Holding Hands: Evaluating Quantitative Outcomes and Parental Perceptions

Submitted by Beth Lauren Hamlin to the University of Exeter as a thesis for the degree of Doctor of Educational, Child and Community Psychology (D.Ed.Psy) in 2012.

I certify that all material in this dissertation which is my own work has been identified and that no material has previously been submitted and approved for the award of a degree by this or any other university.

Signed.....................................................................................................

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**Project Summary**

**Background:**

Behaviour difficulties are one of the commonest problems for which parents seek professional advice. Behaviour difficulties in early childhood are associated with poorer educational and social outcomes in later life (Loeber & Dishion, 1983). The importance of early intervention and preventative work to support behaviour difficulties has been stressed in the literature and is a priority in the government’s strategy for promoting positive outcomes for children.

It is now generally accepted that parenting programmes (PPs) are an effective mechanism for supporting children with behaviour difficulties. A review of the literature suggests that while there are numerous evaluations of PPs there is limited evidence of PPs that are successful outside of a clinic setting and even less evidence on particular aspects of PPs and how parents view them.

**Aims**

The main aim of this research was to explore a community based PP (the Holding Hands Group Programme (HHGP)) in terms of both its outcomes and the perceptions of the parents involved.

The aim of paper one was to investigate whether families who undergo the HHGP, notice any improvement in child behaviour, parental stress and parental confidence. A second aim was to compare the HHGP to the previously evaluated Holding Hands Individual Programme (HHIP).
The aim of paper two was to examine the process elements of the Holding Hands Group Programme (HHGP), seeking new insights and a detailed descriptive portrayal of how parents experience the HHGP.

Methods

The study utilised a pragmatic approach to evaluation, with mixed methods and differing methodologies.

Paper 1 involved a fixed quasi-experimental design using a pre-test, post-test single group evaluation. Outcome data was gathered from 34 parental responses to a range of psychometric measures completed on each of three occasions.

Paper 2 involved semi-structured interviews being carried out with 15 parents prior to, and on completion of, the HHGP. The interviews focused on parent’s experiences of the programme and what they liked/disliked.

Results

Paper 1: At the start of the HHGP parents typically reported high levels of intensity of behaviour, behaviour that was a problem and stress levels. They also reported low levels of parental confidence. By the end of the HHGP parents reported significantly increased confidence and significantly reduced stress, intensity of behaviour and behaviour that was problem. These positive results were maintained beyond the end of the programme as indicated at follow-up meetings. The findings indicate that the HHGP was effective for all identified subgroups of the sample. These findings broadly mirror the findings of the evaluation of the HHIP, although results do show some significant differences between the HHIP and the HHGP.
Paper 2: The interviews conducted with fifteen parents were analysed using a rigorous approach to thematic analysis to identify emerging themes. Six themes were identified from parental accounts: support, new knowledge, reconstructing, awareness, changes and interactions. Alongside these themes was a practical element about ‘what worked’. Prior to the HHGP parents gave detailed descriptions about the difficulties that they were experiencing with their child, were able to identify what they wanted to achieve through the group and seemed able to predict what might be useful to them. After the sessions parents discussed what they had gained from taking part and were able to give suggestions for what had caused any changes.

Extensions and Implications

On methodological grounds it would be desirable to undertake further work with either a control group, or baseline wait list. A further extension would be to use a longer follow up period or to contact the current participants to see how this cohort is coping when they start school. This study relied on self report data, therefore future work could consider the use of videoing interactions. It would also be useful to extend the interview process to include the follow up period.

The results of this study imply that PPs can be delivered effectively to groups in non-clinic settings, and this suggests a route to more cost-effective delivery of PPs. However, as the results indicate that the HHGP was not successful for all, it reminds us that practitioners need to be vigilant in attempting to identify those families that are not helped and flexible in trying to assist them in other ways - perhaps via booster sessions or through the use of self-guided written materials.
Appendix 25: MANOVA, Repeated Measures ANOVAs and Post Hoc Tests For Girls.......................................................... 149
Appendix 26: MANOVA, Repeated Measures ANOVAs and Post Hoc Tests For 2 Parent Households ......................................................... 150
Appendix 27: MANOVA, Repeated Measures ANOVAs and Post Hoc Tests For Single Parent Households ........................................ 151
Appendix 28: MANOVA, Repeated Measures ANOVAs and Post Hoc Tests For Those With Siblings .................................................. 152
Appendix 29: MANOVA, Repeated Measures ANOVAs and Post Hoc Tests For Those Without Siblings ........................................... 153
Appendix 30: MANOVA, Repeated Measures ANOVAs and Post Hoc Tests For Parents Above the Median Age .................................... 154
Appendix 31: MANOVA, Repeated Measures ANOVAs and Post Hoc Tests For Parents Below the Median Age ................................. 155
Appendix 32: MANOVA, Repeated Measures ANOVAs and Post Hoc Tests For Children Above the Median Age .............................. 156
Appendix 33: MANOVA, Repeated Measures ANOVAs and Post Hoc Tests For Children Below the Median Age .............................. 157
Appendix 34: Repeated Measures ANOVA with Between Subject Factor for Child Gender ................................................................. 158
Appendix 35: Repeated Measures ANOVA with Between Subject Factor for Presence of Siblings .................................................... 159
Appendix 36: Repeated Measures ANOVA with Between Subject Factor for Number of Parents in Household ............................... 160
Appendix 37: Repeated Measures ANOVA with Between Subject Factor for Age of Parent ................................................................. 161
Appendix 38: Repeated Measures ANOVA with Between Subject Factor for Age of Child ............................................................ 162
Appendix 39: Repeated Measures ANOVA with Between Subject Factor for Child Gender, Interaction Effects ........................................ 163
Appendix 40: Repeated Measures ANOVA with Between Subject Factor for Presence of Siblings, Interaction Effects .......................... 164
Appendix 41: Repeated Measures ANOVA with Between Subject Factor for Number of Parents in the Household, Interaction Effects .... 165
Appendix 42: Repeated Measures ANOVA with Between Subject Factor for Parent Age, Interaction Effects ........................................ 166
Appendix 43: Repeated Measures ANOVA with Between Subject Factor for Child Age, Interaction Effects ................................................................. 167
Appendix 44: MANOVA, Repeated Measures ANOVAs and Post Hoc Tests For Those Who Score Above Clinical Levels Of Parental Distress .............. 168
Appendix 45: MANOVA, Repeated Measures ANOVAs and Post Hoc Tests For Those Who Score Below Clinical Levels Of Parental Distress ............... 169
Appendix 46: Repeated Measures ANOVA With Between Subject Factor For Clinical Levels Of Parental Distress ........................................................... 170
Appendix 47: Repeated Measures ANOVA With Between Subject Factor For Clinical Levels Of Parental Distress, Interaction Effects ...................... 171
Appendix 48: MANOVA, Repeated Measures ANOVAs and Post Hoc Tests for Those On the HHIP ................................................................. 172
Appendix 49: Repeated Measures ANOVA With Between Subject Factor for HHIP vs HHGP ................................................................. 173
Appendix 50: Repeated Measures ANOVA With Between Subject Factor for HHIP vs HHGP, Interaction Effects .............................................. 174
Appendix 51: Independent T Tests for The DC Subscale of the PSI .............. 175
Appendix 52: Pilot and Revised Pre Semi Structured Interview Questions ...... 176
Appendix 53: Pilot and Revised Post Semi Structured Interview Questions ...... 177
Appendix 54: Sample Transcript From Pre Interviews Showing Initial Coding ... 180
Appendix 55: List of Initial Themes ................................................................. 189
Appendix 56: Structure of Reviewed Themes ............................................... 190
Appendix 57: Literature Review .................................................................. 191
List of Tables and Figures

Table 1: Characteristics of Participants................................................................. 31
Table 2: Groups Attended by Participants .............................................................. 32
Table 3: The Percentage of Parents Falling Above the Clinical Level on Each Measure ........ 39
Table 4: Correlation Coefficients for Pre Date Using Pearson’s Correlation .................... 40
Table 5: ANOVA and MANOVA Results for all Participants (n=34) ............................. 41
Table 6: Post Hoc Tests for all Participants .............................................................. 42
Table 7: Results for Each Subgroup and Each Subgroup Comparison .......................... 43
Table 8: Descriptive Statistics and Independent T tests .............................................. 44
Table 9: Characteristics of Participants .................................................................. 67
Table 10: Groups Attended by Participants .............................................................. 67
Table 11: Open Coding of Transcript ..................................................................... 71

Figure 1: Open Codes for the Theme of Comparisons .......................................... 72
Figure 2: A Diagram Summarising the Interaction of Themes ................................. 88