Case study 1: An evidence-based practice review report

Theme: Interventions implemented by parents

Are programmes for divorced and separated parents effective in promoting positive social, emotional mental health outcomes for children? A systematic review of the literature

1 Summary

which has been rigorously reviewed in two randomised controlled trials (EIF Guidebook, 2023

2019) and those that do cite different theories. Some programmes such as the Parents Forever programme cite Bronfenbrenner's ecological systems theory as a key framework in considering the interactions between a person and their environment within nested systems (Bronfenbrenner, 1979; Hardman et al., 2019). Similarly, the NBP is underpinned by a person-environmental transactional framework and a risk and protective factor model (Wolchik et al., 2007). The person-environment transactional model emphasises the bi-directional interaction between changes in one's environment and changes to one's development, for example how parenting can affect a CYP's SEMH and vice versa.

In contrast, 'Egokitzen' is underpinned by Grych and Fincham's (1990) cognitive-contextual model and Davies and Cummings' (1994) emotional security theory (Martínez-Pampliega et al., 2015). The cognitive-contextual model considers how CYP's experiences of their parents in conflict occurs through contextual, cognitive and developmental factors that mediate their understanding. Emotional security theory builds upon Attachment theory (Bowlby, 1979) and considers how children's outcomes are affected by their emotional security fears due to adverse experiences with parents in conflict (Davies & Cummings, 1994). NKM is underpinned by multi-family therapy (MFT) and the role of experiences in mediating learning (Mortimer et al., 2021). The MFT approach values the role of groups as a means of intensifying families' interactions by allowing them to observe those of other similar families (Minuchin, 1974).

2.2 Rationale

In 2018 there were approximately 2.4 million separated families with 3.5 million children in the UK (Department for Work and Pensions, 2020) and in 2021 the divorce

research question (see Appendix A for the reasons for exclusion). Figure 1 outlines the search and selection procedure adhering to the process set out by the PRISMA Statement recommendations (Page et al., 2021

Author	Sample	Study design	Age of participants	Geographical context of study	Intervention	Deliverer	Key findings	Follow up
Mortimer et al. (2023)	26 parents and 42 children completed the intervention	Pilot study with mixed methods. Quasi-experimental	Average age of mothers = 37.4 yrs Average age of fathers = 46.2yrs Average age of children = 8.5yrs	London, UK	No Kids in the Middle (multi-family therapy)	Multi-disciplinary teams of practitioners, all with experience of working therapeutically with families	Children's CORS and CRIES scores did not change significantly post-intervention. Children actually reported lower wellbeing after the intervention than before. The number of children scoring above the clinical cut off for the CORS decreased from 60% to 45% post-intervention. Mother and father reports on the SDQ varied considerably and there were no significant differences post-intervention.	None

Author	Sample	Study design	Age of participants	Geographical context of study	Intervention	Deliverer	Key findings	Follow up
Sandler et al. (2018)	384 fathers (201 intervention group, 183 comparison) And their children	RCT	Average age of fathers = 39.18yrs Age of children = 3-18yrs	Arizona, USA	New Beginnings Program-Dads (NBP-Dads)	A trained leader	Initial findings were non-significant however several mediating variables showed significant findings. Girls had fewer externalising problems after NBP-Dads, teachers reported lower externalising problems and total behaviour problems for older children after NBP-Dads. Ethnicity was also a mediating	

Author	Sample	Study design	Age of participants	Geographical context of study	Intervention	Deliverer	Key findings	Follow up
Tein et al. (2018)	830 parents (474 mothers and 356 fathers)	RCT (using a multi-group propensity score approach)		Arizona, USA	New Beginnings Program	A trained leader	NBP parents reported significantly greater parent-child relationship quality, discipline and lower psychological distress. However, the effects of child exposure to parental conflict, child risk and internalising problems were mediated by parents' gender. Fathers scored significantly greater differences after attending the NBP.	10 months post

3.6 Participants

In total, 1,830 participants were included across the five studies however it should be noted that the three studies looking at the NBP used some of the same participants as in previous effectiveness trials (Wolchik et al., 2007). Four studies included between 200 and 400 parents whereas Mortimer et al. (2023) only had 26 parents owing to the study's design and the impacts of the coronavirus outbreak. All the studies included either a parent or sets of parents who had divorced or separated. Studies included participant characteristics such as average parental age, and gender; Mortimer et al. (2023) and Sandler et al.(2018) referenced more criteria such as the ethnicity of participants and time that parents had been separated for which resulted in these studies receiving a higher rating for WOE C 'sample' score.

3.7 Study Designs

not include a control group or follow up measure and so this is reflected in their lower WOE A score for methodological quality.

Sandler et al. (2018) conducted a randomised controlled trial (RCT) with an intervention and comparison control group comprised of voluntary participants. Tein et al. (2018) used a multi-group propensity score approach to provide additional analysis of the original RCT evaluation study conducted by Wolchik et al. (2007). Zhou et al. (2008) conducted a mediation analysis at the six-year follow-up to another Wolchik et al. (2002) study evaluating the NBP. As a result, these studies all received a higher WOE B rating for their use of RCTs which are deemed more appropriate for assessing intervention effectiveness (Petticrew & Roberts, 2003).

3.8 Interventions

Three different interventions were evaluated for their effectiveness on child outcomes. Martinez-Pampliega et al. (2021) evaluated the 'Egokitzen' divorce education programme in the community context following promising evidence of its efficacy in university trials (Apraiz et al., 2015; Martinez-Pampliega et al., 2016). Mortimer et al. (2023) conducted a pilot study of NKM; this utilised a multi-family therapy (MFT) approach that has been successfully used to treat various problems (Cook-Darzens et al., 2018; Gelin et al., 2018). These studies therefore received a high WOE C 'setting' score with the rationale that evaluating the intervention in the community is more ecologically valid. The three remaining studies all considered the NBP. Sandler et al. (2018) evaluated an adapted version of the programme called 'NBP-Dads' which was designed to specifically target the fathers of separated couples, whereas Tein et al. (2018) and Zhou et al. (2008) considered aspects of the NBP in its original format for both mothers and fathers.

3.9 Outcome measures

To comply with inclusion criteria, the studies had to include at least one outcome measure that assessed CYP's SEMH. There were some similarities in measures used such as the Child Behaviour Checklist (CBCL) however other measures differed. Martinez-Pampliega ee91 Tc 040 TdBo (i)6 a sg.cklhe2d.

did not measure the

NBP were conducted by the same research team at the University of Arizona including Sandler and Wolchik as co-authors and so it is also presumed that there is some bias in these studies as well as it was in the researchers' personal interest to demonstrate positive outcomes from the NBP. As a result, where the reviewer included 'setting' as a criterion for WOE C these studies were considered to have lower ecological validity due to the influence of researchers' secondary interests. Therefore, it was decided that where conflict of interest is stated or presumed, a study will not be able to score '3' for WOE C 'setting'. This was in order to give acknowledgement to the effects of bias in the research as the context includes a secondary interest that may jeopardise the study's ecological validity even if the study was conducted in a community

Table 6: Effect sizes for the included studies

Study	No of participants	Child outcomes measured	*P* values of pre-post differences	Effect size value	Effect size descriptor*	WOE D rating
Martinez-Pampliega et al. (2021)	Intervention group n = 260 Control group n = 112					

Study	No of participants	Child outcomes measured	*P* values of pre-post differences	Effect size value	Effect size descriptor*	WOE D rating
Sandler et al. (2018)**	Intervention group n = 201 Control group n = 183	Child behaviour checklist: - Internalising - Externalising - Total problems The Brief Problem Monitor (child): - Internalising - Externalising - Total problems The Brief Problem Monitor (teacher): - Internalising - Externalising - Total problems Teacher-Child rating scale: - Learning problems - Assertive Social Skills - Task orientation - Frustration tolerance -				

Study	No of participants	Child outcomes measured	*P* values of pre-post differences	Effect size value	Effect size descriptor*	WOE D rating
Tein et al. (2018)	Intervention group n = 445 Control group n = 385	(NBP versus Inactive control group) Child Behaviour Checklist - Internalising - Externalising - Total problems	 0.82 0.13 0.33	 -0.25 -1.46 -0.97	 Small Large	

*Effect sizes were considered small at the 0.2 level, medium at the 0.5 level and large at the 0.8 level in line with Cohen (1992). Effect sizes smaller than 0.2 was considered to be negligible.

**The authors gave the main effect before and after applying the false discovery rate procedure. The *p*-false discovery rate is the one reported here. The reviewer used the Campbell Calculator (Wilson, 2023) to calculate effect sizes.

Note: Abbreviations for Child Outcomes measured: Parent Strengths and Difficulties Questionnaire (Parent SDQ); Child Outcome Rating Scale (CORS); Child Revised Impact of Events scale (CRIES-8)

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5.2 Appendices

Appendix A: Excluded studies at full-text screening

Table 7: Studies excluded at full-text screening with rationale for exclusion and full-reference

Reference	Reason(s) for exclusion	Related criteria number (see table 2)
Carr, A., Hartnett, D., Brosnan, E., & Sharry, J. (2017). Parents Plus Systemic, Solution-Focused Parent Training Programs: Description, Review of the Evidence Base, and Meta-Analysis. *Family Process*, *56*(3), 652–668. Scopus. https://doi.org/10.1111/famp.12225	This study looked at the effects of Parents Plus interventions. Whilst there is a version of Parents Plus for divorced or separated parents, this study was a review of all the Parents Plus programmes generally. This study was a systematic review rather than a group-based experimental design.	Intervention Study design

Reference

Appendix B

Table 8: Modifications to the Kratochwill (2003) coding protocol with rationale

Modified section of the protocol	Rationale
I. General Characteristics Section B7-B8 removed.	Qualitative methods have not been coded for this review as only one study included any qualitative data.
II. Key Features for Coding	

Appendix C

Table 9: Criteria for coding studies using the adapted Kratochwill protocol

Dimension	Criteria
Dimension 1: Measures	
For a rating of 3 studies should include:	Use of outcomes that produce reliable scores, use multi-methods, multi-sources and have validated instruments with the specific target group. All met with sufficient detail.
For a rating of 2 studies should include:	Three of the above criteria
For a rating of 1 studies should include:	Two of the above criteria
For a rating of 0 studies should include:	Fewer than two of the above criteria
Dimension 2: Comparison group	
For a rating of 3 studies should include:	Comparison group type explicitly mentioned, counterbalancing of change agent, group equivalence established and low attrition rates at post test and follow-up. All met with sufficient detail.
For a rating of 2 studies should include:	Three of the above criteria
For a rating of 1 studies should include:	Two of the above criteria
For a rating of 0 studies should include:	Fewer than two of the above criteria
Dimension 3: Identifiable components	
For a rating of 3 studies should include:	Design allows for analysis of identifiable components, number is explicitly stated and links to primary outcomes are clear, procedures for adapting the intervention are coherent, contextual features of the intervention are documented. All met with sufficient detail.
For a rating of 2 studies should include:	Three of the above criteria
For a rating of 1 studies should include:	Two of the above criteria
For a rating of 0 studies should include:	Fewer than two of the above criteria
Dimension 4:	

Dimension	Criteria
Dimension 5: Site of implementation	
For a rating of 3 studies should include:	Site of implementation is very clearly stated and described in detail.
For a rating of 2 studies should include:	Site of implementation is stated but with limited detail.
For a rating of 1 studies should include:	Site of implementation is inferred with limited detail.
For a rating of 0 studies should include:	

Appendix D:

Table 10: WOE A ratings for the included studies

Study	Quality ratings assigned for the 6 dimensions						Overall WOE A*
	Measures (0-3)	Comparison group (0-3)	Identifiable components (0-3)	Implementation fidelity (0-3)	Site of implementation (0-3)	Follow up Assessment conducted (0-3)	
Martinez-Pampliega et al., (2021)	2	2	0	2	2	2	1.67 (medium)
Mortimer et al., (2023)	2	0	1	1			

*Overall WOE A was calculated by adding up the scores of the individual dimensions and diving by the total number of dimensions (6).

WOE ratings were allocated a descriptor as outlined in table 11

Appendix E

Table 11: Key to outline how

Appendix G

Table 13: WOE B criteria and rationale based upon Petticrew and Robert's typologies of evidence (2003).

Weighting	Type of study and design	Rationale
(Low) 1	Qualitative research, surveys, case-control studies	These studies are less suitable to the current research question concerning effectiveness of intervention and have lower internal-validity.
(Medium) 2	Cohort studies, quasi-experimental designs	These studies are moderately appropriate for the research question about effectiveness of intervention as they provide greater external validity but less causal inference than RCTs.
(High) 3	Randomised controlled trials	These types of designs, apart from systematic reviews or meta-analyses, are most suited to answering the research question around effectiveness of divorce education programmes on children's outcomes (Petticrew & Roberts, 2003).

Appendix H:

Table 14:

Criteria	Weightings

Appendix I:

Table 15: Overall WOE C ratings

Study	WOE C rating				Overall WOE C*
	Setting	Sample	Outcomes measured	Implementation fidelity	
Martinez-Pampliega et al., (2021)	3	2	1	3	2.25 (medium)
Mortimer et al., (2023)	3	3	3	3	3.0 (high)
Sandler et al., (2018)	2	2	3	1	2.0 (medium)
Tein et al., (2018)	2	2	2	1	1.75 (medium)

Appendix J: Example Coding Protocol used for the five studies

Coding Protocol 1

Domain:
- ☐ School- and community-based intervention programs for social and behavioral problems
- ☐ Academic intervention programs
- ☒ Family and parent intervention programs
- ☐ School-wide and classroom-based programs
- ☐ Comprehensive and coordinated school health services

Name of Coder: uju132 Date: 21.01.2023

Full Study Reference in proper format:

Martínez-Pampliega, A., Herrero, M., Sanz, M., Corral, S., Cormenzana, S., Merino, L., Iriarte, L., Ochoa de Alda, I., Alcañiz, L., & Alvarez, I. (2021). Is the Egokitzen post-divorce intervention program effective in the community context? *Children and Youth Services Review*, *129*, 106220. https://doi.org/10.1016/j.childyouth.2021.106220

Intervention Name (description of study): 'Egokitzen' post-divorce intervention program

Study ID Number:__1_____

☐ Type of Publication:

☐ Book/Monograph

☒ Journal Article

☐ Book Chapter

☐ Other (specify):

1.

B. Participants

B. Statistical Treatment/Data Analysis (answer B1 through B6)

B1. Appropriate unit of analysis ☒ yes ☐ no
B2. Familywise error rate controlled ☐ yes ☐ no ☐ N/A
B3. Sufficiently large N ☒ yes ☐ no
Statistical Test: ANOVA_____
alpha level: 0.05_____
ES: 0.20, small; 0.50, medium; 0.80, large_____
N required: _____

B4. Total size of sample (start of the study): 372 (102 lost between pre and post-test, final sample 270)
N
B5. Intervention group sample size: 197___
N
B6. Control group sample size: 73___

C. Type of Program

☐ Universal prevention program

☐ Selective prevention program

☐ Targeted prevention program

☒ Intervention/Treatment

☐ Unknown

D. Stage of Program

☐ Model/demonstration programs

☒ Early stage programs

☐ Established/institutionalized programs

☐ Unknown

E. Concurrent or Historical Intervention Exposure

☒ Current exposure

☐ Prior exposure

☐ Unknown

2. Key Features for Coding Studies and Rating Level of Evidence/Support

(Rating Scale: 3= Strong Evidence, 2=Promising Evidence, 1=Weak Evidence, 0=No Evidence)

B. Comparison Group

B1 Type of Comparison Group (Select one of the following)

- ☐ Typical intervention (typical intervention for that setting, without additions that make up the intervention being evaluated)
- ☐ Attention placebo
- ☐ Intervention element placebo
- ☐ Alternative intervention
- ☐ Pharmacotherapy
- ☐ No intervention
- ☒ Wait list/delayed intervention
- ☐ Minimal contact
- ☐ Unable to identify type of comparison

B2 Overall confidence of judgment on type of comparison group

- ☐ Very low (little basis)
- ☐ Low (guess)
- ☐ Moderate (weak inference)
- ☐ High (strong inference)
- ☒ Very high (explicitly stated)
- ☐ Unable to identify comparison group

B3 Counterbalancing of change agent (participants who receive intervention from a single therapist/teacher etc were counter-balanced across intervention)

- ☐ By change agent
- ☐ Statistical (analyse includes a test for intervention)
- ☒ Other
- ☐ Not reported/None

B4 Group equivalence established (select one of the following)

☒ Random assignment

☐ Posthoc matched set

☐ Statistical matching

☐ Post hoc test for group equivalence

B5 Equivalent mortality

☐ Low attrition (less than 20 % for post) No

☐ Low attrition (less than 30% for follow-up) No

☐ Intent to intervene analysis carried out? No

Findings:_____

Rating for Comparison group (select 0, 1, 2, or 3): ☐ 3 ☒ 2 ☐ 1 ☐ 0

E. Identifiable Components (answer E1 through E7)

E2. Design allows for analysis of identifiable components (select one) ☐yes ☒no
E3. Total number of components: n/a
E4. Number of components linked to primary outcomes: n/a
Additional criteria to code descriptively: n/a
E5. Clear documentation of essential components (select one) ☐yes ☒no
E6. Procedures for adapting the intervention are described in detail (select one) ☐ yes ☒no
E7. Contextual features of the intervention are documented (select one) ☒yes ☐no

Rating for Identifiable components (select 0, 1, 2, or 3): ☐ 3 ☐ 2 ☐ 1 ☒ 0

F. Implementation Fidelity

F2. Manualization (select all that apply)
F2.1 ☐ Written material involving a detailed account of the exact procedures and the sequence in which they are to be used
F2.2

III. Other Descriptive or Supplemental Criteria to Consider (modified)

A. Participant Characteristics Specified for Treatment and Control Group

☒Age of parent/s
☒Age of children
☒Gender of parents
☐Ethnicity
☐Home language
☒Length of time since divorce / separation
☒Levels of parental conflict
☐Levels of children's social emotional difficulties

B. Length of Intervention (select B1 or B2)

B1. ☐Unknown/insufficient information provided
B2. ☐

Summary of Evidence

Indicator	Overall evidence rating 0-3	Description of evidence Strong Promising Weak No/limited evidence Or Descriptive ratings
General Characteristics		
Design		Quasi-experimental
Type of programme		Intervention programme
Stage of programme		Early-stage, effectiveness only established in laboratory context prior to this study.
Concurrent/ historical intervention exposure		None mentioned
Key features: Post-divorce education programme, delivered by employees of Family Visitation Centres (Spain) and all had suitable qualifications in social or health sciences and several years' experience facilitating family interventions. Consists of 11 weekly 1hr 30 min sessions.		

Measurement	2	Promising evidence