

Engagement in parenting programmes

Exploring facilitators of and barriers to participation

Inge Wessels, Soraya Lester and Catherine L Ward

Key points

1 Widespread delivery of evidence-based parenting programmes can contribute to national development by improving outcomes for parents and children.

2 Effective recruitment and retention strategies are essential to ensuring that parents receive services and that resources are used wisely.

3 Barriers to parents' participation in programmes (e.g. transport difficulties, lack of childcare) must be reduced and facilitators of engagement (e.g. family buy-in, readiness to change) must be enhanced.

4 Including pre-programme home visits by facilitators and providing transport, refreshments and childcare are examples of strategies that may enhance engagement.

5 Strategies to increase parents' involvement in programmes may increase the costs, but will also increase the return on investment.

Summary

The large-scale delivery of evidence-based parenting programmes is key to nation building in South Africa. In order to achieve change, parents must participate in these programmes. This policy brief aims to contribute to an understanding of participation by exploring the barriers and facilitators encountered by a sample of parents who were invited to take part in one of two local parenting programmes. Recommendations to improve recruitment and retention strategies are provided.

SUPPORTING PARENTS¹ in their role as caregivers is central to national development and violence prevention in South Africa.² While being a parent can be demanding in any context, parents in South Africa typically face a great number of challenges. These challenges relate especially to poverty, which can make parenting in a positive way much more difficult. Living in poor neighbourhoods or high-violence areas may affect parenting in a variety of ways. For example, when parents live in poor neighbourhoods they tend to show less warmth and use higher levels of harsh discipline towards their children.³ Additionally, parents living in high-risk areas with few resources are more likely to physically abuse their children when compared to parents from areas with well-developed resources.⁴ Parents living in such neighbourhoods are usually under great stress, and desperate to keep their children safe.

However, harsh and inconsistent parenting practices can have negative effects on children. These practices increase children's risk not only of developing emotional and behavioural problems but also of abusing substances, engaging in risky sex, developing mental and physical health problems, and becoming involved in crime later in life.⁵ Encouragingly, positive parenting, which is parenting that is warm, responsive and consistent, does the reverse and instead plays a protective role in child development.⁶ Positive parenting therefore increases children's chances of becoming productive, well-adjusted adults – the types of adults who can contribute to an economically competitive and safer South Africa – regardless of whether the family is

struggling with stressors such as poverty or living in a high-violence neighbourhood. There is no doubt that supporting positive parenting can contribute to a safer, healthier society.

Government's role in providing parenting services

Chapter 8 of the Children's Amendment Act of 2007 (Act 41 of 2007) mandates the South African government to provide interventions to support and develop positive parenting. This chapter recognises that programmes that develop parenting skills are critical to promoting children's wellbeing. Additionally, the South African Integrated Programme of Action on Violence Against Women and Children (2013–2018) identifies parenting programmes as a key prevention and protection intervention, and seeks to support the implementation of these programmes. Although there is increasing government support of parenting services, there are currently no widely implemented evidence-based interventions in South Africa.

Building a safer South Africa must include effective interventions that develop positive parenting skills

Group-based parenting programmes in South Africa

Group-based parenting programmes with evidence of effectiveness are one way of intervening with parents. In high-income countries, these interventions have been successful in supporting parenting and improving outcomes for children.⁷ Unfortunately, few of the group-based parenting programmes available in South Africa have been evaluated, which means that we do not know whether or not they actually work.⁸

Promisingly, some of these programmes in South Africa are currently being evaluated via randomised controlled trials (RCTs) – the only evaluation design that can determine whether a specific intervention, and the intervention alone, has had an impact on families' lives.⁹ One of these programmes is the Sinovuyo Caring Families Programme (SCFP), for parents of 2- to 9-year-olds with challenging behaviour. This programme has preliminary positive evidence from a pilot RCT conducted in 2013.¹⁰ Another programme being evaluated is the Parent Centre's Positive Parenting Skills Training (PPST), which targets parents of 5- to 12-year-olds¹¹ (see the box on page 3).

The fact that these programmes are being evaluated is a significant step forward, especially when considering the need to scale up services to reach more parents. It is critical to know whether a programme is effective before making it widely available – not only does this prevent parents from receiving programmes that may not work or even be harmful, but it also prevents funds from being spent ineffectively.¹²

50%

THE PERCENTAGE OF PARENTS WHO SAID THAT THEY WANTED HELP WITH THEIR PARENTING

Understanding engagement in parenting programmes

Another important consideration when striving towards the successful implementation and, ultimately, scaling-up of parenting programmes is how parents *engage* with these interventions. One cannot assume that if a programme is offered that parents will take part as intended. The rates of enrolment and retention in the PPST and SCFP during their evaluations highlight this. In the PPST trial, 51% of invited parents did not attend any sessions, while only 18% received the full dosage of seven sessions. The SCFP had higher attendance rates (but one cannot be sure what caused this), with 27% of

Examples of group-based parenting programmes

Sinovuyo Caring Families Programme (SCFP)	Positive Parenting Skills Training (PPST)
<p>This programme aims to provide parents with skills to develop a positive relationship with their child and to manage misbehaviour in a non-violent way. Programme sessions are delivered weekly at a community venue over 12 weeks. Each session lasts around 2.5 hours and ends with a hot meal. Parents receive a parent handbook and are assigned home tasks at the end of each session. Where possible, participants who miss sessions or struggle with programme content are visited at home by a programme facilitator who goes over the session with them. In the evaluation of this programme, no formal childcare was provided, although many parents brought their young children with them. Participants' transport costs were reimbursed.</p>	<p>This programme comprises seven weekly three-hour sessions, which are delivered by facilitators who are usually para-professionals. The first session provides an overview of the programme, and the remaining sessions consider topics such as building children's self-esteem, practising assertive parenting, gaining children's cooperation, and applying effective discipline and problem-solving, among other things. No transport is formally provided, but the facilitators do assist with this at times. Participants are given programme manual notes at the end of every session. Childcare is also not provided, and participants get snacks but not a full meal.</p>

invited parents having attended no sessions and 9% receiving the full dosage of 12 sessions.

Low enrolment and attendance rates are not exclusive to programmes in low-resourced settings. In a preliminary trial of the Group Teen Triple P – Positive Parenting Programme in Australia, only 37 out of 169 invited families (22%) attended at least one session of the programme.¹³ Even empirically supported programmes with evidence of cost-effectiveness face challenges with recruiting and retaining parents.¹⁴ Ultimately, failing to address these challenges can waste resources, affect group leader motivation, and prevent parents from receiving programmes that could help them.

It is important to understand parents' experiences so that recruitment and retention strategies can be tailored to the South African context

The lack of service uptake by parents is interesting, as studies have shown that many parents are, in fact, keen to receive parenting programmes. For example, a study to assess need and demand for these programmes for parents of 2- to 8-year-olds in general practice in Oxford, United Kingdom, found that 57% of parents might or would be interested in attending one (and 18% had already done so).¹⁵ Additionally, a study in a small, low-income community in the Western Cape found that over 50% of the parents of 6- to 18-year-olds there said that they wanted help with their parenting.¹⁶ These findings suggest that it is more than just 'interest in attending' that influences whether or not parents actually engage with parenting programmes.

In order to gain an understanding of engagement, one must ask questions such as: How do parents perceive parenting programmes? What prevents them from going or encourages them to go to the first session? What are the barriers and facilitators to continued attendance? Answers to these questions can then inform the development of more effective recruitment and retention strategies to ensure that as many parents as possible benefit from interventions. All of this information is central to the refinement of existing interventions and the development of new ones.

Research has been conducted on engagement, but this has largely been done in high-income countries and not in lower-income contexts such as South Africa. Also, this research has been based mainly on feedback via surveys rather than from in-depth engagement with participants. In this literature, logistical issues, such as time demands and scheduling conflicts, are commonly mentioned barriers.¹⁷ Additionally, child (e.g., level of child behaviour problems), parent (e.g., parent age), family (e.g., socio-economic status) and programme (e.g., delivery format) level barriers have been identified.¹⁸ While some of these findings may transfer to parents in South Africa, it is still important to gain an understanding of what parents experience so that recruitment and retention strategies can be tailored appropriately to the South African context.

Engagement: what do South African parents say?

Facilitators of and barriers to engagement have been identified by a sample of female caregivers from two different peri-urban townships in Cape Town. The sample of 44 parents included 32 isiXhosa-speaking parents from the larger RCT of the SCFP and 12 Afrikaans- and/or English-speaking parents from the RCT of the PPST programme. As part of these studies, these parents were invited to attend one of the programmes and either

went to no sessions (non-enrollers), some sessions (low attenders) or most of the sessions (high attenders). All parents were interviewed individually to gain an in-depth understanding of their experiences.

These interviews gave insight into structural, personal and programmatic barriers and facilitators.

Structural barriers

Low socio-economic status appeared to be the most significant overarching structural barrier for parents from both programmes and all subgroups. The most commonly mentioned barrier related to this was transport. Most participants relied on public transportation to get to and from the programmes when the venue was not within walking distance. In the SCFP trial, parents were reimbursed for transport expenses, yet many parents did not have the money to get there in the first place, to get the reimbursement. As one respondent (SCFP non-enroller #21) said: 'Sometimes I didn't have money or food ... and I only have R10 to buy my child bread ... and so I wasn't able to go.'

Parents from the PPST programme were not reimbursed, and also pointed out that the cost of public transport was a barrier. A number of parents from the SCFP would walk to the programme and use the transport money for other purposes, which may have been an incentive for attendance; but this was not an option for all parents due to safety concerns, health problems and distance. During the winter months, parents who walked to the programme or walked a substantial distance to get to public transport were deterred by bad weather.

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The effects of poverty also emerged strikingly when SCFP parents mentioned how hunger and having to plan how they were going to feed their children that day prevented them from attending. Additionally, some parents from both programmes also spoke about how a lack of childcare prevented attendance. As one participant (SCFP low attender #279) said:

In our group, we had someone that does not get grant money and has three children, so when she wants to go somewhere and she is hungry she has to stay around and plan food for the family, so those are some problems that she would experience. That would prevent her from coming, even if she wanted to come.

Gaining employment was another structural barrier that contributed to both non-enrolment and drop-out from the SCFP. The programme was delivered on Saturday mornings in addition to weekday mornings in an attempt to cater for working parents – evening sessions were not feasible due to safety concerns. However, parents typically found shift work that had irregular hours. This unstructured schedule made it difficult for parents to commit to a set day and time each week for programme sessions. Additionally, parents commented that working hours tend to be long, so they may want to spend their time off resting, doing household chores and running errands, rather than attending a programme:



LACK OF MONEY FOR
TRANSPORT WAS A COMMON
BARRIER TO PARTICIPATION

The reason I did not go sometimes is because I would get piece jobs at times, so maybe I would get a piece job once a week, and then I used to go on Tuesday to the programme and sometimes they would clash and in that way I would not be able to go. [SCFP high attender #201]

I got a job, I went [to the programme] twice or even three times ... and the work I do, I start 11 am in the morning and come out at 10 pm at night – there is no time for sessions. [SCFP low attender #368]

Parents commented that working hours tend to be long, so they may want to spend their time off resting, doing household chores and running errands

Personal barriers

Twenty participants across the two groups identified health issues as a barrier to programme engagement. These issues referred to participants' being physically or mentally unwell or needing to collect their medication from the clinic, or having to care for sick family members.

Going to the clinic is what took up the whole day, you know getting tablets and all of that. You go in at 6 am and come out at 4 pm. [PPST low attender #34]

The only problem was that I was sick at one stage, and I didn't have strength to make it there. [SCFP non-enroller #21]

My reason for not attending the entire programme is that I live with my cousin who is not well, and some of my family members work, so I need to stay with her so that she isn't alone. She has epileptic fits and so she needs someone to look after her, and I am forced to stay with her. [SCFP low attender #70]

Among the SCFP sample, what appeared to be a lack of interest emerged as salient for many participants. This may be partly due to the way in which participants were recruited for the study – they were approached door-to-door by a research assistant who emphasised the broader study of the programme, rather than focusing only on the programme. Parents may not have fully understood that their participation in the study would entail attending a parenting session every week for 12 weeks if they were chosen to receive the programme. Additionally, parents may not have recognised the potential benefits of attending a parenting programme.

It is maybe people not caring or they do not care, because if you are someone that cares and you can understand what is going on, you should be able to go. It is something that is going to help you. We are different as people, other people might not care – you tell them about it, and they just dismiss you ... even if they are not busy, even if they do not work. [SCFP low attender #202]

Some people do not take things seriously and do not look at how it will help them in the long run. For example, in two years' time, this could come to help you ... and other people just think the way they raise their children is correct, not knowing what new things they can learn there, and that can help to add to what you already know. Maybe that type of person is actually the one that needs some kind of help. [SCFP high attender #131]



POOR HEALTH WAS A
BARRIER TO PARTICIPATION IN
PARENTING PROGRAMMES

A third of the SCFP sample identified alcohol as a barrier to attendance. These participants commented that alcohol abuse is rife in their communities and that parents often prioritise drinking over self-care and family responsibilities. Alcohol abuse was said to peak at the beginning of the month after people received their social grants.

Alcohol is a priority in this community. I say so because I also drink. People here prioritise alcohol above taking care of themselves or their family. [SCFP low attender #202]

A lot of the time, in the area that I live in, parents are not serious. All they care about is alcohol ... Sometimes people wake up at the time when we are supposed to be at the programme. Instead, they go to drink and get drunk and they are not able to go to the programme. [SCFP low attender #368]

Alcohol abuse was said to peak at the beginning of the month after people received their social grants

Programmatic barriers

Eight parents across the two groups mentioned challenges with group dynamics, which was mainly due to parents feeling uncomfortable with sharing personal information with the group. High attenders also noted that they felt disheartened when parents dropped out of the programme as this affected the trust developed in the group over multiple sessions.

She went to the first workshop and I saw that she was very shy. When we would sit in a circle as a group and introduce ourselves, some people did not like that. To her, it was like we were playing around and it felt like she was wasting her time. [SCFP high attender #300]

You would see that some of the group members were not as comfortable as others. When someone speaks about their problem, they would become tense. It is because you are scared to tell people your problems in case they go and tell other people. [SCFP low attender #264]

I was just upset that some of the parents were taking it lightly, like it's a joke. We were learning and they would come to a few sessions and then stay out. [PPST high attender #33]

Structural facilitators

Parents mentioned few structural facilitators. Parents liked that the programmes were delivered in the morning as this fitted in with dropping off and fetching children from school. Additionally, parents who lived close to the programme venue identified this as a facilitator as they were able to walk to the programme.

Personal facilitators

Family buy-in appeared to be an important facilitator of attendance. High attenders, especially in the SCFP group, frequently mentioned how their families, including their children, had bought into the programme and had supported their attendance:

My mother was encouraging and telling me that I should go to the sessions because I am a mother now and she played her role as a mother with me and



ALCOHOL ABUSE IS RIFE AND SOME PARENTS PRIORITISE DRINKING OVER SELF-CARE AND FAMILY RESPONSIBILITIES

I should also do the same. She told me to do everything that will help my child.
[SCFP high attender #210]

My family is my husband, so every time when I came back from a session, I would come home and explain to him what it is that we did. I would explain to him that I would like us to practice that particular thing in the house, because I will be practising it too, and by involving him I saw that he, too, became interested.
[SCFP high attender #91]

What also seemed to set the SCFP high attenders apart from the low attenders was a greater sense of commitment and readiness to change – the opposite of the lack of interest that appeared to be a barrier to engagement. When reflecting on why they first went to the programme, they clearly made the connection between the programme's aims and how this could address their needs. These parents also talked about changes that they could see in themselves and their children, which they attributed to the programme. High attenders often mentioned how they rescheduled other commitments or shifted session days if necessary. Although this could reflect greater problem-solving skills and flexibility, it could also be that these parents had greater means, perhaps through higher levels of social capital, to overcome barriers.

Programmatic facilitators

The programme, or elements thereof, is itself a facilitator. In both programmes, parents who enrolled were more likely to remain in the programme than drop out. Parents frequently commented on how they liked the content, facilitation style and group dynamics of the programmes. A number of them mentioned how the programmes were 'like a support group' and that they enjoyed being able to talk openly in a confidential space.

... And the stories also that we shared, I felt that I weren't alone, there is people – parents also – going through this stuff that I am going through or have gone through it so they could like give us a testimony of how they dealt with it, and then the two facilitators could have told us or taught us how to maybe just use a different approach ... [PPST high attender #72]

... At home you have stresses and there is no one that you can speak to, but when you get there you vent out about your problems so you understand each other. I got a lot of support there and we were told if someone has a problem they need to talk about it because everything in the group was confidential. [SCFP high attender #181]

Family buy-in appeared to be an important facilitator of attendance. High attenders frequently mentioned how their families supported their attendance

Following from this, two SCFP participants commented on how attending the programme provided a positive alternative to drinking in the shebeen:

It was an opportunity to forget a lot of things, and also stop drinking for that time. So that I can be busy and not be available the whole day to do things like drinking. [SCFP low attender #202]



A NUMBER OF PARENTS SAID
THAT PROGRAMMES WERE
LIKE A SUPPORT GROUP

Although some parents in the SCFP group said that there should be greater incentives for attending (e.g., vouchers, groceries), others commented that providing a meal at the programme facilitated their attendance:

We would come to Sinovuyo and we have lunch and eat – that is one of the things that attracted people, and we would all eat because we come from different homes, some who come have not eaten, but you know that as soon as you get to Sinovuyo you will eat. If I am not going to eat, then I might as well not go – some people feel that way. So I just wish that Sinovuyo would carry on the way it was before. [SCFP low attender #279]

Recommendations

Based on parents' experiences, a number of suggestions to increase engagement can be made. Implementing most of these suggestions will require additional funds, which may be difficult in this financially challenged climate. However, it may be more valuable to have fewer participants who all receive the intended dosage of the programme than to have participants who drop out. A cost-benefit analysis would be extremely useful in determining which additional components are essential: research may find, for example, that providing childcare is not an optional extra but rather a necessary intervention component for this context.

During recruitment, it is critical that parents gain a clear understanding of what the programme is about and what commitment will be required from them

Recruiting parents

Parents from the SCFP group were asked which recruitment techniques would be the most effective for future rounds of the programme. It was clear that parents wanted one-on-one contact with a facilitator who could explain the programme and answer any questions. They emphasised that recruitment via written materials (e.g., posters or community flyers) or community meetings would have limited reach.

It is better to go house-to-house because if there is an announcement that people should go to the community hall, a lot of people do not follow up on it, unless there is free food or free blankets – people want anything that comes easy. It's better when they come to your house and explain, because you will see that your child also has that problem and you will see that these people can help and make things easier for you. [SCFP non-enroller #Site C]

No, I would not have come because I would have not understood what it was about, because now I sat down with someone from Sinovuyo who explained to me everything, and what it means, and the poster ... I would have just looked at it and walked past. [SCFP high attender #131]

During recruitment, it is critical that parents gain a clear understanding of what the programme is about and what commitment will be required from them. At this stage, facilitators can increase programme buy-in by helping parents gauge the potential benefits that the programme may offer them. For successful engagement, the



HOUSE-TO-HOUSE
RECRUITING COULD
INCREASE REACH
AND ATTENDANCE

perceived benefits of attending (e.g., improved child behaviour) must outweigh the potential costs (e.g., time and effort, financial cost).¹⁹

This type of pre-programme consultation also provides an opportunity for a positive relationship to develop between the facilitator and the parent. A positive relationship is essential as parents are more likely to attend when they know and trust the person who will be delivering the programme.²⁰

Reducing barriers to attendance

Delivering the programme at times convenient to parents is critical.²¹ Additionally, providing transport solutions to parents can improve attendance.²² In low-resourced settings, it may be particularly beneficial to provide a shuttle service for parents. Firstly, parents would not have to worry about having to set aside money each week to attend the programme. Secondly, knowing that a shuttle is coming to collect you may encourage you to attend. Thirdly, a number of parents from the SCFP missed sessions because of rain and cold weather – having a shuttle would ensure that parents do not have to walk in the rain and get cold and wet (a particular issue for poor parents who may have limited changes of clothing or ability to get warm again). Fourthly, providing transport prevents parents from getting lost and not arriving at the programme. Lastly, it also reduces safety concerns, which are particularly relevant in high-risk communities such as those in which the PPST and SCFP were run.²³

Providing childcare that is engaging and fun for children may also enhance parental engagement – parents would not have to worry about finding childcare themselves and their children may encourage their parents to attend.²⁴ High-quality childcare may also have benefits for the children themselves. Offering refreshments is another incentive that is advised.

Enhancing family buy-in

To enhance engagement, it may be beneficial for programme staff to consider how to enhance family buy-in, especially before the start of the programme. If family members have bought into the programme, they may be more likely to encourage their family member's attendance and to support the implementation of positive parenting skills in the home. A home visit, before the programme starts, to explain the programme to other family members, or including several caregivers from one family in the programme, may help.

Providing transport solutions to parents can improve attendance. In low-resourced settings, it may be particularly beneficial to provide a shuttle service

Training and supervision

Well-trained and well-supervised facilitators are essential. This is crucial to delivering the programme in the way it was designed to be delivered and so ensuring that it is effective, but supervision can also help facilitators to troubleshoot recruitment and retention issues so that solutions can be implemented.



A SHUTTLE SERVICE MAY
HELP PARENTS OVERCOME
MULTIPLE BARRIERS TO
PROGRAMME ATTENDANCE

Partnerships and collaboration

Parents are parenting in difficult contexts. In order to provide them with all the support needed, partnerships with other service providers are essential. For example, parents in this sample could have benefited from the services of organisations that run income generation and food gardening projects. Additionally, connecting parents to more specialised services, such as those for substance abuse, may be helpful. Having a referral system and being able to direct parents to appropriate services may reduce some of the barriers that they face.

Integrating parenting programmes within existing services, such as ECD centres, may be a useful means of enhancing recruitment and retention. Parents would likely already be used to and have trust in the system, which would eliminate some potential barriers. However, this integration may exclude those parents who do not use that service (for instance, who do not send their children to crèche).

Notes

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- 1 By parent, we mean anyone who is a primary caregiver of a child – this role is not limited to biological parents and can also include grandparents, aunts and uncles, foster and adoptive parents, etc.
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