Rising to the challenge: Towards effective parenting programmes
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Good caregiving for children – especially in the early years – is fundamental not only to each individual child’s well-being and development, but also to realising a safe and productive South Africa in line with the National Development Plan. Parenting support – including parenting programmes – is a crucial element of an essential package of early childhood development (ECD) services (see the essay on pp. 26 – 33).

The term “parenting programme” is applied to a range of interventions in South Africa, including efforts to improve parents’ knowledge of young children’s development, their stimulation for early learning, their management of children’s behaviour, and their relationships with their children.

This essay focuses on programmes that provide support around child behaviour management and parent–child relationships, and addresses the following questions:

- Why are parenting programmes important?
- What kinds of parenting programmes are needed in South Africa?
- How are parenting programmes best delivered?
- How can the quality of parent training programmes in South Africa be improved?

Why are parenting programmes important?

In the early years of life, children are dependent on their parents to have their needs met – to be fed, to be cleaned and clothed, to be nurtured, to be stimulated, and to be kept safe. Children whose needs are met in these areas are well prepared to succeed at school, to have good relationships with others, and, in the long run, to become productive adult members of society.1 By contrast, child abuse and neglect – the most serious forms of poor parenting – have been shown to increase the body’s stress response so that the development of children’s brains and other organs are harmed, and to increase the risk for physical and mental illnesses, as well as other problems such as delinquency.2 Supporting parents to be effective therefore saves costs in the long term – costs to the health system in treating illnesses, costs to the criminal justice system in dealing with crime, and a loss in tax revenue (as adults who were abused as children may not achieve their full working capacity).3

Caregiving incorporates not only practical tasks, such as providing adequate nutrition, but also providing affection, stimulation and appropriate discipline. Sound child behaviour management (including non-violent discipline), encouragement of positive relationships within the family and beyond, and helping to build the child’s sense of self-worth and competence, are key. Good parenting is responsive.4 In order to respond appropriately, parents need to know what to do (for instance, when the child needs comforting or when s/he has broken a rule), and what not to do (such as using harsh forms of discipline such as beatings), and to be able to do these things consistently.

This is a tall order for any parent at the best of times, but many caregivers in South Africa are parenting under extreme conditions. Poverty,5 exposure to violence,6 health conditions such as HIV,7 as well as single parenthood,8 are all factors that may increase the stress of parenting, and make poor outcomes for children more likely. Caregivers who have children with disabilities (including serious psychiatric disorders) often experience additional stress, particularly if their children’s behaviour is hard to manage.9 Unfortunately, many (if not most) parents in South Africa face exactly these conditions. Yet positive parenting (warm, affectionate parenting that provides appropriate boundaries for children without using violent discipline) can buffer the effects of risk factors, such as poverty, on children.10 Recent South African work11 suggests that improving parents’ knowledge about caregiving may improve child outcomes, even in families where there has been intimate partner violence.

Internationally, parenting programmes (in which parents acquire specific parenting skills,12 such as giving clear instructions, or using time out instead of spanking) have been shown to be effective in improving parenting and in leading to better outcomes for children.13 Programmes designed to improve parenting of the 0 – 9 age group have been delivered through home visits (often starting during pregnancy), group workshops, and longer courses (typically delivered once a week).

Some programmes aiming to prevent child abuse and neglect have experimented with media interventions, and found these at least to shift parenting attitudes (for instance, caregivers’ expectations about what is appropriate at different developmental stages),14 but as stand-alone interventions they are unlikely to change parent behaviour, and so are unlikely to affect child outcomes.15 More recently, programme developers have experimented with a variety of other delivery methods, such as providing internet-based information and developing smartphone “apps”.16 Although these have yet to be tested thoroughly, there is

1 In this essay, the terms “caregiving” and “parenting”, or “caregiver” and “parent”, are used interchangeably as many people in South Africa are caring for children who are not their biological children. It is not the biological relationship that is important, but the quality of care that children receive. All caregivers are worthy of support.
an explosion of interest in them, particularly because most group-based parenting programmes place high demands on parents, who consequently often drop out and do not receive the full training. These innovative delivery methods may help to increase the accessibility of programmes for parents, reinforce key messages, and maintain contact with parents during and after the programme.

What kinds of parenting programmes are needed in South Africa?

Chapter 8 of the Children’s Act provides for prevention and early intervention programmes, which include the development of appropriate parenting skills, and norms and standards to ensure that quality programmes are delivered. The Act aims to give effect to children’s rights to care and protection, and places a responsibility on government to provide and fund prevention and early intervention programmes. For example, the Department of Social Development and UNICEF have developed a training package for parents and caregivers.20

Parenting programmes need to be responsive to the development of the child as well as the needs of parents. Supporting parents is particularly important during pregnancy and the first two years of life. Parents need to understand child development and the importance of early relationships, and warm and responsive care to promote positive attachment. A South African programme has demonstrated that parenting and attachment can be improved through home visiting.21 There is also evidence from the United States that a home-visiting programme for at-risk mothers through the first two years of a child’s life can reduce the risk for child maltreatment and child behaviour problems at age 15, although for other home-visiting programmes the evidence is not as clear.22

From age 18 months through age nine, group-based parent training programmes can successfully reduce child behaviour problems23 and the risk of child maltreatment24. Most parenting programmes aim to prevent problems before they begin. However, once serious problems such as child abuse and neglect, or delinquency, have started, more intensive programmes may be needed. These are usually directed to individual families, and not to groups of parents, and need highly trained clinicians to deliver them.2

Intensive programmes are thus far more expensive to deliver than group-based programmes that can be delivered by trained lay workers and reach several families at once. Although prevention and early intervention should be a priority, there will always be some who need specialised services, no matter how much prevention is done. These intensive interventions therefore should form part of a continuum of services.

How are parenting programmes best delivered?

Parenting programmes must strive to be effective and scalable. If programmes are to meet these criteria, they must incorporate several elements.26 Broadly speaking, programmes should have:

- a clearly defined target population;
- a programme design and delivery system that is tailored to the needs and cultural background of participating parents;
- a programme theory that is plausible and based on evidence of what works;
- realistic and measurable goals;
- a sufficient amount of intervention;
- well-trained and well-supervised staff; and
- rigorous monitoring and evaluation processes to ensure that the programme is implemented as intended and that it is, in fact, effective.

A recent survey of 21 group-based parent training programmes in South Africa showed that they were concentrated in urban areas and that very few meet these standards of effective practice.27 Thirteen were delivered by non-profit organisations, and the remaining eight were businesses. This indicates that parenting programmes are poorly distributed and generally inaccessible to the poor. Table 7 on the next page shows the very limited supply of parenting programmes in relation to child population in each of the nine provinces.

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ii For example, multisystemic therapy (an intensive family- and community-based treatment programme that focuses on addressing all environmental systems that impact on chronic and violent juvenile offenders), and functional family therapy (a short-term, high quality intervention programme conducted in a variety of settings). For more information, see www.mstservices.com and www.fftinc.com.

iii “Programme theory” refers to a statement that describes the mechanisms by which the programme goals are to be achieved.

iv While home-visiting programmes were not included in this survey, many of the same principles will apply.
Table 7: Parenting programmes in South Africa, by province, 2011

<table>
<thead>
<tr>
<th>Province</th>
<th>Number of programmes</th>
<th>Number of children (0 – 17) in 2010 (millions)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eastern Cape</td>
<td>4</td>
<td>2.7</td>
</tr>
<tr>
<td>Free State</td>
<td>6</td>
<td>1.1</td>
</tr>
<tr>
<td>Gauteng</td>
<td>11</td>
<td>3.3</td>
</tr>
<tr>
<td>KwaZulu-Natal</td>
<td>8</td>
<td>4.7</td>
</tr>
<tr>
<td>Limpopo</td>
<td>6</td>
<td>2.3</td>
</tr>
<tr>
<td>Mpumalanga</td>
<td>5</td>
<td>1.5</td>
</tr>
<tr>
<td>North-West</td>
<td>5</td>
<td>1.3</td>
</tr>
<tr>
<td>Northern Cape</td>
<td>4</td>
<td>0.4</td>
</tr>
<tr>
<td>Western Cape</td>
<td>16</td>
<td>1.8</td>
</tr>
</tbody>
</table>


Shortcomings of programmes that participated in the survey included that:

- few programmes conducted formal needs assessments;
- few programmes based their programme content on practices shown in the literature to be effective;
- only 14 programmes provided training and supervision for programme facilitators, with the rest running the risk of inadequate programme implementation; and
- only two programmes had been evaluated by independent evaluators.

Many programmes, especially those located within the non-profit sector, experienced significant challenges in adopting some of these best practices. Scarce financial resources were noted as a barrier to implementing monitoring and evaluation processes, and to providing parents with child care and transport money (strategies that have been shown to enhance the retention of parents in programmes).

In sum, there is very little evidence of the effectiveness of parent training programmes in South Africa. Research is urgently needed to provide evidence of which programmes have the potential to be taken to scale. This will take both political will and significant funding but is essential in order to use resources effectively to achieve the intention of the Children’s Act.

A brief description of a promising programme is provided in case 8 on the opposite page. This particular programme was selected not only because it included many principles associated with programme effectiveness, but also because it is well known within the parenting sector in South Africa and provides a basis for many other programmes in the country.

How can the quality of parent training programmes in South Africa be improved?

There are several key steps that need to be taken to strengthen the field of caregiver training in South Africa:

1. The child outcomes to be targeted by parenting programmes must be clearly identified through careful survey work in the context where the programme intends to work, and the prevalence of those outcomes must also be measured. This will enable priority targets to be selected. Appropriate targets for programmes may include: the prevention of child abuse and neglect as rates appear to be high; and cognitive stimulation which is likely to enhance school readiness and improve children’s educational outcomes. It is important that identified targets are consistent with the cultural norms of the targeted population.

2. Interventions that may be effective must be identified – either through evaluations of existing local programmes, or by taking programmes which have proven effective elsewhere and adapting these for the South African context. Ways to integrate parenting interventions into other services, such as ECD or primary health care services, should also be explored as this may be more cost effective than stand-alone programmes. In the South African context, it is also important to explore the conditions under which paraprofessionals can deliver effective parenting interventions.

3. The effectiveness of these interventions must be established, preferably through rigorous outcome evaluations using the randomised controlled trial design. Most parenting programmes in South Africa have not yet been tested and their effectiveness must therefore be established before considering taking these to scale. The same applies to established programmes adapted from other contexts: adaptations can affect a programme’s effectiveness, and the adapted programme needs to be tested to ensure that it continues to be effective in the new context. The World Health Organisation has recently produced guidelines to help parenting programme managers understand outcome evaluations, which may be helpful.

4. Cost-effectiveness should be established. There is some evidence from high-income countries that investment in parenting programme reaps huge dividends in children’s healthy development. Demonstrating that a programme is cost-effective may assist in arguing for the continued investment of public funds.

Conclusion

Supporting South Africa’s caregivers in the complex task of raising children to effective adulthood should be a national priority. Not only will it improve the lives of individual children and their parents, it is likely, in the long term, to contribute to the economy both through reducing the costs of poor parenting and increasing the
number of children who become productive, tax-paying citizens. To provide the parenting support services envisaged by the Children’s Act, especially for parents faced with multiple challenges, requires political will, resources and evidence of effectiveness.

Signs of political will are evident in the Department of Social Development’s capacity building programme for parents and in the White Paper on Families; the next task is to identify quality parenting support programmes and to take them to scale across the nation.

References
6. See no. 5 above.
15. See no. 2 above.
17. See no. 16 above.
23. See no. 3 above.
27. See no. 26 above.
34. See no. 20 above.