



Evidence-based family and parenting support evaluation strategies: The position of EurofamNet



- ▶ **A pluralistic approach to the development and refinement of evaluation methodologies is a necessity, not a luxury**
- ▶ Evidence-based programmes should be available for all families, in a wide range of intensity of interventions, to adequately address each family's needs and characteristics
- ▶ In community-based services, family support practices nest effective prevention efforts with real-world dynamics



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The authors of this document are Ana Almeida (Universidade Do Minho – Management Committee member from Portugal and WG3 participant in EurofamNet), Orlanda Cruz (Universidade Do Porto – WG3 participant in EurofamNet) and Ana Catarina Canário (Universidade Do Porto – WG3 participant in EurofamNet).

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For further information, please contact: EurofamNet: <https://EurofamNet.eu/contact>

Contact author: Ana Almeida aalmeida@ie.uminho.pt



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1 | Introduction

There has been a general scientific consensus to emphasize that the optimal development of any child depends on the family context (parents or caregivers and the extended family), his or her living environmental conditions and circumstances affecting the parents' capacities to respond to their child's needs (e.g., Belsky, 1984; Bronfenbrenner & Evans, 2000). This theoretical premise draws an influential reference for the development of EU policies on behalf of the child and their wellbeing through childhood and adolescence and, particularly, parenting and family support. A marker for these policies of the new millennium, the Recommendation of the Council of Europe on positive parenting (Rec 2006/19), stresses that the caregiver role evolves from exercising capacities, developing skills out of experiences and, substantially, nurturing the quality and quantity of available support (Ayala-Nunes et al., 2017; Martins et al., 2022). Therefore, in order for children to fully realise their rights and well-being, modern families will be better off whenever help and support is accessible, available and tuned to their characteristics (Daly, 2017; Canavan et al., 2016). The new mindset reclaims universal needs, which are non-stigmatising or mandatory to the at-risk families, stating that "every child matters", especially prompting a strength-based perspective for family and parent support interventions. This all-inclusive framework on behalf of the development and implementation of parenting policies sets the ground to endorse preventative measures capable of addressing family diversity, social backgrounds, health and mental health conditions, and family developmental cycles. Most importantly, it also leads to the development of a different wrap-up for family support delivery, giving a particular focus to positive parenting programmes (Jiménez et al., 2018).

Decisively, in post-modern Europe, knowledge and understandings about parenting have also become an essential pursuit to improve family support services and broaden models and approaches to children and families in need (Rodrigo et al., 2016). Timely, it was foreseen the *zeitgeist* for advocating evidence-based interventions that combined prevention and promotion goals as resourceful and efficient approaches to fulfil the right of children to grow in healthy family contexts. Nonetheless, consensus on the need to support families coexisted with striking differences in the provision of support across Europe and within countries (Molinuevo, 2013; Rodrigo et al., 2016). Diversity encompasses different types and modalities of support addressed to parents and children (Daly, 2007; 2012; Hermanns, 2014). This multiplicity applies for different prevention levels across public sectors and agencies while helping to organise preventative measures among universal or mainstream services (such as early childcare, education, primary health care, prenatal consultation) and policies (work-family reconciliation measures), selective policies to minimize social inequalities

(income support and social welfare measures for single-parent families or large families), and bottom-line, urgent, intensive and specialised care (out-of-home placements under child protection measures, family reunification and therapeutic services). In this wide variety of types of support, parenting support services are singled out, resulting in three core features: (a) parents are the first-line target and the focus is their parenting role; (b) the support provided is an in-kind service; and (c) the focus is the parents' resources and child-rearing competencies (Daly, 2012).

Yet, adjusting the delivery of diverse modes of support to the outcomes of policies and programmes unveiled the importance of incorporating the framework of evidence-based practices in family and parenting support services (Axford et al., 2012; Boddy et al., 2011; Rodrigo et al., 2012). Identified with the principles and goals of evidence-based, family and parenting programmes bear versatility and structure to this intent, representing a resourceful *modus operandi* and a promising investment to realize the child's rights agenda for the 21st century (Moran & Canavan, 2019). Equally sensitive to universal and specific needs of more vulnerable children and families, these programmes are not exclusive of a single public sector but disseminated and integrated at all service-levels. It is important to point out that responses should simultaneously provide helping devices and optimal levers to reduce transitional hazards and losses, as well as major burdens of a multiplicity of material deprivations and impact on family lives (Thévenon et al., 2018). Consequently, the search for services and professionals led to changes in intervention practices. It became more acute to avoid stigmatising referrals, to adequate modalities of interventions to serve the plurality of family needs and groups across universal, selective and indicated prevention levels, and at the same time, to endorse the inquiry for evidence-based practices along the wide range of family and parenting interventions at the individual, home visiting, group and community levels.

Indeed, the diverse nature of family and parenting support services disseminated in different public sectors (i.e., educational devices, health units, social services, community-based services, security forces, jurisdictional departments) also claims for programmes capable of bringing good inputs in terms of sustainability, feasibility, reliability and cost efficiency. Not surprisingly, change requested better-informed professional practices in line with a progressive claim regarding an evaluation culture. As a matter of fact, this led to a staggered move from individual expertise and professional experience toward a systematic uptake of the validated findings. At this particular point, the importance of bringing evidence on whether parenting programmes work, as well as for whom and under which circumstances, becomes an instigating challenge to professional practices, and it calls for a plurality of approaches to evaluation (Fives et al., 2017; Dekovic et al., 2012).

Recognising that efforts are still necessary to reckon with the heterogeneity of service delivery in family support, the internal disparities of professional cultures upon the external

input of evidence-based practices and the standards of an evaluation culture, this paper intends to contribute to a thorough and comprehensive position of the EuroFamNet COST Action on parenting support evaluation strategies. In what follows, this paper briefs the rationale of the evidence-based practice outlining its advances in family support services delivered in community settings. The short historical account traces how the perspectives and approaches to evaluate the putative effects of evidence-based parenting programmes also brought about an interest in the relations and linkages among research, professional practice and, more recently, policies and children and family participation. By having children and families taking part in evidence-based practices, hearing their voices and acknowledging them as active participants, their influence over the processes that shape family and parenting support services is recognised and taken into consideration for the promotion of services that are effectively useful to the needs of families. Thus, a list of key messages recalls a number of influential principles and the standards of prevention science to a more and better-framed pluralist approach in what concerns family and parenting support evaluation.

2 | Setting evidence-based practice in the area of social intervention

The concept of evidence-based practice (EBP) came into view for the first time in the field of Medicine, with evidence-based medicine being described as a conscientious, explicit, and judicious use of current best evidence in making decisions about the care of individual patients (Sackett et al., 1976). Thus, EBP emerged from the confluence between the best research evidence available and the practitioner's clinical expertise, along with the understanding and respect for the client's values. In 2005, the American Psychological Association's task force on EBP reinforced the definition of EBP through these three components, while presenting a broadened scope of the client's values, encompassing each individual's characteristics, cultural background and preferences (APA, 2006).

EBP has surpassed the limits of medicine and clinical practice, and the broad concept of "evidence-based" was progressively adopted in the field of social sciences and in interventions delivered in community-based services, first in the United States, and thereafter in the United Kingdom and in Europe (Asmussen, 2011; McCall, 2009; McCall & Green, 2004). Claiming for accountability, policy-makers began demanding "evidence-based services" in an attempt to prove that programmes and policies achieved their intended goals. The answer to such demands from the policy-makers, regarding the efficacy of the interventions where public investments were made, led to a collaborative bidirectional liaison

between the fields of applied research and interventions delivered in community-based services.

The adoption of EBP by community-based services has been strengthened and reinforced mainly due to the interface and cooperation between researchers and scholars with the community-based practitioners and policies. European political guidelines have contributed to bringing the academia and community closer. Community-based intervention projects funded by European programmes often include a compulsory assessment of the social impact of the interventions delivered. This requirement fostered an approximation between professionals working in communities and the academy while deepening the know-how about the interventions' impact assessment, triggering a change in the initial paradigm, exclusively based on the professionals' practice. In fact, a narrower linkage between professionals and academics contributes to the transferability of scientific knowledge, through a bidirectional cooperation, which is meaningful for the professionals working in community-based services, but also for researchers, whose applied research in communities allows them to validate interventions.

The decision of adopting and implementing EBP on community-based services is not linear and straightforward, but influenced by multiple determinants. Two of these determinants deserve particular attention as they highlight the specificities of practice within community-based services, and lead to the presentation and further development of the three components of EBP. The first determinant is related to what counts as evidence on EBP, whereas the second determinant refers to the social perception of children and families as clients when they should be considered subjects of their own rights. Further details are presented below.

2.1. What counts as evidence

In EBP, evidence comes from the systematic and rigorous evaluation of an intervention's efficacy, determining if the intervention's objectives are in fact achieved, i.e., whether the intervention actually leads to changes in those who receive it, as defined in the programme's theoretical conceptualisation. But how is this evidence defined? Researchers and scholars have played a role in defining what counts as evidence. The use of science-based procedures to evaluate the efficacy of an intervention naturally led to the selection of experimental designs as the hallmark paradigm in this field (McCall & Green, 2004). The standards of evidence from the Society for Prevention Research present a hierarchy regarding the quality of scientific evidence, defining as a major criterion for the evaluation of the efficacy the use of randomised controlled trials (RCT), evaluated through precise analytic procedures, selecting reliable instruments and measures, and using a sample size adequate to the generalisability

of the results. It is a common understanding that the randomisation in a controlled context is a warrant to the research's internal validity and clarification of the causal inference, determining whether the intervention contributed to the observed changes in the participants recruited to take part in the study, further documented at least up to 6 months after the intervention (Flay et al., 2005; Gottfredson et al., 2015).

Researchers agree that experimental and quasi-experimental designs are important to address the question "Is the programme effective in producing the intended changes in its target population?". However, these designs are not the only single way to address programme's evaluation. There is also strong agreement in that the value and selection of the appropriate methods are determined by the research questions raised by scholars and professionals (Fives et al., 2017). Evidence on the outcomes of the interventions is of central importance, but it is not the only information needed when the interventions are delivered in community-based settings or in a multi-agency delivery setting. Moreover, when it comes to the interventions' external validity, most of the research questions go beyond the causality relations between an intervention and its outcomes, addressing issues related to the implementation, such as "who benefits the most from the intervention?", and its economic evaluation and sustainability over time. Verifying the interventions' internal validity is as important as evaluating their external validity, informing on their ecological validity and practical relevance (McCall & Green, 2004, Proctor & Brestan-Knight, 2016; Rodrigo et al., 2016).

Understanding that the frame of EBP is not limited to outcomes measurement and that it applies to all the levels of programme evaluation design is implicitly acknowledging that evidence is not accounted from a single perspective, theoretical framework or single method (Campbell & Fiske, 1959). Moreover, the complementarity of the different methods does not imply a lack of theoretical foundation or the absence of a rationale for using the different methods. Indeed, a critical multiplism approach to EBP can be an advantage, especially when accommodating complex research issues that involve different theories, and claim a diversity of methods, measurement procedures, analyses and outcomes – the latter are often scrutinised under the lens of generalisation and specificity (Shadish, 1986; Shadish et al., 2002). Thus, contrary to an antinomy classification, evidence is to be addressed upon a methodological pluralistic roadmap. A "planned critical multiplism" (Shadish, 1986) or a "pluralistic approach" (Fives et al., 2017) to research and evaluation design is also pleaded by the European Family Network (EuroFamNet) Action's principles:

"Adopting a pluralistic approach to research and evaluation seeks to achieve greater fit between the demands of academic rigor in research/evaluation and the "real worlds" of policy and intervention. It embraces the full range of design and methodological

possibilities to address the diversity of contexts within which research studies and evaluations are set" (EurofamNet, 2020).

2.2. Children and families: From clients to subjects of rights

The view of children and families as consumers and recipients of care, which is typically used in the evidence-based practice approach, is misleading in this context. The Convention on the Rights of the Child and other international treaties state the right that children have to live in a family that provides and cares for them, acknowledging them as subjects of their own rights. The Convention identifies children as rights' holders and, in line with this, the EuroFamNet presents a rights-oriented position in its principles safeguarding the rights of children, parents and families. Family support targets the promotion and protection of children, parents, and families, representing a right of the child. The family is identified as crucial for the full realisation of children's rights through an entire range of rights guaranteed to the children. It is also acknowledged that parents often need support in developing effective parenting skills (Dolan et al., 2020). According to the recommendation of the Council of Europe on positive parenting (Rec 2006/19), it is a responsibility of the member states to guarantee that the conditions to provide family and parenting support to the families in need of such services are available through central and local level policies.

When delivering EBP to families and children as rights' holders, professionals adopt a family-centred approach, developed in a collaborative framework and established on a relation of trust and equity with the families. Adopting EBP within a family-centred approach not only brings together the best available research and professional expertise, but also the inputs of children, youth and families regarding their values, goals, needs and preferences, considering them as rights holders. In this family-centred approach, the professional focuses on the family's needs, and prompts the family to assume the lead in decision-making, fostering the family's empowerment, personal competence, and autonomy toward problem-solving, along with personal agency.

Family support professionals develop a set of activities that strengthens families' positive informal social networks through integrated programmes, usually provided at the families' homes and communities (Dolan et al., 2006). This workforce comprises a broad range of professionals and paraprofessionals who provide support to families through different services offering developmental, compensatory, and protective support to families as a whole and their members to provide subsistence, productive development, and integration of the family into the community (Zegarac et al., 2021). The family support workforce combines expert knowledge with professional experience and "community-level"

knowledge, which are key for reflective practice, characterised by a combination of description and questioning informed by action leading to change (Dolan et al., 2006).

Family support should be delivered in light of the rights of children and families, but it is also on itself a fundamental right of children, as it is implemented in a multi-agency delivery field to promote children's rights and children's and families' wellbeing, also being crucial for children's and families' protection (Dolan et al., 2020). A bidirectional relation exists between children's rights and family support: children's rights are the guiding framework for family support intervention in community-based services, and family support services contribute to the promotion and protection of children's rights.

In sum, when delivered in community-based settings, and particularly within family support services, the question of how to consider those receiving the EBP gains a new meaning in comparison to the EBP delivered in clinical practice settings. Other than classifying or diagnosing the families and its individual members in categories (e.g., as functional or dysfunctional), the EBP delivered in community-based services needs to attend to the families' diversity. In line with the preventive interventions' approach, evaluating the risk and protective factors within each family's systems is crucial for the professionals working with them (Proctor & Bresta-Knight, 2016). In addition to the evaluation of the families' characteristics, the evaluation of the implementation of family support services also deserves attention. A fundamental challenge is ensuring flexible implementation, introducing adaptations to ensure that the programme fits the families and settings' needs, yet without compromising adherence to EBP (Anyon et al., 2019).

3 | Evidence-based programmes: A flagship of integrative efforts to promote family wellbeing

Over the last three decades, the area of family support has witnessed a strong development of structured interventions targeting parents or parents and children. Most of these interventions aim to improve parents' resources for raising children, promoting parents and family's wellbeing and children's development and psychosocial adjustment. Often known as evidence-based family and parenting programmes (EBFPP), these interventions are developed within a theoretical framework supported by evidence and include resources that can be delivered in the form of information, knowledge, skills, social support, and competence development (Dolan et al., 2020). EBFPP have been found to be effective in preventing and reducing negative outcomes for children and parents (Weber et al., 2019) and are

recommended by the European policies as an underlying principle for the investment and transferability of good practice (Rodrigo et al., 2016). However, the use of EBFPP as a service provided at community-based settings is not a generalised practice in most European countries (Baumann et al., 2016). The interventions delivered in community-based services are family-centred and tailored to the family's needs and characteristics, nevertheless these intervention protocols often do not include structured programmes.

EBFPP are theoretically driven and empirically validated interventions, with contents described and structured in a manual, that have their efficacy/effectiveness evaluated, identifying the factors related to the implementation process (Rodrigo, 2016). EBFPP may be delivered in different formats, such as in group or individual format, face-to-face or remotely, self-directed with or without professional support..., etc. They are designed to target the specific needs of parents and children (e.g., parents of children of different ages, with different statuses of mental or physical health) and specific family risk levels (low-universal prevention, medium-selective prevention, high-indicated prevention). In order to be delivered by professionals that are not involved in the conceptual development of the programme, EBFPP include specific training, and often also rigorous accreditation procedures. At the very least, it is mandatory for professionals to be trained on the programme rationale, the strategies, and activities to be presented in each session, as well as on the evaluation protocol to be implemented.

EBFPP present a set of advantages for their users (UNODC, 2010). Firstly, these programmes are based on theoretical models supported by scientific research, which have themselves been empirically tested within the context of human development and education research. The theoretical model clarifies the "theory of change" of the programme, which explains the relationship between the objectives of the programme, the strategies and activities proposed and the expected outcomes in parents and children (Asmussen, 2011). Having the contents described and structured in a manual allows professionals to have a standardised reference, ensuring that the EBFPP is delivered with fidelity and the objectives of the programme are achieved. This is a sensitive issue, given the services' tradition of delivering non-structured interventions, defined according to the needs of the families. However, EBFPP are not rigid entities or unresponsive to the idiosyncrasies of families and intervention contexts. There is already a considerable amount of literature on the "adaptation versus fidelity" balance in the implementation of evidence-based programmes. EBFPP developers should clarify the core components of the programme that should be absolutely respected and the elements that can be altered without compromising the core components of the intervention (Barrera et al., 2016). Changes in non-core aspects, such as sensibly adjusting the number of sessions, or using more culturally appropriate examples and images, are favourable, do not compromise the fidelity of delivery and, on the contrary, promote its

effectiveness. More recently, in the context of the COVID-19 pandemic, evidence has shown that interventions designed to work face-to-face have been successfully implemented remotely (Canário et al., 2021).

A second advantage is that EBFPP have been tested to verify whether their effects were beneficial to the target population of the programme. This is a demanding and time-consuming process, requiring financial and qualified human resources. For these reasons, this process is often carried out in academic settings, through research projects with competitive funding. The evaluation of the programmes' effects is performed through systematic and rigorous methods, whose quality has been addressed by several organisations presenting the standards of evidence (Gottfredson et al., 2015). At the end of the evaluation, there is a guarantee of quality from the scientific research performed and from the publication of the findings in peer-reviewed journals. It is more likely that the programme leads to positive rather than negative effects (Asmussen, 2011). The evidence available allows for the services in community-based settings to choose the most adequate programme to work with their target populations. It also allows the services to recruit the families according to the characteristics and objectives of the programme, ensuring that the programme has the potential to provide the best possible response to the specific needs of the families. Fitting the programme to the needs of the target population also allows its implementation to be reliable, contributing to outcomes in children, parents and families in line with those defined in the theory of change of the programme.

As a third advantage of EBFPP, the economic evaluation and accountability informs on cost-sensitive decisions, thus contributing to social policies and decision making, as well as allowing investing in types of support that fit the families' characteristics, fostering family wellbeing and child development, and reducing societal burden and costs. Several studies have shown that EBFPP are cost-effective in treating behavioural problems over time (Sampaio et al., 2018; Nystrand et al., 2019). Despite the costs related to the training and implementation, the investment in EBFPP as preventive interventions averts further investments in other family support interventions that do not offer a guarantee of effectiveness. An initial economic investment is always required to implement an EBFPP. There are costs related to professionals' training and the acquisition of all the materials necessary for delivering the programme to parents (Scott, 2011). In addition, developing new parenting programmes requires a long-term costly investment to evaluate the efficacy and safety of the interventions over time (UNODC, 2010). The final product needs extra investment in the preparation of the infrastructure that allows the transferal of the programme to the community: editing of handbooks and other materials to support the delivery of programmes, translation into different languages, training and accreditation of professionals and their supervision, etc. However, all this effort results in the knowledge that the EBFPP

can be offered to a larger number of families with a guarantee of effectiveness. Investing in EBFPP, making them available for families in community and real-world settings, is relevant to prevent the occurrence of the mentioned problem and averts the costs with subsequent or more specialised care.

In addition to the previous advantages, delivering the EBFPP at community-based services can potentially contribute to changing the practices that are usually carried on by the professionals at those settings, requiring the reframing of the professional practice within the EBP framework. Practitioners have to make crucial changes in the service organisation, select the appropriate target group, standardise the intervention, and evaluate its outcomes. The understanding of the rationale underlying the EBFPP and each implemented strategy allows the professionals to be more self-conscious and intentional in their practice, improve their expertise and feel greater confidence and motivation toward the intervention. Moreover, practitioners become very satisfied and feel empowered, since they perceive the intervention as being effective, producing changes in parents and children, with medium and long-term consequences for the effectiveness of services (Scott, 2011). By promoting an evaluation culture among professionals, contributions to practice come from the outcomes of the interventions, the costs and effects of the interventions can be weighted and the professionals become better informed to answer the stakeholders' and decision-makers' accountability demands.

To sum up, EBFPP allow integrating EBP on the family support services provided by community-based settings. Even though the culture of evaluation following the standards of best evidence is still not widespread and, therefore, EBFPP are not extensively implemented and/or properly evaluated, there are several advantages regarding the integration of EBFPP on the family support services provided by community-based settings, stimulating a restructuring of the services in order to contribute to the wellbeing of a larger number of families.

4 | Evaluation as a keystone of EBFPP

Programme evaluation is a fundamental and ubiquitous component in EBFPP, given that these programmes include both a conceptual framework that should be respected throughout the implementation and the collection of empirical data before and after the implementation to ascertain whether the objectives of the programme are met. Programme evaluation refers to the systematic collection of empirical information about the activities, characteristics, and

outcomes of programmes to inform evaluative judgments (Patton, 2012). Different methods allow collecting different kinds of information and their value depends on their aptness to answer the question being posed within a specific context and with a specific population (Fives et al., 2017; McCall & Green, 2004). As such, experimental and non-experimental designs, as well as quantitative and qualitative methods can be considered the best match if they allow answering adequately the research question raised (Proctor & Brestan-Knight, 2016). As was mentioned above, the EuroFamNet embraces a pluralistic approach to research and evaluation, enabling a wider range of design and methodological models and addressing the diversity of contexts within research studies and programme evaluations (EuroFamNet, 2020).

Some of the questions often raised requiring a pluralistic approach when programmes are delivered in the community services are described in the following paragraphs.

Is the programme ready to be delivered in community-based services? Evaluation of programme accessibility.

To be delivered in community-based services, the professionals must have access to the programme, as well as to all the materials necessary for the implementation. They should also have access to specific training and accreditation procedures, if the programmes' developers require accreditation procedures. While delivering the programme, the professionals should be able to attend supervision sessions and contact implementation consultants to make queries related to any procedure or content adaptation, in order to ensure implementation fidelity. These are relevant aspects that contribute to the adoption, implementation, and sustainability of the intervention by the professionals and services (Proctor, 2011).

Do the required conditions for programme delivery exist in the community-based service? Evaluation of the service conditions.

The delivery of a programme usually requires the existence of two types of conditions. The first condition is related to the professionals' willingness to innovate in their practice, adherence to the programmes conceptual framework and theory of change, in order to determine the best services to fit the families' needs and characteristics. The second condition refers to the existence of an infrastructure within the service supporting the implementation of the programme. Logistic conditions such as adequate spaces for parents, children and families, a working schedule that fits the families' needs, the programme's materials available, and support for parents regarding transportation, meals or babysitting, are important to ensure parents' recruitment, retention and participation rates throughout the programme delivery. Providing these conditions for the families also reflects the acceptability of the programme by professionals and stakeholders, revealing that they consider the programme an asset to the

service and its objectives (Proctor, 2011). A *posteriori* evaluation regarding the above presented conditions related to the success of the intervention determines the feasibility of the programme, i.e., the extent to which the programme can be successfully delivered within the community services (Proctor, 2011).

What are families' needs? Initial assessment of the families' needs and resources

It is essential that the programme fits the needs of each family. The initial programme evaluation protocol usually includes the assessment of parenting behaviours, attitudes, knowledge and sense of competence, parental adjustment, and perceptions of child behaviour. If the measures are reliable and present an adequate sensitivity and specificity, the information collected prior to the intervention (often at the moment of recruitment) allows the professional to understand whether the programme, in its characteristics, is suitable for the family. It also allows screening for specific conditions among the members of the family that can determine possible referrals to other professionals or services (Proctor & Brestan-Knight, 2016). Several programmes include a session to provide feedback of the initial assessment to the family or the parents, so that the family can use this information to set goals for change. The initial assessment with sensitive and specific measures allows a comprehensive assessment to determine the appropriateness of the programme for each family (Proctor, 2011), and how it can be tailored to the family's needs, without compromising the programme integrity.

Is the programme effective for the family? And for how long? - Evaluation of short- and longer-term effects

Implementing the initial assessment protocol again at the completion of the programme allows assessing the impact of the programme in each family, i.e., whether there were positive changes in behaviours, cognitions, sense of competence, etc. Thus, the assessment protocol has a double purpose: to assess the initial needs of the family, and to evaluate the effects of the programme. The second purpose is critical, not only to determine if the programme was an asset for each family (or not), but also to question why it did not work as was expected and if the family needs to be referred to an additional support. Ultimately, the effectiveness evaluation contributes to ensuring that the services in community-based settings are offering the best care service to families.

Ideally, the evaluation of programme's effects should be carried out not only in the short term (i.e., immediately after the end of the programme), but also in the long term, to understand if the changes are maintained over time. In addition to assessment instruments that allow for quantitative scores, it is desirable to include other assessment formats that comprise observation of child and family interaction, and individual or group interviews.

Likewise, to further understand the effects of the programme on children, in addition to the parents' reports, it is advisable to use multiple sources of information (e.g., from teachers).

How is the programme delivered by professionals? - Evaluation of implementation fidelity

Monitoring the programme implementation allows examining if the programme is being delivered with fidelity. EBFPP have core components that must be identified and accomplished to avoid compromising the fidelity of the intervention delivered. EBFPP usually have fidelity checklists, which must be completed by practitioners at the end of each session. Monitoring the programme's implementation is always important, and even more so when there is an ongoing adaptation process, for example in a new country or with a new language, as part of a "continuous quality improvement cycle". It is essential that the evaluation is carried out rigorously, so that valid conclusions can be drawn. The results should be published in order to increase the knowledge of the services in community-based settings about the effectiveness of the intervention, whether adapted or not (UNODC, 2009).

How were parents during programme delivery? Evaluation of family engagement

The impact of a parenting programme may be compromised if parents are not sufficiently engaged along the intervention process. Parental engagement in family and parenting support interventions is a multi-stage process, including, for instance, enrolment, retention, attendance and participation in the activities within and between sessions (Piotrowska et al., 2017).

The degree of parental engagement in the programme is operationalised through several specific behaviours, such as sessions' attendance (presence/absence), punctuality, active participation in the activities carried out in the sessions, performing the homework tasks, and satisfaction with the intervention. This information should be collected systematically along the intervention process and used to monitor participants' engagement. As an outcome, this information is relevant to better understand the effects of the programme in each family, i.e., determining whether worse/better intervention outcomes relate to lower/higher parental engagement rates.

For whom and in what conditions is the programme effective? - Evaluation in effectiveness studies

Effectiveness studies are those developed to determine if the programme which had its efficacy ascertained in a research context is effective when translated to services in community-based settings (Gottfredson et al., 2015). Effectiveness evaluation should include the evaluation of the programmes' outcomes, using the measures defined in the programme assessment protocol, before and after the intervention and, ideally, in additional follow-ups

over time. This is particularly important to understand if the intervention works and if the effects are sustained over time (van Aarj et al., 2017). Effectiveness evaluation should also address individual characteristics of children, parents, and programme delivery that can contribute to explaining for whom and under which circumstances the intervention is effective. Other important aspects are those related to the processes that contribute to explaining how changes take place throughout or after programme delivery, for instance, whether a parenting programme impacts child behaviour through the change in parenting practices.

Is the programme cost-effective? Economic evaluation of the programme implementation

An economic evaluation of the programme should also be made within an effectiveness evaluation (Crowley et al., 2018), being particularly relevant to inform cost-sensitive decisions regarding the programme's dissemination. This is particularly relevant for social policies and decision-making, informing on the different EBFPP that fit the needs of the families, according to their characteristics, and contributing to reducing family and societal burden and costs.

What is the penetration and the sustainability of the programme? - Evaluation in scale-up studies

Large-scale implementation studies are developed in a wider translation process, following or during programme dissemination (Gottfredson et al., 2015). Developing a scale-up study on programme dissemination requires the existence of a structure that streamlines and monitors the implementation of the programme in the area/region/country where the programme is being delivered. The evaluation of scale-up studies includes all the aspects previously presented regarding effectiveness evaluation. Two key aspects should be considered: penetration and sustainability (Proctor, 2011). What is the integration of the programme within the community services? And to what extent is the programme sustained over time in the community services? At this point, engaging stakeholders is also relevant to determine whether the programme is culturally competent and meaningful (Gill et al., 2016). The outcomes of scale-up evaluation studies are important to inform policies and guidelines.

To sum-up, programme evaluation is a key component of EBFPP, informing about their characteristics, processes, and outcomes. The worth of specific evaluation methods depends on their appropriateness to answer specific questions. When programmes are implemented in the community services, evaluating the external validity is as important as evaluating the internal validity, through a pluralistic methodological approach to programme evaluation.

5| Conclusion

Evidence-based structured family and parenting interventions within a theoretical framework supported by evidence have been proved effective in preventing and reducing negative outcomes for children and parents in multiple countries and cultures. However, the use of EBFPP as a service provided in community-based services is not a generalised practice in most countries, including European countries.

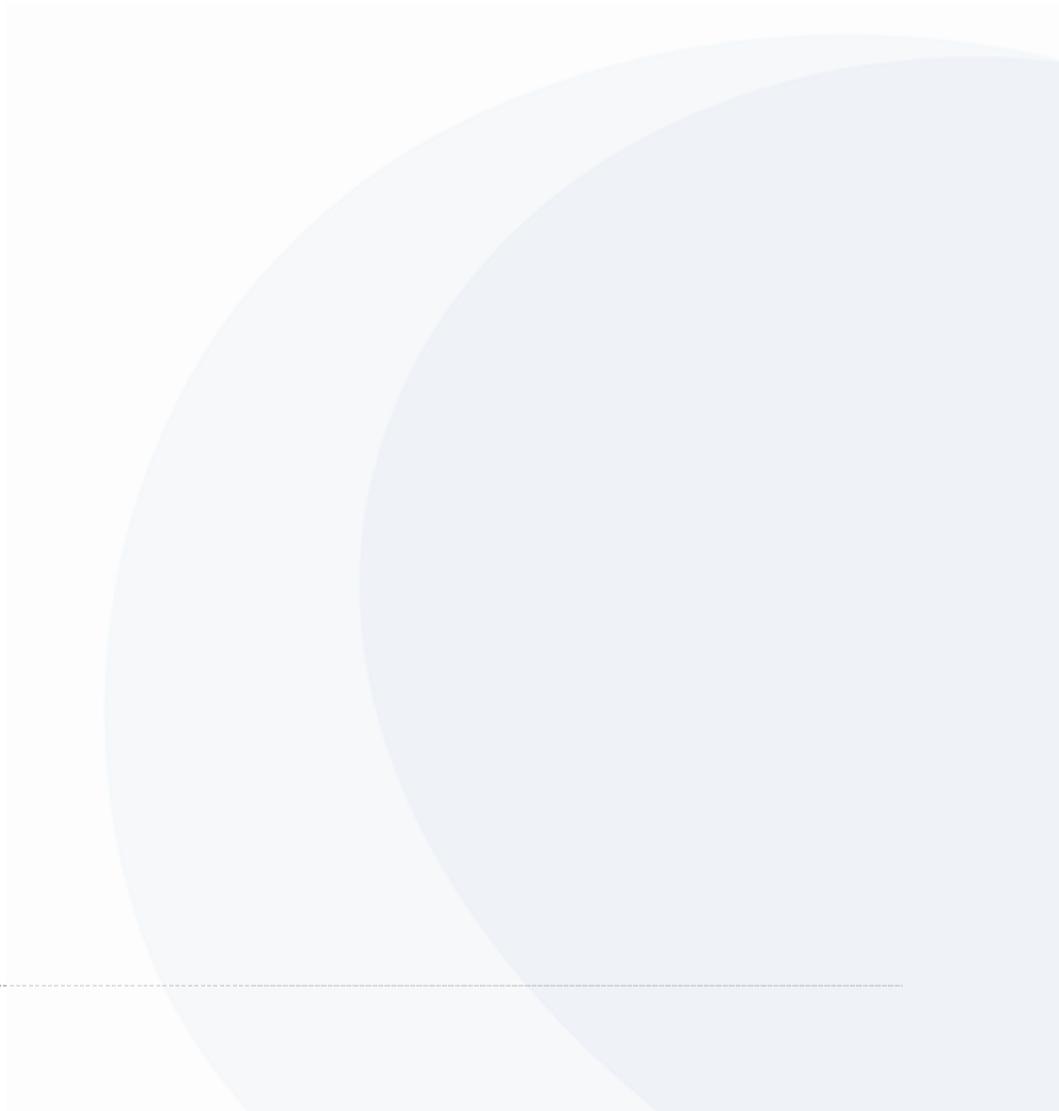
The dissemination of EBFPP in community-based services demands for a pluralistic approach in the evaluation of the support provided to address the different questions at the different stages of EBFPP implementation. This can be achieved by resorting to a multiplicity of methods and procedures, in a straight collaboration between researchers and professionals in community-based services.

Furthermore, to achieve positive outcomes and reduce negative outcomes for children, families and communities, the work developed by family support professionals in real-world dynamics should rely on their expertise, as well as on a collaborative framework with the families, acknowledging children, parents, and families as active and collaborative members of the intervention in a dynamic process to deliver the best family support service.

The implementation of EBFPP in community-based services brings along multiple advantages for those who deliver and benefit from family support services. EBFPP are underpinned by a theoretical background, including a theory of change, which is key for a standardised intervention model that allows defining clear objectives and goals for each family and evaluating whether these objectives and goals are accomplished. EBFPP evaluation outcomes inform family support professionals on the programmes' fit according to the families' needs and characteristics. EBFPP outcomes paired with results from economic evaluations and accountability inform about cost-sensitive decisions and contribute to social policies and decision-making. Delivering EBFPP in community-based services contributes to increasing practitioners' self-consciousness and intentionality while working with families, as well as their sense of confidence and professional engagement.

Scaffolding the evidence-based paradigm in family and parenting programmes with the principles of implementation research will be the next step forward in community-based services at many levels. The complexity of the questions raised along the process of implementation demands for a diversity of methods and procedures that are relevant to accommodate and answer different queries and needs raising from the family support practices in real-world dynamics. This will also encompass the development and refinement of evaluation methodologies in line with EuroFamNet's pluralistic approach to research and

evaluation (EuroFamNet, 2020). Such a quest will encourage researchers, professionals, families and politicians to think, plan and act together to improve parenting and family support in the different sectors of care.



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