

The Empowering Parents, Empowering Communities parenting Project

Submission date 01/02/2010	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
Registration date 16/06/2010	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
Last Edited 14/11/2022	Condition category Mental and Behavioural Disorders	<input type="checkbox"/> Individual participant data

Plain English summary of protocol

Background and study aims

Good parenting is known to be of critical importance in creating positive outcomes for childrens psychological, physical, educational and social functioning. In particular, a large body of research has demonstrated that child outcomes can be significantly improved by teaching parents how to reinforce and model positive behaviours, attitudes and emotional responses. However, well-validated programmes that teach these key parenting skills may not be available in all areas, and not all parents who start a course will finish it. The families who are the hardest to reach are often socially disadvantaged, marginalised and isolated. In order to increase access to effective help for local families, staff in South London and Maudsley (SLaM) NHS Foundation Trust have developed a new model for empowering, training and supporting parents to provide high-quality parenting courses in their own communities. Based in Southwark, the Empowering Parents and Empowering Communities (EPEC) programme has proven to be a cost-effective and accessible method for helping parents whose children are experiencing behavioural difficulties. The programme involves training parents to run parenting groups that use evidence-based techniques recommended by the National Institute for Clinical Excellence (NICE). The main aim of this research project is to measure and decide the usefulness of EPEC in providing support to families, improving child behaviour and parenting skills, and decreasing parenting stress.

Who can participate?

Parents who live in the London Borough of Southwark will be invited to participate through posters in local schools and childrens centres, word of mouth and outreach.

To be take part you:

- must have experienced some difficulties in managing your childs behaviour
- must have a child aged between 2 and 11 years old who does not have a developmental delay
- must live with your child
- be able to read and write English
- be able to attend regular weekly parenting groups

What does the study involve?

The parenting groups (EPEC) have been shown to help a small number of mothers and fathers feel less stressed and more confident as parents and improve difficult child behaviours. We now want to look at the usefulness of EPEC with a larger group of local families.

We will ask you to fill in some questionnaires about you and your child. These include questions about the types of problems that your child is having and questions about how you feel as a parent. We will ask you to fill out the questionnaires twice: once at the start of the project and again about 8 weeks later.

Then there are three possible options:

1. You will have the opportunity to attend a weekly group programme at a local school or community centre and start quite soon.
2. You will have the opportunity to attend a weekly group programme at a local school or community centre. Some parents will be able to start the programme soon but others some will need to start in about 10 weeks. The decision about who will start sooner will be decided randomly by a computer, and everyone will have the same 50:50 chance. No matter when you start the EPEC programme you should receive exactly the same quality of help.
3. You will not be required to attend a weekly group programme but will have the opportunity to attend if you would like to at a later date.

Each group runs for 2 hours per week and there will 8 meetings in total. You will be able to learn about different parenting approaches and discuss them in a supportive and friendly environment with 2 group leaders and 5-13 other parents. The exact number will depend on how many parents choose to join in your area. The groups allow parents to share useful ideas about how to manage child behaviour. They can also be used to discuss common causes of stress and how parenting may be affected. Parents may be asked to do activities at home so they can practise what has been discussed in the groups.

What are the possible benefits and risks of participating?

Participants will have the opportunity to develop new ways to manage their childrens behaviour, become more confident as parents, become less stressed and meet other parents in your area. Some participants might feel upset while discussing parenting and their children but group leaders are trained to provide effective practical and emotional support. Participants may be provided with information about other help as needed. Filling out the questionnaires might be difficult for some parents if they have English as a second language or difficulties reading and writing. The questionnaires are not expected to upset participants but the topics of parenting skills and child behaviour problems might be sensitive for some parents. The researcher will be there while you are filling out the questionnaires in case you need any help or are feeling upset.

Where is the study run from?

The programme will be run in various schools and community centres around Southwark.

When is the study starting and how long is it expected to run for?

Parents will be enrolled in the study from January 2010 until October 2010.

Who is funding the study?

Guy's and St Thomas' Charity and the London Borough of Southwark.

Who is the main contact?

Dr Crispin Day
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Contact information

Type(s)

Scientific

Contact name

Dr Crispin Day

Contact details

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United Kingdom
SE5 8AF

Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers

N/A

Study information**Scientific Title**

The Empowering Parents, Empowering Communities parenting Project: a multicentre randomised controlled trial

Acronym

EPEC Project

Study objectives

The overall objective of this project is to evaluate the effects of the EPEC programme in improving the parenting and mental health outcomes of children in Southwark.

The research will be guided by the following hypotheses:

1. Parents attending the EPEC groups will report a greater reduction in childrens problems by the end of the peer-led parenting intervention, as compared with either parents who are on a waiting list to receive the intervention or matched community controls.
2. Parents attending the EPEC groups will report less stress and greater confidence in their own parenting skills by the end of the peer-led parenting intervention, as compared with either parents who are on a waiting list to receive the intervention or matched community controls.
3. Parents will rate the peer-led groups as being acceptable in teaching them about positive parenting skills.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Ethics approval was gained from the South West England NHS Research Ethics Committee (ref: 09/H0206/71). Final ethics approval was granted on 21st January 2010.

Study design

Multicentre randomised controlled trial with pre/post evaluation and an observational matched cohort-control study

Primary study design

Interventional

Secondary study design

Randomised controlled trial

Study setting(s)

Other

Study type(s)

Quality of life

Participant information sheet

Not available in web format, please use the contact details below to request a patient information sheet

Health condition(s) or problem(s) studied

Child problem behaviour and mental health

Interventions

The EPEC "Being a Parent" group programme comprises eight two-hour sessions delivered over consecutive weeks. Groups are run by pairs of peer facilitators at local schools and community centres across Southwark, with each group including 6 - 12 parents. Parents are provided with handouts that offer summaries of weekly session content and corresponding homework activities.

Group facilitators are recruited from local communities, and reflect the ethnic diversity of the parents who attend the EPEC groups. The facilitators are trained using a comprehensive session-by-session manual. Fidelity in group delivery is further ensured through fortnightly supervision meetings with the programme co-ordinators.

Parents participating in the RCT arm of the study will receive the intervention either immediately (intervention group) or after approximately 10 weeks (control group). They will have a 50:50 chance of being in either group as determined by an online randomisation program. Parents participating in the matched cohort arm of the study will either receive the intervention (based on their willingness to participate) or will not participate in the intervention. Parents in the matched control cohort will be recruited from advertisements in local community settings, with the stipulation that they should not be receiving parenting support from any voluntary or statutory services. These parents will be asked to complete questionnaires at the beginning and end of an 8-week period.

Intervention Type

Other

Phase

Not Applicable

Primary outcome measure

1. The Eyberg Child Behaviour Inventory (ECBI): 36-item scale that measures both the number of problem behaviours (ECBI Problems subscale) and the frequency with which these occur (ECBI Intensity subscale). The frequency of each identified problem is scored from 1 (never) to 7 (always). These ratings are summed to provide an overall Intensity score that ranges from 36 to 252.

This measure will be completed at baseline and 8- weeks later.

Secondary outcome measures

Child Outcomes (parent- reported)

2. The Strengths and Difficulties Questionnaire (SDQ): 25 items divided between five scales (emotional problems, conduct problems, hyperactivity/inattention, peer relationship problems and prosocial behaviour). Each of these items is rated "not true", "somewhat true" or "certainly true" by the parent. A "total difficulties" score is generated by summing all of the items except for those on prosocial behaviour.

3. The Concerns About My Child Questionnaire: requires parents to identify and rate the severity of their child's problem behaviours on a visual analogue scale ranging from "not a problem" to "couldn't get any worse". The scale is scored by taking the mean scores for up to three different problems, as prioritised by the parent.

Parent Outcomes (self- reported)

4. The Parenting Stress Index - Short Form is a 36-item questionnaire comprised of three subscales: parental distress, difficult child and parent-child dysfunctional interaction. Each subscale has 12 items, and parents indicate their response on a five point likert scale from 1 (Strongly disagree) to 5 (Strongly agree). Higher scores on the subscales and the total scale indicate greater levels of parental stress.

5. The Arnold-OLeary Parenting Scale is a 30-item measure of parenting competencies. Each item is rated from 1 to 7, with a dysfunctional parenting strategy (e.g., "when my child misbehaves, I raise my voice or yell") used as an anchor point at one end of a continuum and a more effective counterpart (e.g., "I speak to my child calmly") specified at the other. The scale provides a total score and three subscales (laxness, over-reactivity and verbosity). Higher scores indicate more effective parenting strategies.

6. A modified version of the Training Acceptability Rating Scale (TARS) will be used to assess the usefulness and effectiveness of training, as perceived by parents attending the Being a Parent group). The TARS consists of 11 items. The original format of the questionnaire has been preserved (i.e., a four-point Likert scale combined with open-ended questions enabling qualitative feedback), although individual items have been modified to ensure that the measure is more specific to the evaluation at hand. The Likert scale ranges from 1 (not at all) to 4 (a great deal). The TARS consists of 11 items. A sample item is: "Has the training made you more confident in your skills to be an effective parent?". The TARS will be completed by participants at the end of the intervention only.

Measures 2-5 will be completed at baseline and 8- weeks later. Measure 6 will be completed at the conclusion of the programme only.

Overall study start date

22/01/2010

Completion date

30/06/2011

Eligibility

Key inclusion criteria

1. Parents in Southwark
2. Experiencing difficulties in managing the behaviour of an index child aged between 2 and 11 years

Participant type(s)

Patient

Age group

Adult

Sex

Both

Target number of participants

RCT arm: 80 parents (40 in each group); observational arm: 160 participants

Key exclusion criteria

1. Parents are unable to read and write English
2. Parents are unable to commit to regular weekly attendance at the EPEC groups
3. Index child has significant developmental delays
4. Parents are not currently living at home with the index child

Date of first enrolment

22/01/2010

Date of final enrolment

30/06/2011

Locations

Countries of recruitment

England

United Kingdom

Study participating centre

Centre for Parent and Child Support

London

United Kingdom

SE5 8AF

Sponsor information

Organisation

Institute of Psychiatry (UK)

Sponsor details

Child and Adolescent Psychiatry
King's College London
4 Windsor Walk
London
England
United Kingdom
SE5 8AF
+44 (0)20 7836 5454
pr@kcl.ac.uk

Sponsor type

Hospital/treatment centre

Website

<http://www.iop.kcl.ac.uk/>

ROR

<https://ror.org/0220mzb33>

Funder(s)

Funder type

Charity

Funder Name

Guy's and St Thomas' Charitable Foundation (UK)

Funder Name

Southwark Childrens Services Commissioning Unit (UK)

Results and Publications

Publication and dissemination plan

Not provided at time of registration

Intention to publish date

Individual participant data (IPD) sharing plan

Not provided at time of registration

IPD sharing plan summary

Not provided at time of registration

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article		13/03/2012		Yes	No