What makes parenting programmes work in disadvantaged areas? The PALS trial.

Submission date	Recruitment status	Prospectively registered		
10/03/2006	No longer recruiting	[] Protocol		
Registration date	Overall study status	Statistical analysis plan		
08/05/2006	Completed	[X] Results		
Last Edited	Condition category	Individual participant data		
28/10/2013	Mental and Behavioural Disorders			

Plain English summary of protocol

Not provided at time of registration

Contact information

Type(s) Scientific

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Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers

JRF Ref 9649

Study information

Scientific Title

Acronym PALS

Study objectives

Families allocated to the intervention will show improvements in:

- 1. Parenting style
- 2. Child disruptive behaviour
- 3. Child reading ability

Ethics approval required Old ethics approval format

Ethics approval(s) Institute of Psychiatry Ethics 131/01

Study design

This was a group randomised controlled trial, with random allocation of classrooms to be either intervention classes or control group classes by a statistician independent to the project.

Primary study design Interventional

Secondary study design Randomised controlled trial

Study setting(s) Not specified

Study type(s) Treatment

Participant information sheet

Health condition(s) or problem(s) studied

Parenting quality and childhood antisocial behaviour and underachievement

Interventions

Randomisation was at classroom level, rather than by individuals within it, so that all members of the class could be offered the new programme.

It was a two stage study, with:

1. Screening of all reception and year one pupils for levels of emotional and behavioural difficulties by parent and teacher completed questionnaire Then:

2. In depth measures of selected cases stratified according to high or low level of need. Measures to be taken prior to the start of the intervention group, six months later (within two months of the end of the groups), and one year later, the latter thus allowing several months to elapse between the end of the intervention and the follow up assessment.

Intervention arm:

The parenting programme was an abbreviated form of the Supporting Parents on Kids Education in School, Scott, Sylva et al 2005 (SPOKES) programme. The programme lasted one and a half school terms and ran over 18 weeks. It comprised the basic 12 week Incredible Years parenting programme (Webster-Stratton and Hancock 1998), combined with an abbreviated, 6 week version of our in-house reading readiness programme for parents to use with children (the original lasted 10 weeks - Sylva and Crook 2005). Parents of 8-10 children were invited to attend a group for two and half hours in the morning after dropping their children off at school.

Control arm: Schooling as usual.

Intervention Type

Other

Phase

Not Specified

Primary outcome measure

Direct observation of attachment promoting parenting style. The observation procedure of the Conduct Problems Research Group (1999) was used, with videotaping of parent-child interaction at home across three tasks:

1. Child directed play (ten minutes)

2. Parent directed task - child attempts a difficult construction with Lego toy bricks (ten minutes)

3. Parents gets child to tidy away the toys (three minutes)

A recently devised coding scheme (Matias 2005) was used that measures sensitive responding, the core construct in attachment theory.

Secondary outcome measures

Parenting:

1. Child centred and child directive parental behaviours:

Here, rather than make global ratings of parental style, each individual vocalisation by the parent was rated using a scheme based on social learning principles.

2. Semi-structured interview of parenting practices:

This was a modified form of the interview devised by Quinton and Rutter (1985). Topics covered include:

a. Positive parenting practices such as giving praise and rewards

b. Non-physical discipline including withdrawal of privileges, use of short periods of time out from positive reinforcement

c. Coercive discipline, including how often parents got angry and critical of their child etc.

Child behaviour:

1. Direct observation:

The procedures described above under direct observation of parenting were used. The main scale was the child's attentiveness.

2. Semi-structured interview:

The Parent Account of Child Symptoms (PACS: Taylor et al 1986). This is an investigator-based interview similar in format and scoring to the Child and Adolescent Psychiatric Assessment, but is shorter. It has been used in many large scale surveys of thousands of children (Taylor and Sandberg 1984), and covers:

a. Attentiveness/ADHD symptoms

b. Antisocial behaviour: eight antisocial behaviours are covered, such as lying and stealing, disobedience and tantrums, destructiveness and physical aggression

c. Emotional symptoms. These included fears, worries, and sleep disturbances.

Child literacy:

British Ability Scale Single Word Reading (BAS II: Elliot, Smith and McCullough 1997).

Overall study start date

01/02/2002

Completion date

31/03/2005

Eligibility

Key inclusion criteria

First, in each school, each year, an intervention and a control class was randomly selected; children were in reception class or year one, thus aged 4-5 years old.

Second, letters went out to all parents and coffee mornings were held; the intervention programme was offered to everyone in the intervention class regardless of the child's problem behaviour.

Third, parents who expressed an interest were then contacted to assess further eligibility criteria:

1. Ability to understand English

2. Index child free of clinically apparent marked general global developmental delay or disorder All parents of high risk children were offered places, and parents of 4 low risk children were randomly selected to form each group.

Participant type(s)

Patient

Age group Child

Lower age limit 4 Years

Upper age limit 5 Years

Sex Both

Target number of participants

675 screened, 174 randomized

Key exclusion criteria

Opposite of inclusion criteria above, hence parents who expressed no interest were not contacted to assess further eligibility criteria; parents were excluded if they were interested, but lacked:

1. Ability to understand English

2. Index child free of clinically apparent marked general global developmental delay or disorder

Date of first enrolment

01/02/2002

Date of final enrolment 31/03/2005

Locations

Countries of recruitment England

United Kingdom

Study participating centre Reader in Child Health and Behaviour London United Kingdom SE5 8AF

Sponsor information

Organisation King's College London (UK)

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Sponsor type University/education ROR https://ror.org/0220mzb33

Funder(s)

Funder type Charity

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Funding Body Type Private sector organisation

Funding Body Subtype Trusts, charities, foundations (both public and private)

Location United Kingdom

Results and Publications

Publication and dissemination plan Not provided at time of registration

Intention to publish date

Individual participant data (IPD) sharing plan

IPD sharing plan summary Not provided at time of registration

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Funder report results	results	05/07/2006		No	No
Results article	results	01/12/2013		Yes	No