Short-term benefits from the Incredible Years Parents and Babies Programme in Powys

INTRODUCTION
Jones et al. (2012) reported in this journal on the experiences of parents and leaders involved in the Incredible Years Parents and Babies programme (IYPB) in North and Mid Wales and concluded that the intervention was well received, moderately priced, had good attendance rates and received positive feedback from mothers and group leaders (Jones et al., 2012). The Welsh Government Flying Start initiative (Welsh Government, 2012) provides additional early years support to families in highly disadvantaged areas that includes additional health visiting support and access to evidence based parenting programmes. The IYPB is one of the programmes recommended by the Welsh Government and this programme is delivered in many areas of Wales. The following article evaluates outcomes for parents who received the IYPB in Powys, a rural county in Mid Wales.

Most of the evidence in relation to very early intervention parenting programmes during pregnancy and in the first year of life comes from individual home visiting programmes, rather than group based interventions. There is strong evidence, for example, of the benefits of the Family Nurse Partnership programme (Barnes et al., 2011; Olds et al., 1998). Although cost effective over time, individual support is expensive. Group based parenting programmes can increase the number of families that can receive support and are, potentially more cost efficient (Cunningham et al., 1995). There is strong evidence of the value of group based parenting support in preventing and reducing problem behaviour with preschool and school aged children (Hutchings and Gardner, 2012).

The IYPB was developed as a group based intervention for use with families deemed to be at risk of less than optimal outcomes, although the content of the programme makes it suitable as a universal programme. The curriculum emphasises the importance of appropriate stimulation to encourages babies’ physical, social, emotional and language development. Safety issues are discussed as well as self care strategies for parents. Parents are encouraged to observe their babies’ development and respond to their children’s cues in order to promote parent/infant attachment. Groups of parents and their babies meet weekly for two-hour group sessions over eight weeks to receive the manualised programme (Webster–Stratton, 2008) delivered by two trained leaders. Like the other Incredible Years (IY) parent programmes the programme uses a collaborative learning style that includes DVD clips of parents and their babies that illustrate key parenting principles. It also encourages problem solving by the parents, sets weekly tasks to encourage parents to implement the ideas at home, and encourages parents to share contact details with each other to provide additional support between meetings and to extend their existing social support network (Webster-Stratton, 2011).

The Welsh Government funded group leader training in the IYPB programme across Wales (n= 475), and provided materials for programme delivery to all 22 local authorities across Wales. This provided an opportunity for the first evaluation of the IYPB programme, undertaken by Jones and colleagues in North and Mid-Wales (Jones et al., 2012; Jones 2013). Three IY Baby groups delivered in Powys were included (Jones, 2013). They found that mothers in the intervention group showed significantly higher levels of sensitive responding than control group mothers (Jones, 2013). This finding is important as parents that respond sensitively to their baby are acknowledging their baby’s ability to have an impact on their immediate environment and this encourages their infant’s sense of security and autonomy (De Wolff and...
Van Ijzendoorn, 1997). Parents are the main source of influence in children’s first years of life and the quality of early parent-infant interaction affects the development of secure attachments and future relationships (Ainsworth, 1985; Bowlby, 1969; Guajardo et al, 2009; Meins et al, 1998; Rutter et al, 1998). Parents in Jones (2013) study were mainly functioning well on baseline self-reports of maternal confidence, mental well-being and no significant differences were found on these measures at follow-up.

THE POWYS EXPERIENCE—APPLICATION IN A REAL WORLD SETTING

The Children and Young People’s Partnership (CYPP) in Powys identified the IYBP as an important strand of its early intervention/prevention strategy. The programme has been taken up throughout the county with groups coordinated by third sector providers, with health visitors as co-leaders wherever possible. Training and supervision in the programme is delivered by a local mentor/trainer.

Between Spring 2011 and Summer 2013, 123 parents signed up to attend one of 12 IY Baby groups and attended at least one session. The groups were delivered across seven small towns within Powys. Six of the groups were delivered in towns with designated Flying Start postcodes, where levels of need were expected to be higher. Complete sets of pre- and post-data were collected for 79 parents, this gives a retention rate of at least 64 per cent, but it is likely that some parents completed the programme but did not complete final measures, retention rate is therefore likely to be higher than 64 per cent. The mean number of measures collected from each group was 6.5 with a range of 3-8 measures collected per group. All of the parents who completed measures attended at least 50 per cent of the sessions. Just under a third of the parents who completed the measures (29 per cent) lived in designated Flying Start postcodes. Most parents who attended the groups were mothers. All of the parents started the programme when their baby was under six months of age. All but one of the groups were delivered in partnership with local health visitors. Recruitment was mainly through health visitors, who also ‘targeted’ some parents with higher levels of need.

Parents attending all parent groups in Powys are asked to complete a set of pre- and post-group measures in order to track their progress and flag up whether any further intervention is required once they have completed the programme. Collection of these measures is also essential in evaluating the effectiveness of group delivery, and third sector providers Barnardo’s and Action for Children are required to report outcomes at quarterly project management boards. The data in this paper were collected as part of a service evaluation. The measures chosen assess two important elements of parenting capacity: parenting confidence, measured using the Kangaroo Parenting Confidence Scale (Cmcev et al, 2008) and mental health and well being, measured using the General Health Questionnaire 30 (GHQ 30; Goldberg and Williams, 1988). Both measures provide clinical cut off scores indicating whether parents are reporting difficulties deemed to be within clinical limits i.e. higher than normal levels that may require additional support.

OUTCOMES

Figures 1 and 2 (see app) show pre- and post-group scores on the KPCS and the GHQ 30 with reference to the clinical cut off scores. Table 1 provides a summary of outcomes and statistical analysis.

The results summarised in Table 1 indicate significant benefits from the IYBP offered universally as part of normally available family support in a ‘real world’ setting. There are significant improvements in parental confidence, from parental self report using the KPCS. Figure 1 (see app) shows the baseline mean KPCS score, post group, moving well into normal limits. The data suggest an effect size of 0.61, which indicates medium to large clinical effect.

Over half of the parents (55 per cent) who attended IY baby groups in Powys were showing clinically low levels of parenting confidence at the start of the group. Although all of the groups were offered universally to parents of new babies, effective targeting of parents by health visitors and other agencies meant that more than half of parents attending the group had risk factors relating to perceived parenting self efficacy. The sample of parents recruited in the Jones (2013) study was largely functioning well pre-group in terms of maternal confidence and well being and no significant differences were found following intervention. In contrast the current sample showed higher levels of need pre-intervention and significant change post-intervention. By the end of the group the percentage of parents in the clinical range had reduced to 17.1 per cent, which means that almost 70 per cent of parents who started the group with clinically low levels of confidence developed confidence levels within normal limits by the end of the programme. Some parents continued to need intervention to support them to develop parenting confidence at the end of the group.

Table 1 also shows significant (25) improvements in parental mental health and wellbeing post-group, as measured using the GHQ 30. There is a small but clinically significant (25) effect size.

Around 20 per cent of the parents in the sample reported mental health problems within the clinical range pre-group, and this reduced to 10 per cent at the end of the programme. The mean score for the sample was within normal limits both pre- and post-group, as shown in Fig 2.

IMPLICATIONS FOR PRACTICE AND RESEARCH

There is little evidence for group based early intervention programmes for parents of babies in the first year of life (Barlow et al. 2010). The current evaluation provides some evidence to support the effectiveness of a group-based intervention for parents of babies using the IYBP. As this evaluation data was collected in a ‘real world’ setting, there is no control group for comparison and it is important to note that some of the parents taking part in the group may also have been receiving additional interventions that helped to support the positive outcomes. Nevertheless, the significant effects observed across a large sample over more than a two year period, indicate the efficacy of the IYBP in improving parental confidence and mental health and well being. It also provides further evidence to support larger scale roll out of this programme and further research into its effectiveness using a larger scale randomised control trial than was possible in the Jones (2013) study.

Evidence from the literature clearly shows that the quality of early parent-infant interaction affects the development of secure attachments and future relationships and longer term outcomes for children (Ainsworth, 1985; Bowlby, 1969; Guajardo et al, 2009; Meins et al, 1998; Rutter et al, 1998). Jones et al (2012) found that mothers who attended the programme were significantly more sensitive towards
their babies during play when compared to control mothers. The present evaluation did not contain any systematic observation data, but informal reports from health visitors and parenting workers suggest that many parents who attended the programme demonstrated increased ability to read their babies cues and respond sensitively to their needs by the end of the programme. An important component of the programme is the role of the group leader in noticing and commenting on the sensitive responding shown by parents and this was regularly discussed at supervision sessions with the IY mentor. Future evaluation should incorporate an observational element to pick up any changes in the quality of parental responsivity. A small number of parents continued to show clinical levels of difficulty at the end of the programme. The importance of a robust system for monitoring such parents, who continue, post-intervention, to show early risk factors that may interfere with the development of secure attachments and may predict the development of childhood conduct problems, is emphasised. The development of a clearly defined, multi-agency care pathway in this respect is essential.

CONCLUSIONS

The current evaluation provides evidence of the short-term effectiveness of the IYPB, in terms of both parental confidence and parental mental health, when the programme is delivered in a ‘real world’ setting. Children’s experience in early infancy can have a profound effect on later development and investment in this programme has the potential to produce significant benefits for children and families as a preventative intervention.

Many local authorities in Wales deliver the IYPB, with health visitor involvement, as part of ‘Flying Start’ provision. It is recommended that a large scale research study is considered to provide some national evaluation of the impact of this programme. A larger scale evaluation could include some independent observational data, consider whether sustained improvements are noted for families over time and include an analysis of cost-effectiveness.

REFERENCES


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Key points

- There is a lack of evidence for the use of group based programmes with parents and babies.
- The Incredible Years Parents and Babies programme is a group based intervention delivered to families who may be at-risk of less than optimal outcomes, but is also suitable as a universal intervention.
- A service evaluation showed that the programme significantly benefitted parents’ mental well-being and significantly increased parental confidence.
- The Incredible Years Parents and Babies programme is a potentially effective preventive intervention however larger scale research needs to be conducted.

For figures 1 & 2 please see our app