالوجی
کارڈیف یونیورسٹی
ٹاور بلڈنگ
پارک پلیس
کارڈیف
CF10 3AT
ٹیلی فون: ۰۳۶۰ ۲۰۸۴ ۲۹۰

Appendix K: Semi-structured interview schedule (1) – attending parents (APs)

Thank you for meeting with my today and agreeing to participate in the interview. As part of my training to be an educational psychologist I am conducting a study exploring parents' perceptions of taking part in a group parenting programme. I would like to have a discussion with you about your experiences and views of the Incredible Years School Readiness programme and of the group part of it. I'm interested in your views: seeing what you liked, didn't like and any effects the programme or the group had on you personally. I am going to ask you quite a few questions. If you do not feel comfortable answering a question, that's ok – we can miss it out. All of your responses are confidential.
(Ask permission to audio-tape the interview).

Interview Questions
Attendance
1. What made you attend the Incredible Years School Readiness Parenting Programme? Why?
2. What has motivated you to attend?
3. Where did you hear about the programme?
4. What did you know about it before you started?
5. Have you had to change any appointments/alter your schedule in order to attend?

Experiences of the programme
6. Tell me what it was like to take part in this programme.
7. When you think about some of your experiences of the programme, what were some of the highlights?
8. Could you outline some of the things you think you have learned from the programme?
9. What changes do you think have happened for you since attending the programme? What can you tell me about how the programme has affected you?
10. What do you feel was important to you about the programme?
11. What would you change about the programme?

Experiences of the group (adapted from Levac et al., 2008)
12. Tell me about what it was like taking part in the group.
13. What did you learn from the group?
14. In what ways was the group helpful? Informative?
15. In what ways was the group unhelpful?
16. What differences, if any, did the group make for you?
17. How has being part of this group had a personal effect on you?
18. How would you describe the relationships within the group?
19. How did you feel within the group?

20. How comfortable did you feel [expressing yourself] within the group?
21. Did you look forward to coming to the group? Why?
22. Now that the programme has finished, do you ever meet up with anyone from the group?
23. What have you most liked/disliked about being in the group?
24. How do you think that the group members influence each other?
25. How did your feelings towards the group change over the weeks?

Experiences of the programme and/or group
26. How has this experience lived up to/not lived up to your hopes and expectations?

27. How do you plan on taking some of the things you have learned through this experience in to the future?

General
28. Are there any other comments you would like to make about your experience of the programme and/or group?

Examples of prompts for all interview questions:
To clarify…
Right so…
So by that you mean…
Have I got that right?
[Repeating response given]
[Giving a similar related example to ensure interviewer understanding]

Examples of probes for all interview questions:
Oh really?
[Reflecting response given as a question]
Can you tell me more about that?
Can you give me an example of that?
What did you think about that?
How did you feel about that?
How was that?
That's a particularly interesting (comment/response)…

Appendix L: Semi-structured interview schedule (2) – non-attending parents (NAPs)

Thank you for participating in the interview. I would like to have a discussion with you about your experiences of the School Readiness programme. I'm interested in seeing what influenced your decision not to attend the programme. I am going to ask you a few questions. If you do not feel comfortable answering a question, that's ok – we can miss it out. All of your responses are confidential.

(Ask permission to audio-tape the interview).

1. There has been an Incredible Years School Readiness programme for parents taking place. I wonder:
   - a. What do you know about it?
   - b. How do you know about it?
   - c. Where did you see it advertised?
   - d. Do you know anyone who went?

Probes:
Repeat question, including full title of programme
Have you ever heard of it?
I was wondering about (something interviewee said)

2. What were your initial feelings about the programme?

Prompts: How did you feel about hearing about/ seeing it (advertised)?

3. What influenced your decision not to attend?

Probe: What would put you off attending the programme?

4. What might influence your decision to want to attend the programme in the future?

Prompts: So, for example… (childcare)

Appendix M: Therapeutic Factors Questionnaire (adapted from the Therapeutic Factors Inventory - Lese & MacNair-Semands, 2000).

Below are some statements.

Please circle the answer which best gives your opinion about each statement. Thank you.

	Strongly disagree 1	Disagree 2	Agree 3	Strongly agree 4	
We cooperate and work together in the group	1	2	3	4	TF: Cohesion
Even though we have differences, our group feels secure to me	1	2	3	4	
In the group I get "how to's" on improving my own life situation	1	2	3	4	TF: Imparting information
We share ideas and resources in the group	1	2	3	4	
The group helps me feel any better about my future	1	2	3	4	TF: Instillation of hope
Seeing others change in the group gives me hope for myself	1	2	3	4	
I learn in the group by interacting with the other group members	1	2	3	4	TF: Interpersonal learning
Expressing myself in the group has freed me to express myself better in my outside life	1	2	3	4	
We have a lot in common in the group	1	2	3	4	TF: Universality
In the group I have a sense that we all share similar feelings	1	2	3	4	

Thank you for your time! ☺

Appendix N. Themes & Sub-Themes Identified from Codes for Research Question 1 (To what extent does the group act as a mechanism of change? How?)

Code	Sub-theme *Group factors* Individual factors	Theme (pre-determined - Yalom, 1975)
Respectful of each other	*Acceptance and attendance*	Cohesion
Feeling comfortable to go		
Commitment of members		
I could be myself		
Feeling relaxed in the group		
Defenses down		
Everyone taking part	*Participation*	
No one afraid to speak		
Everyone contributing		
Others talking facilitated me talking		
Being open in what members spoke about		
Smaller 'working' groups for discussion		
Nobody seemed uncomfortable to speak		
Everyone became close	*Relationships between members*	
Getting along well		
Friendly		
Nice relationship with each other		
Happy to talk to each other		
Speaking to person next to you to discuss a comment		
Looking forward to seeing members		
Getting to know members		
Positive group dynamics	*Positive value of group*	
Bounce off each other		
Nice to know you can talk to people		
Chance to be intimate with other people		
Members had a reasons to be there	*Unity and development*	
Group more relaxed over the course of the sessions		
Group were motivated		
Group has a purpose		
Becoming more		

comfortable over sessions		
Approachability of group members	Support	
No one afraid to speak		
Nodding in agreement		
Saying 'I understand' when others speak out		
Nice to know you can talk to people		
Group was motivating	Motivation	
Others talking facilitated me talking		
Desire to change something amongst members		
Asking other parents for advice	*Advice giving/seeking*	Imparting information
Asking other parents for an explanation		
Giving suggestions to each other		
Parents happy to help each other with advice		
Perceptions of advice given by others		
Misconstrued information		
Tips from parents	*Acquiring new knowledge*	
Practising tasks with other parents		
Gaining knowledge related to older children		
Discussing techniques		
Practising tasks with other parents	Meaningful learning	
Giving suggestions to each other		
Discussing techniques		
Trial new knowledge at home		
Everyone getting something out of the programme	*Witnessing improvement of others*	Instillation of hope
Encouraging	Hope	
Parents kept going to programme because getting something from it	Motivation	
Increased awareness of cultural differences	*Increased awareness*	Interpersonal learning

Increased empathy		
Eye-opener		
Way in to others lives		
Differences in family set-ups		
Overlapping with people not in usual social group	Self-awareness and awareness of others	
Re-visiting own parenting		
Increased awareness of cultural differences		
Empathise with others' personal situations		
Change in attitude	*Shift in thinking*	
Exposure to other ideas		
Ways of interpreting		
Learning from others' personal situations	*Learning from other group members*	
Picked up what other parents might do		
Discussing problems most enjoyable		
Learning how parents handle situations	Meaningful learning	
Learning and socialising at the same time	*Social development*	
Learning about parents as individuals outside of the programme		
Improving own confidence	Initiating and facilitating a personal journey	
Change in own perceptions		
Everyone on the same level	*Perceived similarities to others*	Universality
Role as 'mother'		
Able to relate to all the mothers		
Perceived similarities to all parents in the group		
Perceived similarity to another parent		
All parents in the group are similar		
Others are experiencing the same problems	*Mirroring of concerns*	
We all have the same problems as mothers		
Shared concerns and experiences		
Getting together with	*Reduced feelings of*	

parents in the same situation	*uniqueness*	
You're not on your own		
Deal with same situations		
Feeing equal		
Sense of relief that other parents are doing the same	*Relief*	
Concerns that your way of parenting dispelled		
All coming from the same planet	Normalising of problems and parenting behaviour	
Other parents are doing the same		
We all have the same problems as mothers		
Going through the same is encouraging	Support	
I'm not the only one		

Appendix O: Themes & Sub-Themes Identified from Codes for Research Question 2 (What are parents' perceptions of the group component of a group parenting programme?)

Code	Sub-theme	Theme
Continued social contact beyond programme completion	Social	Individual
Limited ongoing social contact		
Social contact related to school or nursery		
Impromptu contact - positive		
Since programme, now speak to another parent		
Friendship with another parent on programme		
Discussion of wider personal topics with parents		
Learning and socialising		
Sense of making new friends at programme		
Programme enabled parent to meet people	Well-being	
Progamme provided a reason to go out		
No one is above no one	Equality	
Each parent is equal		
Each parent is a mother		
Change in perceptions	Personal outlook	
Increased awareness of others needs		
Interpersonal communication		
Taking a critical view of self		
Clear teacher-student roles	Facilitator	Group
Collaborative approach		
Group facilitators supportive		
Group facilitators nice/friendly		
Group facilitators use own examples of their own children		
Group facilitators able to manage group well		
Group facilitators able to respond to each parent		
Increased understanding of differences in family set-ups	Understanding of cultural issues	Cultural/Community

Increased awareness of extended family situations	122	
Increased appreciation for difficulties encountered		
Misconstruing of information related to cultural differences		
Eye-opener		
The group as a social meeting place	Addressing cultural issues	
Differences in ethnic society of meeting up		
Women and cultural differences		
Mix of individuals within the group	Diversity	
Positive view of group diversity		
Meet people with own community		
Community service		

Appendix P: Themes & Sub-Themes Identified from Codes for Research Question 3 (What are the perceived facilitators of and barriers to attendance at the group parenting programme?)

Code	Sub-theme	Theme
Childcare available	Childcare	Practical
Childcare unsuitable		
Concerns about bringing child to programme		
Childcare difficulties		
Nobody to look after child		
Inconvenient time	Timing	
Wider availability		
Logistics		
Times in the afternoon		
Work clashes with programme	Work commitments	
Cannot go because at work		
Day of programme is a working day		
Disabled family member	Family commitments	
Family members' health appointments		
Housework		
Responsibility for in-laws		
Wife pregnant	Health	
Wife unwell		
Number of sessions is too many	Commitment level	
Programme a good idea	Perceived relevance	Programme
Programme sounds good		
Programme content can help child		
Programme content relevant for age of child		
Thought programme was for nieces		
Not knowing if 'needed' to go		
Missed initial communication about the programme	Lack of advertising	
Not heard about the programme		
Seeking additional information about programme	Unclear advertising	
Message needs to be more targeted		
Misunderstanding the term 'readiness'		
More information required		
Misunderstanding the term 'readiness'	Terminology	

Concerns about discussing personal information with others	Format	
Interest in learning about specific content	New learning	
Increase knowledge base		
Helping children	Support child	Personal
Helping child with their education		
Helping child in the 'right' ways		
Help-seeking	Help seeking	
Problem with children's behaviour		
Limited helped available to parents		
Unsure about where to go for help		
Certificate and achieving	Achievement	
Be less stressed with children	Intention to change	
Change own behaviours		
Translator required to communicate	Proficiency in English	Proficiency in English
Translator not required to communicate		

Appendix Q: Example of an annotated transcript (non-attending parent 2) detailing identified codes and themes

Interview question/interviewee response	Identified Code	Identified Theme
1. I just wondered, um, what you know about the School Readiness Incredible Years programme running? 2. Um, I knew it was on, um and unfortunately I didn't go, because of the smaller one um…I'm not…I don't really know much about it. **3 How did you know about it…?(…)** 4 Um, there was, I think we had a leaflet and I think there was something in the window about it as well. There wasn't a lot on the leaflet. **5 And what were your initial feelings about seeing this programme advertised?** 6 I think it's a good idea. Um, to be honest I had no idea what to expect, how to help him [referring to her son] through it all so I think it was a good idea **7 A good idea. (…). And what, sort of, influenced your decision not to attend?** 8. It was purely taking her [referring to her daughter] so I didn't want to be disruptive [laughs] **9. That makes sense. What might influence your decision in the future to attend the programme, if you were interested?** 10. Just sort of better availability because I think it was only, there were quite restricted times. **11. Yeh it was only one morning** 12. So maybe at different times, yeh, then I would have gone. **13. You would have gone.** 14. Yeh, it wasn't because I didn't want to. I thought it would be very useful, but it was purely logistics.	Childcare difficulties Unclear advertising Programme a good idea Concerns about bringing child to programme Wider availability Logistics	Practical Programme Practical Practical Practical

Appendix R

A USB stick containing interview data has been submitted

The Group Component of a Group Parenting Programme: Exploring Parents' Perceptions.

Part Three: Reflective Summary

5743 words

(Excluding references)

Reflective Summary

This reflective summary examines and discusses the research process including the research paradigm, methods and data analysis. It provides a commentary of the role of the researcher. Finally, reflections are presented in relation to the ways in which the current study provides a contribution to knowledge.

1. The research paradigm and design

In order to access individuals' constructions of their own reality (Punch, 2005) the current research adopted a social constructionism paradigm. The current research aimed to produce knowledge of individuals' constructions of a particular experience, in which the perceptions of individuals are personally and socially constructed. A qualitative design was chosen owing to its focus upon participants' beliefs about their experiences (Strauss, 1987). In seeking to explore and understand participants' perceptions of the group component of a parenting programme a qualitative design was deemed a suitable choice. I felt that a qualitative design would help to understand how participants made meaning of their experiences of a particular event. I felt that gathering a rich source of information from a small sample of participants was the best way to gather data in order to address my research questions. A qualitative approach to data collection enabled more detailed, in-depth data (Bryman, 1992) to be collected. The aim of qualitative research is to generate understanding that will be useful (Willig, 2008). The current study was concerned with discovery and with creating understanding of the behaviour of participants involved in a group parenting programme.

2. Methods

As qualitative methods are more suited to accessing subjective meanings about how people make sense of the world and how they experience events (Willig, 2008) it was a suitable method of choice. The current research was interested in the interpretations individuals made about events (Willig, 2008). Qualitative methods propose that approaches that allow the researcher to access the meanings that guide behaviour

enable us to better understand the social world (Henwood, 1996). As Willig (2008) advocates: "the most important thing is to select methods that are able to generate data which will help us to answer our research questions" (p.23).

The rationale and design for the semi-structured interviews and the questionnaire are discussed below.

2.1 Semi-structured interviews

2.1.1 Rationale

Interviews were deemed a suitable method to allow participants to relay their own constructions of their perceived experiences of the parenting programme and of their perceived reasons for attending or not attending the parenting programme. Semi-structured interviews allowed participants to discuss issues and express their views through interactive discussions, whilst also providing a checklist of topics (Robson, 2011) that were necessary to provide data in accordance with the research questions posed.

Robson (2011) suggests semi-structured interviews to be particularly appropriate when the interviewer is closely involved with the research process. I felt this was relevant to the current study as I was the sole-researcher and had been involved in supporting the delivery of the parenting programme through my training placement at an educational psychology service. Interviews also enable direct individual contact between researcher and participant (Cohen, Manion & Morrison, 2007) and this was felt to facilitate improved engagement of all participants in the current study.

2.1.2 Design

Kemmis and McTaggart (2003) describe an interview as "a conversation, the art of asking questions and listening" (p. 604). As a researcher I was new to designing interview schedules and conducting semi-structured interviews. Interview questions were based upon the literature search conducted and some questions were adapted from a previous study (Levac, McCay, Merka & Reddon, 2008). Guidelines for

interviewers were followed: long questions, leading questions and questions involving jargon long were avoided (Cohen *et al.,* 2007; Robson, 2011) and prompts and probes were used to facilitate individuals to elaborate on some of their responses (Cohen *et al.,* 2007). Although questions were asked in a common sequence (Robson, 2011), the semi-structured interview design allowed the interviews to be more like a "conversation with a purpose" (Merriam, 2009, p. 71). This permitted the researcher to modify questions based upon the flow of the interview and also allowed unplanned questions to be asked (Robson, 2011). This element of the data collection was aligned to the epistemological stance of exploring.

In order to explore the constructions of each individual the researcher used open ended questions during interviews, in accordance with Bannister and colleagues' suggestion that open ended questions are useful when the study is exploratory (Bannister, Burman, Parker, Taylor & Tindall, 1994). Upon reflection, I acknowledge that I might have lacked the skills of a more experienced interviewer and this might have impacted upon the data that was gathered. Participants were asked about their personal experiences of the programme and their experience of being part of the group. Both aspects were seen as interlinked and relevant to participants' perceptions of the group parenting programme. It was thought that asking a range of questions about the programme might have been one way to avoid response bias.

2.2 Therapeutic Factors Questionnaire (adapted)

2.2.1 Rationale

The current study explored ways in which the group component of a parenting programme was perceived by parents. The structured therapeutic factors questionnaire (adapted) was used as an alternative method to extract participants' perceptions of the group component of the parenting programme. I felt that employing a structured questionnaire as a different method of data collection to explore perceptions of the group component might have emphasised or highlighted areas related to research question one that participants had not 'consciously' considered but had perceived. I felt

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this to be appropriate as participants might have not automatically considered group factors as related to their experiences of the parenting programme.

I decided to use the therapeutic factors questionnaire (adapted) because the questions were related to exploring the group in relation to a change framework. Other types of group questionnaire were considered: The Group Climate Questionnaire (GCQ; MacKenzie, 1983), and the Perceived Cohesion Scale (PCS) adapted for the small group context (Chin, Salisbury, Pearson & Stollak, 1999). Neither the GCQ nor the PCS were deemed as relevant within the context of exploring parents' perceptions of the group in relation to a framework of change.

2.2.2 Design

In accordance with Robson's (2011) guidance that questionnaire items should be designed to help achieve the goals of the research, this questionnaire was deemed to generate data to help answer the overarching research aim and specifically research question one: 'To what extent does the group act as mechanism of change. How?' The full version Therapeutic Factors Inventory (TFI; Lese & MacNair-Semands, 2000) has been used to identify the presence or absence of therapeutic factors within group contexts, in relation to the therapeutic factors as change mechanisms. The structured therapeutic factors questionnaire aimed to capture the participants' perceptions of the group component. As a researcher, I felt it would complement participants' interview responses, related to group factors.

The questionnaire was adapted and developed after a review of the literature on parents' experiences of parenting programmes and a review of measures of group factors related to group change and group processes. As alluded to in the Methods section (Part Two) a shorter version with simpler language was more appropriate to meet the needs of some participants in the study, many of whom spoke English as an additional language (EAL). Having supported the delivery of the parenting programme I was aware of some participants' level of literacy and designed the questionnaire accordingly. The number of response alternatives available for rating the statements was four. This response categorisation design was felt to reflect the language issues of

this particular group of participants and also the purpose of this exploratory study. It is recognised that fewer response categories may have restricted the amount of choice available to participants and, therefore, the overall sensitivity of the scale in being able to distinguish differences between participants' ratings. Whilst a scale with a wider range of response alternatives, such as a ten-point scale, may have created more difficulties in choosing, it may also have been more useful in order to heighten the sensitivity of the scale in distinguishing differences between subscales in more detail. Including a rating scale with a wider range of responses in the design of the adapted questionnaire could be beneficial for its use in future research.

3. Participants

3.1. Context

Within the participant population of the current study at least half of participants spoke English as an additional language (EAL). Within this EAL population, participants varied in their grasp of English. Some participants spoke no English at all. Assistance from a translator was required in order to elicit the constructions of these parents. The influence of language and the use of a translator are discussed in a later section (Section 9). Within the attending parent population, participants had a grasp of English that enabled them to attend the parenting programme. However, it became apparent during interviews how challenging attending the programme has been for some of these parents. The population of participants was predominantly female, a feature common to studies within the field of parenting programmes. The lack of presence of fathers at the parenting programme was commented upon by AP4.

3.2 Participation

It is possible that I might have unintentionally influenced participants to take part. Participants that had attended the parenting programme knew me as I had supported the delivery of the parenting programme through my training placement at a local authority educational psychology service. Having a shared the experience of the parenting programme it is possible that these parents were perhaps more willing and

inclined to take part in the current study. A second unintentional influence was that some non-attending parents who knew a parent who had participated in the parenting programme were sometimes more inclined to participate in the study.

4. Procedure

It was important to be flexible throughout the research process. Researching within real world contexts produces real world issues (Robson, 2011). For this reason, there were some changes in procedure throughout the research process. My being flexible was key when trying to juggle the demands of conducting a research study with the demands of a trainee placement.

4.1. Questionnaire administration

I had originally planned to administer the therapeutic factors questionnaire (adapted) during the final session of the parenting programme. However, in accordance with programme protocol parents were required to complete paperwork during the final session. Therefore, the completion of the questionnaire was postponed to the occasion of the interview in order elicit valid responses without the pressure of time. The procedure on the occasion of the interview was firstly, to interview parents and secondly, to administer the questionnaire. I thought that discussing the programme during the interview would help remind parents of their experiences at the group parenting programme and help parents recall aspects of the programme related to group factors. I acknowledge that the order of administering the questionnaire might have impacted upon parents' perceptions of therapeutic factors.

4.2 Interviewing

Interview questions had to be used flexibly when interviewing EAL parents and these parents sometimes required longer to respond. As an interviewer the style of interviews with EAL participants felt different to those of non-EAL participants. They felt less like fluid a conversation. EAL participants often sought confirmation that what they had said had been understood. This meant that I often had to repeat to them what they had said to me. During interviews I felt I used more non-verbal communication with EAL

participants. Interview prompts helped to clarify ambiguous responses made. It was noticed that interview probes designed to get participants to elaborate upon responses were not always as successful with EAL parents. Another difficulty was encouraging the translator to use the interview probes.

Using open-ended questions was a successful way to enable participants to speak at length. However, a consequence of this was that sometimes it was a challenge to keep the focus of the interview. Applying an interview protocol flexibly helped to adhere to the relevance of the topic whilst simultaneously incorporate participants' responses with questions on the protocol.

Unfortunately, the translator was ill for a portion of time during the research process. This meant that some non-attending parent interviews requiring a translator had to be delayed. This might have impacted upon the data in terms of parents being able to remember information related to their reasons for not attending the parenting programme. This was an unfortunate but unavoidable time lapse owing to ethical approval, school holidays, trainee placement commitments and translator illness. School A was considering running a second programme and during the final phase of interviews the school had begun to advertise the second programme. Consequently there was sometimes confusion about as to which parenting programme I was referring. This was considered to be an unavoidable contaminator to the data.

5. Data Analysis

Willig (2008) posits that the method of data collection generates data appropriate to data analysis. The two methods of data analysis are outlined below in relation to the methods of data collection.

5.1 Thematic analysis

As the semi-structured interviews generated data related to individuals' perceptions and constructions, thematic analysis was deemed a suitable method of analysis, as it can examine the ways in which events are experienced (Braun & Clarke, 2006). This fitted with the exploratory nature of the current study. Thematic analysis was chosen because

it is not aligned to any pre-existing theoretical frameworks (Braun & Clarke, 2006) unlike other qualitative methods, such as Grounded Theory (Glaser & Strauss, 1967) and Interpretative Phenomenological Analysis (IPA; Smith, 2004). Part of the decision to use thematic analysis related to its accessibility for researchers new to qualitative research and its ability to reveal unanticipated aspects related to the data (Braun & Clarke, 2006). Thematic analysis was deemed to be a suitable method in which to provide a rich description of the data through both inductive and deductive analysis in order to address the broad research questions of the current study. As highlighted by Braun and Clarke (2006) data analysis does not take place in an "epistemological vacuum" (p.84). The active role of the researcher within thematic analysis is acknowledged. As a researcher, I brought my own values, beliefs and prior knowledge of the research literature to the analysis of my data. Consistent with guidance, the analysis was conducted in a recursive fashion where the data set and codes were revisited (Braun & Clarke, 2006).

Within stage one of the thematic analysis process, by transcribing the data myself, I became very familiar with the data. As transcripts need to retain the meaning of what was said during interviews (Braun & Clarke, 2006), I purposely did not change participants' words nor their grammar. By transcribing verbatim meaning was retained, and, although sometimes owing to participants' proficiency of English, some meaning was unclear. Verbatim transcription enabled participants' voices to be accurately represented. Transcripts for attending parents and non-attending parents were analysed separately. Consistent with a social constructionist framework, cautious attempts to interpret participants' perceptions were made.

5.2 Descriptive statistics

I felt that descriptive statistics would provide a clear way of understanding the therapeutic factors that participants perceived to have been present in the group. Using a bar chart was felt to provide a simple yet clear way of presenting data. Descriptive statistics could show the extent to which each of the five therapeutic factors were perceived to be present.

5.3 Reflections about analyses

Upon reflection, whilst the use of descriptive statistics did indicate differences in the perceived presence of therapeutic factors and did support perceptions reported by parents during interviews, they were not able to provide the richness of detail which promoted understanding of how the group acted as a mechanism of change for parents.

6. Reflexivity and the role of the researcher

"Reflexivity requires an awareness of the researcher's contribution to the construction of meanings throughout the research process, and an acknowledgement of the impossibility of remaining 'outside of' one's subject matter while conducting the research" (Willig, 2008, p.10).

6.1 Personal reflexivity

Throughout the research process, it was important to remain personally reflexive (Willig, 2008). I was aware of the influence of my own values, experiences, interests, beliefs and political commitments in shaping the research (Willig, 2008). I remained aware of the influence of myself as a researcher upon the data that was generated. Characteristics, such as my gender, age and ethnicity as a Caucasian female in her late-20s, would have impacted upon the recruitment of, and engagement with, participants of different nationalities and cultures within the current study. With experience of teaching in a multicultural environment I am familiar with working with professionals and parents from a range of different cultures. In this study exploring parents' perceptions, I myself was not a parent, and therefore, had no real insight in to the reality of parents' constructions of parenthood. However, through my professional training and experience I was able to empathise with the challenges of being a parent. It was important to reflect upon these issues prior to commencing the research and also to remain reflexive during the research process itself, in order to keep an open-minded approach.

Within qualitative research reflexivity is important "as it encourages us to the foreground, and reflect upon, the ways in which the person of the researcher is

implicated in the research its findings" (Willig, 2008, p. 18). In relation to the non-existence of an 'epistemological vacuum' (Braun & Clarke, 2006) the experiences I brought to the current research might have influenced the research findings. My prior reading of research, my background in teaching and my training as an educational psychologist might have all influenced the expectations I had in relation to the current research. Within interviews I tried to remain neutral and avoid guiding or leading participants towards preconceptions I might have had. During data analysis I actively tried to remain reflexive by questioning myself as to 'why' I thought something and questioning how my presence, my own values and beliefs might be impacting upon the data. Consistent with the principles of thematic analysis, recognising the assumptions and beliefs I brought to the 'active' process of analysis (Attride-Stirling, 2001; Braun & Clarke, 2006) as a researcher is important for the transparency of findings.

6.2 Researcher influence

Vidich and Lyman (1998) assert that the researcher is implicated in the research process and becomes part of the social world which is being studied. Within the current research it was central to acknowledge my influence upon the data gathered. Fontana and Frey (1994) discuss how the ways in which the self is used within interviews can have considerable influence upon the success of a study. I was aware of the influence of my behaviour during interviews upon the willingness of participants to discuss topics openly (Robson, 2011). Interviewer-interviewee rapport with participants can impact upon the data collected (Robson, 2011). Steps taken to address this issue were ensuring participants; were informed of the aims of the interview; understood that I was interested in their views, not a particular 'right' or 'wrong' answer; and, understood that information given would remain confidential and be reported anonymously. It was noted that the use of an audio-recording device might have had a negative impact upon how parents felt during interviews and, therefore, their responses. Willig (2008) reminds us of the disruptive aspects of using a recording device, however, audio-recording interviews was important for other aspects of the research design, such as validity.

Reinharz (1992) refers to trust as an issue central to study success. In the current study, the researcher aimed to be open, responsive, and respectful and to create a warm atmosphere in which participants felt sufficiently comfortable to share their ideas. The prior involvement of the researcher with attending parents was deemed beneficial to developing a positive relationship. However, in being familiar with the group of attending parents, I remained mindful of the potential response bias this may have caused in how parents reported their experiences. Reflecting upon the findings, responses given by attending parents were mostly positive. This might have been because parents might have wanted to give an answer they thought correct in order to be helpful. My presence as a researcher, therefore, might have impacted upon the constructions gathered. An alternative reflection relates to the complexity of my dual role as a trainee educational psychologist involved in supporting the delivery of the parenting programme and to my role as a researcher. I was careful to distinguish my roles to parents, and to emphasise the confidentiality of all data. However, when discussing shared aspects of the parenting programme these role boundaries were sometimes blurred. Reflexivity involves accepting these influences are part of the research (Hammersley, 1989).

7. Validity

It was important to engage in reflexivity in order to try to address the threats to validity present within qualitative research. Willig (2008) defines validity in qualitative research as: "the extent to which our research describes, measures or explains what it aims to describe, measure or explain" (p.16).

Following guidance from Robson (2011), measures taken to address issues of validity were: ensuring all interviews were audio-recorded and data was high quality; transcribing the interviews verbatim to enhance accurate recording of information; remaining aware of my potential influence of researcher bias when interpreting data; and, remaining reflexive. Whilst it is acknowledged that one way to address validity is to engage in follow up participant validation owing to time restrictions in the current study, it was not possible to follow up with participants. In order to address this issue,

time was taken after each interview to clarify and check the meanings of participants' constructions. This was also a step taken to help reduce researcher bias.

8. Credibility

Lincoln & Guba (1985) posit that respondent bias can threaten the trustworthiness of research findings. In relation to the current study the researcher remained aware that respondent bias might have influenced data collected. Respondent bias can involve obstructiveness and withholding information if the researcher is seen as a threat, or can involve providing answers participants feel are helpful to the researcher (Lincoln & Guba, 1985). Reflecting upon the current study, respondent bias might have influenced attending parents in either of these ways. With a shared experience with the researcher, attending parents might have been prone to providing answers they thought the researcher wanted to hear. Or, equally possible, attending parents might have wished to withhold information owing to knowing the researcher. Parents might have been concerned about information reaching the group facilitators and, therefore, might have felt obliged to withhold negative information about the parenting programme. In contrast, non-attending parents had no prior knowledge of the researcher and, therefore, were perhaps less likely to feel they ought to provide 'helpful' responses. On the other hand, the unfamiliarity of the researcher to non-attending parents may have impacted upon how truthful the responses given were. At times, I felt that some non-attending parents provided 'socially desirable' responses, perhaps as a way of withholding information.

9. Lost in translation

Willig (2001) posits the importance of "making sure as little as possible is lost in translation" (p. 16). From a social constructionist perspective all knowledge is constructed as a product of culture, history and politics and is mediated by language (Burr, 2003). Aspects of language and the translation of language during this study presented challenges both to data collection and to the interpretation of data. Edwards (1998) refers to the "unshared language competencies" (p.197) between researcher and researched, and these were very much a part of the current study. Despite the obvious language barriers measures were taken to overcome these.

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9.1 Translations

In order to address the EAL status of many of the parental population at School A steps were taken: informed consent and debrief documents were translated in to Urdu and Bengali (the two most commonly spoken languages); the translated documents were translated back to English by native Urdu and Bengali speakers to ensure accuracy; a translator of Urdu and Bengali was employed to read the translated informed consent to parents with different dialects or with lower levels of literacy; and, this translator was present during interviews to translate the interview questions and responses for the researcher and parents.

9.2 Translator and researcher relationship

In order to make the translator aware of the sensitivity of the topic and of the confidentiality of data gathered, we met prior to conducting interviews so that I was able to brief her about the research aims and principles. This was especially important owing to the translator also being a member of staff at School A. I felt we developed a positive working relationship in which there was trust. This helped me to feel confident that her translations of the interview questions to parents reflected the interview schedule.

9.3 Interpreting during interviews

Guidance related to carrying out interviews using a translator was followed (Edwards, 1998). A triangular shape arrangement was adopted when conducting interviews. This made it easier to maintain eye contact with the participant as well as looking at the communication between the translator and participant (Edwards, 1998). I tried to engage in as much positive non-verbal communication as possible in order to develop some rapport with the participant, although, it is difficult to say how successful I was in my aim. As the translator and I had a good working relationship and the translator had been briefed on the interview, I felt confident that the questions she translated to parents were as they were intended to be asked.

Reflecting upon the process of the interviews involving a translator I acknowledge that meaning might have been lost in what parents understood from the translator, what the translator understood from the parent and what I understood from the translator. During interviews, as a researcher and as an individual I felt (and was) entirely dependent upon the translator, sometimes resulting in feeling somewhat excluded. At times, I felt I could identify with the feelings of exclusion experienced by some parents when I too experienced the barrier of language to communication. Reflecting upon the concept of power and status, on occasions it felt as though the translator held the power within the interview context. Within contexts where an additional person to the researcher is included (in this case a translator) it is important to recognise the contribution of the translator upon the constructions of the accounts given by participant (Willig, 2008).

9.4 Interpretation and researcher bias

Although questioned in their native language some participants were sensitive and chose to respond in English because of my presence. However, in so doing, meaning was sometimes lost owing to a misunderstanding of the original interview question or due to limited proficiency in English. Consequently, I applied due caution when interpreting these findings. As suggested by Miller & Glassner (2004) it is possible to study what is said during an interview despite full knowledge of the pollutants that shape the discussion. Upon reflection, the perceptions of all parents in this study were elicited as fully as possible.

10. Ethics

10.1 Informed consent
 An unanticipated result of having documents translated was that the formal language of some of the translated material was noted by a translator. Mindful of the practice of informed consent (British Psychological Society [BPS], 2009) I requested that the translator was available to help parents to understand the translated documents, either by translating them in to in their local dialect or reading the translated documents for

parents. This was often a challenge due to other job demands placed upon the translator by the school.

10.2 Dual roles and confidentiality

In the current study it was important to clarify my role with all participants, School A and B, and the educational psychology service with whom I was on placement. It was important to clarify my role to the group of attending parents as a researcher. However, there was unavoidable contamination between my role as a trainee educational psychologist and as a researcher. It was important to clarify my role as a researcher for both schools (A and B). I remained mindful of my role as a trainee EP with allegiance to the school and, within my researcher capacity, my allegiance to the BPS Code of Ethics and Conduct, University Ethics Regulations and the parents I interviewed. There was sometimes a conflict between my professional allegiance to the school and adhering to research confidentiality. Despite some parents sharing information during interviews that the school may have found helpful, I could not share this with the school owing to the binding confidentiality agreement. Similarly, the two group facilitators who delivered the parenting programme were interested in parents' perceptions. In these instances, it was necessary to clarify my role as a researcher and the confidentiality code of the research.

Some non-attending parents sought information about the parenting programme from me both during and after the interview owing to my role as a trainee EP as well as a researcher. An unintended outcome of some interviews was that they sometimes served to highlight the parenting programme as being of interest for some non-attending parents. This presented an unanticipated ethical dilemma. In my role as a researcher I was clear about the purpose of the interview, however, whilst not wishing to promote the programme, I also did not wish to withhold potentially helpful information.

As a member of school staff and a translator in the study, the translator also had a dual role. This dual role status might have been a perceived threat to confidentiality by some parents.

10.3 Respect

The ethical principle of respect (BPS, 2009) shown to all participants was paramount during the current research. Respecting parents' reasons for choosing not to attend the parenting programme was important to ensure parents did not feel as if they were at fault. Emphasising the exploratory nature of my questions, the anonymity and confidentiality of data, as well as the voluntary status of attending the programme were all aspects I hoped would have helped parents feel respected.

10.4 Power

Within interview situations I remained aware of the relative powerlessness of participants and the influence of this upon the relationship between myself as an interviewer and the parent as an interviewee (Alexander *et al.,* 2004). As a white, English-speaking woman with a professional background I might have been perceived as someone with power and influence. This idea was reinforced when some participants asked me about the parenting programme assuming that I had this knowledge. In all instances, I 'held' the power in as much as I was the researcher 'driving' the interviews and my asking questions (Kvale & Brinkmann, 2009). Despite unintentional, this exerted power over participants is important to recognise as it might have influenced the ways in which they chose to convey their constructions.

To address this I tried to minimise my status in order to appear less threatening. During data collection, I was conscious of my presence and took steps to try to reduce my 'physical' presence, for example, I dressed conservatively. I tried to employ psychological skills that would empower participants and ask open questions to allow the voice of the participant to be present more than mine. Viewing situations from different perspectives helped me remain reflexive so that I was aware of times when my presence might have been of influence.

I was mindful of the ethical dilemmas of using a translator from the school and local community owing to her status within the community. Parents' perceptions of the translator were unknown. Research suggests that a translator not from the local area may have to spend time establishing his or her credibility (Mayall, 1991). I felt this was

an advantage of using a translator who was familiar to parents within the local community.

10.5 Language

In the current study, language was a significant factor. Competence in the English language for participants of minority ethnic groups varied and this might have impacted upon parents who felt able to participate in the current study.

11. Contribution to knowledge

"The primary goal of research is, and must remain, the production of knowledge" (Hammersley & Atkinson, 1995, p.17). The findings of the current study add knowledge and insight into the relatively small qualitative literature of parents' experiences of parenting programmes and support findings within the literature that group parenting programmes can bring about positive outcomes for parents.

This study adds knowledge to help further understand how parents' perceive and experience the group component of a group parenting programme. This study has demonstrated the role of the group and group therapeutic factors in positively impacting upon parents' perceived changes. The findings highlight the interrelationship between factors within the group component and factors related to individual change. The findings highlight the importance of both the psychology of individuals and of group processes within group parenting programmes and the significance of applying both aspects to the design and delivery of parenting programmes. Findings demonstrate that the group facilitators are perceived as an important part of the group component. Amidst the wealth of evidence of effectiveness of parenting programmes, the current study adds a different perspective to the study of group parenting programmes. The small-scale findings add real-world knowledge as to how group parenting programmes might be effective in bringing about positive outcomes and change for parents. Investigation of the factors associated with change underpinning group parenting programmes adds a new dimension of knowledge to the existing parenting programme literature. The study of the contribution of group factors to parenting programmes is

relatively limited, yet, arguably, important for practitioners involved in programmes both to recognise and understand. As well as the content of the programme, the group component is, arguably, equally important to outcomes for parents. Although small-scale, these findings offer a helpful contribution towards aspects related to programme implementation and evaluation.

11.1 Professional development

This study contributes understanding to educational psychology research and practice of the ways in which the reciprocal influence of group factors and individual factors within a group parenting programme may impact upon outcomes for parents. The current research brings a new perspective to educational psychology research and practice by applying the group component of a parenting programme in relation to a framework of change. Educational psychologists can be considered to have the skills and knowledge in relation to both the psychology of individuals and the psychology of groups as well as group supervision expertise in relation to the management of other practitioners. As a facilitator skilled in understanding the psychology of individuals and of groups, and with skills in facilitating change for individuals within groups, arguably, EPs can consequently create positive changes for parents through involvement in group parenting programmes.

From conducting this research I feel equipped theoretically and practically to become involved in the design, delivery and evaluation of parenting programmes. On a personal note, the findings have increased my awareness of the role that group factors can have upon facilitating change for individuals, something which I feel will be applicable in my future role as an educational psychologist working to facilitate positive change. For me, these findings also highlight the positive influence a multicultural group parenting programme can have towards an increased appreciation of culture and diversity. However, at the same time the study has also highlighted the ways issues related to culture can influence attendance at parenting programmes, access to resources and engagement within wider society. Striving to be socially inclusive whilst remaining

culturally sensitive within group parenting programmes involves challenges and provides thought for further reflection.

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