PARENTING PROGRAMMES AND SELF-EFFICACY: 
AN INVESTIGATION INTO THE PERCEIVED 
effectiveness of a programme in terms of 
change for parents and their children 

By 

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A thesis submitted to 
The University of Birmingham 
for the degree of 

DOCTORATE IN APPLIED EDUCATIONAL AND CHILD PSYCHOLOGY 

School of Education 
The University of Birmingham 
June 2009
DEDICATION

I would like to dedicate this thesis to my parents, Peter and Celia Davies who have supported and encouraged me throughout my life, with all the goals that I have pursued. Without their belief in me both personally and academically, I would not be who I am today, or have realised my potential.
ACKNOWLEDGEMENTS

Firstly, I would like to thank my Tutor, Dr Jane Leadbetter who has provided support to me throughout the doctoral program. Her enthusiasm, encouragement and belief in me, both personally and professionally has been highly valued, particularly, when faced with the practicalities and challenges of completing research within a real world context. I also have to acknowledge Jane for listening diligently to my various escapades over the years, which have provided some light relief during tutorials.

Secondly I would like to express my gratitude to the course director, Sue Morris, who has provided me with support and guidance throughout the three years, particularly when completing the write up of my research. Her dedication to the course and her students requires high praise.

I would also like to express my thanks to colleagues and friends at Dudley Local Education Authority. Their positive team spirit is a credit to the service and something I especially valued throughout my two years as a Trainee. I had the opportunity to expand my experiences and skills as an Educational Psychologist and I could list many individuals, who have contributed to the development of my professional practice. I would particularly like to thank Lisa Thistleth, Mary Scully, Jane Williams, Ruth Whaling and Howard Marsh, for directly supervising my work as a Trainee.
Finally, I would like to acknowledge all of my family and friends who have encouraged me to persevere throughout the three years. You provided me with emotional support, particularly when times were more challenging. Perhaps more importantly, you also ensured that I retained a value for the finer elements of life such as wine and well deserved breaks! I would like to say a particular thank you to my Mum, who typed the interview notes for my research and to Steven Bewick who reviewed part of my thesis. I would also like to thank Steve for his support and positive outlook on life that helped me to retain the momentum to finally complete my thesis.
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ABSTRACT

The importance of family relationships and the quality of parenting to the psychological and social well-being of children has been well documented. The government has emphasised the importance of schools providing support to parents. Parenting programmes are based on different psychological frameworks but the majority of programmes aim to alter parenting styles to resemble an “authoritative” parenting style, characterised by behaviours associated with positive parenting. Parent Self-Efficacy (PSE) is a specific domain within the general construct of self-efficacy. It is conceptualised by Bandura (1982) as the expectation caregivers hold about their ability to parent successfully. The literature review considers how PSE develops and the influence of PSE on parenting behaviours. The review also considers how parenting programmes alter PSE. The final section discusses the reliability of PSE research.

Further research is required, to establish whether schools can provide effective parenting programmes. The principal research question addressed by the current study was to establish whether a positive parenting programme, delivered at school, could facilitate long-term change for parents and their children. This research also aimed to establish whether levels of PSE were altered by the programme and the mechanisms that may have facilitated this change. Mothers who had participated in the parenting programme completed a semi-structured interview and results highlighted three main themes. The research concludes that the parenting
programme directly altered parenting behaviours and that PSE levels increased, leading to an indirect change in parenting behaviour. Mechanisms theorised to have facilitated this change in PSE, reflected those hypothesised by Bandura (1989).
CHAPTER 1

OVERVIEW

1.1 BACKGROUND

The importance of effective parenting was profiled in the two government green papers Supporting Families (Home Office, 1998) and Every Child Matters (DfES, 2003) that identified the support of parents and carers as one of four key areas for national development. This was followed by the publication of Every Parent Matters (DfES, 2007). The importance of family relationships to the psychological, social, physical and economic well-being of children has been well documented. A review of research by Desforges and Abouchaar (2003) concluded that positive parenting at home, had a significant, positive effect on children’s achievement and adjustment at school.

Research suggests that children who become disengaged as adolescents, primarily become disaffected at school and exhibit behaviour difficulties, increasing the likelihood that they will be excluded (Ghate and Ramella, 2002). Parenting programmes could therefore be a preventative intervention for some children who display difficult behaviour at school. With the extension of the Anti-Social Behaviour Act (Home Office, 2003) Local Authorities (LAs) are now being encouraged to apply
for parenting orders if children are permanently excluded or receive two fixed term exclusions within 12 months.

Parenting programmes are coordinated and run by numerous different agencies working with families; including social services, health services, voluntary organisations, youth offending teams and education. Some are tailored for individual parents, while others are delivered to groups. Programmes vary in their length of delivery with some lasting three months while others are just six weeks in duration. Due to this variation in provision, LA’s were given the responsibility of completing a “Parenting Strategy” document by March 2008, providing an audit of current provision and an action plan to address omissions in supporting families. There are currently 130 parenting programmes running in Dudley, 29 of these have been approved by the National Parenting Academy, these include the Family Links Nurturing Programme, Mellow Parenting, Strengthening Families 10-14 and the Triple P parenting programme.

The Educational Psychology Doctoral training programmes in England, collated LA’s opinion regarding research topics they considered a priority. Consequently, parenting programmes were identified as an area of national interest for Trainee Educational Psychologists (TEPs) to research.
1.2 INITIAL PLANNING OF THE RESEARCH

As a TEP in Dudley it was agreed by the Educational Psychology Service (EPS) that my research would contribute to the national research agenda in parenting. However, the EPS had few direct links with parenting programmes and so I started to attend the “Parenting Strategy” forum, a multi-agency group that were planning an audit of provision for parents across Dudley. It soon became apparent that support for parents was run by various organisations and aimed at different populations of parents, and it took a further six months to decide on the focus for my research.

Although parenting interventions work directly with parents, there is an assumption that through the programme, a child’s behaviour (at home and at school) will be indirectly affected by a change in parenting. Following initial scoping of the literature, it was apparent that the outcomes measured by previous research considered the outcomes for parents and children at home. As a TEP I planned to extend the literature and investigate whether there was a positive impact from parenting programmes for children in the school setting.

Through the strategy group I realised that a Pupil Referral Unit currently delivered a parenting programme, as part of their outreach service to mainstream primary schools. If a child is on the verge of exclusion, schools are able to request a parenting programme and the parents of that particular child are invited to attend. The programme could be considered as a preventative measure for children “at risk”
of becoming involved in later antisocial behaviour. The remaining parents that form
the group are recruited on a voluntary basis, through a letter sent to all the parents
at that particular school. The outreach team delivers the programme to
approximately 4-8 schools per term and parent attendance is good.

The programme run by the outreach service in Dudley is six weeks in duration and
follows the “Positive Parenting” publications and programmes manual (Douglas,
2005). The aims of the programme are to enhance parents' knowledge of positive
parenting strategies and to support them in using these strategies at home (See
Appendix 12 for details of the programme).

A discussion with the outreach service in Dudley indicated that for schools to
consider this a viable option to alter children’s behaviour, rather than the outreach
service working individually with a child, they required evidence to establish whether
the programme was effective and if any outcomes for families were sustained over
time. Further discussions with the outreach workers highlighted that in their view one
of the outcomes was that parent perceptions changed and they seemed to be more
confident. This reflected the theory of perceived self-efficacy proposed by Bandura
(1982). Perceived self-efficacy is a belief that can explain how motivation and
behaviours are affected by judgments that people make about their own capabilities
(Bandura, 1982).
1.3 SUMMARY OF THE LITERATURE REVIEW

The literature review considers the findings from Parent Self-Efficacy (PSE) research. More specifically it discusses how PSE could be developed and the influence of PSE on parenting behaviours, thoughts and emotions. The implications from research findings for parenting programmes is also considered. Although previous reviews have considered the impact of PSE on parenting, to the authors’ knowledge, this is the first literature review to consider how PSE research could inform parenting programmes. Additionally, this is also the first review to include studies that measure PSE as an outcome from parenting programme interventions, although research remains relatively limited. The findings from this review were presented to the EPS using a PowerPoint presentation (which is included in Appendix 10).

1.4 RE-NEGOTIATING THE EMPIRICAL RESEARCH

The principal research question for the empirical research was to consider whether a positive parenting programme, delivered at school, could facilitate long-term change for parents and their children. Previous research (in the literature review) indicated that levels of PSE had a central role in parenting. Therefore, the other questions addressed by the research aimed to establish whether PSE was altered by the programme and the mechanisms that could have facilitated this change.
The initial design for the research planned to use a pre and post intervention interview to gather the views of children, their parents and teachers regarding changes in behaviours, thoughts and feelings, with a follow up measure after the intervention period. This would have triangulated findings and increased the reliability of data. I also aimed to use the questionnaire (Tool to Measure Parenting Self-Efficacy) designed by Bloomfield and Kendall (2007) to measure parenting self-efficacy and provide construct validity.

This study highlights the difficulties of completing real-world research. Within the limited time frame that I was required to complete my research (eight months) the outreach team were unable to start any parenting programmes. Therefore I completed my empirical research with parents who had already attended the parenting programme, run by the outreach team, and conducted a long-term follow up study. The outreach team invited both Mothers and Fathers to attend the parenting programmes but only Mothers volunteered. Consequently, only Mothers were interviewed in the current research.

The research findings were disseminated through a summary report (see A11) to various professionals in the LA including; participating schools, the outreach team, the Pupil Referral Unit Head Teacher and the Manager of the Pupil Referral Units. For professional dissemination, this research could be published in The “Journal of Family Psychology”. This would be an appropriate journal as it contains articles that apply psychological theory to increase knowledge about families and interventions that may be effective in supporting them.
1.5 MY POSITION AS A RESEARCHER

1.5.1 Ontological and epistemological assumptions

Robson (2006) highlights reflexivity as an important consideration for a researcher. Rather than being objective, it is important for the researcher as an individual to acknowledge their own position and how this may have influenced the research. An individual's position about their reality (ontology) and the basis of that knowledge (epistemology) affect how a person sees the world in relation to notions such as truth, belief and justification (Usher, 1996). The theoretical position taken by the researcher influences the research design and the method of reporting (Usher, 1996).

My ontological assumptions as a researcher follow a nominalist view; that reality is complex and multi-layered, created by the individual (Phillips and Burbules, 2000). Following this ontological assumption my epistemological position is that knowledge should be considered as personal, exclusive to that individual and subjective, rather than hard, real and transferred in a concrete form (Phillips and Burbules, 2000). My epistemological position follows the anti-positivist or interpretive paradigm and the researcher therefore aims to “understand the subjective world of human experience” pg. 22 (Cohen et al, 2000).
My epistemological position influenced the conceptualisation and design of the study. As an interpretive researcher considers situations as fluid and changing rather than fixed and static, there is an assumption that events and behaviour evolve over time (Schwandt, 2002). My principal research question aimed to understand whether the programme had altered parents’ behaviour and whether this had changed over time.

An interpretive researcher typically uses methods that aim to understand the direct experience of people within a specific context and the researcher interacts with their participants (Schwandt, 2002). Following an interpretive paradigm, I aimed to understand the social constructions of meaning and knowledge. Semi-structured interviews were used to construct the multiple “realities” of individual parents. Also, data was analysed using thematic analysis, interrogating the data to understand the social contexts and latent themes (Braun and Clarke, 2006).

1.5.2 Vulnerability of the sample, power imbalance and bias as a researcher

Cohen et al (2000) suggest that interviews should be considered as social situations rather than simply a method of data collection. Within this research there was a power imbalance that was difficult to address, as I was a professional who was asking questions about a subject that could potentially be a sensitive issue for parents. However, parents volunteered to participate in the research and were informed about the aims prior to the interview. The power imbalance was also
reduced because of my position as a Trainee rather than being a qualified Educational Psychologist. I was also independent to the parenting programme.

The parents who participated in this research had volunteered to attend a parenting programme; most reported this was because they were having difficulties with their children at home. As a professional it was important for me to demonstrate empathy and also consider how parents could access further professional support if difficulties with their children had persisted. It was also important for me to consider my actions as a professional if parents disclosed abusive parenting behaviour that put their children at risk. If this occurred I would have stopped the interview and informed parents that I would need to report the information to Social Care.

The outreach team from the pupil referral unit considered the parenting programme an important contribution to their service to schools. They were understandably biased in their hopes and expectations regarding the outcome of the empirical study. They hoped findings would indicate that the programme was effective for parents and their families, as this would raise their profile in schools. As a researcher I was aware of their position and I ensured that all comments (positive and negative) from the parents were represented in the findings. I also included the number of parents (see Section 3.5) who made particular comments to ensure that my discussion remained balanced. Therefore I reduced the influence and potential bias of the outreach workers' expectations towards the research findings.
CHAPTER 2

THE THEORY OF PARENT SELF-EFFICACY: A REVIEW OF HOW IT EFFECTS PARENTING AND UNDERPINS PARENTING PROGRAMMES

2.1 ABSTRACT

Positive parenting at home has a significant, positive effect on children’s achievement and adjustment at school. Although programmes are based on different psychological frameworks it can be argued that the majority of programmes aim to alter parenting styles to resemble an “authoritative” parenting style that is characterised by behaviours associated with positive parenting. Perceived self-efficacy (SE) is a belief that can explain how motivation and behaviours are affected by judgements that people make about their own capabilities (Bandura, 1982). Parent Self-Efficacy (PSE) is a specific domain within the general construct of self-efficacy. It is conceptualised as the expectation caregivers hold about their ability to parent successfully.

This literature review considers how PSE develops and the influence of PSE on parenting behaviours. Research indicates that high levels of PSE are associated with parenting behaviours that characterise positive parenting and are subsequently linked to positive child outcomes. Parents with high PSE are also likely to have a more positive emotional state and engage in problem focussed coping strategies,
rather than be emotion focused. This literature review also considers how PSE develops by reviewing research that considers how a child’s age or characteristics such as temperament affect PSE. Intervention research is also reviewed to consider whether PSE can be increased through parenting programmes. Research indicates that increases in PSE may be a potential measure to indicate whether a parenting programme is effective. There is a final section to discuss the reliability of PSE research.

2.2 RATIONALE FOR PAPER

The previous literature reviews that considered the role of parent self-efficacy (PSE) in parenting were completed by Coleman and Karraker (1998) and Jones and Prinz (2005). Coleman and Karraker (1998) based their review on 18 studies from 1995 onwards, related to PSE and the role this had in parenting. Jones and Prinz (2005) considered literature from 1995 onwards and included 47 studies that considered the extent that PSE could be related to parental and child adjustment.

This review considers how PSE develops and the influence it has on parenting behaviours. Whether PSE levels can subsequently be altered by interventions is also reviewed and the impact this has on parenting behaviours.
Therefore, the articles reviewed were divided into three broad groups to consider three questions:

- How does PSE affect parenting?
- When and how does PSE develop?
- Can parenting programmes alter PSE?

The bibliographic database PsychINFO and the British Education Index, were searched for the years 1987 to 2008, specifically looking for articles on PSE and how this influences parenting. These articles were also consulted to identify other articles that were referenced, which may not have been found when searching the databases. Due to the relatively small quantity of research all relevant journals have been included in the review.

This review also contains an additional section, to consider the methodological limitations of PSE research which has mostly utilised correlation methods to establish relationships between parenting and PSE rather than causality. PSE is arguably an emerging field and therefore evidence of links between particular parenting behaviours and PSE are relatively limited as is the direct application and measurement of PSE within interventions such as parenting programmes.
2.3 BACKGROUND AND CONTEXT OF PARENTING PROGRAMMES

The importance of family relationships to the psychological, social, physical and economic well-being of children has been well documented by a large body of research. A review by Desforges and Abouchaar (2003) concluded that positive parenting at home had a significant, positive effect on children's achievement and adjustment at school. The importance of parenting to child wellbeing has resulted in a large variety of parenting programmes that aim to educate and enhance parenting skills. A review of international evidence for parenting support by Moran et al (2004) identified the target population of parents varying from those with newborns (with no specific difficulties) to the parents of children defined as within a clinic population (with conduct disorder or attention deficit hyperactivity disorder).

The two green papers Supporting Families (Home Office, 1998) and Every Child Matters (DfES, 2003) identified the support of parents and carers as one of four key areas for national development. Attention was also focussed on the role of parenting in preventing anti-social behaviour and offending in young people. This was followed by the introduction of parenting orders issued by magistrates in the year 2000 (Home Office, 2006). These controversially mandated the parents of young offenders and frequent truants to receive parenting education. The Anti-Social Behaviour Act (Home Office, 2003) extended this to allow Local Authorities (LA’s) to apply for Parenting Orders if children are permanently excluded or receive two fixed
term exclusions within 12 months. The introduction of the *Respect Action Plan* (Home Office, 2006) retained government focus on the role of parents with additional funding being provided for LA’s to run parenting programmes and the formation of a “National Parenting Academy”.

Parenting programmes are coordinated and run by numerous different agencies working with families such as social services, health services, voluntary organisations, youth offending teams and education services. Some are tailored for individual parents while others are delivered to groups. Programmes vary in their length of delivery with some lasting 3 months while others are just 6 weeks in duration. Due to this variation in provision LA’s were given the responsibility of completing a “Parenting Strategy” document by March 2008, providing an audit of the current provision and an action plan to address omissions in supporting families.

In practice the numerous parenting programmes, some of which are manual-based, differ in the quality and quantity of research evaluating their effectiveness. Some LA’s have addressed this issue by choosing one particular programme such as the manual based Triple P-Positive Parenting Programme (Sanders et al, 2003) that incorporates five levels of intervention of increasing intensity, for parents of children from birth to age 12. More recently the programme has been extended to include young people up to 16 years. However, a review of parenting programmes across 9 LA’s raised concerns about the dominance of the evidence based manual parenting
programmes as other programmes addressing local needs were just as effective (Lamb et al, 2007).

This paper argues that the rich tapestry of parenting programmes that are available in some authorities perhaps currently lack an evidence base. However, they are actually very effective for particular populations of parents or groups of children. Further research and evaluation to identify distinct elements that make different programmes more or less effective is required, prior to a decision allocating LA resources to support a particular programme. Also, the majority of research forming the evidence base for many programmes has been completed in the United States; a country with arguably a different context, society and culture both in education and family support to the United Kingdom. If decisions in practice are based on a currently limited research base from the United Kingdom context, there is a high risk of potentially effective programmes becoming lost.

Although programmes are based on different psychological frameworks it can be argued that the majority of programmes aim to alter parenting styles to resemble an “authoritative” parenting style (e.g. Maccoby and Martin, 1983). This has been linked to optimal psychological and social outcomes for children. Authoritative parenting is characterised by a parent being emotionally responsive and the endorsement of consistent positive parenting strategies. Alternatively, permissive or authoritarian parenting is often coercive and irritable with reduced communication and consistency (Maccoby and Martin, 1983).
Parenting programmes are based on various different psychological theories and many have elements drawn from a number of paradigms. Different reviews categorise these slightly differently but broadly they follow behavioural, cognitive, emotional or mental health domains of psychology (e.g. Bunting, 2004, Moran et al, 2004).

Moran et al (2004) argue that the majority of parenting programmes follow behavioural psychology to a certain degree as programmes aim to teach parents effective skills and reduce the quantity or intensity of inappropriate behaviour. Some programmes are specifically based on social learning principles such as the manual-based, Webster-Stratton (2001) video modelling. Relationship-based parenting programmes promote listening and communicating skills, considering behaviour in the context of relationships (e.g. positive parenting programmes) rather than simply aiming to alter behaviour (Bunting, 2004).

Parenting programmes that are based on cognitive behavioural psychology aim to alter parents’ thought processes about themselves and their children; this could focus on general confidence or perceptions of their own competence as a parent. Rather than the practice of specific skills these programmes promote reflection and self evaluation, (Bunting, 2004, Moran et al, 2004).
Although some programmes specifically target attitudes and beliefs of parents, this paper argues that, for behaviour change to be sustained over a longer time period, all parenting programmes aim to alter the beliefs of the parent. To understand how and why particular elements of parenting programmes are effective, it is necessary to consider the underlying psychological principles and research that has been completed about the thoughts and beliefs parents retain about their own behaviour and their children. This could then be used to inform parenting programmes.

2.4 SELF-EFFICACY THEORY

Perceived self-efficacy (SE) is a belief that can explain how motivation and behaviours are affected by judgements that people make about their own capabilities (Bandura, 1982). SE judgements influence the choice of activity that a person engages in and the degree of competence a person feels they have to manage future situations (Bandura, 1982). People with high SE in a particular domain think, feel and act differently from those people who have low SE (Bandura, 1982, 1989). The former group are more likely to persevere when faced with challenges, whereas those with doubt about their own capabilities are more likely to give up (Bandura, 1982). SE also influences thought patterns and emotions through the anticipation of events or the result of events.

Bandura (1998) proposed that efficacy beliefs vary across domains of functioning rather than representing an undifferentiated trait. Parent Self-Efficacy (PSE) is a
specific domain within the general construct of self-efficacy. It is conceptualised as the expectation caregivers hold about their ability to parent successfully. Bandura (1989) suggests that it incorporates levels of specific knowledge related to the behaviours involved in child rearing and the degree of confidence in one’s ability to carry out these behaviours.

Various studies have investigated the different effect PSE has on parenting. Coleman and Karraker (1997) reviewed PSE research and reported it was “relatively sparse”. Although 12 years have passed, the number of studies has not substantially increased.

2.4.1 The contribution of self-efficacy theory to parenting programmes

Although few parenting programmes focus on directly increasing self-efficacy, this paper argues that the majority of parenting programmes are underpinned by SE theory and use many of the techniques theorised to increase SE. The Webster-Statton (2001) manual based parenting programme is explicitly based on social learning theory and the success of this programme may therefore be due to increased PSE levels. Although other programmes claim to draw from other theoretical frameworks, they all use the mechanisms through which SE is increased.
The mechanisms will be defined below and then applied to the Triple P parenting programme as an example. This manual based programme is widely effective and claims to draw on social learning models, family and behaviour therapy, developmental research, information processing research and cognitive behavioural therapy (Sanders et al, 2003). However it is likely that the mechanism which makes this programme successful for parents is, at least in part, increased levels of PSE.

Bandura (1989, pg 733) proposed various mechanisms through which SE could be increased including:

- the experience of personal success at particular tasks;
- observing people similar to oneself succeed by persevering;
- social persuasion that one possesses the capabilities to succeed; and
- an increased awareness of bodily states and various forms of somatic information.

It is apparent that parenting programmes, such as Triple P use these techniques, based on social learning theory during sessions. Personal success in a particular situation, such as managing a child’s behaviour, increases perceived SE whereas repeated failures at managing behaviour are likely to reduce it, particularly if these instances do not reflect lack of effort or external circumstances. The majority of parenting programmes such as Triple P provide information and support for parents to attempt new strategies. These should hopefully lead to increased personal
success with parenting that may then lead to increased PSE. Parents are also given homework tasks based on the session content.

Bandura (1989, 1996) also suggested that other sources of information increase SE. Observing others manage difficult child behaviours successfully can make the observer feel that they have comparable capabilities. Modelling supports parents to learn effective strategies and emphasises the predictability of the environment. Parenting programmes, such as Triple P, promote the discussion of different strategies that parents have attempted themselves, allowing parents to learn from one another. Also most programmes such as Triple P utilise role play or video tapes as a teaching method to model positive parenting behaviours.

Bandura (1989) also proposed that verbal persuasion comprises a further influence on SE (Bandura, 1989) and reinforces the belief in parents that they have the parenting capabilities to succeed. Using persuasion to increase (even if these are temporary) SE may then encourage the use of particular parenting strategies which subsequently increase SE further, through personal success. The parent group and leader are likely to provide verbal reassurance and persuasion to support one another to attempt new strategies.

Parenting programmes, such as Triple P, also provide an opportunity for parents to become more aware of their own feelings and how these may influence their behaviour. People consider negative arousal states such as anger or stress to be
associated with failure, therefore they are more likely to expect success when they are feeling calm and positive (Bandura, 1982). Parenting programmes arguably enhance this awareness and reflection.

Bandura (1989) also found that SE affected a person’s cognitive processing, with different profiles characterising people with high and low SE. Bandura (1989) suggested that SE and anticipatory cognitive simulation (defined below) have a bidirectional effect. Therefore SE levels may affect cognitive processes. Alternatively, the cognitive process may affect SE. It could also be argued that other cognitions (defined below) are also bidirectional. If there is a bidirectional effect between cognitions and SE then, if cognitions can be altered, SE may subsequently increase. The majority of parenting programmes aim to alter the cognitions of parents; therefore SE within the parenting domain may increase.

Analytic thinking considers how people predict and control events (Bandura, 1989). Hypotheses are generated from predictive factors and these are then tested through actions. The person is then required to remember what actions produced a positive outcome and consider how to modify their actions. People with high SE believe strongly in their problem solving abilities and remain efficient when faced with a failure. However, those with low SE are erratic in their strategies. In my view, a parenting programme facilitates the development of these positive problem solving skills.
This correlation is linked to anticipatory cognitive simulations when people with high SE visualise success and rehearse solutions to potential difficulties. Whereas those people with low efficacy visualise failure and dwell on how things can go wrong. These thought processes undermine motivation and performance. Cognitions and actions can also potentially be modified through future goal setting and motivation. Those people with high perceived SE set higher goals and are more likely to maintain their commitment towards these goals. Parenting programmes such as Triple P, arguably provide support for parents by increasing their capacity to problem solve, rehearse potentially useful strategies and persevere when a strategy is unsuccessful.

2.5 HOW DOES PARENTING SELF-EFFICACY AFFECT PARENTING?

In this section, research that considers how parenting behaviours are affected by PSE is reviewed and the implications from this research for parenting programmes are discussed. High levels of PSE are associated with parenting behaviours that characterise positive parenting and are linked to positive child outcomes. Parents with high PSE are also likely to have a more positive emotional state and engage in problem focussed coping strategies rather than be emotion focussed. This paper also reviews research that is beginning to highlight a more complex interaction between the environment, PSE and parenting.
2.5.1 The relationship between parenting behaviours and PSE

Although PSE has been related to parenting, there has been less research specifically identifying the parenting behaviours or situations in which parents with low or high PSE react differently to their children (for a discussion regarding the methodology of measuring PSE see Section 2.8) Researchers have also begun to theorise about the function of PSE and how this influences behaviour.

Various research has associated high PSE with positive parenting behaviours. Research has mostly focussed on how discipline techniques alter depending on PSE level. Those parents with low PSE reported increased difficulties with child behaviour and they used more aversive discipline techniques (Day et al, 1994). These authors explained their results by suggesting PSE mediated between the discipline strategies utilised by parents and child behaviour difficulties.

Similar results by Gross et al, (1999) and Tucker et al (1998) suggested that parents with low PSE were more likely to use inconsistent and harsher discipline strategies. However, causality could not be assumed as these children were also more likely to engage in disruptive behaviours than a control group; therefore parents could simply be responding to the more difficult behaviours. Gross et al (1999) suggested this finding could highlight a reciprocal but coercive relationship between these parents and their children. It is difficult to determine whether parent behaviour causes
children to become more disruptive or whether the difficult behaviour causes parents to respond with harsher discipline strategies.

There has been limited research about how PSE affects the parenting of adolescents. High PSE is related to positive adolescent reports of their parents monitoring and their responsiveness. (Bogenschneider et al, 1997). Adolescents with parents’ who had high PSE levels considered their parents to engage in more effective parenting practices. Confirming these results Shumow and Lomax (2000) found that high PSE was associated with higher levels of parental involvement and parental monitoring.

More recent research has begun to consider other task-specific domains of parenting than discipline. Coleman et al (2002) researched parenting behaviours more specifically. They found that parents with high PSE had children who were less difficult and were more likely to respond to child misbehaviour, alter the environment to prevent misbehaviour and were less likely to reinforce misbehaviour. Whereas those with low PSE reinforced negative child behaviour and responded negatively to a child’s difficulty in progressing on a task.

Similarly, Sanders and Woolley (2004) considered various task-specific domains of parenting in different situations such as shopping or being on the telephone and behaviours such as a child acting defiantly or having a tantrum. They found that parents of children with behavioural difficulties had lower PSE across all but one
task specific domain than a control group. Also low PSE significantly predicted parent “over activity” (harsh discipline) and laxness (permissive and inconsistent discipline).

2.5.2 Summary and implications for parenting programmes

Research that exists is broadly consistent in suggesting that negative discipline techniques and parenting behaviours associated with detrimental child development are associated with low PSE. Some authors such as Teti and Gelfand (1991) use Bandura’s explanation of SE to explain their results by suggesting that PSE assumes a mediating influence between parenting competence and knowledge. They found significant relations between all the independent variables (including parenting behaviour, parent emotions and infant temperament) and the dependent variable (PSE). However, if a variable is mediatory then when it is statistically controlled, relations between the independent (e.g. maternal depression and infant temperament) and dependent variables (e.g. PSE) are reduced. When PSE was controlled for, parenting behaviour was not related to maternal depression or infant temperament. This indicates that parent emotions and infant temperament have an indirect influence on parenting behaviour through PSE. Whereas PSE is directly related to parenting behaviour.
Research into parental behaviours supports this theory but research outlined later in this paper indicates that a more complex relationship is more likely. Perhaps further research into parental cognitions and whether these affect PSE levels will provide more information. Parents thoughts about their own behaviours and whether these are successful are likely to effect PSE and may provide information about how or if PSE mediates subsequent behaviour. Further research into the cognitions of parents may also provide information about how PSE develops, how it influences behaviour and whether it changes over time. Further research is also required to determine how PSE is related to behaviours that may be less observable and more complex such as sensitivity, empathy and responsiveness.

If PSE assumes a mediating role between knowledge and behaviour, as proposed by Bandura (1989), then if PSE can be successfully altered, it may change subsequent behaviour. This is arguably supported by intervention research that has successfully increased PSE through parenting programmes (see Section 2.7). Research may indicate that the content of parenting programmes require tailoring in terms of information and parenting strategies depending on PSE levels. Further research is required to inform parenting programmes about parenting behaviours that parents use who have medium levels of PSE because again programme content may not be appropriate.
2.5.3 The relationship between PSE and emotions

The emotions of adults are influenced by how children behave. Additionally, different emotions have been shown to elicit different behavioural responses in both adults and children. Therefore the emotional state of the parent is likely to influence their subsequent response to their children (Lovejoy et al, 2000). Research has investigated whether high or low PSE is associated with different emotions. This has mainly focussed upon the relationship between PSE and negative emotions such as depression, although no causal link has been established. Mothers who have depression may ruminate or worry and may therefore be less attentive or responsive to their children’s needs. Mothers who are depressed are also more likely to be irritable and therefore respond more negatively to difficult child behaviour (Lovejoy et al, 2000).

Teti et al (1996) used a PSE questionnaire and observations to complete a longitudinal study with 86 mothers, 48 of whom were diagnosed with depression. They found that when PSE levels were statistically controlled for (see Section 2.5.6 for a full explanation) maternal depression did not exert a direct effect on maternal behaviour. This indicates that PSE may exert a direct effect on levels of depression or vice versa. PSE levels in turn may then mediate maternal behavioural competence.
Gondoli and Silverberg (1997) extended this research with adolescents and mothers from a typical population. They found that less competent parenting and parental emotions were mediated by PSE. Mothers with high levels of emotional distress were more likely to have low PSE and engage in less positive parenting strategies than those parents with high PSE. As this was a non-clinical sample it suggests that individual differences in mood may affect PSE, or perhaps PSE levels contribute to different moods. However, as there was no direct comparison with a clinical sample, it can not be concluded that parenting behaviours significantly differ depending on maternal emotion levels, although this has been evidenced in other studies.

Although PSE exerts a mediating effect on emotions, the role seems complicated. Kochanska (1990) found that depressed mothers (36 participants) were more likely to respond negatively to their children than mothers who were not diagnosed with depression (20 participants). However, he also found this did not necessarily relate to their beliefs about positive child rearing. Therefore, depressed mothers realised that authoritative parenting resulted in more positive child outcomes and they realised which parenting behaviours would be more productive such as setting clear boundaries and attending to positive behaviour. However, their behaviour did not reflect these beliefs as they continued to respond negatively to their children. Therefore endorsement of authoritarian parenting styles does not necessarily reflect beliefs. Perhaps emotional state lowers PSE levels and prevents parents from engaging in practices that they know are productive to children.
Supporting this theory, Pridham and Chang (1992) suggest that parents with high PSE may be less preoccupied with cognitions and emotions that are unrelated to their children, allowing them to focus on how to facilitate their child’s development. They are thus able to respond with behaviours that reflect beliefs regarding authoritative parenting, whereas parents with low PSE may be preoccupied with managing their own thoughts and emotions. Such parents are more likely to react with parenting behaviours that do not necessarily reflect their beliefs about positive parenting.

This theory supports Coleman and Karraker (1998) who found that high PSE was associated with a preference for problem focused coping. Therefore parents responded with a strategy or behaviour that addressed the incident or problem. Whereas low PSE was associated with emotion focused coping where the parent response is based on their emotions at the time of the incident. Similarly, Wells-Parker et al (1990) found that parents with low PSE had a passive coping style and high levels of stress.

2.5.4 Summary and implications for parenting programmes

The research summarised above suggests that emotional state may lower PSE, which may in turn, increase negative parenting behaviours. Alternatively, low PSE may contribute to a depressed mood in parents. They may then be more likely to use an emotional-coping style and their behaviour will therefore reflect their
emotional reaction to events rather than a more productive, problem-solving approach. This emotional response to situations may not reflect their beliefs about positive parenting. Research has focussed on how mothers’ emotions are affected by PSE or vice versa. Further research is required to consider whether emotions exert a different effect on PSE in fathers.

Parenting programmes would benefit from further research considering how depressed mood, even within the general population, can indirectly affect parenting behaviours. It may be that depression exerts an effect on PSE through altering cognitions that subsequently change parenting behaviours.

Parenting programmes arguably require a different focus if they are targeting parents who are depressed. There may need to be a focus on how to alter emotionally focussed coping to problem-focussed coping. There may need to be less input on parenting knowledge and appropriate parenting behaviours, particularly as research indicates these parents may have knowledge conducive to positive parenting.

2.5.5 Environmental effects and PSE

Research is beginning to highlight that the environment and the situations parents find themselves within affect PSE. Coleman and Karraker (2000) found that mothers with higher incomes also had higher PSE levels. Authors suggest that income level
could prevent certain parenting stresses through the provision of material goods and outings for the children and through support from baby sitters.

Researchers also found that more highly educated mothers were more likely to have higher PSE than those who were less well educated. Authors suggest the former group were more likely to have a wider knowledge of child development and effective parenting strategies. However, research again highlights a more complex interaction. Teti and Gelfand (1991) again found that when socio-demographic status was controlled it did not directly relate to maternal competence but was related to PSE. This suggests that PSE levels are affected by socio-demographic status and then may exert an effect on parenting skills.

Extending this finding, Coleman and Karraker (2003) suggested that in circumstances where child rearing occurs in advantaged circumstances (e.g. stable finances, well-educated parents who are psychologically stable) PSE may assume a more peripheral role. Coleman and Karraker (1997) suggest that PSE is likely to be a predictor of parenting behaviour during situations that parents find stressful. Therefore, when parents are facing adverse living conditions high PSE could assume a central role in facilitating child development. Similarly, Shumow and Lomax (2000) found that environmental circumstances contributed to PSE. Those parents in more difficult neighbourhoods had lower PSE. They also found that PSE mediated the effects of living in a less advantaged neighbourhood.
Eccles and Harold (1993) developed a model to consider how neighbourhood quality influenced parental beliefs and behaviours. They proposed that parents with lower socio-economic resources frequently experience greater stress and more difficulty allocating time, energy and resources to parenting. Furstenberg (2003, cited in Ardelt and Eccles, 2001) suggested that parents in these circumstances with high PSE, are more likely to modify the environment to support their child’s development, through the provision of higher supervision, chaperoning in difficult neighbourhoods or relying on trusted neighbours to assume supervision. However, those parents with low PSE were unlikely to promote their child’s development through the modification of their environment.

Figure 1: Conceptual Model (Ardelt and Eccles, 2001)
Ardelt and Eccles (2001) proposed a conceptual model to theorise how the environment and Bandura's theory of SE influence child development (see Figure 1). They proposed a reciprocal link between PSE, positive parenting strategies and child development both psychologically and academically. This interaction varies within the context of different environments or family contexts. Ardelt and Eccles (2001) also suggested that PSE beliefs could also exert a direct effect on children's developmental success. Parents with high self-efficacy are likely to serve as positive role models and children may internalise these attitudes and beliefs independently from observations about new parental behaviour. In difficult environments, parents with low PSE are likely to become overwhelmed by the parenting task. If there are multiple adversities, such as socio-economic difficulties and lack of family support, parents may not attempt to influence child behaviour or their environment unless they have high PSE levels.

Although there are theoretical arguments that consider how environments may influence PSE and therefore affect parenting behaviours, there remains a lack of empirical evidence. Coleman and Karraker (1997) highlight the “intergenerational transmission of ineffective parenting”. They suggest that it is unlikely that many parents in socio-economically disadvantaged areas would develop high PSE. This could partly be due to their own experiences as children and the various circumstances associated with lower socio-economic groups. Also, there are likely to be limited situations that facilitate the learning of positive parenting skills.
2.5.6 Summary and implications for parenting programmes

Research indicates that the environment exerts an effect on PSE, although this is complex and different for each individual. Frameworks such as the conceptual model (see Figure 1) have begun to extend the theory of PSE to consider external factors to the parent-child relationship. Parenting interventions attempting to target parents in difficult socio-economic circumstances may require a different focus to those programmes that target more affluent groups.

It would be interesting for future research to establish whether parents in lower socio-economic groups experience more of the factors that lower PSE such as depression (see Section 2.5.3) or difficult child characteristics (see Section 2.6.2). It may be that individuals experiencing particularly complex circumstances require individual rather than group parenting programmes to raise PSE. However, research highlights PSE as a protective factor, so it may be particularly beneficial for this group to have an opportunity to attend a parenting programme.
2.6 WHEN AND HOW DOES PSE DEVELOP?

This paper charts an increasing association between PSE and parenting, although the picture is perhaps more complex when the different strands of research are considered together. If parenting programmes are to alter PSE and utilise this research it seems pertinent to consider how PSE may develop. Research has considered the effects of child age and characteristics such as temperament on PSE, this is reviewed below.

2.6.1 Age of the child

Research across age ranges associates high PSE with positive parenting outcomes. Coleman et al, (2002) suggest that parents need to develop new skills to facilitate a toddler’s development into an infant. This can be difficult as toddlers aim to become autonomous by actively exploring their environment while becoming familiar with limitations imposed by others. Coleman and Karraker (1997) report that different PSE measures may be required for parents with typically developing children of different ages as the parent role changes as children become older. The parenting of adolescents, for example, assumes a monitoring role rather than direct supervision (Shumow and Lomax, 2002).
Teti and Gelfand (1991) used observational studies with parents of 3-13 month old infants. They found that high PSE correlated with observed positive parenting behaviours. Similarly, Conrad et al (1992) found that maternal confidence was significantly related to interactions between mothers and toddlers but only when their knowledge of early child development and parenting skills were considered together. Therefore, confident parents who were most knowledgeable about parenting and child development demonstrated more positive toddler-mother interactions.

This research with younger children could indicate that PSE is established early in parent-child relationships. This may indicate that general levels of SE could predict subsequent PSE levels. This finding is important, as interventions that aim to alter PSE may be more effective as preventative or early intervention strategies. Additionally, research by Conrad et al (1992) indicates that it is important for parenting programmes to increase parental knowledge of child development as this and high PSE are necessary for positive parenting behaviour.

Mash and Johnston (1983, cited in Coleman et al, 2002) found that as difficult children became older there was an association with a decline in PSE, whereas the PSE levels of parents with typically developing children increased. Bogenschneider et al (1997) found that adolescent sons of parents with high PSE reported less delinquent behaviour whereas daughters reported they were more likely to approach their mothers than peers regarding their difficulties.
Further research is necessary to determine whether PSE alters as children become older independently of the parenting challenges they present. If PSE levels are influenced by child characteristics this could indicate that parenting interventions are particularly necessary for those parents who perceive their children as “difficult”. Some research has considered whether difficult child behaviour may influence PSE. However, this is correlational and it is therefore difficult to establish whether PSE levels cause difficult child behaviour, or whether the latter causes the former. It is possible that, rather than being mutually exclusive, a bidirectional or reciprocal relationship occurs with difficult child behaviour reducing PSE levels. This in turn, may alter parenting behaviours that escalate difficult child behaviour, with this relationship developing into a repetitive cycle.

### 2.6.2 Child temperament

Mothers with low PSE levels are also more likely to have children with difficult temperaments or behavioural difficulties. Gross and Tucker (1995) found that mothers with low PSE were more likely to report that their children had higher levels of conduct difficulties. As low PSE has been shown to affect parenting behaviour towards toddlers, one could argue that low PSE may contribute to child difficulties indirectly through its impact on parenting skills. Coleman and Karraker (2000) found that the child characteristic most consistently related to mothers' PSE beliefs was their perception of their child’s emotionality. Mothers who rated their children with high emotionality (more difficult) also had lower PSE levels. These mothers may
experience less success in parenting and this, in turn, may lead to reduced PSE and less attempts to manage their children’s behaviour.

Extending this research, Coleman and Karraker (2003) used questionnaires to establish PSE levels and also observed parents in a laboratory setting using the Crowell procedure. They found that parents with high PSE were more likely to have children who showed high levels of “compliance, enthusiasm and affection” towards their mothers. Also, children were likely to have low levels of negativity and were less likely to show “mother avoidance” (as assessed during the Crowell Procedure and BSID-II Mental scale scores). A limitation of this study was the contrived nature of the laboratory observations. If observations had occurred when children were tired or bored, parental behaviour would perhaps have been different and the relations between PSE and toddler behaviour might have appeared more pronounced in consequence of these situational factors.

Coleman and Karraker (1998) suggest that parents construct cognitive appraisals regarding future successes and failures. As proposed by Bandura (1989), individuals with low PSE anticipate future failure, while those with high PSE expect future success. Coleman and Karraker (1998) suggest that focussing on limitations detracts from the actual task of parenting. A preoccupation with these negative cognitions may therefore prevent parents from engaging in problem focussed coping, similar, to the impact of negative emotions on PSE (see Section 2.5.3). Low
PSE may therefore increase the likelihood of parents predicting future failure across various situations.

Although the association between PSE and children who exhibit difficult behaviour is relatively well supported by research, the actual mechanism through which the impact of PSE is mediated seems more complex. Teti and Gelfand (1991) found that difficult behaviour in infants did not directly relate to maternal behaviours when PSE levels were statistically controlled (see Section 2.5.6) but that characteristics were directly linked to PSE. Therefore authors concluded PSE levels mediates the effects of child characteristics. Therefore, a difficult infant only exerted an effect on parenting behaviour if PSE was low. Mothers with high PSE and a difficult child had successfully established a good relationship with their infants. However, those parents with low PSE withdrew from their infants. This research indicates that that high PSE levels may reduce difficult child characteristics through positive parenting behaviours.

Interestingly, Coleman et al (2002) ran a further analysis of their findings, separating toddlers defined as either having a high (more difficult) or low (easygoing) temperament. The latter group were associated with high PSE and the positive parenting behaviours outlined above. Interestingly, there were no significant associations between parenting behaviours (outlined above) and low PSE if the children were more difficult.
A similar pattern of results was found by Corapci and Wachs (2001 cited in Coleman et al, 2002) with verbal stimulation and responsiveness associated with high PSE and less difficult children. However, there was no relation between low PSE, parenting behaviour and the more difficult children. Coleman et al (2002) suggest this could indicate that child temperament may have a moderating effect on PSE. It could indicate that other factors than just PSE exert an effect on parenting behaviours of difficult children. The identification of these factors is required if the effects of PSE are to be understood. Research on the wider environment (see Section 2.5.5) and the subsequent effect this may have on parenting is therefore required and may provide a more detailed understanding.

2.6.3 Summary and implications for parenting programmes

Research with young children indicates that PSE may develop early through parent-child interactions. If this is the case, early intervention may be required for parents that have low PSE. When considered in light of research about emotions and their effect on PSE, mothers with post-natal depression are likely to be particularly vulnerable. Although research is limited, adolescents with mothers who have high PSE levels seem to have a more positive relationship. Further research is required to consider whether PSE alters as children become older and the challenges of parenting change.
A more difficult child temperament is associated with low PSE levels. PSE has been proposed as both a mediator and moderator of child characteristics. Research indicates an association between mothers with high PSE, children without difficult behaviours and positive parenting behaviours. However, this association is more complex for children with difficult behaviour. Therefore the effect of other factors, such as the situation or environment require further consideration (discussed in Section 2.5.5).

Different parenting programmes are arguably required for the parents of differently aged children. The content and skills that a programme aims to teach parents should alter as children become older. Perhaps the parents of children with behavioural difficulties require a different programme. One that aims to address other difficulties the parents may have, that could be affecting their parenting behaviour rather than simply raising PSE levels. Perhaps interventions for these more complex cases require one to one or a smaller group intervention.

2.7 CAN PARENTING PROGRAMMES ALTER PSE?

2.7.1 Research into PSE and parenting programmes

SE research has grown largely from an experimental paradigm. More recently research has begun to study these concepts in real life situations. Many researchers have concluded, from their research into parenting and PSE that interventions
increasing PSE may lead to positive changes in the behaviour of parents that may in turn, improve outcomes for children (e.g. Coleman and Karraker, 2000, 2003, Jones and Prinz, 2005). Coleman and Karraker (2000, 2003) also suggest that intervention research may provide information about causality for PSE and parenting behaviour. Research remains relatively limited but some parenting programmes have measured whether PSE has increased as an intervention outcome (this is discussed below).

The behavioural parent training programme developed by Webster-Stratton (1993) is explicitly based on Bandura’s social learning theory. Videotapes provide modelling of positive parenting strategies and group discussions facilitate how knowledge and skills can be utilised. The process is considered collaborative and the facilitator aims to elicit ideas, feelings and understanding from the parents. This “no-blame” approach is thought to increase PSE and self-sufficiency.

Gross et al (1995) completed a 10 week parenting programme with 46 parents of two year olds. Findings suggested a significant increase in PSE, decreases in parenting stress and increases in positive toddler-parent interactions. Gross et al (1995) found that PSE was significantly increased through the delivery of this intervention for middle class families of two year olds in comparison to a control group. There was also a reduction in parent stress and an increase in positive parent interactions. Tucker et al, (1998) completed a follow up after a year and found that these effects were maintained.
Similarly, Landy and Menna (2006) found that the HEAR (Helping Encourage Affect Regulation) parenting programme (Landy and Menna, 2006) successfully reduced parentally reported difficult child behaviour. In comparison to a control group parents also reported a higher knowledge level and confidence in their parenting. The authors suggested that improvements were due to increased feelings of parental competence. This research indicates that PSE can be increased in the mothers of children with behavioural difficulties.

Sofronoff and Farbotko (2002) researched whether PSE increased following a parenting programme for the parents of children with autism. In comparison to a control group parents subsequently reported a decrease in difficult behaviour and an increase in PSE. Parents in the control group reported a reduction in PSE. Authors suggest that practical skills supported parents effectively to manage child behaviour and led to subsequent increases in PSE. However, after 3 months there was a slight drop in PSE; authors suggested this could indicate the need for a booster group for parents. Additionally, parenting for this population of parents may be particularly challenging. Perhaps if children constantly challenge the parenting skills of a parent PSE levels may decrease over time.

The research discussed thus far indicates that individual parenting programmes increase PSE levels. It is therefore plausible that PSE could be used to measure whether a parenting programme is effective. Barber et al (1992) measured the self-confidence of parents attending various parenting programmes (not necessarily
based on social learning theory) that differed in content, context and method of delivery. They found that all of the programmes produced comparable changes in parent confidence which were sustained after 3 months. Interestingly, none of the programmes produced short term changes in parent child interactions or global child difficulty rating, but after 3 months these changes had occurred. This may indicate that increased PSE levels directly alter parenting behaviours. However, it may take a longer time period for interactions between parents and children to change. Perhaps the more positive interactions between parents and children then lead to parents viewing their child more positively. Barber et al (1992) suggests that it may be the group process of the parenting programme that is the important factor and that reduced social isolation of parents leads to positive outcomes for children.

Bloomfield and Kendall (2007) supported these finding but used a larger sample (356 parents) across 53 different parenting programmes, none of which were explicitly based on social learning theory. They found an increase in PSE across all domains (emotion and affection, play and enjoyment, empathy and understanding, routines, control, discipline and boundary setting, pressure, self-acceptance, learning and knowledge) of the parenting role following the intervention. A follow up after four months suggested the increases in PSE were maintained. The authors suggest that measurement of PSE may provide information about which parenting programmes are optimal for particular parents.
Although PSE may provide a measure of effectiveness for many parents attending parenting programmes, for some parents however this may not be an accurate measure. Conrad et al (1992) found that some parents were confident but lacked knowledge about parenting and child development. These “naively confident mothers” are arguably the most vulnerable to adopting aberrant parenting strategies. They are likely to be difficult to target with parenting programmes. They are likely to be the parents who choose not to attend a group because they have little doubt about their parenting capabilities and are unaware of children’s development. When participating in parenting programmes the challenge to their existing knowledge of child development and parenting strategies may create heightened anxiety leading them to drop out.

Conrad et al (1992) suggest that further research into why parents may drop out or choose not to attend programmes is necessary. Perhaps those parents with inflated PSE levels characterise this group. Perhaps a different intervention would be more appropriate for this population of parents that aims to increase their knowledge but reduce inflated confidence.

Following the concept of “naively confident mothers” it is possible that the findings of Miller-Heyl et al, (1998) who implemented a family support programme could be explained. They found that changes in parenting confidence and self-esteem were strongly related to improvements in nurturing parenting behaviours. They found that some parents declined in PSE but their parenting skills became more effective. If
parents were naively confident PSE would already be elevated and therefore unlikely to increase. However, an increase in knowledge would be expected.

2.7.2 Summary

Research shows that parenting programmes can successfully develop PSE and that this often coincides with a change in parenting behaviour. Coleman and Karraker (1997) suggest that further research is necessary to determine the extent to which parenting programmes modify PSE. Research thus far seems to indicate that increases in PSE may be a potential measure to indicate whether a parenting programme is effective. However, whether changes in PSE lead to behaviour change or vice versa is still to be established.

This section again highlights the more complex picture for parents with children who have behavioural difficulties (as discussed in Sections 2.5 and 2.6). Although high PSE levels are related to positive parenting behaviours, parenting interventions should also aim to increase the knowledge base of parents. Perhaps naively confident parents have inflated PSE levels that actually become lower when they attend a parenting programme as they begin to interpret their own skills more realistically. Increasing PSE may also be difficult when children are adolescents, due to substantial relationship history (Shumow and Lomax, 2002). Early interventions that aim to modify PSE may therefore be more effective.
2.8 FACTORS AFFECTING THE RELIABILITY OF PSE RESEARCH

General SE research has mostly used experimentally induced successes and failures and the contingent feedback of participants to investigate SE. Teti and Gelfand (1991) suggest this has prevented the systematic study of naturally occurring PSE in which researchers do not attempt to actively manipulate the construct such as in ethnographic research.

PSE has mostly been researched using self-report measures; however, these retain a slightly different focus depending on the researchers’ construct and subsequent conceptualisation of PSE. A frequently used measure considers whether the parent feels competent in their role, this is defined as a “general” PSE measure (e.g. Parenting Sense of Competence Scale, by Johnston and Mash, 1989). However, this has been criticised for not representing the definition of PSE proposed by Bandura (1982).

An alternative measure is a “domain task specific” measure that assesses PSE globally but uses items that are task specific, such as child rearing activities and discipline (e.g. Maternal Self Efficacy Scale, by Teti and Gelfand, 1991). These domain measures are considered more precise in associating self-appraisals and actual behaviour (Bandura, 1989), supported by research completed by Coleman and Karraker (2003). The third measure of PSE has a narrow domain and focuses on one parenting domain such as discipline; this is rarely used in research.
Research by Coleman and Karraker, (2000, 2003) compared the general and domain task measure of PSE. They found an association between child behaviour and PSE with the latter measure but not the former. The questionnaires may therefore reflect a different operational construct of PSE (See Shelton, 1990 for a full discussion of the SE construct). Additional research is required to compare the three different measures to establish whether particular methods lead to different findings.

Research in PSE could also be criticised as many studies use measures created by the investigator which are rarely utilised in more than a few studies. This has arguably threatened predictive and construct validity of PSE measures. There are also threats to reliability. Coleman and Karraker (2003) also draw attention to lack of conceptual clarity, minimal validation and homogenous normative samples (usually white, middle class parents).

Coleman and Karraker (2003) acknowledge that observations of parent-child interactions in a laboratory setting, in their controlled research may have elicited different child behaviour compared to the home environment. In this study parents also highlighted surprise at how cooperative their toddlers were, again contradicting research findings and threatening the ecological validity of this research. It is possible that more descriptive methodologies may provide a more detailed, rich picture of the “transactional” nature of the PSE construct and highlight areas for future consideration.
The majority of research in PSE relies on self-report measures by parents. However, effects can be considered reliable as they are corroborated by other studies that have used more independent measures such as observation, indicating that shared method variance occurs (Jones and Prinz, 2005). However, it is still possible that a halo effect may exist with both methods (Coleman and Karraker, 2003).

The majority of PSE measures have been developed in the USA. This is also a weakness because it is important for measures to be relevant to context, particularly as the environment affects PSE. To address this limitation, more recently, Kendall and Bloomfield (2005a,b) developed a pre and post questionnaire (Tool to Measure Parenting Self-Efficacy) to evaluate whether there was an increase in PSE following a parenting programme. This was based on Bandura’s definition of SE and on parenting issues relevant to the UK context.

2.9 DISCUSSION

Coleman and Karraker (1997) define PSE as the “guiding force” behind parenting. Research indicates PSE is an antecedent, consequence and mediator (Jones and Prinz, 2005). In the antecedent role, PSE appears to predict more adaptive parenting behaviours, which may then lead to particular patterns of child behaviour. High PSE could also be a consequence of adaptive parenting behaviours. An emerging body of research indicates that PSE has a direct effect on parenting
behaviour while exerting a mediating effect on other factors such as parental emotions.

Jones and Prinz (2005) criticise research for drawing heavily on the construct defined by Bandura. This has led research to focus on a few clearly defined specified tasks, whereas parenting as a concept could potentially be wider than this (Coleman and Karraker, 1997). However, research using various measures has demonstrated these effects, providing a degree of construct validation to the definition.

Bandura (1998) theorised that a bidirectional interaction may occur with parenting successes or failures contributing to feedback that then affects PSE. This is likely, particularly when considering the more complex results indicated by research with parents who have children who exhibit behavioural difficulties. Low PSE is not directly associated with poor parenting behaviour therefore other factors require consideration such as the situation or environment.

Theories such as the conceptual model (Ardelt and Eccles, 2001) have begun to consider this interaction. Parents with complex environmental circumstances may particularly benefit from developing PSE to act as a protective factor. This has important implications for parenting programmes because if they successfully increase PSE, other variables such as low income may have less of a detrimental impact on children.
Although various research has identified the characteristics of high and low PSE in parents there is a lack of research considering parents between these two extremes (Coleman and Karraker, 1997). If a medium level of PSE is adequate for positive child outcomes, perhaps it is more realistic for parenting programmes to raise PSE to this medium “good enough” level.

Research indicates that many parenting programmes increase PSE and also enhance positive parenting behaviours. It is argued in this paper that this is achieved through the mechanisms theorised by Bandura (1986). Research to date has focussed on measuring how PSE affects behaviour and emotions rather than cognition. However, Bandura (1989) outlines cognition as having a key role in increasing SE. Further research into parent cognitions, such as whether thoughts become more positive, leading to subsequent increases in PSE, may explain research that is currently less conclusive.

The expanding literature on parenting programmes highlights that PSE is a concept that can be measured across many parenting programmes, and which leads to more positive parenting behaviours. It could therefore be used as an indicator of whether a parenting programme has been effective. However, further research is required into parents who may be naively confident as they would be expected to show an initially high PSE level but perhaps low knowledge levels. The aim of the parenting programme would be to increase their knowledge which may initially reduce levels of PSE.
Further research is also required to consider where PSE originates and the degree to which parents feel adequately informed or emotionally prepared for the parenting role. Particular personality traits or social support networks available to parents are likely to have an important influence and could potentially act as a protective factor for PSE.

Parenting programmes have shown the potential to increase the parenting behaviours associated with positive child outcomes. Professionals have a responsibility to recognise that parents have a right to attend a programme based on psychological research and theory about parenting strategies soundly linked to positive outcomes for children. Research in PSE indicates that different parents are likely to benefit from a differing focus in parenting programmes depending on their child’s characteristics and age. Parents that have particularly complex situations or who have emotional difficulties may require a different focus to those parents who require information and support in developing their parenting knowledge and skills.
CHAPTER 3

PARENTING PROGRAMMES AND SELF-EFFICACY: AN INVESTIGATION INTO THE EFFECTIVENESS OF A PROGRAMME IN TERMS OF CHANGE FOR PARENTS AND THEIR CHILDREN

3.1 ABSTRACT

The importance of family relationships and the quality of parenting to the psychological, social, physical and economic well-being of children has been well documented. The government has also emphasised the importance of supporting parents and has provided Local Authorities with additional funding. This has resulted in schools having increased responsibility with regard to providing support for parents. Further research into the effectiveness of parenting programmes that schools can provide is therefore required. The principal research question addressed by the current study, was to establish whether a positive parenting programme, delivered at school, could facilitate long-term change for parents and their children. This research also aimed to establish whether levels of parent self-efficacy (PSE) were altered by the programme and the mechanisms that could have facilitated this change. Participants (N=18) who had completed the parenting programme agreed to participate in a semi-structured interview. Themes were identified from the data set by using a theoretical thematic analysis. Results highlighted three main themes (Identified changes in parenting and/or children’s
behaviour, implementing strategies from the programme and the parenting programme process) with sub themes contained within these. The research concludes that the parenting programme directly altered parenting behaviours and that PSE levels increased, leading to an indirect change in parenting behaviour. Mechanisms within the parenting programme that increase PSE reflected those that raised self-efficacy as hypothesised by Bandura (1989).

3.2 INTRODUCTION

3.2.1 Rationale for the present research

The principal aim of the research is to consider whether a positive parenting programme based at several primary schools, alters parent and child behaviour in order to inform the Local Authority (LA) about whether parenting programmes are a potentially useful intervention in altering child behaviour and preventing exclusions. Other research questions consider whether there is change in parent self-efficacy (PSE) following the programme, and whether this is sustained over time. The process of the parenting programme, and how this may promote change in parent and child behaviour, is also considered. The research questions were therefore as follows:
Is a school based positive parenting programme effective in facilitating long term change for parents and their children?

a) Were there any changes in parenting and/or children that occurred while the parents were completing the programme or in the time period following the programme?

b) Were there any changes in levels of PSE?

c) What mechanisms within the parenting programme may have contributed to changes in PSE?

3.2.2 Context

The importance of family relationships, particularly parenting, to the psychological, social, physical and economic well-being of children has been well documented. A review of research by Desforges and Abouchaar (2003) concluded that positive parenting at home had a significant, positive effect on children’s achievement and adjustment at school. The importance of parenting was also reflected in the two green papers Supporting Families (Home Office, 1998) and Every Child Matters (DfES, 2003) that identified the support of parents and carers as one of four key areas for national development.
Attention has also focussed on the role of parenting in preventing anti-social behaviour and offending in young people. The introduction of parenting orders issued by magistrates in the year 2000 (Home Office, 2006) controversially mandated the parents of young offenders and frequent truants to receive parenting education. An evaluation by the Youth Justice Board (Ghate and Ramella, 2002) reviewed parenting programme interventions and found they were generally effective in reducing antisocial and offending behaviour in children. They were also effective at increasing parent confidence in their parenting skills.

Research suggests that children who become disengaged as adolescents become disaffected at school and exhibit behaviour difficulties, increasing the likelihood that they will be excluded (Ghate and Ramella, 2002). Perhaps parenting programmes could therefore be a preventative intervention for some children who display difficult behaviour at school. LAs are being encouraged to consider parenting programmes as a preventative intervention, as the extension of the Anti-Social Behaviour Act (Home Office, 2003) now allows them to apply for parenting orders if children are permanently excluded or receive two fixed term exclusions within 12 months.

More recently, the government focus on parenting continued with the introduction of the Respect Action Plan (Home Office, 2006). Additional funding was provided for LAs to run parenting programmes and the “National Parenting Academy” was formed. The launch of Every Parent Matters, in March 2007 (DfES, 2007), outlined the government plan for the development of services for parents. It promotes the
vision that by the year 2010, schools will offer a range of support for parents. This will vary from simply providing information to targeted support for parents whose children have problems with attendance or behaviour. This clearly places the responsibility for providing parenting support with schools. Therefore further research into programmes that are based in schools is required if they are to be effective.

Parenting programmes are currently coordinated and run by numerous different agencies working with families; including social services, health services, voluntary organisations, youth offending teams and education. Some are tailored for individual parents while others are delivered to groups. Programmes vary in their length of delivery with some lasting 3 months while others are just 6 weeks in duration. Due to this variation in provision LA’s were given the responsibility of completing a “Parenting Strategy” document by March 2008, providing an audit of current provision and an action plan to address omissions in supporting families.

In practice, the numerous parenting programmes, some of which are manual-based, differ in their theoretical orientation and context. There is also variation in the quality and quantity of research evaluating their effectiveness. Some LA’s have addressed this issue by choosing one particular programme such as the manual based Triple P-Positive Parenting Programme (Sanders et al, 2003). Further research and evaluation to identify distinct elements that make any programmes more or less effective is required, prior to a decision allocating LA resources in support of a
particular programme. Additionally, the increased responsibility of schools to provide support for parents requires further research into programmes that could be effective if delivered in this context.

Moran et al (2004) argue that the majority of parenting programmes follow behavioural psychology to a certain degree as they aim to teach parents effective skills and reduce the quantity or intensity of inappropriate behaviour. Some parenting programmes that currently lack an evidence base are actually very effective for particular populations of parents or groups of children (Lamb et al, 2007). Also, the majority of research forming the evidence base for many programmes has been completed in the United States, a country with arguably a different context, society and culture in both education and family support to the United Kingdom (Kendall and Bloomfield 2005a,b). If decisions in practice are based on a currently limited research base from the United Kingdom, there is a high risk of potentially effective programmes being neglected.

In Dudley LA a Pupil Referral Unit currently delivers a parenting programme called “Time out for parents” (See appendix 12 for programme details) as part of their outreach service to mainstream primary schools. If a child is considered at imminent risk of exclusion, schools are able to request a parenting programme and the parents of that child are invited to attend. The programme could be considered as a preventative measure for children “at risk” of becoming involved in later antisocial behaviour. The remaining parents that form the group are recruited on a voluntary
basis through a letter sent to all the parents at that particular school. The outreach team delivers the programme to approximately 4-8 schools per term and parent attendance is good.

In general, parenting programmes are based on different psychological frameworks but the majority of programmes aim to alter parenting styles to resemble an “authoritative” parenting style (e.g. Maccoby and Martin, 1983). This has been linked to optimal psychological and social outcomes for children. Authoritative parenting is characterised by a parent being emotionally responsive and endorsing consistent positive parenting strategies. Alternatively, permissive or authoritarian parenting styles are characterised by parents that are often coercive and irritable with reduced communication and consistency in their parenting behaviour (Maccoby and Martin, 1983).

The programme run by the outreach service in Dudley is six weeks in duration and follows the “Positive Parenting” publications and programmes manual (Douglas, 2005). The aims of the programme are to enhance parents’ knowledge of positive parenting strategies and to support them in using these strategies at home. Although parenting interventions work directly with parents, there is an assumption that through the programme a child’s behaviour will be affected by changes in parenting. The following sections consider the role of self-efficacy in parenting and how this concept affects parenting behaviour
3.3 SELF-EFFICACY THEORY AND IMPLICATIONS FOR PARENTING

The construct of self-efficacy (SE), derived from social learning theory, is a belief that can explain how motivation and behaviours are affected by judgements that people make about their own capabilities (Bandura, 1982). SE judgements influence the choice of activity that a person engages in and the degree of competence a person feels they have to manage future situations (Bandura, 1982). PSE is a specific domain within the general construct of self-efficacy. It is conceptualised as the expectation caregivers hold about their ability to parent successfully (Bandura, 1989).

People with high SE in a particular domain (such as parenting) think, feel and act differently from those who have low SE (Bandura, 1982, 1996). High levels of PSE are associated with behaviours that characterise positive parenting and are linked to positive child outcomes (for reviews see Jones and Prinz, 2005, Davies, 2009). Research has focussed on how discipline techniques alter depending on PSE level. Those parents with low PSE reported more difficulties with child behaviour and they used more aversive discipline techniques (Day et al, 1994). Similar results (Gross et al, 1999) suggested that parents with low PSE were more likely to use inconsistent and harsher discipline strategies. There has been limited research about how PSE affects the parenting of adolescents but high PSE has been related to positive

It is difficult to determine whether PSE levels cause different parent behaviours or whether parental behaviour and child response influence PSE levels. Gross et al (1999) draw attention to the finding that the children of parents with low PSE were also more likely to engage in disruptive behaviours than a control group. Therefore parents could simply be responding to the more difficult behaviours. Gross et al (1999) suggested this could highlight a reciprocal but coercive relationship between these parents and their children.

More recent research has begun to consider task-specific domains of parenting other than discipline. Coleman et al (2002) researched parenting behaviours more specifically. They found that parents with high PSE had children who were less difficult and such parents were more likely to respond to child misbehaviour, alter the environment to prevent misbehaviour and were less likely to reinforce misbehaviour. Those with low PSE reinforced negative child behaviour and responded negatively to a child’s difficulty in progressing on a task. Similarly, Sanders and Woolley (2004) considered different parenting situations such as shopping or being on the telephone and measured children’s behaviours such as acting defiantly or having a tantrum. They found that parents of children with behavioural difficulties had lower PSE across all but one task specific domain than a control group.
Parents with high PSE are also more likely to retain a positive emotional state and engage in problem-focused coping strategies rather than be emotion-focused (Coleman and Karraker, 1998). Parents with high PSE responded with a strategy or behaviour that addressed the incident or problem (problem-focused coping), whereas parents with low PSE typically responded with emotion-focused coping, where the parent response is based on their emotions at the time of the incident.

PSE levels are therefore correlated with both parent behaviour and their emotions. An emerging body of research indicates that PSE has a direct effect on parenting behaviour while exerting a mediating effect on other factors such as parental emotions. Teti and Gelfand (1991) completed a longitudinal study with 86 mothers, 48 of whom were diagnosed with depression. They found significant relations between all the independent variables (including parenting behaviour, parent emotions and infant temperament) and the dependent variable (PSE). However, if a variable is mediatory then when it is statistically controlled, relations between the independent and dependent variables are reduced. Teti and Gelfand (1991) found that when PSE was controlled, parenting behaviour was not directly related to maternal depression or infant temperament. However, PSE continued to have a direct effect on parenting behaviour. The authors concluded that PSE exerted a direct and indirect (mediating) effect on parenting behaviour. Gondoli and Silverberg (1997) extended this research with adolescents and mothers from a typical population, with similar results.
Many researchers have concluded from their research into parenting and PSE that interventions increasing PSE may lead to positive changes in the behaviour of parents that may in turn then improve outcomes for children (e.g. Coleman and Karraker, 2000, 2003, Jones and Prinz, 2005, Davies 2009).

3.3.1 Parenting programmes and self-efficacy

Although few parenting programmes directly focus on increasing self-efficacy, it is likely that the majority of programmes are underpinned by SE theory and use many of the techniques theorised to increase SE. The Webster-Stratten (2001) manual based parenting programme (The Incredible Years) is explicitly based on social learning theory, and the success of this programme is likely to be due to increased PSE levels. Although other programmes claim to draw from other theoretical frameworks, it is likely they use mechanisms which increase SE.
Bandura (1989, pg. 733) proposed various mechanisms through which SE could be increased including:

- the experience of personal success at particular tasks;
- observing people similar to oneself succeed by persevering;
- social persuasion that one possesses the capabilities to succeed; and
- an increased awareness of bodily states and various forms of somatic information.

Where parenting programmes arguably use these mechanisms during sessions; it would be plausible to expect that they raise levels of PSE.

Along with proposing mechanisms through which SE was increased, Bandura (1989) also found that SE affected a person's cognitive processing, with different profiles characterising people with high and low SE. People with high SE, believe strongly in their problem solving abilities and remain efficient when faced with a failure. They are also more likely to set higher goals, visualise success, rehearse solutions to potential difficulties and persevere. Alternatively those people with low SE are erratic with their strategies, visualise failure and dwell on how things can go wrong. These thought processes undermine motivation and performance (Bandura, 1982, 1989). It is likely that through the mechanisms (listed above) a parenting programme facilitates the development of positive problem solving skills and therefore raises PSE.
If PSE assumes a mediating role between knowledge and behaviour, as proposed by Bandura (1989), it follows that if PSE can be successfully altered, this may in turn change subsequent behaviour. Research remains relatively limited, but some parenting programmes have measured whether PSE has increased as an outcome of the intervention (see Davies 2009 for a full discussion). These programmes are not explicitly based on social learning theory but do typically incorporate the key principles outlined above.

Gross et al (1995) completed a 10 week parenting programme with 46 parents of two year olds. Findings suggested a significant increase in PSE, decreases in parenting stress and an increase in positive toddler-parent interactions, in comparison to a control group. Tucker et al, (1998) completed a follow up after a year on the same sample and concluded that these effects were maintained. Similarly, Landy and Menna (2006) found the HEAR (Helping Encourage Affect Regulation) parenting programme successfully reduced parental reports of difficult child behaviour. In comparison to a control group parents also reported a higher knowledge level and confidence in their parenting. The authors suggested that the improvements were due to increased feelings of parental competence. This research indicates that PSE can be increased in the mothers of children with behavioural difficulties.
The studies discussed so far focus on specific parenting programmes that increased PSE levels. Barber et al (1992) measured the self-confidence of parents attending various parenting programmes (not necessarily based on social learning theory) that differed in content, context and method of delivery. All of the programmes produced comparable changes in parent confidence, sustained after 3 months. Interestingly, none of the programmes produced short term changes in parent child interactions or the global child difficulty rating, but after three months these changes had occurred (Barber et al, 1992). This may indicate that increased PSE levels create a direct change in parenting behaviours. However, it may take a longer time period for interactions between parents and children to change. Perhaps the more positive interactions between parents and children then lead to parents viewing their child more positively. Barber et al (1992) suggest that it may be the group element of the parenting programme that is most important and that reduced social isolation of parent’s leads to positive outcomes for parents and their children.

Bloomfield and Kendall (2007) supported these finding but used a larger sample (356 parents) across 53 different parenting programmes, none of which were explicitly based on social learning theory. They found an increase in PSE across all domains (emotion and affection, play and enjoyment, empathy and understanding, routines, control, discipline and boundary setting, pressure, self-acceptance, learning and knowledge) of the parenting role following the intervention. A follow up after four months suggested the increases in PSE were maintained. Authors suggest
that the measurement of PSE may provide information about which parenting programmes are optimal for particular parents.

3.3.2 Limitations of previous research

PSE has mostly been researched using questionnaires; these have a slightly different focus depending on the researchers' constructs or conceptualisation of PSE (for a more detailed discussion see Coleman and Karraker, 2000, 2003). Questionnaires are problematic for some parents as literacy levels and understanding of questions vary. Also, questionnaires typically use categories about parenting that are determined by the researcher. It may be that parents consider one aspect of parenting to be more important than another or could identify aspects that are not included.

Previous research also provides no indication about how the changes in PSE occur or how this may then exert an effect on parent behaviour. To my knowledge there has been no qualitative research to date, focussing on PSE (see Davies 2009 for a full discussion). The present research therefore used interviews with parents to gain a more detailed understanding of whether PSE was affected by parenting programmes and the mechanisms through which this may occur.
3.4 METHODOLOGY AND METHOD

3.4.1 Design

My ontological assumptions as a researcher follow a nominalist view; that reality is complex, multi-layered and created by the individual (Phillips and Burbules, 2000). In the present study, the ontological assumptions and epistemological position influenced the conceptualisation and design of the study. An interpretive researcher considers situations as fluid and changing rather than fixed and static. There is an assumption by the interpretive researcher that events and behaviour evolve over time (Cohen et al, 2000). I aimed to understand whether parents’ behaviour had changed and whether this had been sustained long-term.

An interpretive researcher typically uses methods that aim to understand the direct experience of people within a specific context and the researcher sometimes interacts with their participants (Robson, 2006). I aimed to understand the social construction of meaning and knowledge by parents who had participated in a specific programme, and used interviews to explore the multiple “realities” of individuals.
3.4.1.1 Selection of the method and design of the research instrument

A semi-structured interview was selected as the method of data collection. Robson (2006) suggests that an interview is an appropriate method to use when trying to understand the multiple experiences and perspectives of participants. The outreach workers (see Section 3.2.2) reported that parents had varied literacy levels, with some parents being illiterate. Therefore an interview was judged more accessible to parents than using methods requiring parents to read and write, such as a questionnaire. An interview also allowed the flexibility to capture parents’ individual experiences and views rather than using the pre-determined structure of a questionnaire. Also, this study aimed to use a qualitative method to extend previous research (see Section 3.3.2).

A semi-structured interview, rather than a structured or unstructured interview, was chosen as the method of data collection. This allowed the order of questions to be altered and further explanation or question wording to be modified, depending on the participant. It also allowed particular lines of questioning to be followed within the interview process in order to abstract accurate reflections of parent experiences. Having some pre-determined questions was useful as fundamental topics (including the parenting programme process and outcomes from the programme) could then be covered during all the interviews.
The semi-structured interview schedule was constructed following the recommendations and examples provided by Robson (2006). Introductory comments informed participants about me as a researcher and the purpose of the research. The schedule contained ten key questions with associated prompts for participants (see Appendix 4); these were derived from research findings discussed in the literature review (see Davies, 2009). The key questions were open questions rather than closed or scaled items. It was important for questions to be flexible, as this allowed participants to answer as they chose and reduced the likelihood that they were led to a particular answer. It also allowed me to build rapport with participants and encouraged them to expand their answers. At the beginning of the interview the initial question was easy and non-probing, to relax participants. The interview concluded with closing comments and debrief of participants.

The interview schedule was piloted with one parent to ensure participants understood the questions and that the data collected would address the research questions. The participant in the pilot interview reported that the interview schedule covered a range of topics she considered relevant to the parenting programme. From the pilot interview I realised that it was difficult to record participant replies during the interview due to the speed of their replies, so audio-recording was employed to allow me to fill in the additional responses post hoc. Reflecting on my performance as an interviewer from the pilot study, it was important that I phrased probes (see Section 3.4.3) carefully to reduce risks of leading participants, I therefore practised my interviewing technique with a colleague.
3.4.1.2 Ethical considerations

Guidelines from the British Psychological Society and the University of Birmingham (School of Education, see Appendix 1) were followed throughout this research (BPS, 2006). Prior to the interviews, participants were informed about my identity as the researcher and the aims of the research. Participants also read and signed a consent form that was also read orally (to accommodate varied literacy levels). This contained information about their right as participants to withdraw consent at any time during the research. Participants were also informed that their data would be anonymised during the data analysis and in the final report (see Appendix 3). Participants were asked to sign their consent if they agreed to the interview being audio-recorded and to excerpts being used in the final report, (see Appendix 3). They were then debriefed following the interview and provided with the researcher’s contact details in case they had any further questions or concerns about the research.

3.4.2 Participants

The outreach team from the pupil referral unit consisted of two adults who had led nine parenting programmes in mainstream primary schools within the last 12 months. Parents were interviewed with a time lapse between completing the programme and participating in the interview (this time lapse varied from four to 12
months). The seven schools from which the programmes had been run, were contacted and asked to participate in the research. Five schools volunteered to participate (from a total of seven) and were requested to contact all the parents who had attended the programme to ask whether they would participate in the research.

From a total of 34 mothers that attended these five programmes, 20 volunteered to participate in the research. I was then able to contact 18 of the participants who had agreed to participate in the research by telephone. All the mothers had at least one child within the age range of 5-12 years. There were seven mothers with a child on the verge of exclusion from school.

3.4.3 Procedure

The participants were initially contacted by a letter to request their participation in the research (see Appendix 2). The outreach workers then asked their contact in school (Special Educational Needs Co-ordinator or Learning Mentor) to follow up the letter with a telephone call to parents. School staff reminded parents about the aims of the research and asked whether they would be willing to participate. If parents volunteered to participate, school staff gained permission from parents for the researcher to contact them. I then contacted parents to arrange a time and location for participants to be interviewed. Parents were interviewed at a time and location that was convenient to them (at home or at their child’s school).
Prior to the interview I explained my identity and the aims of the research (see Appendix 4). Participants were then asked whether they had any further queries and provided with a written consent form (see Appendix 3). They were also asked for their permission to audio-record the interview (see Appendix 3).

During the interview, if required, I used probes to encourage participants to expand their responses. Sometimes a short silence was used, or repeating back all or part of what a participant reported. Participants were also asked “Is there anything more?”. If participants were having difficulties answering a question they were prompted from a list of prompts (see Appendix 4).

The first question was easy and non-probing, to relax participants (see Appendix 4). The second question asked participants what they hoped to gain from attending the programme and whether it had been successful. The flexibility of the interview schedule encouraged participants to continue talking, while I ensured they commented on questions two to seven. Some participants required questions two to seven read to them to elicit their responses. If parents had answered yes to questions two to seven they were then asked questions eight to ten, while participants who had answered no to questions two to seven were asked question nine and ten (see Appendix 4).

Following the interview, participants were debriefed and given the researcher’s contact details if they had any further questions or concerns.
3.4.4 Data analysis

Following the interpretive paradigm, information was analysed using the qualitative approach of thematic analysis (Braun and Clarke, 2006). When a research area is under-researched or participant views are unknown, describing the whole data set is appropriate (Braun and Clarke, 2006). In this research a thematic description of the entire data set is provided in order to make predominant themes explicit.

Within thematic analysis, themes can be identified by either completing a theoretical or inductive analysis. When completing an inductive thematic analysis, the data are coded without trying to fit them within a pre-existing coding frame. The themes identified from the data set may therefore have little relevance to the research questions (Braun and Clarke, 2006). In this research, data were coded using a theoretical thematic analysis to answer the pre-determined research questions.

The data analysis identified both semantic and latent themes. Semantic themes are those explicitly written or talked about by participants, whereas latent themes are abstracted by the researcher, in an endeavour to consider the underlying assumptions of the data that may inform or influence the semantic data (Braun and Clarke, 2006).
The data analysis procedure followed the six phases described by Braun and Clarke (2006). This involved familiarisation with the data set and generation of initial codes with the subsequent coding of data units (see Appendix 5, 6, 7). A person independent to the researcher then checked the similarity of all the individual data units within the codes to test inter-rater reliability. Codes were then grouped to form sub-themes (see Appendix 9), these were subsequently reviewed by the researcher and some deleted due to insufficient data supporting them.

Thematic maps were generated to consider the relationship between sub-themes (see Appendix 8). The sub-themes were then grouped under over-arching themes, with the research questions in mind (see Appendix 9). The over-arching themes and sub-themes were then reviewed again by both the researcher and a person independent to the researcher.

### 3.4.5 Validity and reliability

Maxwell (1992) identifies “description”, “interpretation” and “theory” as the principal threats to the validity in qualitative research. A valid description considers whether the data are accurate or incomplete; this threat was minimised in the current research by audio-recording interviews. The interview schedule did not contain leading questions (Robson, 2006). Also, participants were encouraged to expand their answers through prompts and probes, increasing the likelihood that their perspective was accurately represented.
Valid interpretation of data can be threatened by imposing a pre-conceived theory or framework onto the data set. A semi-structured interview asked broad questions (see Section 3.4) and the data were coded for content. Inter-rater reliability was achieved by a person independent to the researcher checking the coding for the whole data set. Themes were created with the research questions in mind; however the whole data set was coded and subsequently reported to increase validity, rather than only coding or reporting selected elements. To ensure that alternative explanations were considered for the research findings (theory) multiple pathways were highlighted to explain findings (see Figure 2, pg 103).

Reliability was increased through the use of the same research procedure and a semi-structured interview that ensured the same topics were covered with all participants. However, there was also flexible management of interviews to accommodate the differing response styles of participants. A pilot interview increased the reliability of the interview schedule.
3.5 RESULTS

The main themes and sub-themes arising from analysis of the interviews are described below. These are considered in relation to the research questions that they inform, conclusions about the research questions are made in the discussion (Section 3.6). Throughout this section tables summarise the sub-themes, with the number of participants that made particular comments. Excerpts reported from the interviews (labelled with participants numbers e.g. B3) are also presented to illustrate some of the comments made by participants within each sub-theme.

The three main themes are:

1. Identified changes in parenting and/or children’s behaviour
2. Implementing strategies from the programme
3. The parenting programme process
3.5.1. IDENTIFIED CHANGES IN PARENTING AND/OR CHILDRENS’ BEHAVIOUR

a) Were there any changes in parenting and/or children that occurred while the parents were completing the programme or in the time period following the programme?

b) Were there any changes in levels of PSE?

Most participants reported various parenting behaviours and the behaviours of their children that had changed following the parenting programme. Some also talked about how their feelings towards their children and towards their own parenting altered as a result of the parenting programme. Parents also commented about changes in their values and beliefs.

3.5.1.1 Changes in parenting behaviour

Participants identified various changes in their parenting behaviour. The number of participants that commented on each sub-theme, a summary of the comments made and excerpts from the interviews (individual participant number is shown e.g. S1) are presented in Table 1 (below).
Nearly all the parents reported a change in the boundaries they set or the way they disciplined their children. It required perseverance from parents for there to be a noticeable change in a child’s response (discussed further below in Sections 3.5.2.1 and 3.6). In contrast, one parent said there had been no change in her discipline style and she had been unable to maintain the behaviour boundaries with her children. Through reflection parents realised that their behaviour could potentially be exacerbating or maintaining their child’s difficult behaviour. Some participants also suggested that reflection helped them to predict their children’s behaviour.

Through the programme over half of the participants were able to change their discipline style focusing more on the positive behaviours of their children rather than the negative behaviour. Half the parents spent more positive time with their children, such as playing games or having fun. A few parents also suggested that spending more positive time with their children had directly improved their relationship with their children.

3.5.1.2 Changes in children’s behaviour

There were 14 participants who commented on the changes in their children (see Table 2, below). Responses suggest that strategies learned from the course resulted in a change in parenting behaviour (see Section 3.5.1.1), that seemed to have positively affected the behaviour of children at home. One parent mentioned there
Table 1: Changes in parenting behaviour

<table>
<thead>
<tr>
<th>Sub-Theme</th>
<th>Summary of comments (number of participants)/ excerpts from interviews</th>
</tr>
</thead>
<tbody>
<tr>
<td>Change in boundaries and discipline (N=17)</td>
<td>Some participants talked about how they were able to maintain boundaries to discipline their children (N=6). Two parents said:</td>
</tr>
<tr>
<td></td>
<td>“It was hard at first but they do know when I mean something, I mean it. I used to change my mind but now when I say ‘no’ it’s no”. (C1)</td>
</tr>
<tr>
<td></td>
<td>“There were a few things that I already had in place but I didn’t enforce them” (B2)</td>
</tr>
<tr>
<td></td>
<td>Most participants talked about how they focused more on positive behaviour (N=9). For example:</td>
</tr>
<tr>
<td></td>
<td>“I changed everything completely. I concentrated on the positive behaviour and ignored the difficult behaviour. I overplayed the good behaviour”.(D1)</td>
</tr>
<tr>
<td></td>
<td>“I did the charts as well. I found they helped. They enjoyed putting their stickers on and having their reward at the end of the week”. (B3)</td>
</tr>
<tr>
<td></td>
<td>A few participants suggested they talked more calmly to their children (N=4). One participant said that she felt calmer (N=1).</td>
</tr>
<tr>
<td></td>
<td>One participant reported being unable to use the strategies, she said:</td>
</tr>
<tr>
<td></td>
<td>“I also tried to use praise but that was also ignored”. (E5)</td>
</tr>
<tr>
<td></td>
<td>“I tried to use charts but they ended up screwing them up”. (E5)</td>
</tr>
</tbody>
</table>
Improved communication (N=15)

Some of the participants suggested that they listened more to their children (N=4). For example:

“I realised I wasn’t really listening to them and I listen more now.” (B4)

Most participants suggested that they talked more to their children (N=12). Three parents said:

“We were having the problem of them not coming to me for help. They’d rather ask their Nan and Grandad, but she’s telling me now and I can sort it out.” (B3)

“I wait until they’re calm to talk to them, then I sit down and talk calmly. That’s something I learned.” (A1)

“Communication with them, there was a lack of it. It seems pathetic now for me as the adult to have been screaming at the child. I was just as bad as them.” (C1)

A few parents reported that improved communication improved their relationship (N=4).

There was 1 participant who reported that communication did not improve.

“I was trying to tell one something while the other just screamed.” (E5).

More positive time together (N=9)

Some of the parents suggested they spent more positive time with their children (N=9). A few parents said:

“We’ve got more of a mother-daughter bond. I’ve done that by spending more time with her” (C3).

“I have more fun with my kids now” (B1)

“I started to spend more quality time with them. – the course taught me to spend more time with the older ones too.” (E2)
More positive time resulted in an improved relationship for a few parents (N=3). One parent said:

“Playing the games with them brought us a bit closer. Especially playing as a family rather than letting them play on their own”. (B1)

<table>
<thead>
<tr>
<th>Reflection about how own behaviour affects child (N=8)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Some participants said they reflected more about how their own behaviour affected their child (N=8)</td>
</tr>
<tr>
<td>“it made me more aware that my reaction was perhaps part of the problem” (B4)</td>
</tr>
<tr>
<td>“He still wants a lot of attention and he’ll still interrupt, like if you’re trying to have a conversation he can be difficult. I learnt to speak more calmly to him. If you shout he just gets louder” (E3)</td>
</tr>
<tr>
<td>A few parents suggested that reflection helped them to predict their child’s behaviour (N=6). For example:</td>
</tr>
<tr>
<td>“It gave me an insight into how to break situations down and prevent things before they kicked off” (A1)</td>
</tr>
<tr>
<td>“We learned how to minimise the temper tantrums before they got to full scale, like getting down to his level and trying to talk to him. I began to read the signs at the beginning.” (C4)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>More time for themselves (N=4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>A few parents suggested they tried to make more time for themselves (N=4). One parent said:</td>
</tr>
<tr>
<td>“It was good because it talked about you as a parent. Make sure you do something that you enjoy like pampering yourself or going shopping. She always asked about you as well. We learned to relax more and not stress out. She showed us some techniques.” (E2)</td>
</tr>
</tbody>
</table>
had been a change in her child’s behaviour at school that she directly attributed to the parenting programme.

Interestingly the changes in child behaviour that parents commented on were similar sub-themes to those mentioned by parents about their own behaviour. A few participants reported that their children’s communication with them had improved. Over half the participants reported that their relationship with their child had improved, or highlighted that their children cared about them more.

3.5.1.3 Changes in the feelings of the parents

Parents also commented about how their feelings had changed about themselves and their children (see Table 3, below). Over half of the participants said they had increased empathy towards their children. Most said that they tried to consider situations from their child’s point of view. A few of the parents mentioned the role play session from the programme that had made them think about situations from a child’s perspective. Additionally, over half of the participants said they had a more positive view of their children and they spent more time with them. A couple of parents said that discussion with other parents had made them realise that their children were relatively manageable.
Following the programme, half of the parents reported that their confidence had increased. Parents highlighted various reasons, such as experiencing personal success with using strategies and having more control over their children’s behaviour. Some participants also said that listening and talking to other parents made them realise they were not alone, which also led to increased confidence.

The results suggest that as parents altered their own behaviour and also saw a change in their children’s behaviour, their feelings of being a competent parent also increased. However, the results also indicate that some parents’ confidence may have increased as a direct result of the parenting programme. Therefore increased feelings of competence may also lead to behaviour change.

3.5.1.4 Changes in values and beliefs

Over half of the participants commented on changes in their values and beliefs. Parents commented about values and beliefs related to parenting competence and expectations of themselves as parents (see Table 4).

A number of parents said that following the programme, their beliefs about parenting had changed. Some parents reported that their views about what constituted effective parenting had altered. Other parents specifically mentioned that their views about their own competence as a parent had changed. Interestingly, a couple of parents commented that their beliefs and values about parenting had stayed the
### Table 2: Changes in child behaviour

<table>
<thead>
<tr>
<th>Sub-Theme</th>
<th>Summary of comments (Number of participants)/ excerpts from interviews</th>
</tr>
</thead>
<tbody>
<tr>
<td>Improved Communication (N=6)</td>
<td>There were a few participants who thought their children’s communication had improved (N=4). For example:</td>
</tr>
<tr>
<td></td>
<td>“They tend to come to me more often now and tell me things. They think Mum wants to know” (B3)</td>
</tr>
<tr>
<td></td>
<td>“She responds to me quite well now. She gives me better eye contact and doesn’t walk off” (C3)</td>
</tr>
<tr>
<td></td>
<td>One participant suggested her child listened more.</td>
</tr>
<tr>
<td></td>
<td>One participant suggested that her child talked to her more.</td>
</tr>
<tr>
<td>Improved Relationship (N=5)</td>
<td>There were a few participants who suggested their relationship with their child had improved (N=5). Some parents said:</td>
</tr>
<tr>
<td></td>
<td>“My children are more loving now and our relationship is much more positive”. (E4)</td>
</tr>
<tr>
<td></td>
<td>“A lot of people say how close we are now. Before he wasn’t like that. I found it so hard to cope with him I wanted to give up and it made me so depressed” (D1)</td>
</tr>
<tr>
<td></td>
<td>A few participants said that their children were more caring (N=4).</td>
</tr>
<tr>
<td>Improved Behaviour (N=11)</td>
<td>The majority of parents suggested there had been an improvement in their child’s behaviour (N=10). For example:</td>
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<td>--------------------------</td>
<td>---------------------------------------------------------------------------------------------------</td>
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<tr>
<td></td>
<td>“I’m not saying he’s not boisterous but his behaviour is really good now and I’m so proud” (C4)</td>
</tr>
<tr>
<td></td>
<td>“He had a lot of anger and aggressiveness which we found difficult to cope with. He used to kick and hit us but most of that has stopped now” (E1)</td>
</tr>
<tr>
<td></td>
<td>“It’s not 100% but it’s got a lot better. I’ve continued using some of the strategies” (C1)</td>
</tr>
<tr>
<td></td>
<td>“The older-two are now more bearable. At the time I was having a lot of problems.” (A1)</td>
</tr>
<tr>
<td></td>
<td>A few parents thought their children were calmer (N=3). For example:</td>
</tr>
<tr>
<td></td>
<td>“There was a difference in their behaviour like they’d come to me and they were calmer. We’d discuss things.” (B4)</td>
</tr>
<tr>
<td></td>
<td>Only one participant reported that there was no change in their child’s behaviour.</td>
</tr>
</tbody>
</table>
### Table 3: Changes in the feelings of the parents

<table>
<thead>
<tr>
<th>Sub-Theme</th>
<th>Summary of comments (Number of participants)/ excerpts from interviews</th>
</tr>
</thead>
<tbody>
<tr>
<td>Increased empathy with child.</td>
<td>Some parents said that they considered things more from their child's point of view (N=6). Some parents said that they had more understanding (N=4) of their children. For example:</td>
</tr>
<tr>
<td>(N=10)</td>
<td>“It’s hard and I used to get frustrated but now I sit down and try to understand her more”. (A4)</td>
</tr>
<tr>
<td></td>
<td>“I try and see things from his point of view more often now”. (E4)</td>
</tr>
<tr>
<td></td>
<td>“We did some role play…I found it helpful. I had to ignore someone who was talking to me. It made me realise what it must be like for my child” (B4).</td>
</tr>
<tr>
<td></td>
<td>I think we did one thing where we saw it from the child’s point of view – what the child might be thinking – so it was seeing it from their point of view as well as the adults. That changed how I saw things at home. (A3)</td>
</tr>
<tr>
<td></td>
<td>A few parents said their patience (N=2) had increased and another suggested she felt more love towards her child (N=1).</td>
</tr>
<tr>
<td>Confidence</td>
<td>Some of the parents said that they had lacked confidence prior to the parenting programme (N=6). For example:</td>
</tr>
<tr>
<td>(N=10)</td>
<td>“When I first started I had no confidence”. (A4)</td>
</tr>
<tr>
<td></td>
<td>“I always felt a bit of a failure and you always think it’s you with the problem” (B3)</td>
</tr>
</tbody>
</table>
Most of the parents said that their confidence had increased (N=9). Three parents said:

"It increased my confidence I think. It was realising that you could stop it happening and there were ways of doing it". (B3)

"I feel more confident as a result of the programme as a parent. Other parents were in the same position and it made me realise I wasn’t the only one". (B2)

"It increased my confidence I think. It was realising that you could stop it happening and there were ways of doing it". (B1)

Some of the parents reported that they felt calmer as a parent (N=5). For example:

"I’m much more relaxed, I used to get so stressed out". (E2)

Some parents said that discussion with others made them change their views (N=2). One parent said:

"It made me feel better knowing I’m not on my own. You can listen to other people and think, oh yes she’s like that, or no she isn’t like that. It can make you feel better about your child’s behaviour. I found it reassuring." (E4)

Other parents said that positive experiences with their child changed their view of them (N=5).

"Just generally playing with your children like getting a game out – now we do get a game out a few times a week to play as a family. It’s positive." (B1)

Other parents said that they focused more on the positive aspects of their children (N=7). For example:

"You start to look for the positive things of something loving that your child has done." (D1)

"I’m less negative about everything, I can see the positives." (A2)

"I try and see the positive side in them more. You can focus on the negatives too much." (B4)
Table 4: Changes in values and beliefs

<table>
<thead>
<tr>
<th>Sub-Theme</th>
<th>Summary of comments (Number of participants)/ excerpts from interviews</th>
</tr>
</thead>
<tbody>
<tr>
<td>Values and beliefs</td>
<td>Before the programme some participants said they compared themselves negatively to other parents (N=4). One parent said:</td>
</tr>
<tr>
<td>(N=12)</td>
<td>“Well you do look at other parents, like your friends and think well they’ve got time for their children why haven’t I got time for mine?” (B3)</td>
</tr>
<tr>
<td></td>
<td>Following the programme participants suggested they were as competent as other parents (N=6). Some parents said:</td>
</tr>
<tr>
<td></td>
<td>“Parenting isn’t really talked about in the playground. It made me realise I’m a normal parent and if they can do it, so can I.” (A4)</td>
</tr>
<tr>
<td></td>
<td>“Is anyone a ‘good parent’? You can never know it all, you’re always learning. That’s something I learned from the course.” (E4)</td>
</tr>
<tr>
<td></td>
<td>Some parents said that their parenting values had changed following the programme (N=5). For example:</td>
</tr>
<tr>
<td></td>
<td>“The perfect parent wouldn’t smack and shout but there isn’t such a thing as the perfect parent” (A4).</td>
</tr>
<tr>
<td></td>
<td>“Is anyone a ‘good parent’?— you can never know it all, you’re always learning. That’s something I learned from the course”. (E4)</td>
</tr>
<tr>
<td></td>
<td>A few parents did not feel that their beliefs about parenting had changed following the programme (N=2). One said:</td>
</tr>
<tr>
<td></td>
<td>“Sometimes it’s difficult, because you know what you should be doing as a parent, you have an idea, but it’s hard to think of strategies that will get you there. Especially when they don’t work the first time and you’ve tried again and again. The programme gives you these ideas.” (B2)</td>
</tr>
</tbody>
</table>
same but that the programme had provided them with ideas and strategies to follow those beliefs.

**3.5.2 IMPLEMENTING STRATEGIES FROM THE PROGRAMME**

The results above reflect the changes that parents identified in themselves and their children. Parents highlighted factors that supported them in implementing the strategies they learnt from the programme, and factors that had made it more difficult for them to use the strategies. Participants also commented about support they received following the parenting programme.

**3.5.2.1 Facilitators and barriers to implementing strategies**

Parents outlined various facilitators and barriers to implementing strategies that they learned on the parenting programme (see Table 5 below). Over two thirds of parents commented that it had taken time to see a positive response in their children and this was often not evident until after the programme had finished. Some suggested that behaviour began to improve during the programme but that the attitude of children took longer to alter. Some parents said that another barrier to implementing the strategies had been the additional challenges they faced if their child had ADHD or special educational needs. Some of the strategies were considered inappropriate to the specific needs of some children and families, with a minority of parents
reporting that they would have welcomed a programme that was specifically aimed at children with a particular diagnosis, such as ADHD.

The support and values of family and friends was identified as both a barrier and facilitator to parents implementing strategies. Most of the parents thought that this support had been a positive influence. They reported that other people were more likely to use the strategies if there was evidence that they had a positive effect on the child such as improved behaviour. However, some parents reported that the values of others had been a negative influence as they were different to those promoted by the programme. Other parents said that it was more difficult if there were two parents who were not following the same strategies as there was no consistency.

3.5.2.2 Support since the parenting programme finished

Parents commented about support they continued to receive or would have appreciated after they had completed the parenting programme (see Table 6 below). Some parents said that they would have benefited from follow up sessions. The few parents who continued to attend a regular parenting group, talked positively about the group and highlighted various aspects they benefited from, including emotional support and discussion of strategies. Parents also reported that the group support increased their confidence levels.
Table 5: Facilitators and barriers to implementing strategies

<table>
<thead>
<tr>
<th>Sub-Theme</th>
<th>Summary of comments (Number of participants)/ excerpts from interviews</th>
</tr>
</thead>
<tbody>
<tr>
<td>Support and beliefs of others (N=12)</td>
<td>Parents commented about how the support and beliefs of others affected them implementing strategies at home. Some parents made neutral comments (N=5), positive comments (N=8) or negative comments (N=6). For example:</td>
</tr>
<tr>
<td></td>
<td>“Mum used some of the strategies too. It was helpful and she also build a bond with her” (C3)</td>
</tr>
<tr>
<td></td>
<td>“My husband has seen the change in the older son’s behaviour and that has made him spend even more time with him.” (B2)</td>
</tr>
<tr>
<td></td>
<td>“It’s taken longer for Dad to become involved but as they’ve seen certain things working they’ve been more motivated to try it.” (A1)</td>
</tr>
<tr>
<td></td>
<td>“What we learn now is different from the knowledge of my Mother. She didn’t believe in the positive parenting because of her age” (E1).</td>
</tr>
<tr>
<td></td>
<td>“It’s very difficult if there are 2 parents and they’re not following the strategies.” (D1)</td>
</tr>
<tr>
<td>Child characteristics (N=6)</td>
<td>Parents commented on how child characteristics like special educational needs or ADHD made it more difficult for them to implement strategies (N=6)</td>
</tr>
<tr>
<td></td>
<td>“When you have a child with special needs everyday is different. You’re learning all the time” (A2)</td>
</tr>
<tr>
<td></td>
<td>“Some topics were not relevant because of child having ASD but you will cover topics that are not relevant because it’s not 1:1.” (A4)</td>
</tr>
</tbody>
</table>
Parents commented that it took time to see positive changes (N=12). Some parents said:

"Relationships change after the programme. It takes time doesn't it. You can't expect it all to suddenly be rosy, it just isn't like that" (B1).

"It wasn't over night, it wasn't as though I could suddenly not shout at her and just sit and listen. It was like I'll try and listen. It took a while." (A4)

"It takes a long time to put it in place but they know now. It took 6 or 7 weeks of me constantly saying 'no' with them testing the boundaries. – It's still testing now but it does work." (C1)

"I started to make changes during the programme. It’s taken a long time for things like attitude to change with my older one but things like behaviour were quicker to change with the younger one." (C2)

Parents commented about how it had required perseverance (N=5). For example;

"Sometimes I still shout, it's difficult." (E2)

"My husband tries to use the strategies but gets frustrated when they don't work. It requires a lot of perseverance." (E4)

Parents commented about how the strategies they used had changed since the programme (N=6).

"I sometimes still use the book when different incidents occur." (A4)

"The booklet was helpful and I still go back to that to remind myself." (C2)
Table 6: Support since the programme finished

<table>
<thead>
<tr>
<th>Sub-Theme</th>
<th>Summary of comments (Number of participants)/ excerpts from interviews</th>
</tr>
</thead>
<tbody>
<tr>
<td>Additional programme/ support (N=9)</td>
<td>Most parents said that they would welcome additional support or another parenting programme (N=9). Three parents said:</td>
</tr>
<tr>
<td></td>
<td>“The problems have changed as the children have become older. I’ve now got different questions I’d like to ask”. (E4)</td>
</tr>
<tr>
<td></td>
<td>“Follow up sessions would have been really useful”. (B2)</td>
</tr>
<tr>
<td></td>
<td>“It’s a shame a group can’t be started before the kids start nursery, aimed at a younger age group”. (A1)</td>
</tr>
<tr>
<td>Attended a weekly parenting group (N=4)</td>
<td>A couple of these parents said that this group gave them ideas for strategies (N=2).</td>
</tr>
<tr>
<td></td>
<td>All of the parents said that it provided them with emotional support (N=4). One parent said:</td>
</tr>
<tr>
<td></td>
<td>“I came in feeling upset and I’ll go home feeling better and that’s more positive for him”. (A2)</td>
</tr>
<tr>
<td></td>
<td>Most of the parents said the weekly group maintained their confidence levels (N=3). Two parents said:</td>
</tr>
<tr>
<td></td>
<td>“It gives me the confidence to try new things.” (A4)</td>
</tr>
<tr>
<td></td>
<td>“The group keeps my confidence level high.” (A1)</td>
</tr>
</tbody>
</table>
3.5.3 THE PARENTING PROGRAMME PROCESS

What mechanisms within the parenting programme may have contributed to changes in parenting, and parenting self-efficacy?

The responses of the majority of parents suggested that positive outcomes for themselves and their children had been achieved from attending the parenting programme. The data set also suggests a number of features from the programme which parents believed had contributed to these outcomes. These suggestions are considered below.

3.5.3.1 Learning from the programme

Parents commented on various aspects of the parenting programme that had supported their learning (see Table 7 below). Results suggest that the topics covered were wide enough to suit the majority of parents for children within the primary age range.

Over half of the participants commented about the leader who had run the course. A notable strength of the course leaders had been the use of personal experiences and examples, with either their own children or children with whom they had previously worked. Over half of the participants also commented on how they had learned new strategies and reflected about the success of these through the group
discussions. Additionally, parents said the group had given them the confidence to attempt new parenting strategies.

3.5.3.2 Support from the group

Nearly all of the participants across the five parenting programmes commented about the support they had gained from the group (see Table 8). Parents said they felt emotionally supported by the other group members and many had felt reassured by the other parents. Some parents also highlighted that they felt empowered by the support from the group. Feedback suggested that the group identity contributed to parents feeling more confident and thus empowered to try some of the strategies they had learned through the programme. Listening to others with similar difficulties to themselves succeed was also highlighted as empowering.

Some parents said that the group dynamics were positive, with the size of the group being appropriate for them to feel comfortable sharing personal experiences and feel relaxed. However, other parents commented that the group dynamics had been difficult at times, as some parents were more vocal, while others were quiet and chose not to participate. Although some parents found the group dynamics difficult they still considered the programme emotionally supportive. Perhaps dynamics were only difficult during some sessions, as they did not seem to have been sufficiently aversive to have prevented parents from identifying with the group.
Table 7: Learning from the programme

<table>
<thead>
<tr>
<th>Sub-Theme</th>
<th>Summary of comments (Number of participants)/ excerpts from interviews</th>
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</table>
| Content of the programme (N=11) | Participants commented about a good range of topics being covered by the course (N=7). For example:  
  “We covered a lot of different topics that suited a lot of different people and it was about the same amount in each” (A3).  
  “I’d give it a 10 for being successful. It covered all aspects of parenting from being a small baby to being a teenager”. (C1).  
  Some participants identified particular topics they had found useful (N=7). A few parents said:  
  “The setting loving limits was useful and the one about setting boundaries”. (C2)  
  “The behaviour session was really useful”. (E4)  
  A few participants commented on personal relevance of topics (N=5). One parent said:  
  “I found the behaviour session most helpful because of the younger one. He was going through the tantrum stage and when he wasn’t happy you knew about it”. (B1) |
| Group leader (N=12) | Participants commented positively about how the leaders had used their own experiences as examples (N= 8). For example:  
  “She used her own issues and experiences, she didn’t just let us talk about our things”. (C1)  
  “She used her own experiences about her own children. Lisa was very approachable”. (C2)  
  “Not so much the information she bought in but her examples that I’d draw from for my own personal use”. (A1)  
  A few also suggested that the knowledge and expertise of the leaders had been useful (N=3).  
  Some participants talked about the group having ownership of the course (N=5). A few said:  
  “We would start a conversation off and she would follow that”. (B1) |
“The parents had a lot of say in the discussion and what the topics were that was covered”. (B2)

A couple of participants (N=2) said that the feedback they had provided was important.

A few participants suggested that the leader had found it difficult to manage the group dynamics (N=3). One participant said:

“Sometimes the topics didn’t get covered because of the discussion”. (A4)

Only 1 parent had difficulty approaching the leader.

<table>
<thead>
<tr>
<th>Learning from the group (N=13)</th>
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</table>
| Participants commented that they had learned from the rest of the group (N=13). Some of these participants suggested they had learned new strategies (N=6) from the group while others thought the group had supported reflection (N=5) about strategies. For example:

“You sit and discuss things and share ideas. It was looking at how I was doing things at home and seeing what I could change” (A4).

“We’d talk about what we’d done since the last week”. (B1)

“I tried some of the things other people were suggesting.” (E2)

“You sit and discuss things and share ideas, and it was looking at how I was doing things at home and seeing what I could change.” (H4)

“It was useful listening to other parents ideas.” (E4)

Most participants suggested they had felt empowered by the groups ideas to try something different (N=8).

“It gave us a chance to practice and it didn’t matter if they weren’t successful. We came back and discussed it with the group. It then gave me the confidence to try something else. I found the group supportive”. (C2)

“That was the exciting thing like you could come home and think oh I’ll try that. I stuck at it more because of the support from the group. If it wasn’t for them I’d still be shouting.” (E3)
Table 8: Support from the group

<table>
<thead>
<tr>
<th>Sub-Theme</th>
<th>Summary of comments (Number of participants)/ excerpts from interviews</th>
</tr>
</thead>
<tbody>
<tr>
<td>Support from the group</td>
<td>Participants commented on the group dynamics. There were an equal numbers of positive (N= 5) and negative (N= 5) comments. For example:</td>
</tr>
<tr>
<td>(N=17)</td>
<td>“There were lots of different people in the group and sometimes it was difficult to manage the group dynamics. Some people were a lot louder than others and dominated the discussions”. (E1)</td>
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<tr>
<td></td>
<td>“Some of the group were a bit quiet. You’ve got to be able to join in and answer questions properly. It’s a waste of time going if you don’t want to give or want any help”. (C4)</td>
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<tr>
<td></td>
<td>“The group was a good size. If it had been a big group it would have been difficult to share experiences especially as they’re personal”. (C2)</td>
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<tr>
<td></td>
<td>“Everyone was relaxed in the group”. (B1)</td>
</tr>
<tr>
<td></td>
<td>Participants commented on how they felt emotionally supported by the group (N=15). More specifically they commented on how they felt reassured (N=12) and/or empowered (N=7). For example:</td>
</tr>
<tr>
<td></td>
<td>“Other parents were going through the same thing. I thought I was the only one”. (C3)</td>
</tr>
<tr>
<td></td>
<td>“You think you’re the only one, it’s been positive for me because I felt very alone with my problems” (A2)</td>
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<tr>
<td></td>
<td>“The discussions were useful, I found them reassuring. It made me realise that you’re not on your own”. (B3)</td>
</tr>
<tr>
<td></td>
<td>“Looking at other people you think oh yes I can do it and it’s not impossible”. (A4)</td>
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<tr>
<td></td>
<td>“You can hear from others that your children aren’t as naughty”. (B1)</td>
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</table>
3.5.3.3 Teaching methods

Parents commented on various teaching methods they had found useful during the programme (see Table 9 below). Parents highlighted the importance of actively participating during the course sessions. They thought it was important that the learning had been interactive through activities and discussion. Over two thirds of the participants commented on the teaching methods that had been used during the group sessions. Over half of these participants said they had found the role play activities useful. These provided parents with an opportunity to rehearse parenting strategies within the context of the sessions. It also supported parents to consider situations that may occur at home from a child’s perspective.

Although parents learned new strategies during the sessions, for behaviour to change at home it was important these strategies were applied in context. Some of the parents commented that they also found the home activities useful. To support parents during the course sessions, and while they were at home, parents were provided with a booklet that covered key points from the course. Participants reported that they found the written support materials, such as the booklet, useful and some said they continued to refer to it after the course had finished.
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<thead>
<tr>
<th>Sub-Theme</th>
<th>Summary of comments (Number of participants)/ excerpts from interviews</th>
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<tr>
<td><strong>Teaching method (N=14)</strong></td>
<td>Most participants commented on the role play activities they had participated in (N=7). Three parents said:</td>
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<tr>
<td></td>
<td>“The role play was very helpful. It gave us a chance to practice the strategies”. (C2).</td>
</tr>
<tr>
<td></td>
<td>“The role play was good because it gave you a chance to practice the strategies”. (E4)</td>
</tr>
<tr>
<td></td>
<td>“The role play was quite fun and made you think about situations you might find yourself in”. (B2)</td>
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<td></td>
<td>Some participants talked about the group discussions being a useful way to learn new strategies (N=6) while 1 participant (N=1) found the discussion unfocussed. One parent said:</td>
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<td></td>
<td>“It gets you involved about thinking how to put it into practice. I found the discussion part really helpful” (E1)</td>
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<td></td>
<td>Some participants talked about the partner work they had engaged in (N=3). A few participants suggested they had played games and activities (N=4).</td>
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<td></td>
<td>A few participants talked about the homework activities (N=4). One participant said:</td>
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<td></td>
<td>“Homework tasks were good because it gave us a chance to practice and it didn’t matter if they weren’t successful” (C2)</td>
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<tr>
<td></td>
<td>Most participants commented positively on the support materials provided by the course (N=8). For example:</td>
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<tr>
<td></td>
<td>“I find the booklet helpful, I go back to it”. (A3)</td>
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<tr>
<td></td>
<td>“The booklet was helpful and I still go back to that to remind myself”. (C2)</td>
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<tr>
<td></td>
<td>“The booklet was really useful to refer to at home”. (B1)</td>
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3.6 DISCUSSION

The initial part of the discussion considers the direct and indirect role of the parenting programme in altering parenting behaviours. The role of PSE as both an outcome from the parenting programme and as a mediator within the process of behaviour change is also discussed. The second part of the discussion hypothesises what mechanisms from the parenting programme may alter PSE, while the next section highlights factors that influenced the long-term outcomes for parents from the programme. The final section to the discussion acknowledges the strengths, limitations, and implications for future research and professional practice, from this study.

3.6.1 The role of the parenting programme in altering parenting behaviours and levels of PSE

Most parents reported that the parenting programme facilitated changes in their parenting practice and also altered the behaviour of their children. In order to depict the different pathways through which these changes may have occurred Figure 2 was devised. A direct pathway to these changes is illustrated by Figure 2. However, a more indirect pathway is also depicted (see Figure 2) and hypotheses that changes in parenting may have occurred from increased PSE levels, that could in turn have lead to changes in behaviour. Figure 2 also illustrates various pathways through which PSE levels may have increased; these could be bi-directional. The Figure will be referred to throughout this discussion.
The sub themes (see Section 3.5) reflect the categories that Bloomfield and Kendall (2007) chose to use in their questionnaire “Tool to Measure Parenting Self-Efficacy” (TOPSE). Although PSE was not directly measured in the present study, the changes parents identified reflect the PSE construct adopted by Bloomfield and Kendall (2007). This supports the hypothesis that the changes in parenting elicited by the programme, are partly due to changes in PSE.

Most of the participants reported that they were able to maintain boundaries for behaviour and they focused more on the positive behaviours of their children. This exemplifies positive parenting (Maccoby and Martin, 1983) reflecting strategies used by
parents with high PSE levels (Day et al, 1994, Gross et al, 1999, Sanders and Wooley, 2004). The parent from the programme who was unable to use these strategies was unable to implement consistent use of boundaries, characteristic of a parent with low levels of PSE (Gross et al, 1999, Tucker et al, 1998).

Parents reported that their children had responded to these strategies with improved behaviour. Successful maintenance of boundaries and a positive response from children probably led to parents’ increased sense of control. This supports previous findings in which parents reported increased levels of control, following a parenting programme (Bloomfield and Kendall, 2007). In the present research, nearly all the parents commented about discipline strategies, indicating that in their view this formed an important aspect of parenting. Perhaps parents require a sense of control before levels of PSE can increase.

Parents also suggested they were able to reflect on how their own behaviour affected situations, and use this awareness to take steps to pre-empt their children’s negative behaviour. Therefore their child’s reaction could sometimes be prevented by the use of appropriate strategies. This supports previous research by Coleman et al (2002) who found that parents with high PSE levels were more likely to prevent difficult child behaviour and less likely to reinforce negative child behaviours. A reduction in the number of incidents where a parent and child interact negatively is likely to increase levels of perceived control over the situation and promote a more positive relationship. Increased levels of control may then facilitate the other changes identified by parents.
such as improved communication and spending more positive time with their children (see Section 3.5.1.1). Research by Bloomfield and Kendall (2007) also found increases in parents’ level of “play and enjoyment” with their children, following parenting programmes. However, conclusions about the importance of particular elements to the PSE construct cannot be drawn from previous research.

This study also emphasises the importance of communication, which was not a specific category measured by the TOPSE (Bloomfield and Kendall, 2007), and perhaps needs to be more explicitly incorporated into research that investigates PSE. Additionally, parents suggested that improved communication and spending more positive time with their children led to a more positive parent-child relationship (see Figure 2). This again supports the findings of Coleman et al (2002), who found that parents with high PSE levels responded positively to their children when they were completing activities. The increased number of positive interactions probably led to parents viewing their children more positively, with some reporting increased levels of empathy and attempts to understand their children as individuals (another category, used by Bloomfield and Kendall, 2007).

It could be that as parents experience success across the various domains of parenting (discussed above) PSE levels increase. However, it may be that the parenting programme directly increased levels of PSE (see Figure 2), that in turn facilitates a change in the parenting reported by the parents. Some parents explicitly mentioned that their confidence had increased through the parenting programme, indicating that their
views about their own capabilities were altered (see Section 3.5.1.3). This supports previous findings by Landy and Menna (2006). Increased confidence is also likely to have resulted in the reported feelings of being calm and more relaxed as a parent (see Section 3.5.1.3). Figure 2 also illustrates a possible bi-directional relationship between PSE behaviours, feelings, and beliefs. It may be that feedback in the form of improved children’s behaviour or more positive feelings directly increase PSE levels.

The programme also facilitated a change in how parents view themselves in comparison to others. It may be that increased PSE levels lead to changes in values and beliefs about the self as a competent parent in comparison to others. Bloomfield and Kendall (2007) also found increased levels of self-acceptance. However, as illustrated by Figure 2, causation cannot be established and it is possible that a change in values or beliefs and the normalising of unrealistic expectations of being a “perfect parent” (see Section 3.5.1.4) leads to a parents’ increased confidence or levels of PSE. Changes in beliefs and values may be important if parents are to sustain a change in their behaviour over time. However, the results from this research indicate this is a complex element to PSE, as some parents did not require a shift in their belief systems but just support in implementing strategies to follow those beliefs. This is the first research to consider the effects of beliefs on PSE levels, and further research into how beliefs may alter or sustain PSE is required.

In conclusion this research lends cautious support to previous findings that indicate parenting programmes increase levels of PSE (e.g. Barber et al, 1992, Gross et al,
1995, Bloomfield and Kendall, 2007). Parents suggested that the parenting programme had facilitated positive changes for them and their children. The present study also indicates that PSE is likely to play an important role both as a potential outcome and a mediator to the parenting programme process. There could also be a bi-directional relationship between PSE and parenting, as illustrated in Figure 2. As PSE could be an important element to altering behaviour, it is important to consider the processes, highlighted by parents which made the programme successful, as these mechanisms may also increase PSE levels.

3.6.2 What mechanisms within the parenting programme may have facilitated a change in parent self-efficacy?

Parents commented that support from the group was one of the most important elements of the programme (see Section 3.5.3.2). The process of observing others persevere and succeed, exemplifies one of the mechanisms proposed by Bandura (1989, pg 733): “observing people similar to oneself succeed by perseverant effort”. This is supported by comments made by parents (see excerpts in Table 8, pg 99) For this mechanism to be effective parents needed to view themselves as similar to others in the group, as reported by parents in this study. They also said that it was important for the leader to use their own experiences; this probably facilitated a group identity.

Some of the participants commented about the group, retaining ownership over the course. However, parents were also positive about the wide range of topics that were
covered (see excerpts in Table 7, pg 97). This indicates that although parents felt like they had ownership over the sessions; the discussion was actually steered by the leader towards particular topics. Therefore, it is important for leaders to act as facilitators to the group discussion and to empower parents, possibly increasing PSE levels, rather than directly teaching parenting strategies through expertise which may reduce PSE levels in parents.

The group discussion was reported by parents to provide them with motivation to sustain a change in their behaviour. This again reflects another mechanism hypothesised by Bandura (1989, pg 733) to increase SE: “social persuasion that one possesses the capabilities to succeed”. Parents on the programme suggested the group had empowered them to try something different and to persevere if they were not initially successful, (see excerpts in Table 8, pg 99). Parents said that the programme supported them to use strategies successfully and to acknowledge their successes in the group. This reflects another mechanism highlighted by Bandura (1989, pg 733): “direct mastery of experiences”, (pg 733) hypothesised to increase SE.

Previous research shows that parents with high PSE use problem-focussed coping (e.g. Coleman and Karraker (1998). Additionally, Bandura (1989, pg 733) hypothesised that SE affected thinking processes. This research suggests that the programme supported parents to alter some aspects of their cognitive processing. Parents suggested that the programme supported them to reflect (see excerpts in Table 1, pg. 80) on how they could alter their parenting strategies to be successful. This exemplifies the development
of “analytic thinking” (Bandura, 1989, pg729) or an increased problem solving capacity associated with people who have high SE.

Parents suggested that several teaching methods had been useful in the sessions, such as the role play (see excerpts in Table 9, pg 101). This facilitated discussion and reflection about parenting in the sessions and provided an opportunity to rehearse different strategies. The programme supported parents to experience “anticipatory cognitive simulations” (Bandura, 1989, pg 729) where people with high SE are able to visualise their success.

In conclusion, parents suggested various mechanisms used during the parenting programme, that are congruent with the mechanisms hypothesised by Bandura (1989) to increase levels of SE. Parents also highlighted factors they considered supportive in changing their behaviour and those which made it more difficult to implement strategies.

3.6.3 Implementing strategies and long term outcomes

The main challenge to implementing strategies that parents commented on was the amount of time it took for there to be a noticeable change in their children. This is supported by previous research (Barber et al, 1992) which found that directly after parenting programme, parents did not report a change in their children’s behaviour but measures over a follow up period indicated these changes had occurred. The need to persevere with strategies was therefore identified as a challenge. It may be that it takes
time for PSE levels to increase due to parents experiencing a lack of success with their parenting through a limited response from their children.

In the present research, as parents were interviewed at least five months after they had completed the programme, it could be assumed that PSE levels had remained high. None of the parents mentioned their confidence had decreased, and most parents said that the changes in their children’s behaviour had occurred after the programme. They had experienced growing levels of personal success which may have led to further increase in PSE. This supports the findings of previous research (e.g. Tucker et al, 1998, Barber et al, 1992, Bloomfield and Kendall, 2007) who found that PSE levels were maintained after a follow up.

Parents identified the support and beliefs of other adults, in and around the family (see Section 3.5.2.1), as having either a negative or positive influence, depending on personal circumstances, when they implemented strategies. Participants said that other adults retained a different understanding of what constituted effective parenting in comparison to the ideas promoted by the programme. Alternatively some parents found that others helped them to persevere with strategies (see Section 3.5.2.1). This supports previous research that highlights the importance of a social support network, especially for those parents with more difficult socio-economic circumstances (Ardelt and Eccles, 2001). Previous authors hypothesised that the support of others is one of the environmental factors that could increase PSE (see Ardelt and Eccles, 2001 or Davies, 2009 for a full discussion).
Some parents suggested that they would find further support with parenting useful, they suggested that there were different challenges as their children became older. A few parents continued to attend a regular parent group (see Section 3.5.2.2) and reported that it maintained their confidence levels and ideas for different strategies. Some parents may require ongoing support to develop their knowledge as their children develop: this in turn, may sustain high levels of PSE. If PSE assumes a mediating role between knowledge and behaviour, as proposed by Bandura (1989), then increases in knowledge through ongoing parent support may directly lead to increases in PSE.

Landy and Menna (2006) found that confidence levels and knowledge levels increased following a parenting programme. This provides a cautious indication that the two outcomes could be linked. However, this relationship is likely to be more complex as Conrad et al (1992) found that some parents were confident but lacked knowledge about parenting and child development (See Conrad, 1992 for a further discussion). This relationship requires further investigation before PSE levels are used exclusively as an indicator for whether a parenting programme is effective. The present study indicates that for some parents, ongoing support is useful for them to sustain a long-term change in their parenting.
3.6.4 The contribution of this study

3.6.4.1 Strengths

Previous findings (see Davies, 2009 for a review) were extended by this study which aimed to identify whether a parenting programme increased levels of PSE. It also considered the mechanisms through which PSE may have been increased; these seem to reflect those hypothesised by Bandura (1989). The findings from this research also provide a degree of construct validity to the PSE questionnaire designed by Kendall and Bloomfield (2007), as parents in this study identified similar aspects of parenting to those measured by the questionnaire.

3.6.4.2 Limitations

Although this study has contributed to theory development, there are a number of limitations regarding the design, sampling and method used to obtain data.

In common with previous research (e.g. Landy and Menna, 2006, Bloomfield and Kendall, 2007) where participants are asked to self-report, there is the possibility of a self-serving bias (Cohen et al, 2000). Although parents had no reason to report inaccurate opinions of the programme and many explained they had found the process personally challenging, this threat to validity can not be eliminated. The design of the research could have reduced this threat to validity with the use of a multi-method
design, or triangulation of data sources regarding the changes reported by parents (Robson, 2006).

In this small scale study it was not possible to compare whether parents with children on the verge of exclusion, compared to parents with children who have different levels of behaviour difficulties, found the programme comparably useful. It would have been unethical to have made this comparison without informing parents, and there was a higher risk of self-serving bias if parents were aware that comparisons were being made.

**3.6.4.3 Implications for practice and directions for future research**

This study has various implications for professional practice and future research. It is important for practitioners who run parenting programmes, to consider the methods they utilise when delivering a course and whether these could potentially increase PSE levels. In this study parents identified the use of particular strategies, including the development of a group identity and the facilitation of a group discussion that could be potentially important to increasing PSE.

Many of the parents in this study reported that they would have welcomed additional support after the programme. Practitioners who run parenting programmes therefore need to consider how parents can remain supported after the programme has finished. This could be through follow up sessions or the continuation of a parenting group,
perhaps run by a member of staff at school. This could be important for PSE levels and changes in parenting to be sustained over time.

Parents reported that there were positive changes in children’s behaviour at home, but further research about the impact of PSE levels on children and their behaviour at school is required. One parent in the current research suggested there had been an improvement in her child’s behaviour at school. However, further research is required to consider whether positive changes at home have a positive impact in other settings. Further research could enhance the probability of generalisation of change across settings.

Finally, this study indicates that PSE could have an important role in altering parenting behaviours. Some parenting programmes, like the one in this study, lend support to the notion that PSE levels can be increased which may then facilitate a change in parenting. The mechanisms in a parenting programme that may increase PSE levels require further research, as these could be particularly important in facilitating positive, long-term change for parents and their children.
These concluding comments provide a critical reflection on the design, method and findings from the empirical research and literature review, it also highlights areas for future research. Although various limitations are acknowledged, the literature review and empirical research have made a distinctive contribution to the literature on parent self-efficacy and parenting programmes.

4.1 REFLECTION ON THE DESIGN AND METHOD USED IN THE RESEARCH

The researcher considered how validity and reliability could be increased throughout the research (see Section 3.4.5). However, it is important for various limitations to the design and method to be acknowledged and the implications for future research considered.

4.1.1 Design

The sample for the research contained mothers who had attended the parenting programme within the last 12 months. Perspectives were gained retrospectively, after the parents had completed the programme, and parents may not have remembered everything (Mason, 2002). However, parents highlighted that for
children’s behaviour to change they had to allow time and perseverance. Therefore if data had been collected directly after the programme may not have reflected these changes.

Participants were interviewed following various time lapses between completing the parenting programme and the interview; this has a number of implications for the research findings. Parents interviewed after a shorter time lapse may be expected to have higher PSE levels and more positive parenting behaviours as they had completed the course more recently, whereas a longer time lapse would require more perseverance with parenting behaviours and PSE levels may therefore have been adversely effected. Also, the accounts from participants with a longer time lapse may be less reliable due to the reliance on their memory for events.

Parents also had individual family circumstances that varied, including different numbers of children who were various ages. It is likely that a larger number of children are more challenging. This may adversely affect a parents perseverance at using strategies and consequently reduces PSE levels.

All of the parents, except for one participant reported they had been able to use the programme to alter their parenting strategies. This parent had low PSE levels and reported having low levels of control over her children. Due to the retrospective nature of the research, the parents who volunteered were an opportunity sample (Cohen et al, 2000). The sample may have been biased (18 out of 34 parents) and
only have contained parents with high levels of PSE; i.e. they may have believed in their parenting abilities and may therefore have felt confident to participate in the research. It is possible that parents with low levels of PSE chose not to participate.

Alternatively, the sample of parents attending the programme, run by the outreach team may not be representative of the general population. The programme required parents to volunteer. It may be that these parents already have a certain level of PSE and that parents who have very low PSE or are naively confident (see Section 2.7.1) may be hard to reach and rarely participate in parenting programmes. Therefore, findings may not be generalised to wider population.

The literature review highlights that other factors, such as a challenging environment, can make PSE levels particularly important for positive child outcomes. Therefore, it may be particularly important to raise PSE levels in parents who are facing adverse circumstances in which to raise their children. Many of these parents may be “hard to reach”, with particularly low levels of PSE and may therefore not attend parenting programmes. Future research needs to consider how to raise the PSE levels of these parents and whether there are other interventions that could be effective.

It is difficult for the design of this study to eliminate respondent bias (Robson, 2006) as parents may have provided information during the interview that reflected themselves in a more positive light and what they considered to represent a “good
parent”. However, the researcher was independent to the parenting programme and this would have increased the likelihood that parents provide accurate accounts.

In the present study, mothers attended the programme and they were subsequently interviewed. However, it is important for future research to consider the role of fathers and other key adults within a child’s life. The effect of PSE on the behaviour and emotions of fathers has not been investigated and research into PSE and parenting programmes remains limited. It would also be interesting for future research to compare the experiences of different groups of parents on a parenting programme. It would have been interesting to consider whether parents with children on the verge of exclusion found the programme more or less positive than other groups of parents, and whether levels of PSE increased or their behaviour changed.

Collecting pre and post intervention data, as originally planned (see Section 1.2 and 1.4) would have made conclusions about PSE levels and behaviour change more valid. A follow up measure after the intervention would also have provided more reliable information regarding whether changes had been sustained over time. If multiple methods had been used to collect this information it would have increased the validity and reliability (triangulation) of the research findings (Robson, 2006).

I chose to use thematic analysis to analyse the data from the interviews however there are alternative methods that may be appropriate for future research. A grounded theory design would allow a theory to be constructed from the data set
about how parenting programmes alter parenting and it may indicate that PSE levels are an essential component. It was not possible for the present research to use this methodology as the researcher had pre-determined research questions agreed with the outreach team. An alternative method that may also be useful is Interpretative phenomenological analysis. This method aims to understand participants’ everyday experiences in detail, to understand a particular phenomenon and would be a useful way to gain parents’ perspectives. Transcripts are coded (with the researcher considering information provided by the participant and the researcher's interpretation of the meaning of those claims), this method was not used in the present research because of the limited time scale in which data needed to be coded and themed.

4.1.2 Strengths and limitations of the method

The use of interviews as a method of data collection during this study also has various strengths and limitations, some of which are considered below.

The face-to-face interview in this research provided an opportunity for interesting points to be followed up and multiple perceptions to be considered in depth (Robson, 2006). In my view, participants responded well to the semi-structured schedule as it allowed them some control over the direction of enquiry during the interview procedure. However, the individuality of the interviews, due to a less standardised procedure raises issues about reliability and bias that are difficult to rule out (Robson, 2006).
If the interview had been directly compared with another independent measure that previous research had shown to be effective, convergent validity would have increased the validity of the interview findings (Cohen et al, 2000). However a limitation from previous PSE research is that the construct of PSE has not yet been firmly established and a valid measure of PSE (See Coleman and Karraker, (2000, 2003 for a full discussion) is yet to be designed and reliably tested.

Cohen et al (2000) identify the characteristics of the interviewer and participant as sources of bias. The choice of a semi-structured interview (rather than an unstructured interview) increase the reliability of participants covering the same topics, and reduces the interviewer bias. However, the individual differences between participants in terms of their ability to remember, articulate and explain their own experiences through the interview process was evident during this study, in terms of depth and expansion of answers. There was also a power imbalance (see Section 1.5.2 for further discussion) and some participants seemed more relaxed than others. Participants’ emotions during the interview will have affected their interactions with the interviewer, their engagement with the interview process and consequently the validity and reliability of data (Mason, 2002).

Oppenheim (1992) argues that changes in wording, context, and emphasis, undermine reliability as questions are consequently different for each participant. He suggests that reliability can be increased through the piloting of interview schedules.
Although a structured interview would have increased reliability, in my view it would not have allowed the flexibility for participants to represent their unique view of the world. Also, Mason (2002) argues that interviews should be considered as "social interactions" (pg. 65) and regardless of a pilot study or structure, the interaction cannot be considered as “biased”.

4.2 REFLECTIONS ON THE RESEARCH FINDINGS

Despite the limitations, this empirical research extends previous findings in the literature and indicates direction for future research.

To the authors’ knowledge this is the first literature review to consider how PSE research can inform parenting programmes. It is also the first review of parenting programmes that use PSE as an outcome measure to determine whether an intervention was effective. Although previous studies indicate that PSE levels can be increased by parenting programmes (supported by this study) it is important to consider the construct of PSE in further detail.

This is also the first qualitative study in PSE; previous research has used questionnaires (pre and post) as a method for data collection (see Section 2.8). Although this has provided an indication of the changes in PSE, the preconceived idea (in questionnaires) about what components make up the construct of PSE (e.g.
control, discipline, relationship, communication), and which elements are more important, are still to be established.

Parents in this study indicate that having control over their children’s behaviour is an important element to PSE. This may be a prerequisite to developing other parenting behaviours such as; building a positive relationship or having good communication with children. It may be that all individuals have particular core components to the construct of PSE, such as control, but that other more peripheral elements are more individualised. Further research is required to establish this.

Further qualitative research would provide a better understanding about the construct of PSE. It is likely that PSE is different for every individual therefore “high” PSE may be different for every person. There is likely to be an optimal level of PSE for parents to attain a “good enough” level of parenting, although this is still to be established. The literature review highlights the complex interaction between a range of factors and PSE, indicating that different levels will be attained depending on the individual. Although PSE can be utilised as a measure for whether a parenting programme has been successful, it is unrealistic to assume that all parents will reach a pre-determined level of PSE. Perhaps individualised targets would be more useful and realistic.

Findings from previous research (see Section 2.7) and the present study indicate that programmes increase PSE levels and alter parenting behaviours. Therefore, it is
important for research to establish how programmes can increase PSE levels. This is the first study to investigate how a parenting programme can increase levels of PSE. This research indicates that the process might be more important in raising PSE levels than the information provided by the programme leaders. However, knowledge gained through the programme is also likely to be important especially when considering naively confident parents (see Section 2.7.1). Further research is required to establish whether there is a relationship between knowledge and PSE levels.

Future qualitative research would also provide an opportunity to gain the voice of the child. Children could provide information regarding the changes in their parents behaviours and also their own thoughts, feelings and behaviour. It would be interesting to consider whether there is a positive change in the relationship between themselves and their parents following a parenting programme. Semi-structured interviews both pre and post intervention would provide a method to gather this detailed and individualised information. Research with children regarding their opinions on parenting remains relatively sparse (Moran et al, 2004). This is partly due to the ethical issues about whether it is appropriate to consult children regarding their parents behaviour.
4.3 PERSONAL LEARNING

My previous experiences as a researcher required me to use quantitative methods for data collection and subsequent statistical analysis of data. Through the doctoral programme, I have widened my knowledge about the value and potential contributions of qualitative research, particularly the advantage of achieving depth of understanding about a particular topic (Cohen et al, 2000). Through my empirical study I was able to develop my skills as a qualitative researcher.

I have also experienced the challenge of negotiating research with key stakeholders and am more aware of the practical difficulties associated with researching in a real world context. During this time it was important for me to be flexible and to utilise the expertise of others through supervision with colleagues and University tutors.

This research has developed my skills as an interviewer. I practised my skills at using probes with a colleague prior to the research; I also learned how to phrase questions carefully so that I was less likely to lead participants. Some parents seemed to particularly enjoy the interview and it was sometimes difficult to bring the interview to a close.

I have also developed my skills in analysing qualitative data. There was a large quantity of information from 18 interviews and this could have been reduced by using some structured questions when designing the questionnaire (Mason, 2002).
However, in my view this would have reduced the depth of the data which was a strength to this research. To analyse the data I followed the phases described by Braun and Clarke (2006), the Conceptual maps (See Appendix 8) were particularly useful to consider the relationship between different themes.

4.4 CONCLUDING COMMENTS

High PSE levels are associated with parenting behaviours that lead to positive outcomes for children. However, further research into the construct of PSE, how it develops and the influence of child characteristics or the wider environment is required. Parenting programmes increase levels of PSE and alter parenting behaviours. It is likely that multiple pathways lead to these changes but the mechanisms through which a parenting programme may increase PSE levels are still to be established. PSE levels may provide an indicator of whether a parenting programme is successful although further research is still required. Various limitations are acknowledged but this small scale study has extended previous findings and provides interesting directions for future research.
APPENDICES

A1 Ethics form for the University of Birmingham, School of Education

Form EC2 for POSTGRADUATE RESEARCH (PGR) STUDENTS
MPhilA, MPhilB, MPhil/PhD, EdD, PhD IS

This form MUST be completed by ALL students studying for postgraduate research degrees and can be included as part of the thesis even in cases where no formal submission is made to the Ethics Committee. Supervisors are also responsible for checking and conforming to the ethical guidelines and frameworks of other societies, bodies or agencies that may be relevant to the student’s work.

Tracking the Form

I. Part A completed by the student
II. Part B completed by the supervisor
III. Supervisor refers proposal to Ethics Committee if necessary
IV. Supervisor keeps a copy of the form and send the original to the Student Research Office, School of Education
V. Student Research Office – form signed by Management Team, original kept in student file.

Part A: to be completed by the STUDENT

NAME: Lisa Davies

COURSE OF STUDY (MPhil; PhD; EdD etc):

EdD: Educational and Child Psychology

DATE: 19/03/2008

NAME OF SUPERVISOR: Dr Jane Leadbetter

PROPOSED PROJECT TITLE:

The effects of a school based, positive parenting program on parental self-efficacy.
BRIEF OUTLINE OF PROJECT: (100-250 words; this may be attached separately)

A Pupil Referral Unit (The Mere) currently delivers a parenting program as part of their outreach service to mainstream primary schools. If a child is on the verge of exclusion, schools are able to request a parenting program to be delivered and the parents of that particular child are invited to attend. The remainder of the group are recruited on a voluntary basis through a letter from the school. The program is 6 weeks in duration and follows the “Positive Parenting” publications and programmes manual. The aim of my research is to evaluate whether the parenting programme has long term benefits for the parents.

MAIN ETHICAL CONSIDERATION(S) OF THE PROJECT (e.g. working with vulnerable adults; children with disabilities; photographs of participants; material that could give offence etc):

Working with potentially vulnerable parents and possibly discussing the difficulties of their child’s behaviour. This could be an emotive subject for some parents and it may elicit difficult memories. They may also disclose related family issues and difficulties.

RESEARCH FUNDING AGENCY (if any): N/A

DURATION OF PROPOSED PROJECT (please provide dates as month/year): 10/2008 - 12/2008

DATE YOU WISH TO START DATA COLLECTION: 10/2008

Please provide details on the following aspects of the research:

1. What are your intended methods of recruitment, data collection and analysis? [see note 1]

Please outline (in 100-250 words) the intended methods for your project and give what detail you can. However, it is not expected that you will be able to answer fully these questions at the proposal stage.
Parents were informed of the program through a letter sent by the school. They then volunteered to participate in the parenting program. Parents completed the program 6-9 months ago.

The follow up study will send letters to parents explaining about the evaluation and asking them if they would participate. Parents will then be contacted via telephone to arrange a time and place to participate in an interview. The letter and telephone call will inform them about myself as a researcher, the evaluation aims, and their right to withdraw consent.

Parents will complete a semi-structured interview and this will be tape recorded for analysis purposes (permission to record will be obtained from the parents prior to the interview).

2. How will you make sure that all participants understand the process in which they are to be engaged and that they provide their voluntary and informed consent? If the study involves working with children or other vulnerable groups, how have you considered their rights and protection? [see note 2]

Parents will be sent a letter informing them about myself as a researcher, the evaluation aims and their right to withdraw consent. Prior to the interview I will verbally explain the aims of the evaluation and discuss the semi-structured interview process. They will be informed of their right to withdraw consent at any time during the research.

3. How will you make sure that participants clearly understand their right to withdraw from the study?

Participants will be informed verbally and through writing that they have the right to withdraw from the research at any time.

4. Please describe how you will ensure the confidentiality and anonymity of participants. Where this is not guaranteed, please justify your approach. [see note 3]

Parents will be given a number and letter to identify the school program they attended. Recordings of the interviews will remain anonymous. All data will be made anonymous during analysis and when findings are reported.

5. Describe any possible detrimental effects of the study and your strategies for dealing with them. [see note 4]

6. How will you ensure the safe and appropriate storage and handling of data?
Any data will be stored anonymously. Electronic data will be kept securely in a locked location.

7. If during the course of the research you are made aware of harmful or illegal behaviour, how do you intend to handle disclosure or nondisclosure of such information? [see note 5]

If a parent disclosed any illegal or harmful behaviour, either I or the Parent Program Facilitator would have a duty to report it to the appropriate agency (perhaps social services or the police).

If a parent began to disclose illegal or harmful behaviour. I would then explain that anything they disclosed I would need to report to the appropriate agency.

8. If the research design demands some degree of subterfuge or undisclosed research activity, how have you justified this and how and when will this be discussed with participants?

N/A

9. How do you intend to disseminate your research findings to participants?

Research findings will probably be disseminated using various methods. Verbally and visually findings may be presented short public domain briefing. Findings will be written up as part of my thesis, and possibly a publication in a journal.
A2 Letter to participants
Appendix 2 is not available in this web copy of the thesis
A3 Consent form

Name...................................................................................................................................................
Contact number (optional)......................................................................................................................

My name is Lisa Davies (Trainee Educational Psychologist) and I am employed by Dudley Educational Psychology Service (EPS). As part of my training I am evaluating the parent program run by the outreach team. The evaluation aims to highlight strengths and areas for development, both for the program and for all those involved with supporting children and their families.

Thank you for agreeing to participate in the interview. I would like to emphasise that:

- Your participation is entirely voluntary
- You are free to refuse to answer any question
- You may withdraw part or all of your contribution at any time.

The interview discussion will be audio-recorded, but when transcribed will not contain personal information or identify individuals. Researchers from the EPS or Birmingham University may have access to the recording. Excerpts from the discussion may form part of the final research report but under no circumstances will your name be included.

I agree to excerpts of the focus group being used in the final report.

Signed..............................................................Date..................................................

Please sign this form to show that you have read and understood the contents.
Signed.............................................................. Date..................................................

Name (printed)........................................................................................................................................
A4 Interview schedule

Introductory Comments

Thank you for being willing to take part in a follow up interview to the parenting program that you completed with either Lisa Bowen or Jane Evans. My name is Lisa Davies and I am a year 3 Trainee Educational Psychologist. I am employed by Dudley Educational Psychology Service (EPS). As part of my training I am evaluating the parent program run by the outreach team. The evaluation aims to highlight strengths and areas for development, both for the program and for all those involved with supporting children and their families.

Can I first of all assure you that you will remain completely anonymous and no records of the interview will be kept with your name on them. Names will also be left out of any written report from this study. With your permission I would like to tape record the interview to add any additional information that I might miss while taking notes.

There are no right or wrong answers to the questions, I am interested in your own experiences and personal opinions about the parenting program that you attended. Please feel free to interrupt, ask for questions to be repeated or ask for further explanations of questions throughout the interview.

Interview schedule and prompts

1. Why did you volunteer to attend a parenting program, what were you hoping to gain from it?

   How many sessions did you manage to attend?
   a) was it practical for you to be able to attend the sessions?
   b) was the time appropriate
   c) was the location of the program useful

2. How successful do you think the parenting program was for you considering what you hoped to gain from it? (Participants can be prompted to provide a mark out of 10. If they continue to explain why they thought it was successful/unsuccesful allow them to continue but ensure questions 2-7 are covered sufficiently).
3. Did it change your knowledge of parenting? (If the answer is yes prompt participant with a, b, c, d, e. If the answer is no prompt with f, g, h.)
   a) How has your knowledge about parenting changed?
   b) During the program what topics did you find helpful?
   c) Were there any topics that were not included that you feel would have been useful?
   d) Can you remember what you learned from the different topics now?
   e) Is there anything that helps you to remember the information now?
   f) Were you expecting your knowledge about parenting to change?
   g) Were there any topics that were not included that you feel would have been useful?
   h) What would help you to increase your knowledge about parenting?

4. Did the program change your parenting behaviours at home? (If the answer is yes prompt participant with a, b, c, then move on to question 4.
   If the answer is no prompt participant with d, e, f, then move to question 5.
   a) How did your parenting behaviours change?
   b) What helped you to change your behaviour at home?
   c) Were there other factors that contributed to a change in your parenting at home?
   d) Would you like to have changed your behaviour at home?
   e) Why do you think it was difficult to change your behaviour at home?
   f) What would have supported you in changing your parenting behaviours at home?

5. Do you think that the changes in your parenting behaviour have remained over time?
   a) Has there been a change in your behaviour since the program finished?
   b) How does your parenting behaviour affect other members of the family?
   c) What has helped you to sustain your changed behaviour since the program has finished?

6. Did you notice any changes in other family members while you were attending the program or after the program finished? (If the answer is yes prompt with a, b, c. If the answer is no prompt participant with d, e, f)
a) Which family members was there a change in?
b) When did this occur?
c) Why do you think there was a change in family members?
d) Did you expect there to be a change in any of the family members?
e) Which family members?
f) When did you expect this change to occur?
g) Why do you think there were no changes in other family members?

7. Do you think your ideas about what is “good parenting” have changed? (If yes then continue with prompts a,b,c. If no then continue with prompt d, e)

a) What were your ideas before the program and how have they changed?
b) Do you still believe in these ideas about “good parenting”?
c) Do your parenting behaviours reflect your ideas about what you consider to be good parenting?

d) Do you think your ideas about “good parenting” should have changed?
e) Do your parenting behaviours reflect your ideas about what you consider to be good parenting?

If answers have been yes to any of questions 1-7 then ask question 8-9. If all answers have been no to questions 1-7 then ask question 9.

8. How did the parenting program support you? Allow parent to talk and prompt if they're unsure.
a) Did the leader of the sessions have an influence?
b) How did you find the information booklet?
c) Did the other parents have an impact on the program? If so how?
d) Were there particular teaching methods used during the sessions that you found helpful?

9. How could the program itself have been improved?

a) Was there other information that would have been useful?
b) Was the time of day appropriate for you?
c) Was the location appropriate for you?
d) A high number of parents across the country choose to drop out of parenting programs. Why do you think this is? How could it be prevented?

10. How can the benefits from the parenting program be maintained after it has finished?
a) What would you find helpful?
b) Would you find some follow up sessions useful?

Closing comments

Thank you very much for helping me and giving up your time. Can I finally ask you if there are any aspects of your experience of the parenting program that were not covered in this interview?

A5 Initial list of codes

Things that had changed

| Discipline                                      | CH-Disc |
| Improved empathy/understanding of children     | CH-Em   |
| Pressure/ influence of other people            | CH-Pres |
| Spending more time with child                  | CH-Play |
| Increased knowledge                            | CH-Know |
| Improved relationship                          | CH-Rel  |

Process

| Teaching methods               | PR-Meth |
| Group leadership               | PR-Lead |
| Group dynamics                 | PR-GrpDy|
| Support from the group         | PR-GrpSupp|

Facilitators and Barriers for parents

| Characteristics of the child    | FB-Char |
| Support from others            | FB-Supp |
A6 Initial coding of interview data

Qu1. I probably missed 1 or 2 weeks (FB-Att)

Qu2.
- One of my kids has Aspergers diagnosis and I thought it might tell me how to manage him, what to do and how to progress things. (FB-Att)
- When they said this course was running I jumped at the chance (FB-Att)
- I wanted to pull it all together as well. – I used to just do it my way. (FB-Att)

Qu3.
- Listening to how she worded things was useful, and the little fact sheets and things – we’d have brainstorming sessions. (PR-Meth)
- Listening to how she worded things was useful, and the little fact sheets and things – we’d have brainstorming sessions. (PR-Lead)
- Not so much the information she bought in but her examples that I’d draw from for my own personal use. (PR-Lead)
- There were things I hadn’t thought of and maybe if I just twisted this it may work for A or one of the other boys even. (CH-ParStr)
- If I maybe tried things a bit different with a different slant. (CH-ParStr)

Qu4.
- Like the sheep in the field and moving closer for my older son. You get stressed when they move away and you have to think of how to keep them close. (PR-Meth)
- Even though he’s 19 maybe he needs to talk – I try and be a good listener now. (CH-List)
- I listen a lot more than I did before and I take on board a lot more – we’ve never had a Mother son relationship. (CH-List)
- It helped me to understand what he was thinking – by listening to her it helped me to support him while he was grieving. (CH-Em)
- It was more specifically for the kids I had at home but it really did help – it had a domino effect and made me feel easier with the situation. To pull some of the strategies out from class to help him with his grief – like maybe if I did or said this or gave him this face – and it did seem to help.

Qu5.
- I was a lot more patient and thought through situations a lot more. If I couldn’t and it was spur of the moment, I could take a step back after I’d parted them, take a seat and think about how I could deal with it in a better way or prevented it in the first place do you know what I mean? (CH-Ref)
- It gave me an insight into how to break situations down and prevent things before they kicked off – so it was helpful for me. (CH-Ref)
- So I’ve got those strategies and I try and build on it – like this morning.
• Wait until they’re calm to talk to them then I sit down and talk calmly. That’s something I learned from Jane. (CH-Talk)
• Sometimes it needs to be different strategies.
• The older-two are now more bearable. At the time I was having a lot of problems. (CH-Rel)
• I can talk to him at home about what happened at school. (CH-Rel)
• He’s just become kick boxing champion of the under 5’s. He’s picked up kick boxing really quickly. After all that he’s achieved something. So that’s a goal for him. (CH-Pos)

Qu6.

• It was mainly me as their Dad works a lot. (FB-Supp)
• Mother-In-Law comes to help with children – in denial about my son who has ASD – there’s a different slant on things and she found it hard to understand and use strategies because they were so different from what she did in her day. (FB-Supp)
• It’s taken longer for Dad to become involved but as they’ve seen certain things working they’ve been more motivated to try it. (FB-Strwrk)

Qu7.

• I say to my child tell me but don’t shout. (CH-Disc)
• There’s only so much anyone can take. I was always getting out of steam and saw the parenting group as a life line. (FB-Att)
• To be honest I was very nervous about coming because my confidence was so low even though I knew most people. I had to force myself to get into the swing of the group but then I felt I could cope better with A. (FB-Att)
• I needed that life line to say recharge your batteries and lets start all over again. (FB-Att)
• It’s a shame a group can’t be started before the kids start nursery, aimed at a younger age group. (IF-Age)
• I wish there was something for pre-schoolers. (IF-Age)
• I just know that Lyd is so experienced that if she doesn’t know she’ll find out for us. (PR-Lead)

Qu8.

• It’s nice to come and listen to others. (PR-Grp)
• Its nice to listen to other peoples experiences. (PR-Grp)
• I’ve really loved coming. (PR-Grp)
• For instance we could talk about CAMHS and ask about it. I’d been through the IEP’s and he’s seen lots of people but it helped me to understand how other services worked. (CH-Know).
Qu9.
• I found the booklet helpful to work through – I keep it in the corner of my bedroom upstairs and I think right a bit of light reading – lets go. I see what I could do better or more. So yeah I do go back to it a lot. (PR-Meth).
• And the print offs I used to have them stuck in the kitchen on the freezer and all over the place. Just sometimes, I think I’ve failed but then I look at it and think what I could try so I do refer back to it. (PR-Meth)

Qu10.
• I’ve been to the Elms with A but other people haven’t so we know what to expect and we can share experiences. (IF-Suppgrp).
• You’re able to get it off your chest and feel like the weights been lifted. (PR-Grpsupp).
• It takes the stress away because if so in so has been through it we can bring it back and ask well how did you cope with it? (Suppgrp).
• I asked if I could come in and we do Art Therapy and talk about things. (IF-Suppgrp).
• We had a rapport going on between us and we knew how one another worked. (IF-Suppgrp).
• Kids with special needs, you need to work hard at keeping on top of them. Sometimes you need individual strategies. (FB-Char)
• The other parenting course told me to send A out of the room and give him time. That doesn’t work for me. I need to get everyone else out to speak to A about whats happened. (FB-Char).
• The group I still attend gives me new strategies for as the children get older. (IF-Suppgrp).
• It gives us reassurance that what we’re doing is right. (IF-Suppgrp).
• Sometimes I’ve gone in like a raging bull and they’ve said it’s alright we’ll talk it through. She can then give me ideas. (IF-Suppgrp).
• We’re more relaxed when we’re painting so we can talk and open up more. (IF-Suppgrp).
• It stops us from bottling it up. (IF-Suppgrp).
• We’re grateful for our group, we love it to bits. (IF-Suppgrp).
• I can come in and ask about a certain situation and how I could do it differently. Then it might not happen again. (IF-Suppgrp).
• It lets me laugh and have a joke about it rather than going home and stressing. (IF-Suppgrp).
• It makes me think ‘no’ I did what was right at the time. (IF-Suppgrp).
• The group keeps my confidence level high. (IF-Suppgrp).
• I must admit its given me a lot more confidence. – especially as an individual because I was going through a lot at the time. (IF-Suppgrp).
• I thought it was me who was going do-lally but coming into the group gave me more confidence. (CH-Self).
But it did make me feel a failure as a parent because I needed to go. But then I said to myself no I needed to brush up on my skills. (CH-Self)
• Also I feel like I can deal with a lot – and I can cope with different situations that are thrown at me. (CH- Self-care)
• We started it up and it was only an hour then its gradually stretched out further and further. (IF-Suppgrp).
• It’s like a sounding board. (IF-Suppgrp).
• A lot of younger Mums scream at their children why can’t they just tell them. Sometimes I just have to walk away.
A7 Final list of codes

(Including additional codes derived from the interview data)

Things that had changed

Discipline and setting boundaries CH-Disc
Empathy and Understanding CH-Em
Playing/spending time with child CH-Play
Relationship with child CH-Rel
Response of child CH-Child
Feelings CH-Feelings
Listening CH-Lis
Talking CH-Talk
More positive view of child CH-Pos
Reflection about own behaviour CH-Ref
Self-Care CH-SelfCar
Pressure from others CH-Pr
Change in values CH-Val

Process

Content of the programme PR-Cont
Group dynamics PR-GrpDy
Emotional support from group PR-GrpEm
Reassurance from the group PR-GrpReas
Learning from the group PR-GrpLear
Group leader PR-GrpLead
Teaching methods PR-Act
Learning at home PR-Homeact

Facilitators and Barriers for parents

Support and beliefs of others. FB-Supp
Child characteristics FB-Char
It took time to see changes FB-Tim
Additional support welcome FB-Add
Weekly parenting group FB-Wgrp
A8 Thematic maps

**PROCESS**

- Group could identify with the course leader
- Used own experiences
- Respect and trust for the leader
- Knowledge/Expertise
- Group ownership
- Good range of topics
- Some sessions had less personal relevance
- Particular sessions were useful
- Empathy with children
- Role play was useful
- Viewing situations from child's perspective
- Group dynamics
- Emotional support
- Empowerment
- Group reassurance
- Learning new strategies
- Rehearsal of strategies
- Reflection
- Home activities
- Booklet/Written Information
- Modification of strategies

**CONTENT OF COURSE**

- Experiences of others in the group
- Used own experiences
- New strategies
- Empowered to try something different

**TEACHING METHODS**

- Viewing situations from child's perspective
- Rehearsal of strategies at home
- Reflection
- Learning new strategies
- Rehearsal of strategies in sessions
- Empathy with children

**SUPPORT FROM GROUP**

- Group could identify with the course leader
- Used own experiences
- Respect and trust for the leader
- Knowledge/Expertise
- Group ownership
- Good range of topics
- Some sessions had less personal relevance
- Particular sessions were useful
- Empathy with children
- Role play was useful
- Viewing situations from child's perspective
- Group dynamics
- Emotional support
- Empowerment
- Group reassurance
- Learning new strategies
- Rehearsal of strategies
- Reflection
- Home activities
- Booklet/Written Information
- Modification of strategies

**COURSE LEADER**

- Group ownership
- Used own experiences
- New strategies
- Empowered to try something different
- Group could identify with the course leader
- Used own experiences
- Respect and trust for the leader
- Knowledge/Expertise
- Group ownership
- Good range of topics
- Some sessions had less personal relevance
- Particular sessions were useful
- Empathy with children
- Role play was useful
- Viewing situations from child's perspective
- Group dynamics
- Emotional support
- Empowerment
- Group reassurance
- Learning new strategies
- Rehearsal of strategies
- Reflection
- Home activities
- Booklet/Written Information
- Modification of strategies
More positive time together

BOUNDARIES AND DISCIPLINE

- Boundaries were maintained
- Predicting child behaviour
- Focus on positive behaviour

IMPROVED COMMUNICATION

- More talking
- Improved relationship
- Increased listening

CHANGE IN FEELINGS

- It’s alright to make mistakes
- More positive time together
- More positive view of child
- More control

IMPROVED COMMUNICATION

- Communicating calmly
- Feeling calm

CHANGE IN VALUES AND BELIEFS

- More competent as a parent
- Increased empathy with child
- Increased understanding of child

CHANGES IN PARENTS

- Increased confidence
- Calmer as parent
- More positive view of child

Increased confidence

More control
**CHANGE IN CHILD**
- Improved relationship
- Children are more caring
- Children are calmer
- Improved behaviour

**FACILITATORS AND BARRIERS**
- Change in strategies over time
- Perseverance
- Support and beliefs of others
- It took time to see changes

**IMPLEMENTING STRATEGIES FROM THE PROGRAMME**
- Ideas for strategies
- Support from group discussion
- Emotional support
- Welcome additional support/programme
- Increased confidence

**WEEKLY SUPPORT GROUP**
- Ideas for strategies
- Support from group discussion
- Emotional support
- Welcome additional support/programme
### A9 Example of coded data extracts, sub-themes and over-arching themes

<table>
<thead>
<tr>
<th>Party</th>
<th>Data Extract</th>
<th>Code</th>
<th>Semantic Meaning</th>
<th>Latent Meaning</th>
<th>Sub-theme</th>
<th>Over-arching theme</th>
</tr>
</thead>
<tbody>
<tr>
<td>A3</td>
<td>Some things have stayed the same like setting boundaries but it's the way you do it.</td>
<td>CH-Disc</td>
<td>Maintained Boundaries</td>
<td>More Parent Control</td>
<td>Change in Boundaries and Discipline</td>
<td>Change in Parenting Behaviour</td>
</tr>
<tr>
<td>B4</td>
<td>They've sort of stuck. The rules and boundaries that we have set have stayed the same. Like bed times and meals there are routines.</td>
<td>CH-Disc</td>
<td>Maintained Boundaries</td>
<td>More Parent Control</td>
<td>Change in Boundaries and Discipline</td>
<td>Change in Parenting Behaviour</td>
</tr>
<tr>
<td>A3</td>
<td>There are certain things they can do and other things that they're just not allowed to do.</td>
<td>CH-Disc</td>
<td>Maintained Boundaries</td>
<td>More Parent Control</td>
<td>Change in Boundaries and Discipline</td>
<td>Change in Parenting Behaviour</td>
</tr>
<tr>
<td>B4</td>
<td>There were a few things that I already had in place but I didn't enforce them.</td>
<td>CH-Disc</td>
<td>Maintained Boundaries</td>
<td>More Parent Control</td>
<td>Change in Boundaries and Discipline</td>
<td>Change in Parenting Behaviour</td>
</tr>
<tr>
<td>B4</td>
<td>I know we should already be doing these things but it really needed a bit of enforcement and picking back up.</td>
<td>CH-Disc</td>
<td>Maintained Boundaries</td>
<td>More Parent Control</td>
<td>Change in Boundaries and Discipline</td>
<td>Change in Parenting Behaviour</td>
</tr>
<tr>
<td>C1</td>
<td>I'm finding it easier to set boundaries.</td>
<td>CH-Disc</td>
<td>Maintained Boundaries</td>
<td>More Parent Control</td>
<td>Change in Boundaries and Discipline</td>
<td>Change in Parenting Behaviour</td>
</tr>
<tr>
<td>------</td>
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</tr>
<tr>
<td>C1</td>
<td>The boundaries, as I didn't have anything. I was moaning for the sake of it at them but they didn't know why. I used to just say go and play.</td>
<td>CH-Disc</td>
<td>Maintained Boundaries</td>
<td>More Parent Control</td>
<td>Change in Boundaries and Discipline</td>
<td>Change in Parenting Behaviour</td>
</tr>
<tr>
<td>C1</td>
<td>It was hard at first but they do know when I mean something, I mean it. I used to change my mind but now when I say 'no it's no'.</td>
<td>CH-Disc</td>
<td>Maintained Boundaries</td>
<td>More Parent Control</td>
<td>Change in Boundaries and Discipline</td>
<td>Change in Parenting Behaviour</td>
</tr>
<tr>
<td>C2</td>
<td>I've learned how to set boundaries and things like that.</td>
<td>CH-Disc</td>
<td>Maintained Boundaries</td>
<td>More Parent Control</td>
<td>Change in Boundaries and Discipline</td>
<td>Change in Parenting Behaviour</td>
</tr>
<tr>
<td>C3</td>
<td>I tried to set limits and punished her.</td>
<td>CH-Disc</td>
<td>Maintained Boundaries</td>
<td>More Parent Control</td>
<td>Change in Boundaries and Discipline</td>
<td>Change in Parenting Behaviour</td>
</tr>
<tr>
<td>C1</td>
<td>With the playstation when they're arguing I just say well until you can share, it's going off. They know that</td>
<td>CH-Disc</td>
<td>Maintained Boundaries</td>
<td>More Parent Control</td>
<td>Change in Boundaries</td>
<td>Change in Parenting Behaviour</td>
</tr>
</tbody>
</table>
if it's going off it's going off.

<table>
<thead>
<tr>
<th>C3</th>
<th>The eating session was the most helpful because I was going through a funny stage. I told her that if she didn’t eat everything she would go upstairs.</th>
<th>CH-Disc</th>
<th>Maintained Boundaries</th>
<th>More Parent Control</th>
<th>Change in Boundaries</th>
<th>Change in Parenting Behaviour</th>
</tr>
</thead>
<tbody>
<tr>
<td>C1</td>
<td>They share more and there’s boundaries but I still haven’t tackled the bickering that goes on between them yet.</td>
<td>CH-Disc</td>
<td>Maintained Boundaries</td>
<td>More Parent Control</td>
<td>Change in Boundaries and Discipline</td>
<td>Change in Parenting Behaviour</td>
</tr>
<tr>
<td>B4</td>
<td>You have to give them that little bit more leeway you know. I think I was a bit too strict, a bit of a battle axe and it made me ease off a little bit.</td>
<td>CH-Disc</td>
<td>Maintained Boundaries</td>
<td>Less Parent Control</td>
<td>Change in Boundaries and Discipline</td>
<td>Change in Parenting Behaviour</td>
</tr>
<tr>
<td>B4</td>
<td>The other day the children were supposed to be going to Barnardos but they were arguing, like proper fighting. So I phoned them up and cancelled because I didn’t want to reward them for tearing strips off each other. It’s got through to</td>
<td>CH-Disc</td>
<td>Maintained Boundaries</td>
<td>More Parent Control</td>
<td>Change in Boundaries and Discipline</td>
<td>Change in Parenting Behaviour</td>
</tr>
</tbody>
</table>
them and this morning they’ve got up no problems.

<table>
<thead>
<tr>
<th>Partial</th>
<th>Data Extract</th>
<th>Code</th>
<th>Sub-theme</th>
<th>Latent meaning</th>
<th>Over Arching Theme</th>
</tr>
</thead>
<tbody>
<tr>
<td>B4</td>
<td>It made me realise that my children were all individual with their own needs and different personalities. I used to treat them all the same because I didn’t realise.</td>
<td>CH-Em</td>
<td>More Understanding</td>
<td>Increased Empathy with child</td>
<td>Change in Feelings</td>
</tr>
<tr>
<td>B4</td>
<td>I’ve got to know my kids a lot better. Especially K, we’ve got more of an understanding.</td>
<td>CH-Em</td>
<td>More Understanding</td>
<td>Increased Empathy with child</td>
<td>Change in Feelings</td>
</tr>
<tr>
<td>C1</td>
<td>Set loving limits. It’s not about being harsh it’s about letting them understand.</td>
<td>CH-Em</td>
<td>More Understanding</td>
<td>Increased Empathy with child</td>
<td>Change in Feelings</td>
</tr>
<tr>
<td>A1</td>
<td>It helped me to understand what he was thinking – by listening to her it helped me to support him while he was grieving.</td>
<td>CH-Em</td>
<td>More Understanding</td>
<td>Increased Empathy with child</td>
<td>Change in Feelings</td>
</tr>
<tr>
<td>A4</td>
<td>It’s hard and I used to get frustrated, but now I sit down and try to understand her more.</td>
<td>CH-Em</td>
<td>More Understanding</td>
<td>Increased Empathy with child</td>
<td>Change in Feelings</td>
</tr>
<tr>
<td>Particular</td>
<td>Data Extract</td>
<td>Code</td>
<td>Sub-theme</td>
<td>Latent Meaning</td>
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<td>CH-Em</td>
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<td>Change in Feelings</td>
</tr>
</tbody>
</table>
try to understand her more.

<table>
<thead>
<tr>
<th>A4</th>
<th>I try and sit down if she gets fidgety and upset. I try for longer to understand what she's trying to put across.</th>
<th>CH-Em</th>
<th>More Understanding</th>
<th>Increased Empathy with child</th>
<th>Change in Feelings</th>
</tr>
</thead>
</table>

| A4  | I wasn't as patient or understanding of her as I am now. | CH-Em | More Patience/Understanding | Increased Empathy with child | Change in Feelings |

| A3  | I think we did one thing where we saw it from the child’s point of view – what the child might be thinking – so it was seeing it from their point of view as well as the adults. That changed how I saw things at home. | CH-Em | Child’s Point of View | Increased Empathy with child | Change in Feelings |

| A4  | Tried to look at things from how the child would see it. | CH-Em | Child’s Point of View | Increased Empathy with child | Change in Feelings |
| B1 | We did some role play, there were some people who didn’t like it. I found it helpful. I had to ignore someone who was talking to me. It made me realise what it must be like for a child when you ignore them. | CH-Em | Child’s Point of View | Increased Empathy with child | Change in Feelings |
| B2 | The role play sessions were useful where someone ignored me when I was trying to talk to them. It made me realise what it must be like for my child. | CH-Em | Child’s Point of View | Increased Empathy with child | Change in Feelings |
| B4 | It told us about how and why children think like they think because they’re children. | CH-Em | Child’s Point of View | Increased Empathy with child | Change in Feelings |
The theory of parental self-efficacy: A review of how it affects parenting and underpins parenting programmes.

Trainee Educational Psychologist
Lisa Davies
Setting the Context...

- Parenting as a government priority.
- Local Authority completion of a "Parenting Strategy" document.
- The importance of parenting to child wellbeing has resulted in a large variety of parenting programmes that aim to educate and enhance parenting skills.
- Various psychological frameworks underpin parenting programs.
- Parenting programs have a varied research based (quantity and quality) that evaluates whether they are effective.

- Highlight - The two green papers Supporting Families (Home Office, 1998) and Every Child Matters (DfES, 2003) that identified the support of parents and carers as one of four key areas for national development.

- Parenting orders issued by magistrates in the year 2000. The Anti-Social Behaviour Act (Home Office, 2003) was extended to allow Local Authorities (LA’s) to apply for parenting orders if children are permanently excluded or receive two fixed term exclusions within 12 months.

- Discuss parenting strategy document and how this was completed in Dudley.

- Briefly introduce different psychological frameworks:
  - Behavioural psychology - aims to teach parents effective skills and reduce the quantity or intensity of inappropriate behaviour. Some programs are specifically based on social learning principles such as the manual-based, Webster-Stratten (2001) video modelling.
  - Relationship-based - promote listening and communicating skills, considering behaviour in the context of relationships (e.g. positive parenting programmes) rather than simply aiming to alter behaviour (Bunting, 2003).
  - Cognitive behavioural psychology aim to alter parents' thought processes about themselves and their children. Rather than the practice of specific skills these programs promote reflection and self evaluation.

- Introduce some of the manual based parenting programs (e.g. Webster-Stratten) and the implications of using just one of these programs for all parents.
The Key Concepts of Self-efficacy theory...

- Perceived self-efficacy is a belief that can explain how motivation and behaviours are affected by judgements that people make about their own capabilities (Bandura, 1982).

- Self-efficacy judgments influence the choice of activity that a person engages in and the degree of competence a person feels they have to manage future situations (Bandura, 1982).

- People with high Self-efficacy in a particular domain (such as parenting), think, feel and act differently from those people who have low Self-efficacy (Bandura, 1982).

- People with high self-efficacy are more likely to persevere when faced with challenges, whereas those with doubt about their own capabilities are more likely to give up (Bandura, 1982).

- SE also influences thought patterns and emotions, through the anticipation of events or as the result of events.

- Bandura (1998) proposed that efficacy beliefs vary across domains of functioning rather than representing an undifferentiated trait.
Parent Self-Efficacy (PSE) is a specific domain within the general construct of self-efficacy.

It is conceptualised as the expectation caregivers hold about their ability to parent successfully.

• Bandura (1989) suggests that PSE incorporates levels of specific knowledge related to the behaviours involved in child rearing, and the degree of confidence in one’s ability to carry out these behaviours.

• In 1997 Coleman and Karraker reviewed PSE research and reported it was “relatively sparse” and although 11 years onward the amount has increased this is not substantial.
The contribution of self-efficacy theory to parenting programs...

- The Webster-Stratten (2001) manual based parenting program is explicitly based on social learning theory and the success of this program may therefore be due to increased PSE levels.

- Although other programs claim to draw from other theoretical frameworks, they all use the mechanisms through which Bandura (1989) proposed that Self-Efficacy could be increased.

• The Triple P manual based program is widely effective and claims to draw on social learning models, family and behaviour therapy, developmental research, information processing research and cognitive behavioural therapy (Sanders et al, 2003). However it is likely that the mechanism at least in part which makes this program successful for parents is likely to be increased levels of PSE.

• I’m now going to outline the different mechanisms and discuss how they could influence the Triple P program. However this is just an example and most of these mechanisms could probably be applied to most parenting programs.
Mechanisms that increase Self-efficacy...

- The experience of personal success at particular tasks;
- Observing people similar to oneself succeed by persevering;
- Social persuasion that one possesses the capabilities to succeed;
- An increased awareness of bodily states and various forms of somatic information.

(Bandura, 1989)

- Personal success in a particular situation, such as managing a child's behaviour, increases perceived SE whereas repeated failures at managing behaviour are likely to reduce it, particularly if these instances do not reflect lack of effort or external circumstances. The majority of parenting programs such as Triple P provide information and support for parents to attempt new strategies. These should hopefully lead to increased personal success with parenting that may then lead to increased PSE. Parents are also given homework tasks based on the session content.
- Other sources of information increase SE. Observing others manage difficult child behaviours successfully can make the observer feel that they have comparable capabilities.
- Modelling supports parents to learn effective strategies and emphasises the predictability of the environment. Parenting programs, such as Triple P promote the discussion of different strategies that parents have attempted themselves, allowing parents to learn from one another. Also most programs such as Triple P utilise role play or video tapes as a teaching method to model positive parenting behaviours.
- Verbal persuasion reinforces the belief in parents that they have the parenting capabilities to succeed. Using persuasion to increase (even if these are temporary) SE may then encourage the use of particular parenting strategies which subsequently increase SE further, through personal success. The parent group and leader are likely to provide verbal reassurance and persuasion to support one another to attempt new strategies.
**Aims of the literature review...**

- To consider how PSE develops and the influence of PSE on parenting behaviours.
- To consider whether PSE levels can subsequently be altered by interventions.

Articles were divided into three broad groups to consider three questions:

1. How does PSE affect parenting?
2. When and how does PSE develop?
3. Can parenting programs alter PSE?
1. How does parenting self-efficacy affect parenting?

- The relationship between parent self-efficacy (PSE) and parenting behaviours.
- The relationship between parent self-efficacy (PSE) and emotions.
- The relationship between parent self-efficacy (PSE) and the environment.

• Literature was divided into 3 main subheadings.

• As these findings are being highlighted consider the implications for parenting programs.
The relationship between parenting behaviours and PSE...

- Various research has associated high PSE with positive parenting behaviours.

- Research has mostly focussed on how discipline techniques alter depending on PSE level. Those parents with low PSE reported increased difficulties with their children’s behaviour and they used more aversive discipline techniques (e.g. Gross et al, 1999).

- It is difficult to determine whether parent behaviours cause children to become more disruptive or whether the difficult behaviour causes parents to respond with harsher discipline strategies.

- Although PSE has been related to parenting there has been less research specifically identifying the parenting behaviours or situations in which parents with low or high PSE react differently to their children.

- Similar results by Gross et al, (1999) and Tucker et al (1998) suggested that parents with low PSE were more likely to use inconsistent and harsher discipline strategies. However, causality could not be assumed as these children were also more likely to engage in disruptive behaviours than a control group; therefore parents could simply be responding to the more difficult behaviours.

- More recent research has begun to consider other task-specific domains of parenting than discipline. Coleman et al (2002) researched parenting behaviours more specifically. They found that parents with high PSE had children who were less difficult and were more likely to respond to child misbehaviour, alter the environment to prevent misbehaviour and were less likely to reinforce misbehaviour. Whereas those with low PSE reinforced negative child behaviour and responded negatively to a child’s difficulty in progressing on a task.
The relationship between PSE and emotions...

- Mothers with high levels of emotional distress were more likely to have low PSE and engage in less positive parenting strategies than those parents with high PSE (Gondoli and Silverberg, 1997; Kochanska, 1990).

- High PSE is associated with a preference for problem focussed coping. Whereas low PSE was associated with emotion focussed coping (Coleman and Karraker, 1998).

- This does not necessarily relate to beliefs about positive child rearing. Depressed mothers realised that authoritative parenting resulted in more positive child outcomes. However, their behaviour did not reflect these beliefs as parents continued to respond negatively to their children. (Kochanska, 1990).

- Gondoli and Silverberg (1997) researched adolescents and mothers. Mothers with high levels of emotional distress were more likely to have low PSE and engage in less positive parenting strategies than those parents with high PSE.

- Coleman and Karraker (1998) found that high PSE was associated with a preference for problem focussed coping. Therefore parents responded with a strategy or behaviour that addressed the incident or problem, whereas low PSE was associated with emotion focussed coping where the parent response is based on their emotions at the time of the incident.

- Although PSE exerts a mediating effect on emotions, the role seems complicated. Kochanska (1990) found that depressed mothers (36 participants) were more likely to respond negatively to their children than mothers who were not diagnosed with depression (20 participants). However, he also found this did not necessarily relate to their beliefs about positive child rearing. Therefore depressed mothers realised that authoritative parenting resulted in more positive child outcomes and they realised which parenting behaviours would be more productive such as setting clear boundaries and attending to positive behaviour. However, their behaviour did not reflect these beliefs as parents continued to respond negatively to their children. Therefore endorsement of authoritarian parenting styles does not necessarily reflect beliefs. Perhaps emotional state lowers PSE levels and prevents parents from engaging in practices that they know are productive to children.
Some authors have begun to consider whether PSE mediates other variables.

Teti and Gelfand, (1991) found significant relations between all the independent variables (including parenting behaviour, parent emotions and infant temperament) and the dependent variable (PSE).

When PSE was statistically controlled for, parenting behaviour was not related to maternal depression or infant temperament.

This indicates that parent emotions and infant temperament have an indirect influence on parenting behaviour through PSE. Whereas PSE is directly related to parenting behaviour.

Teti and Gelfand (1991) explain their results by suggesting that PSE assumes a mediating influence between parenting competence and knowledge. They found significant relations between all the independent variables (including parenting behaviour, parent emotions and infant temperament) and the dependent variable (PSE).

If a variable is mediatory then when it is statistically controlled, relations between the independent (e.g. maternal depression and infant temperament) and dependent variables (e.g. PSE) are reduced. When PSE was controlled for, parenting behaviour was not related to maternal depression or infant temperament. This indicates that parent emotions and infant temperament have an indirect influence on parenting behaviour through PSE. Whereas PSE is directly related to parenting behaviour.
Environmental Effects and PSE...

- Research is beginning to highlight that the environment and the situations parents find themselves within affect PSE levels.

- In circumstances where child rearing occurs in advantaged circumstances (e.g. stable finances, well-educated parents who are psychologically stable) PSE may assume a more peripheral role. However, when parents are facing adverse living conditions high PSE could assume a central role in facilitating child development (Coleman and Karraker, 2003).

- Ardelt and Eccles (2001) proposed a conceptual model to theorise how the environment and Bandura’s theory of SE influence child development.

• Coleman and Karraker (1997) suggest that PSE is likely to be a predictor of parenting behaviour during situations that parents find stressful. Therefore, when parents are facing adverse living conditions high PSE could assume a central role in facilitating child development.

• Furstenberg (2003, cited in Ardelt and Eccles, 2001) suggested that parents in difficult neighbourhoods with high PSE, are more likely to modify the environment to support their child’s development, through the provision of higher supervision, chaperoning in difficult neighbourhoods or relying on trusted neighbours to assume supervision. However, those parents with low PSE were unlikely to promote their child’s development through the modification of their environment.
Ardelt and Eccles (2001) proposed a reciprocal link between PSE, positive parenting strategies and child development both psychologically and academically. This interaction varies within the context of different environments or family contexts.

- PSE beliefs could also exert a direct effect on children’s developmental success. Parents with high self-efficacy are likely to serve as positive role models and children may internalise these attitudes and beliefs independently from observations about new parental behaviour.

- In difficult environments, parents with low PSE are likely to become overwhelmed by the parenting task. If there are multiple adversities such as socio-economic difficulties and lack of family support, parents may not attempt to influence child behaviour or their environment unless they have high PSE levels.
2. When and how does PSE develop?

- Age of the child
- Child Temperament

• Literature was divided into 2 main subheadings.
Age of the child...

- Research with younger children could indicate that PSE is established early in parent-child relationships. General levels of self-efficacy could predict subsequent PSE levels.

- Bogenschneider et al (1997) found that adolescent sons of parents with high PSE reported less delinquent behaviour whereas daughters reported they were more likely to approach their mothers than peers regarding their difficulties.

- Mash and Johnston (1983) found that as difficult children became older there was an association with a decline in PSE, whereas the PSE levels of parents with typically developing children increased.

- There is limited research considering how PSE may develop as a child becomes older. However, research with younger children indicates that PSE levels may be established early on.

- Further research is necessary to determine whether PSE alters as children become older independently of the parenting challenges they present. If PSE levels are influenced by child characteristics this could indicate that parenting interventions are particularly necessary for those parents who perceive their children as “difficult”.

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Research findings indicate that mothers with low PSE were more likely to report that their children had high levels of conduct difficulties. (e.g. Gross and Tucker, 1995).

Although the association between PSE and children who exhibit difficult behaviour is relatively well supported by research, the actual mechanism through which the impact of PSE is mediated seems more complex.

It is difficult to establish whether low PSE exerts an effect on parenting behaviours that subsequently influence child behaviour; or whether difficult child characteristics effect parenting behaviour and reduce PSE levels.

As low PSE has been shown to affect parenting behaviour towards toddlers, one could argue that low PSE may contribute to child difficulties indirectly through its impact on parenting skills.

Coleman and Karraker (2003) used questionnaires to establish PSE levels and also observed parents in a laboratory setting using the Crowell procedure. They found that parents with high PSE were more likely to have children who showed high levels of “compliance, enthusiasm and affection” towards their mothers. Also, children were likely to have low levels of negativity and were less likely to show “mother avoidance” (as assessed during the Crowell Procedure and BSID-II Mental scale scores).

Mention Teti and Gelfand (1991) research from earlier. Authors concluded that PSE level mediate the effects of child characteristics. Therefore, a difficult infant only exerted an effect on parenting behaviour if PSE was low. Mothers with high PSE and a difficult child had successfully established a good relationship with their infants. However, those parents with low PSE withdrew from their infants. This research indicates that high PSE levels may reduce difficult child characteristics through positive parenting behaviours.
Discussion...

- Consider some of the implications for parenting programs from the research highlighted so far…
1. How does parenting self-efficacy affect parenting?

Implications for parenting programs...

- If PSE assumes a mediating role between knowledge and behaviour as proposed by Bandura (1989) then if PSE can be successfully altered (through a parenting program), it may change subsequent parent behaviour.

- Parents cognitions about whether they consider their parenting behaviour successful are likely to effect PSE levels. If programs could alter these thoughts it is possible they could increase PSE.

- Parenting programs would benefit from further research considering how depressed mood, even within the general population can indirectly affect parenting behaviours. It may be that depression exerts an effect on PSE through altering cognitions that subsequently change parenting behaviours.
Parenting programs arguably require a different focus if they are targeting parents who are depressed. There may need to be a focus on how to alter emotionally focussed coping to problem-focussed coping.

Research highlights PSE as a protective factor so it may be particularly beneficial for parents with complex environmental circumstances to attend a parenting program.
2. When and how does PSE develop?

Implications for parenting programs…

- Early intervention may be more effective for parents that have low PSE. When considered in light of research about emotions and their effect on PSE, mothers with post-natal depression are likely to be particularly vulnerable.

- Different parenting programs are required for the parents of differently aged children.

- The parents of children with behavioural difficulties may require a different program that aims to address other difficulties the parents may have that could be affecting their parenting behaviour rather than simply raising PSE levels.

• Research with young children indicates that PSE may develop early through parent-child interactions. If this is the case, early intervention may be required for parents that have low PSE.

• Different parenting programs are arguably required for the parents of differently aged children. The content and skills that a program aims to teach parents should alter as children become older.
3. Can parenting programs alter PSE?

- The behavioural parent training program developed by Webster-Stratton (1993) is explicitly based on Bandura’s social learning theory.

- Programs that are not explicitly based on social learning theory have raised PSE levels. These changes have also been sustained over time (e.g. Gross et al, 1995, Barber, 1992).

- Conrad et al (1992) found that some parents were confident but lacked knowledge about parenting and child development. These “naively confident mothers” are arguably the most vulnerable to adopting aberrant parenting strategies. They are likely to be difficult to target with parenting programs.

- There are a few studies that have considered whether PSE is increased following a parenting program intervention.
- The behavioural parent training program developed by Webster-Stratton (1993) is explicitly based on Bandura’s social learning theory. Videotapes provide modelling of positive parenting strategies and group discussions facilitate how knowledge and skills can be utilised. The process is considered collaborative and the facilitator aims to elicit ideas, feelings and understanding from the parents. This “no-blame” approach is thought to increase PSE and self-sufficiency. Weekly homework tasks are also given.
- Gross et al (1995) completed a 10 week parenting program with 46 parents of two year olds. Findings suggested a significant increase in PSE, decreases in parenting stress and increases in positive toddler-parent interactions. Tucker et al, (1998) completed a follow up after a year and found that these effects were maintained.
- Barber et al (1992) measured the self-confidence of parents attending various parenting programs (not necessarily based on social learning theory) that differed in content, context and method of delivery. They found that all of the programs produced comparable changes in parent confidence which were sustained after 3 months.
- These “naively confident mothers” are arguably the most vulnerable to adopting aberrant parenting strategies. They are likely to be difficult to target with parenting programs. They are likely to be the parents who choose not to attend a group because they have little doubt about their parenting capabilities and are unaware of children’s development. When participating in parenting programs the challenge to their existing knowledge of child development and parenting strategies may create heightened anxiety leading them to drop out.
Conclusions...

- Research indicates PSE as an antecedent, consequence and mediator (Jones and Prinz, 2005).
- Although various research has identified the characteristics of high and low PSE in parents there is a lack of research considering parents between these two extremes.
- Research indicates that many parenting programs increase PSE and also enhance positive parenting behaviours. This is likely to be achieved through the mechanisms theorised by Bandura (1986).

• In the antecedent role, PSE appears to predict more adaptive parenting behaviours, which may then lead to particular patterns of child behaviour. High PSE could also be a consequence of adaptive parenting behaviours. An emerging body of research indicates that PSE has a direct effect on parenting behaviour while exerting a mediating effect on other factors such as parental emotions.

• If a medium level of PSE is adequate for positive child outcomes, perhaps it is more realistic for parenting programs to raise PSE to this medium “good enough” level.
Research to date has focussed on measuring how PSE affects behaviour and emotions rather than cognition. However, Bandura (1989) outlines cognition as having a key role in increasing SE.

If PSE levels are associated with positive parenting behaviours, it could be used as an indicator of whether a parenting program is effective.

Further research into parent cognitions, such as whether thoughts become more positive, leading to subsequent increases in PSE, may explain research that is currently less conclusive.

The expanding literature on parenting programs highlights that PSE is a concept that can be measured across many parenting programs, and which leads to more positive parenting behaviours. It could therefore be used as an indicator of whether a parenting program has been effective.

However, further research is required into parents who may be naively confident as they would be expected to show an initially high PSE level but perhaps low knowledge levels. The aim of the parenting program would be to increase their knowledge which may initially reduce levels of PSE.
A11 Empirical research public domain briefing

PARENTING PROGRAMMES AND SELF-EFFICACY: AN INVESTIGATION INTO THE EFFECTIVENESS OF A PROGRAMME IN TERMS OF CHANGE FOR PARENTS AND THEIR CHILDREN

Summary of empirical research:

This report aims to summarise the psychological theory, methodology and main findings from research into whether a parenting programme run by a pupil referral unit in Dudley Local Authority (LA), facilitated long-term change for parents and their children. Implications for future parenting programmes is also considered. The research was undertaken by a Trainee Educational Psychologist, from Dudley Educational Psychology Service, as part of the doctoral training programme.

1. Background

The importance of family relationships to the psychological, social, physical and economic well-being of children has been well documented. A review of research by Desforges and Abouchaar (2003) concluded that positive parenting at home had a significant, positive effect on children’s achievement and adjustment at school. The importance of parenting was also reflected in the two Green papers Supporting Families (Home Office, 1998) and Every Child Matters (DfES, 2003) that identified the support of parents and carers as one of four key areas for national development.

In Dudley LA a Pupil Referral Unit currently delivers a parenting program as part of their outreach service to mainstream primary schools. If a child is on the verge of exclusion, schools are able to request a parenting program and the parents of that particular child are invited to attend. The program could be considered as a preventative measure for children “at risk” of becoming involved in later antisocial behaviour. The remaining parents that form the group are recruited on a voluntary basis through a letter sent to all the parents at that particular school. The outreach team delivered the program to approximately 4-8 schools per term (during 2007-2008) and parent attendance was good.

The program run by the outreach service is 6 weeks in duration and follows the “Positive Parenting” publications and programmes manual. The aims of the program are to enhance parent’s knowledge of positive parenting strategies and to support them in using these strategies at home. Although parenting interventions work directly with parents, there is an assumption that through the program a child’s behaviour will be indirectly affected by a change in parenting.

2. Self-Efficacy theory and implications for parenting

Perceived self-efficacy (SE) is a belief that can explain how motivation and behaviours are affected by judgements that people make about their own capabilities (Bandura, 1982). SE judgements influence the choice of activity that a person engages in and the degree of competence a person feels they have to manage future situations (Bandura, 1982). Parent Self-Efficacy (PSE) is a specific domain within self-efficacy and is defined as the expectation caregivers hold about their ability to parent successfully (Bandura,1989).
People with high SE in a particular domain (such as parenting) think, feel and act differently from those people who have low SE (Bandura, 1982, 1986). High levels of PSE are associated with behaviours that characterise positive parenting and are linked to positive child outcomes. Many researchers have concluded from their research into parenting and PSE that interventions increasing PSE may lead to positive changes in the behaviour of parents, that may in turn improve outcomes for children (e.g. Coleman and Karraker, 2000, 2003, Jones and Prinz, 2005).

Although few parenting programs focus on directly increasing PSE, it is likely that the majority of programs are underpinned by SE theory and use many of the techniques theorised to increase SE.

Bandura (1989) proposed various mechanisms through which SE could be increased including:

- the experience of personal success at particular tasks;
- observing people similar to oneself succeed by persevering;
- social persuasion that one possesses the capabilities to succeed;
- an increased awareness of bodily states and various forms of somatic information.

Parenting programs arguably use these mechanisms during sessions; it would therefore be plausible that they raise levels of PSE.

A few studies (e.g. Gross et al, 1995, Tucker et al, 1998, Landy and Menna, 2006, Bloomfield and Kendall, 2007) have shown that parenting programmes raise levels of PSE. Barber et al (1992) measured the self-confidence of parents attending various parenting programs that differed in content, context and method of delivery. All of the programs produced comparable changes in parent confidence, sustained after three months. Interestingly, none of the programs produced short term changes in parent child interactions or the global child difficulty rating, but after 3 months these changes had occurred. This may indicate that increased PSE levels create a direct change in parenting behaviours. However, it may take a longer time period for interactions between parents and children to change. Perhaps the more positive interactions between parents and children then lead to parents viewing their child more positively.

3. Research questions and method

The questions for the research were:

1. Is a school based positive parenting program effective in facilitating long term change for parents and their children?
   a) Were there any changes in parenting and/or children that occurred while the parents were completing the program or in the time period following the program?
   b) Were there any changes in levels of parenting self-efficacy?
   c) What mechanisms within the parenting programme may have contributed to changes in parenting self-efficacy?

The outreach team from the pupil referral unit consisted of two adults who had led nine parenting programs in mainstream primary schools within the last 12 month. Five schools volunteered to participate in the research. From a total of 34 mothers, the researcher was able to contact and interview 18 participants.
To gain the perspectives and experiences of parents a semi-structured interview was used. This method allowed the order of questions to be altered and further explanation or question wording to be modified depending on the participant. Particular lines of questioning could also be followed during the interview process that provided a more accurate reflection of parent experiences.

Notes were taken during the interviews by the researcher and the audio-recording subsequently consulted for additional information given by participants that was not recorded during the interviews. The information was then analysed using thematic analysis (following the process described by Braun and Clarke, 2006).

4. Results

Comments made by the parents during the interviews were grouped into sub-themes and then main themes (outlined in the table below).

<table>
<thead>
<tr>
<th>Main themes</th>
<th>Sub-theme</th>
<th>Sub-theme</th>
<th>Sub-theme</th>
<th>Sub-theme</th>
</tr>
</thead>
<tbody>
<tr>
<td>Identified changes in parents/child behaviour</td>
<td>In parents behaviour</td>
<td>In parents feelings</td>
<td>In parents values and beliefs</td>
<td>In children</td>
</tr>
<tr>
<td>Parenting programme process</td>
<td>Learning from the programme</td>
<td>Support from the group</td>
<td>Teaching methods</td>
<td></td>
</tr>
<tr>
<td>Implementing strategies from the programme</td>
<td>Support and beliefs of friends and family</td>
<td>Child characteristics</td>
<td>It took time to see changes</td>
<td>Support after the programme finished</td>
</tr>
</tbody>
</table>

5. Conclusions

a) Were there any changes in parenting and/or children that occurred while the parents were completing the program or in the time period following the program?

b) Were there any changes in levels of parenting self-efficacy?

Some parents explicitly mentioned that their confidence had increased through the parenting program indicating that their views about their own capabilities were altered; it could therefore be concluded that PSE levels increased. Additionally, parents began to use parenting behaviours that characterise positive parenting and are associated with parents who have high PSE levels. The figure below illustrates the main findings from the research and shows PSE is likely to have a central role in altering parenting behaviour. It also shows the indirect and direct pathways that are influenced by the parenting program process.
Most parents commented on how their discipline strategies had become more positive and they were able to maintain the boundaries for their children’s behaviour. This reflects the parenting strategies of parents with high levels of PSE (Day et al, 1994 and Gross et al, 1999). Parents also suggested they were able to reflect on how their own behaviour affected situations and also helped them to pre-empt their children’s behaviour. As can be seen from figure 1, the parenting program directly influenced changes in parenting behaviour. However, a more indirect pathway to behaviour change may occur; from increased PSE levels caused by the parenting program, that lead to subsequent changes in behaviour.

This research indicates that parents consider discipline and the maintenance of boundaries to be an important element of parenting. Perhaps an increased feeling of control over the situation and children’s behaviour is an important initial step to increasing PSE and leads to parents feeling empowered. This may then help parents to view their parenting role differently. It is possible that this facilitates the other changes identified by parents such as spending more positive time with their children. Therefore feeling in control, may be an essential component of PSE.

Additionally, parents suggested that improved communication and spending more positive time with their children led to a more positive parent-child relationship (see figure 1). This probably led to parents viewing their children more positively. Again parents suggested this was reflected by changes in their children with increased communication and listening.
The program also facilitates a change in how parents view themselves in comparison to others. It may be that increased PSE levels lead to changes in values and beliefs about the self as a competent parent in comparison to others.

The present findings support previous quantitative research, indicating that parenting programs can increase PSE levels (e.g. Barber et al, 1992; Gross et al, 1995; Bloomfield and Kendall, 2007). As parents were interviewed at least 5 months after they had completed the program it could be assumed that PSE levels remained high, none of the parents mentioned their confidence had decreased and most parents said that the changes in their children’s behaviour had occurred after the program, so they had experienced more personal success with parenting that probably led to increased PSE.

In conclusion, this research lends support to previous findings that indicate parenting programmes increased levels of PSE (e.g. Barber et al, 1992; Gross et al, 1995; Bloomfield and Kendall, 2007). Parents in this research reported that the parenting programme had facilitated positive changes for them and their children. The present study indicates that PSE has a potentially important role as both an outcome and mediator to the parenting programme process. There could also be a bi-directional relationship between PSE and parenting illustrated in figure 1. As PSE is a central component it is important to consider the processes that the programme used to successfully increase PSE levels.

c) What mechanisms within the parenting programme may have contributed to changes in parenting self-efficacy?

Parents commented that support from the group was one of the most important elements of the program. Parents seemed to gain support from others in the group both emotionally and to learn new parenting strategies. Parents emphasised that it took perseverance in using the parenting strategies for there to be a noticeable change in their children’s behaviour. Support from the group provided the motivation for them to sustain a change in their behaviour.

It is therefore important for parents to share a group identity if they are to view themselves as similar to others. Parents also commented that it was important for the leader to use their own experiences, this is likely to have created a sense of everyone being part of the same group. It is likely that for a program to alter PSE levels a group identity is required.

The group discussion allowed parents to persuade each other that they possessed the capabilities to succeed. Parents on the program suggested the group had empowered them to try something different and to persevere if they were not initially successful. Also, parents said the program had allowed them to acknowledge their personal successes. These mechanisms are likely to increase levels of PSE.

These research findings also indicate that the program supported parents in altering the way they thought about parenting. The parents suggested the program supported them to reflect more, both during and following the programme, about how they could alter their parenting strategies to be more successful. Parents said the program encouraged them to rehearse solutions to their problems both in the sessions and in context at home. It also helped them to visualise success and to work towards their goals. These thought processes are likely to have increased levels of PSE.
5.1 Concluding comments

Positive parenting is associated with high levels of PSE, for parenting behaviour to be altered and for this change to be sustained over time, this research indicates that interventions should aim to increase PSE levels. Parenting programs can successfully increase PSE levels; this could potentially be used to alter parenting behaviour and facilitate a positive change for their children. PSE levels could also be used as a measure of whether a parenting programme is effective. This research also indicates that the parenting programme process requires more than simply delivering information about how to parent appropriately. To facilitate real change practitioners should aim to use the mechanisms highlighted in this research that successfully increase levels of PSE.

For a full research report contact lisa.m.davies@dudley.gov.uk

Acknowledgements
I (Lisa Davies, TEP), would like to thank the outreach team at the pupil referral unit for participating in the research and for all your support throughout the project. I would also like to thank the parents for agreeing to be interviewed and for providing such detailed opinions and accounts about the programme. Finally I would also like to thank the five schools for agreeing to participate in the research and the learning mentors or Special Educational Needs Co-ordinators at the schools who contacted the parents.
A12 TIME OUT FOR PARENTS

Positive Parenting Publications and Programmes

The programme is 6 weeks in duration.

Planned topics:

**Week 1:** Introduction/ building rapport (Course aims, personal goals)

**Week 2:** What children really need (Children’s emotional needs, need for boundaries time and attention, considering own children, thinking about the positive aspects of own children).

**Week 3:** Developing emotional security (Children feeling loved and valued, damaging self-esteem, how to talk to children and listen, building relationships).

**Week 4:** Setting loving limits (Setting boundaries, discipline strategies, routines, rewards)

**Week 5:** Keeping children safe (Physical safety, considering the influence of the T.V/internet, bullying).

**Week 6:** Final session (Celebrating success, considering individual goals for the future, saying goodbye to other members of the group).
REFERENCES


