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**Topic: Parenting Programs**

Guest Editor:

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### The User Experience of Participants of a Self-Guided Chatbot Intervention for Parents

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**Background:** MaPaText is the Philippines' adaptation of the ParentText program that is a self-guided chatbot intervention developed for parents of children aged zero to seventeen. This adaptation from the typical in-person mode to delivery via a messaging app was done for the program to reach more Filipino families amid the government mandate to stay at home at the peak of the COVID-19 pandemic. The program was pilot tested to 98 caregivers in one of the cities in the Philippines.

**Aims:** This paper explores the participants' user experience of the MaPaText program.

**Methods:** Data was collected through one-on-one phone interviews from nine program participants using a semi-structured interview guide. Thematic analysis was used to extract themes from their narratives.

**Results:** We found that certain features of the program, how it was delivered, and the emotions the program elicited from the participants facilitated and hindered engagement. Moreover, the credibility of the recruiters and text reminders, not having time, and mistrust of the content and mode of delivery were also reported to have influenced their engagement in the program. Improvements in their knowledge and skills on parenting, their communication and emotional regulation skills, and reduced stress were identified as a perceived impact of their participation in the program on themselves. Meanwhile, improvements in child compliance, behavior and communication and no effects were identified as perceived effects of their participation in the program on their children. **Conclusions:** These results could inform revisions for the improvement of the program and its delivery.

### Feasibility and Acceptability of a Parent Support Intervention Via Group Chat: Results From a Pilot Study

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**Background:** ParentChat is a parent support group intervention for caregivers of children aged 2-17 delivered using group chat. The program was developed to address the immediate need for caregiver support during COVID-19. ParentChat was tested in a feasibility pilot across six countries including the Philippines, where the program was called MaPaChat and delivered using Viber.

**Objective:** This pilot study examined the feasibility and acceptability of MaPaChat with Filipino caregivers using a mixed methods design.

**Methods:** Forty caregivers of children aged 4-17 from predominantly low-income households participated in the study. Through phone interviews, caregivers reported on primary outcomes of child maltreatment, positive parenting, and parenting stress. Feasibility was assessed by enrolment, attendance, and dropout rates. Semi-structured interviews with 10 caregivers and nine program facilitators explored program acceptability.

**Results:** Pre-post comparisons showed statistically significant reductions in physical and emotional abuse, parenting stress. The mean attendance rate was 82% and the dropout rate was 10%. Analyses of the interview transcripts revealed the following themes: appreciation of learnings and skills gained, effective delivery via group chat, and navigating technological difficulties. Caregivers suggested more flexibility in scheduling group chat sessions and facilitators raised the need for enhanced training and module revisions to improve program delivery.

**Conclusions.** The group chat program shows some evidence of acceptability and feasibility for delivery with families from socioeconomically disadvantaged

backgrounds. This study informs adaptations for future trials of the program and highlights the need to address barriers related to digital access and navigation.

### **Masayang Pamilya Program in Selected Residential Care Facilities for Children in Metro Manila**

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**Background:** Residential Care Facilities (RCF) under the Program Management Bureau of the Department of Social Welfare and Development are the institutions that provide long-term care, support, and accommodation to individuals who require assistance. Integration of MaPa in RCF for children is designed to provide support to the house parents and social workers on positive and playful parenting strategies using the MaPa messages and principles.

**Aims:** This paper aims to explore the integration and implementation process of MaPa in selected RCFs for children.

**Methods:** A total of 38 house parents from three RCFs in Metro Manila were purposively recruited to take part in the implementation of MaPa. Within a month after the program implementation ended, trained researchers conducted focus group discussions with house parents who received the program and the social workers who served as MaPa facilitators to get their perspectives on the feasibility, cultural and contextual relevance, and acceptability of MaPa in RCFs.

**Results:** Results provide information on the benefits and challenges of integration and implementation of MaPa in RCFs for children. Collaboration and consultations with end-users in the adaptation and development of the program provided valuable insights into the actual needs and contexts which helped ensure that MaPa meets their specific needs.

**Conclusions:** MaPa was the first parenting program

that was integrated in the Residential Care Facilities in the Philippines. The rollout of MaPa in RCFs was part of the aims of integrating MaPa into the national social welfare system of the Philippines.

### **Masayang Pamilya Chat (MaPaChat) Revised Program: Preliminary Results From a Small-Scale Feasibility Trial**

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**Background:** The challenges of financial strain and unemployment, adult and child emotional distress, school closures, and COVID-19 quarantine measures are risk factors for increased violence against children in the home (Fore, 2021). In response, the MaPaChat program was developed and pilot-tested in 2021 and revised in 2022. This study presents initial evidence from the feasibility trial of the MaPaChat Revised Program in 2023.

**Aims:** To evaluate at immediate post-test the initial effects of MaPaChat Revised Program on child physical and emotional abuse, positive parenting, and caregiver depressive symptoms and stress.

**Methods:** The study used a pre-post design. Baseline and immediate post-intervention assessments were administered on caregivers of children aged 2 to 17. These caregivers were purposively recruited from one city in Metro Manila to take part in MaPaChat. Participants joined Viber groups composed of 8-10 parents, two trained group facilitators, and two process observers. MaPaChat sessions were delivered over a period of 8 weeks with one interactive group session every week. Trained facilitators introduced program contents via video and audio messaging and comics, and moderated discussions and feedback sessions using text.

**Results:** Results comparing baseline and post-intervention scores on child maltreatment, positive parenting, parental depressive symptoms, and stress will be presented.

**Conclusions:** The findings provide initial evidence of the effectiveness of MaPaChat Revised Program in reducing child maltreatment and associated risk factors and suggest adaptations for a more rigorous randomized controlled trial.

### **Evaluation of eFDS-MaPa: A Parenting Program Implemented Through the National Conditional Cash Transfer Program**

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**Background:** In the time of the COVID-19 pandemic, the MaPa program had to be adapted to be implemented within the context of the pandemic and community lockdown measures. Due to health and safety guidelines, face-to-face implementations of MaPa had to be stopped and adapted for easier electronic dissemination. One way the MaPa program was implemented was through the conditional cash transfer system of the Philippines. This study presents an evaluation of the integration and implementation of MaPa within the conditional cash transfer system from the time of facilitator training to the implementation and to a follow-up.

**Aims:** This paper evaluates the implementation of MaPa by evaluating the facilitators' training, implementation of the program, and effectiveness of the implementation on the lives of parent beneficiaries of the conditional cash transfer program.

**Methods:** Data was collected through online quantitative and qualitative survey questionnaires from community service providers and parent beneficiaries. Community service providers were measured on their reactions (n = 1,837 to 3,476), level of learning (n = 1,837 to 3,476), and changes in parenting behavior (n = 54) from participating in a brief online training in order to implement MaPa. Data was also collected from community service providers monthly (n = 689 to 2,561) to evaluate and

monitor their implementation of the program. Parent beneficiaries (n = 51) were also measured on the possible changes in parenting outcomes.

**Results:** Results from the evaluation of community service providers showed positive reactions, learnings gained, and significant decreases in parenting stress and depression. Majority of the community service providers reported that eFDS-MaPa monthly modules implemented were comprehensible, useful, relevant and appealing to the conditional cash transfer beneficiaries. Majority of the parent beneficiaries in the sample similarly indicated high ratings towards the program. Although ratings trended towards the positive side, accessibility was seen to be consistently rated lower among the criteria.

**Conclusions:** Findings from this study provide an exploratory look into the possible effects that brief online parenting programs can have on parenting behaviors. It can inform the way the program can be further developed and improved when rolled out to a wide audience using various mediums.

### **Preliminary Outcomes of an Online-Based Parenting Intervention for Mothers in Promoting Early Adolescents' Mental Health**

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**Background:** Mental health problems during adolescence if left untreated may cause significant difficulties in adulthood. Since adolescents are still under parental care, parents, particularly mothers, need to be included in the preventive and interventional measures for adolescent's mental health. However, parents tend to have difficulty in committing physically to typical parenting intervention programs. There is substantial evidence that online parenting interventions promote better parental engagement and can result in better adolescent outcome. However, online parenting intervention is virtually rare in Malaysia.

**Aims:** This study aims to describe the preliminary outcome of an online parenting intervention in promoting early adolescents' mental health.

**Methods:** A total of 22 mothers of early adolescents aged 10 to 14 years old were randomized into an online parenting program (n=11) or the control

group (n=11). The participants were assessed on parental self-efficacy and mental health (i.e., depression, anxiety, and stress), as well as their adolescent's mental health at three-time point: pre-intervention (baseline), post-intervention and at one-month follow up.

**Results:** All mothers in both groups completed the 8-week program. Paired sample *t* test showed significant increment in parental self-efficacy at post-intervention and one-month follow up and reduced depression symptoms at one-month follow up among mothers in the online parenting program group. Changes in adolescents' mental health were present and in the expected direction.

**Conclusions:** The findings provide preliminary evidence that the online-based parenting intervention has potential in improving parental self-efficacy and mental health of mothers and subsequently their early adolescents' mental health.

### **Community-Delivered Collaborative and Proactive Solutions and Parent Management Training for Oppositional Youth: A Randomized Trial**

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**Background:** Over the past 40 years, Parent Management Training (PMT) has been the “gold standard” of evidence-based treatment for youth with oppositional defiant disorder. Despite the impressive research base for PMT, not all families are responsive to this treatment model. Thus, the need exists for alternative treatments for families that do not respond to PMT or find the model unappealing. This randomized comparison trial investigates the effectiveness of Collaborative and Proactive Solutions (CPS) compared to PMT for the treatment of oppositional youth. The aim is to determine whether equivalent outcomes for CPS and PMT shown in an earlier RCT by Ollendick et al. can be reproduced in a “real world” setting (2016).

**Methods:** One hundred and sixty participants, aged 7-14 years, were randomized to either PMT or CPS conditions. Families received, on average, 12 one-hour sessions of psychological treatment, delivered in a community setting. They were assessed at pre- and post-treatment and again at 6-month follow-up. Assessment comprised semi-structured interviews, child and parent questionnaires and clinician rated severity and global improvement.

**Results:** Using an intent-to-treat sample, analyses were conducted with hierarchical growth linear modeling, ANCOVA, and equivalence testing. Both treatments demonstrated similar outcomes, with almost all of the youth moving into the non-clinical range after treatment, and two-thirds being considered much improved. No differences were found between groups and gains were maintained at follow-up.

**Conclusion:** CPS works as effectively as the well-established treatment, PMT, for youth with ODD, when implemented in a community setting. CPS is a promising alternative treatment for oppositional behavior in youth.

### **Predictors and Moderators of Response to Parent Management Training and Collaborative Proactive Solutions for Oppositional Defiant Disorder**

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**Background:** Identifying with whom and under what conditions a treatment works has been identified as an important goal of outcome research (Weersing & Weisz, 2002). Treatment predictors and moderators address these questions. In the treatment of disruptive behaviour disorders, both Parent Management Training (PMT) and more recently (e.g., Eyberg et al., 2008) Collaborative and Proactive Solutions (CPS) have demonstrated effectiveness with disruptive behavior disorders (e.g., Ollendick et al., 2015). Although these treatments have impressive outcomes, they do not work satisfactorily for all children and adolescents. While our understanding

of predictors and moderators in the treatment of externalizing disorders is more advanced than other disorders (e.g., internalizing disorders) a large gap in knowledge exists as to why some participants do not benefit from these evidence-based therapies. Much of the research to date has focused on child characteristics and sociodemographic factors. Parental characteristics that predict or moderate treatment outcome have not been extensively examined.

**Aims:** The current study aims to address this gap by examining parental predictors and moderators of treatment outcome in the treatment of ODD.

**Methods:** Participants who fulfilled the Diagnostic and Statistical Manual of Mental Disorders (4th ed.) for ODD were randomized to CPS or PMT. Assessments were conducted at pre- and post-treatment and at three-month follow-up.

**Results:** Higher pre-treatment levels of conduct problems, lagging skills, and inconsistent discipline predicted poorer behavioral outcomes following both treatments. The only characteristic that moderated treatment outcome was child-responsible attributions, mothers who were more likely to attribute their child's problematic behaviors to factors in the child had significantly poorer outcomes in PMT than CPS at six-month follow-up.

**Conclusions:** CPS may be a more beneficial treatment than PMT for families who have been identified as having higher levels of child-responsible attributions before commencing treatment for ODD.

### **The Needs and Experiences of Refugee Parents in Helping Their Children's Mental Health: ENRICH Study**

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**Background:** In 2019, 79.5 million individuals were forcibly displaced worldwide, and half of the world's refugees are children. Children exposed to traumatic events are at higher risk of developing psychiatric disorders and behavioural problems, but child refugees face barriers in accessing mental health services. Guided parent-led therapy is a promising alternative, but its effectiveness for refugee children is unknown.

**Aims:** The ENRICH study aims to explore how refugee parents manage their young children's mental health needs, identify how to support them, and investigate the feasibility of a guided parent-led evidence-based mental health intervention for refugee children.

**Methods:** The study will use semi-structured interviews to collect data from a diverse sample of 30 parents/ caregivers of young refugee children (aged 3-11).

**Results:** The interviews will investigate the parents' experiences in identifying and managing their children's mental health needs, barriers and facilitators to support, and potential obstacles to implementing a guided parent-led intervention. Thematic analysis will be used to analyse the data and inform the feasibility trial of the intervention.

**Conclusions:** The ENRICH study aims to address the knowledge gap on guided parent-led therapy models for refugee children. The study will inform the development of an evidence-based therapy as a preventative mental health intervention for refugee children. The findings will be disseminated through lay summary reports, academic journals, and conferences, and may lead to a randomized controlled trial. The study's outcomes will inform the development of an acceptable, accessible evidence-based therapy for primary schools that can improve mental health outcomes for refugee children.

### **Development, Feasibility and Acceptability of a New Parent-Toddler Programme to Support Toddlers With a Family History of Autism/ADHD to Develop Strong Attention, Regulation and Thinking Skills (START)**

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**Background:** Executive Function (EF) difficulties are common amongst autistic individuals, those with ADHD, and their first-degree relatives. EFs are associated with academic outcomes, mental health and quality-of-life. Supporting children with a family history of autism or ADHD to develop strong EFs may therefore help these children to thrive: this is the aim of START. START comprises 12x weekly parent-toddler sessions. START

supports EF development through: increasing opportunities for toddlers to practise EF skills in enjoyable ways that can be embedded into day-to-day life; recognising how parents already support their child's development, and empowering them via peer-support to develop their knowledge and confidence further; and promoting accommodations and adaptations to meet children's individual needs. The hour-long group sessions were refined with community input.

**Aims:** To evaluate the feasibility and acceptability of START in two delivery pilot rounds of the programme.

**Methods:** 13 parents of 21-to-27-month-olds with a family history of autism/ADHD were recruited (across 2 rounds). Fidelity was assessed through practitioner self-report and independent ratings of audio recordings. Acceptability was assessed through parent questionnaires and attendance rates.

**Results:** 58% of parents attended seven sessions or more. Reasons for non-attendance included illness, difficulties at home, and travel disruption. Fidelity was good-to-excellent for every session, with high inter-rater agreement. 86% of parent responses indicated that the sessions were very or quite useful.

**Conclusions:** Initial pilots indicate that the START programme can be delivered with high fidelity and are acceptable to parents. The programme will now proceed to a Feasibility Randomised Controlled Trial.

### Promoting Resilience Through Children's Socio-Emotional Competence - A Parent Training Workshop

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**Background:** Social emotional competence can promote children's resilience; parents can facilitate this. We designed a Social Smart Group encompassing a parent workshop to facilitate social emotional competence in children.

**Aims:** To evaluate the acceptability and utility of a parent training workshop for promoting social skills in children.

**Methods:** Parents of children with social communication difficulties were offered a training to understand and apply social skills concepts into their child's daily routines. Children were of age 4-6 years and underwent children-focused workshops in parallel. Two 1.5-hour workshops including 4-6 parents were conducted within a month, with material adapted from the Social Thinking curriculum by Michelle Garcia Winner. Workshops were conducted by trained speech and occupational therapist. Parents completed a post workshop parent feedback questionnaire.

**Results:** Data from 46 participants were collected. Approximately 3/4 of parents (72%) felt more confident in helping their children's social communication skills and (78%) found the workshop content of relevance. Parents found the following to be most useful: 1) Explanation of the social thinking concepts, 2) Video sharing from the children's group, and 3) Understanding social thinking frameworks. Some parents (26%) found the definition of social skills and social thinking frameworks to be least useful. All parents recommend this talk to other parents.

**Conclusions:** Parents found that learning about social emotional competence was relevant and improved their confidence in helping their child. Further research exploring how parent training positively impacts child outcomes is recommended.

### Brazelton Touchpoints Interactive Training of Healthcare Professionals and Early Childhood Educators in Child and Family Engagement

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**Background:** Enhanced family-child relationships can foster resilience and promote healthy development in children. The Brazelton Touchpoints approach promotes family-child relationships

through interactive and didactic workshops for early childhood professionals, with post-workshop mentoring for 4-6 months.

**Aims:** To evaluate 1) The utility of the Touchpoints training programme. 2) Participants understanding of the child development process and confidence in speaking with families about their children's development.

**Methods:** Data was obtained from healthcare professionals and early childhood educators who attended Brazelton Touchpoints training. Participants completed questionnaires on course utility and knowledge-assessment of child development and parent interaction (pre and post-training). Descriptive statistics and tests of comparison were used.

**Results:** The sample comprised 97 participants. The majority (70%) rated the course as useful/very-useful to aid child development understanding, and 80% found it helpful for communication with

families. Almost all participants (99%) would share learning outcomes with a co-worker. More than ¾ of participants found the workshop delivery (real life demonstrations (78.4%) and role plays (77%)) very useful. Post-training, there was an increase in the number of knowledge-assessment questions where > 75% of participants gave desired responses reflecting understanding of the material. There was a significant increase in the proportion who got desired responses in 6 out of 14 questions post as compared to pre-training.

**Conclusions:** Brazelton touchpoints training through this engaging format, was useful for improved child development knowledge and communication with families among early childhood professionals. Further research will correlate improvement in knowledge with real-life work performance and child resilience measures.