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An Exploration of the Factors that Influence Practitioners' Decision-Making in the Context of Delivering the Strengthening Families Programme

This thesis is presented by

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Declaration

This is to certify that the work I am submitting is my own and has not been submitted for another degree, either at University College Cork or elsewhere. All external references and sources are clearly acknowledged and identified within the contents. I have read and understood the regulations of University College Cork concerning plagiarism.

Lorraine O' Donovan

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Abstract

Background: Evidence-based parenting programmes are widely recognised as one of the most effective ways to support parents and families. A large volume of scientific investigation supports the effectiveness of evidence-based programmes; however there is little available evidence on the implementation in 'real-world' practice contexts. The Strengthening Families Programme (SFP) is an evidence-based programme, utilised in the Irish context, albeit in a modified form.

Rationale: Practice response to the implementation of evidence-based programmes is relatively unknown. This research does not dispute the value of evidence-based programmes, but seeks to understand the factors that influence practitioners' decision-making in their delivery of evidence-based programmes in the practice setting.

Method: The research methodology, specifically the use of reflective journaling to gather contextual information about programme implementation, provides an innovative way to examine programme implementation. Information from reflective journals informed the direction of interviews that were later completed with practitioners. Interview data was analysed using Charmaz (2014) guidelines for constructivist grounded theory.

Results: The evidence from this study shows that no completed sessions of the programme were delivered absolutely, as prescribed in the Strengthening Families Programme manuals. Various changes were identified in the delivery of all sessions of the programme. Five theoretical categories emerged from the analysis as significant influences on practitioners in their delivery of the programme. These include:

- Readiness for the Programme;
- Sufficient Cultural and Language Adaptation;
- Interagency Model of Delivery;
- The Prescribed Nature of the Programme; and
- The Practitioner and their Experience of Delivering the Strengthening Families Programme.

Conclusion: This research highlights 'what's going on' in the real-world delivery by practitioners of an evidence-based programme. This study provides a new way to examine the process of implementation of evidence-based programmes by practitioners. It demonstrates, using qualitative research methods, that important contextual information can be uncovered that further informs the reach, dissemination and maintenance issues associated with evidence-based programmes.

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Chapter 1

Introduction

1.1 Background to Research

Neoliberalism as a theory has significantly impacted on policy developments and practice, particularly affecting the way in which social work and family support are delivered by the public, third sector/community and voluntary sector. It has greatly influenced the construction of work practices and positioned it within the backdrop of a corporate framework (Connell, 2013). The neoliberal agenda has led to a complete restructuring of organisational practices and professional practice in some public services (Dominelli, 1999), including child and family welfare. New concepts, such as assessment tools and packaged interventions, are now commonly utilised when working with clients (Gibbon and Henriksen, 2012). Evidence-based programmes are one such intervention.

Evidence-based parenting programmes are supported by the neoliberalist view, as they are organised and have a scientific evidence base. Evidenced-based programmes are introduced by funders and agencies as optimum and preferred interventions (Child and Family Agency, 2013; CES, 2016; Family Support Agency, 2013). An evidence-based programme is a programme which has consistently been shown to produce positive results by independent research studies conducted to a particular degree of scientific quality (Devaney, 2011). They include: Incredible Years, Parents Plus, Triple P, and the Strengthening Families Programme, etc. Evidence based programmes are viewed as an extremely valuable and useful intervention. Substantial evidence exists that parenting interventions such as evidence-based programmes can improve parent-child relationships and behaviours (Gardner et al., 2016). The programmes teach parents techniques to manage problem behaviours (Cotter et al., 2013), can reduce antisocial behaviours (Scott, 2005) and lead to improvements in youth outcomes (Sandler et al., 2011). This research examines how practitioners deliver one such evidence-based programme in a real-world setting.

The implementation of the Strengthening Families Programme (SFP) by practitioners is the focus of this research. It is an internationally recognised evidence-based parenting and family skills programme for high-risk families. The programme has been imported from the United States of America for use with high-risk families and has a significant evidence base (Fox et al., 2004; Gottfredson et al., 2006). The Strengthening Families Programme is a manualised, evidence-based parenting programme which was developed in the United States of America and has been promoted as an appropriate support for parents and families (Child and Family Agency, 2013, p. 52; CES, 2016; Sneddon & Owens, 2012), in the Irish context. The programme has been culturally adapted by the creators for the Irish context and is targeted at teens aged 12-16 years and their parents/main carers.

All the programmes within the Strengthening Families Programme suite follow the same format and aim to improve family relations, increase parenting skills, develop the child's/teen's life skills and their behaviour, increase child's/teen's social competencies, and reduce or prevent alcohol and drug abuse.

The programme content is prescribed within the programme manuals. It is delivered using a number of methods, including lectures, activities, discussion, and roleplays (Kumpfer et al., 2010). Homework, called home practice, is set for families to engage with each week outside of the programme and is discussed at the beginning of the following week's session. The home practice aims to get families to practice the skills they learn on the programme from week to week.

This study is not an investigation of the effectiveness of the Strengthening Families Programme. It queries how the practitioners deliver the programme and to what extent it is implemented as prescribed. This is of particular interest, as the Irish delivery context and the context within which practitioners of the Strengthening Families Programme deliver the programme differs significantly to other jurisdictions. To achieve greater cost effectiveness and sharing of resources, the programme is implemented in Ireland using an interagency collaboration model (Kumpfer et al., 2012; Kumpfer et al., 2010).

The interagency delivery model is influenced by neoliberalism in seeking economic and commercial common sense, including accountability and rational provision of

resources (Carey and Foster, 2013; Dominelli, 1999). The interagency working model aligns with some of the principles and key goals of family support, including working in partnership with other agencies and working from a strengths-based perspective (Pinkerton et al., 2004). The interagency working model aligns with some of the principles and key goals of family support, including working in partnership with other agencies and working from a strengths-based perspective (Pinkerton et al., 2004). It is commonplace for a team of up to eight practitioners from several different agencies to be involved in the delivery of the Strengthening Families Programme. This model of delivery is different to other jurisdictions within which the programme is run and also differs from the programme evaluation context (Kumpfer et al., 2012).

The use of such evidence-based programmes poses challenges for practitioners in their implementation, as the intervention is not adaptable to the changing circumstances of the parent/family, and the practitioner is not delivering the evidence-based programme in the same test conditions under which it was developed. It is often unclear as to what issues and challenges arise in the course of trials and evaluations of evidence-based programmes (Axford and Morpeth, 2013). This creates difficulty understanding and implementing the intervention. Barriers are encountered by practitioners when attempting to implement interventions, which include material resources, language barriers, scheduling issues, and the adaption of the intervention (Bohr et al., 2010; Barth et al., 2012). The practitioners are a significant variable in the delivery of these programmes; however, little is known about the 'real-world settings' of such interventions. Interventions are challenged by the contextualised lives of the families who engage with the programmes. They additionally challenge the practitioner and their construction of professionalism, as they are presented with a prescribed intervention to deliver.

Traditionally, programme evaluations were concerned with quantitative outcome measures and examinations of fidelity. Generally, assessments of implementation fidelity may be undertaken using observations, self-reports, fidelity checklists, or recordings of delivery. Such methods fail to capture the process of implementation as a research focus. This gap in the literature provides validation for this research project.

As programmes are developed and initially examined in test settings with well-trained and highly-skilled staff (Axford and Morpeth, 2013), it may be more challenging to adhere to fidelity in real-life settings (Scott et al., 2006), as the conditions are not the same. The Irish delivery context differs considerably from other contexts. It raises important issues in relation to the model of delivery and implications for the dissemination and maintenance of the programme in relation to implementation science.

Implementation science seeks to translate scientific knowledge into 'real-world' practice settings. It uses a systematic and scientific approach to identify the factors which assist or hinder the delivery of an intervention and are likely to facilitate administration of an intervention. It is the study of methods to promote the systematic update of findings and evidence-based interventions into routine practice. It seeks to bridge the gap between programme theory and practice. Implementation science seeks to ensure the adoption and sustainability of programmes (Moir, 2018) outside of test settings.

The factors contributing to the successful adoption and maintenance of programmes have been examined and various frameworks developed. These implementation frameworks have been developed and adopted to guide implementation of evidence-based interventions. They describe the barriers and facilitators of successful implementation (Nilsen, 2015). They illustrate the challenges and factors that aid the implementation of programmes. They guide the selection and development of implementation strategies, including selection of variables, outcomes, measures, evaluation of implementation processes and outcomes.

Most frameworks examine the reach of the programme for the target population, the efficacy of the programme, adoption of the intervention by practitioners, implementation with consistency and adaptations made, and maintenance of the programme. However, this researcher has not been able to locate information pertaining to the implementation framework used for the Strengthening Families Programme when it was developed in the 1980s. This research will utilise the RE-AIM (Reach, Effectiveness, Adoption, Implementation, and Maintenance) implementation framework, which will be described later in this thesis, to analyse the implementation

of the Strengthening Families Programme within the Irish context. As the Irish delivery context differs considerably from other contexts, it raises important issues for implementation science, implementation frameworks, and the dissemination and maintenance of the Strengthening Families Programme.

1.2 Research Design

This researcher has decided to pursue an investigation into the delivery of a manualised evidence-based programme by practitioners. This interest has been ignited by the researcher's professional experience of training practitioners, working with them, and supporting them to implement specific evidence-based programmes.

This researcher has specifically been involved in one evidence-based programme, namely the Strengthening Families Programme, for the past eight years. Within the practice context, practitioners spoke about changes they had implemented to the prescribed programme and identified components of the programme that they struggled to deliver. These disclosures from practitioners piqued the interest of the researcher in their consideration of the practitioner as a factor in the implementation of evidence-based programmes, particularly what the practitioners viewed as influencing their delivery of the programme.

Upon investigation of the literature, this researcher has found there is little information on practitioner experiences of evidence-based programme implementation, particularly in an Irish context. For this reason, this researcher has decided to address the void of research and pursue an examination of the challenges and opportunities associated with the delivery of the programme from the perspective of the practitioners.

1.3 Aims and Objectives

This research study is an investigation into the practitioners' delivery of the Strengthening Families Programme. It is an exploration of how the practitioners deliver the programme in a real-world setting. This study aims:

- To represent the delivery context of the Strengthening Families Programme in Ireland.

- To examine the position of evidence-based programmes within the area of family support and welfare.
- To study the Strengthening Families Programme in Ireland with practitioners of the programme and to investigate what factors shape their representation of the programme during its implementation.

The current research was conducted in two stages and involved a reflective journaling process and interviews with practitioners. The objectives of this research were to:

- Explore the 'lived experience' of the practitioners delivering the Strengthening Families Programme through their reflective journaling.
- Undertake interviews with practitioners to understand the factors that shape the practitioners' representation and delivery of the programme.
- Apply constructivist grounded theory in the analysis of the interview transcripts.
- Build an understanding of the factors that affect practitioner decision-making when delivering the programme.
- Develop a qualitative approach to examining practitioner implementation of evidence-based programmes which can be used alongside quantitative measures of implementation.
- To provide recommendations regarding the implementation of the Strengthening Families Programme implementation in Ireland.
- To provide recommendations regarding the implementation of evidence-based programmes in real-world delivery contexts.

This research study gathers the perspectives of the practitioners in a way that has not been done previously. Firstly, it captures their delivery of the intervention using self-reflection and an online journal facility. This body of information has not previously been gathered in this way before. These views are then considered and discussed with practitioners as a means of responding to the issues emerging through the reflective journals.

The outcomes of this research are expected to contribute to the wider field of research and theorising in the area of family support work, evidence-based programmes, interagency working, and implementation. This is a multidisciplinary area, often

rooted in social work, social policy, youth and community work, and child development. The findings of this research hold relevance to these disciplines.

1.4 A Qualitative Approach to Research

The purpose of this research is to examine the factors that influence practitioner decision-making in the context of delivering the Strengthening Families Programme. A qualitative methodology was developed for this research project. A qualitative approach is warranted when the research is of an exploratory nature. *"The focus of all qualitative research needs to be on understanding the phenomenon being explored, rather than solely on the reader, the researcher or the participants being studied"* (Creswell, 2007, p. 03).

Qualitative research better positioned this researcher to gain an in-depth understanding of what is going on, which a quantitative study could not accommodate. It provides a means to contextualise and understand the research questions posed in this research project. A qualitative approach is the most appropriate approach for this research project as it fosters a better understanding of the perspectives of the practitioners of the Strengthening Families Programme and the influences on their decision-making in the delivery of the programme. The research questions for this study are:

- How do practitioners using the Strengthening Families Programme in Ireland make decisions about their implementation of the Strengthening Families programme?
- What influences practitioners' decisions when preparing to implement the Strengthening Families Programme?
- What influences practitioner decisions on programme delivery in a contemporaneous way?

1.5 Structure of Thesis

This introductory chapter briefly introduced the background and research for this study. The remainder of this thesis is divided into six chapters. The following section outlines the structure of the remaining chapters within this thesis.

Chapter 2 discusses the neoliberalist influence on parenting policy and the emergence of the use of evidence-based parenting programmes as a practice response. This chapter outlines the use of manualised programmes to teach parenting skills, as it promotes a view that parenting and parenting skills can be taught and learned. The role of the practitioner and matters pertaining to their delivery of such programmes are explored.

Chapter 3 presents an overview of the Strengthening Families Programme. A review of the evidence supporting the programme is presented and the psychological theories underpinning are explored. The delivery of the programme by practitioners within the Irish context is outlined and discussed.

Chapter 4 sets out the methodological design of this research. The epistemological position of the researcher and the rationale for selecting a qualitative methodology is presented. The reasons for choosing to use a grounded theory method, specifically constructivist grounded theory, is detailed. The two research phases of this project are outlined, and the data collection tools, the online reflective journal, and one-to-one interview are described. The chapter explains the data analysis process of constructivist grounded theory and highlights the main ethical considerations for this project, as well as an examination of the researcher's positionality in relation to this research.

Chapter 5 provides an account of the construction of the theoretical categories emerging from the data analysis. The theoretical categories are presented, and the interactions of practitioners and how they construct meaning with the process of making changes in their delivery of the Strengthening Families Programme are described. The theoretical categories contribute to an understanding of the influences on practitioner decision-making when delivering the Strengthening Families Programme.

Chapter 6 discusses the findings of this research in relation to the literature presented in Chapter 2 and Chapter 3. It situates the findings within the broader context of evidence-based programmes to provide an enhanced sense of understanding of the topic in relation to the research questions.

Chapter 7 discusses the policy implications and potential impact of this research. It outlines the strengths and limitations associated with this research and considers possible areas for further research. This chapter concludes with a discussion of contributions of this research to the Strengthening Families Programme and the wider field of research.

Chapter 2

Literature Review

2. Introduction

This chapter provides an overview of the cultural context, policy trends, and practice development which have led to the use of evidence-based parenting programmes to provide parenting support. It discusses the neoliberalist and managerialist approach that has developed in work practices.

The neoliberal perspective has been applied to parenting and the identification of parenting as deficit-focused or in need of upskilling has developed. The impact of neoliberalism and its policies has tended towards a one-size-fits-all approach. Instead of a service based on need, it is now driven by managerialist influences and increased accountability (Bunyan, 2013). Packaged interventions such as evidence-based programmes have emerged as preferred interventions, as their methodology and scientific base appeals to the audit and accountability culture of neoliberalism (Webb, 2001).

The contextualised lives of families who engage with such evidence-based programmes will be discussed in this chapter. Implementation science is challenged by this, as the context within which families live will vary. Family support as an approach to working with families is described within this chapter. The key principles as they relate to the delivery of parenting programmes will be discussed. Evidence-based programmes as a method of working with families will be examined. Such interventions are challenged by the contextualised lives of the families who engage with the programmes. They additionally challenge the practitioner and their construction of professionalism by presenting them with a prescribed intervention to deliver. This is further complicated by the interagency delivery model used for the delivery of the Strengthening Families Programme. It poses challenges for the foundations of implementation science because of the delivery context of the programme.

2.1 Neoliberalism and its Influence on Public Policy

In recent years, the neoliberal agenda has greatly influenced the construction and delivery of work practices and services to individuals, positioning it within the backdrop of a corporate framework (Connell, 2013).

Neoliberalism was developed following World War II by academics who sought to move away from totalitarianism. It is an economic philosophy that gives priority to the free market without any interference from the State. Writers in differing fields offer varying definitions of neoliberalism and agree that there is no one particular brand of neoliberalism. However, the major elements of neoliberalism remain the same and include a focus on the economic and social changes required to achieve a free market (Connell et al., 2009).

The extent to which neoliberalism is present or visible within the economic and social sectors varies. It is found in all aspects of service delivery, from governance to work plans. It has introduced features of corporate business, including managerialism, accountability, standardisation, and cost effectiveness into public services, including social work and family support work.

Neoliberalism is a loose and contradicted ideological framework (Peck, 2004), which is constantly evolving and is complex in what it represents. Peck (2004) asserts that it reflects both the free market and conservative authoritarianism. It reflects not only a response to fiscal crises but also corporate globalisation. It is suggested that such commoditisation of services leads to institutional and cultural change within agencies, disciplines, and practice.

The neoliberal agenda has permeated through the political and economic spheres into social services, which has led to a complete restructuring of organisational practices and professional practice in some public services (Dominelli, 1999), including child and family welfare. It is suggested that neoliberalism and its policies have created a business model for services (Carey and Foster, 2013; Dominelli, 1999) and has changed the nature of the work done by stripping it back to business terms and replacing the concern for the greater good with commercial common sense.

Neoliberal influences such as managerialism and standardisation are seen to have significantly impacted on the delivery of welfare support to families. Critiques suggest that it is a move towards the professionalisation of parenting and the imposition of middle-class ideals on families. In addition, it positions families within a context-free landscape (Wilson et al., 2012), as it does not recognise the individual family context.

The use of standardised responses when working with families, including standardised, evidence-based parenting programmes, is of interest to this research. It raises questions about how such interventions are perceived and delivered by practitioners. It raises questions about the neoliberal influence on the delivery of evidence-based programmes by practitioners.

The international economic crises in 2007/2008 and the demise of the Irish Celtic Tiger highlighted poor management practices and accountability practices (O'Callaghan et al., 2015) in public service management. This required governments to implement cuts in public spending (Henderson and McWilliams, 2017). This facilitated the acceptance of increased managerialist practices to address the disorder and poor financial management which led to the crises.

Previously, services were centred on relationship-building and were client-centred. However, the influence of corporate strategies on social services has led to a focus on management skills, on performance measures, on cost and cost savings, as identified by McDonald (2006). Corporate business strategies were introduced to public statutory services, as well as services in the community and voluntary sector. Consequently, work undertaken by practitioners with families has become more regulated and procedure-orientated, with a strong focus on policy, forms of managerialism, and surveillance (Carey and Foster, 2013). Service provision is now based on efficiency and effectiveness (West and Heath, 2011) and, in particular, has promoted the use of evidence-based programmes and packaged interventions. These practices are at odds with the skills and values of the social work profession, as they remove the relationship-based work with clients. They remove the context from decision-making and reduce the autonomy of practitioners (Gray, Plath, and Webb, 2009; Axford and Morpeth, 2013).

It is of relevance to this research project to gain an understanding of how practitioners experience the neoliberal influence on their work in the context of the delivery of an evidence-based programme. Additionally, whether practitioners view such interventions as appropriate for the client group with whom they work and how they engage with the delivery of the intervention is a key consideration for this study.

Neoliberalism has affected work practices for those in the public sector, directly employed by the Government. However, Bunyan (2013) asserts that the shift to neoliberalism has also had a significant impact on the practices of the third sector or community and voluntary sector. Agencies in the third sector undertake social activity outside of the public and private sector. They are independent of the Government but are reliant on funding from the Government.

The work practices in the third sector have changed as a result of neoliberalism. Instead of a service based on need (Bunyan, 2013), it is now driven by the managerialist influences and increased accountability. The provision of services has changed as the control held by funding agencies and services is now driven by competition. The increased contracting of services on behalf of the government (Williams, Cloke, and Thomas, 2012) can lead to uncertainty about service provision and planning.

The third sector has adopted business-type structures, particularly where funding is received by agencies to undertake work. This has driven the competition among agencies (Lavalette and Ferguson, 2007).

The continuous introduction of, and assessment against, Government controls and restrictions through accounting and auditing procedures (Neville, 2016) is also a factor in the competition among agencies. The third sector has arguably lost its autonomy as it comes under increasing pressure to adopt managerialist practices. These practices include: working within set frameworks, logic modelling of practice, outcomes, outputs, and standardised packages. The relationship between the State, the market, and third sector are complex given the partnership approach utilised for the provision of services. It suggests that the third sector has now become complicit in the neoliberal agenda.

While agencies within the third sector may campaign and comment on policy, the lengths to which they can exert pressure may be influenced by funding contracts, or service level agreements. The partnership approach has been successful, in that it has achieved cooperation with the third sector to achieve more efficient work practices (Bunyan, 2014). However, it has weakened their position to challenge the State. Agencies are arguably compromised because they are dependent on State funding and so may not be able to negatively appraise the system.

Dominelli (1999) argues that neoliberalist policies have forced practitioners to stop practicing as independent, autonomous professionals. Instead, they work as technicians within the rules and regulations set by others. Neoliberal bureaucracy has significantly impacted on the work undertaken by social work professionals. The impact of neoliberalism and its policies, in particular managerialism, has moved towards a one-size-fits-all approach (Jenkins, 2005), using standardised assessment and intervention packages. Practitioners have moved from narrative assessment to computerised assessments, where they are required to assign clients to categories. This has impacted on the practitioners, who have moved from working with clients using a need-led perspective to using specific programmes and interventions, as directed by their agency.

Practitioners often do not have to independently make considerations about clients and their working practices as they have done in the past (Dominelli, 1999). The role of the practitioner has been pared back to provide less opportunity to make independent decisions. The use of standardised or computerised programmes and interventions does not consider the complexity or context within which the practitioner is required to make decisions. Such examples include manualised parenting programmes. This raises questions, which this study aims to address, about neoliberalism and standardisation within the practice context and whether practitioners implement the intervention as prescribed.

Dominelli (1999) argues that neoliberalism has changed the nature of relationships as well as the work undertaken. Relationships are viewed as commodities and the creation of a *"technicist cadre"* when working with families means that the social work profession no longer makes use of therapeutic techniques or casework methods

(Parton, 1996). It removes the client from the focus of the work and positions new concepts, such as assessment tools or packaged interventions, as the focus (Gibbon and Henriksen, 2012). It is proposed that such methods of standardisation may deskill social workers and take from their professionalism (Webb, 2001), as it diminishes the requirement for practitioners to critically assess clients, situations, and suitable responses (Gray et al., 2009; Axford and Morpeth, 2013). Thereby the practitioners' work is focused on managing clients or coordinating their care. Neoliberalism requires practitioners to assess need and risk, manage costs and budgets, monitor, evaluate progress, and to work with other agencies in multidisciplinary teams rather than utilise their skills to work with the actual client.

The reconfiguration of the professionalism of social work is relevant to this research project as social workers are involved in the delivery of "approved" suites of packaged interventions rather than using their independent assessment skills. It is argued that the impact of the reconfiguration of social work has led to significant changes in their roles. Social workers' roles are increasingly changing to work within policies of deskilling, quantitative measures, and production line mentality (West and Heath, 2011), which is eradicating the autonomy of the professional. Internationally, accountability measures have reduced the profession of social work to a technical role and includes issues of performance-related pay, cost effectiveness scales, value for money assessments, highly-defined role descriptions, and large volumes of documentation of activities (Noble and Henrickson, 2011; Weinberg, 2016).

Neoliberalist policy has positioned social workers as a subject of control (Weinberg, 2016), where their performance is assessed and held up to scrutiny against business models and ideals of productivity by managers and funders. It raises important questions as to how practitioners engage with such interventions and how they experience delivery of the neoliberal-influenced, packaged, evidence-based programmes. It highlights the challenge to reflective practice and the capacity of the practitioner to reflectively respond if practice is curtailed by prescribed programmes. While neoliberalism has applied corporate and market principles to the organisational delivery of services, it has also significantly impacted on parenting and parenting support in Ireland, which is discussed in the next section.

2.2 Parenting and Parenting Support in Ireland

Neoliberal influences are not only evident in the provision and delivery of services by professionals but also extend into the sphere of parenting. This section examines the prevailing norms of parenting and the idea of effective or good parenting. Parents who are perceived as failing in their parenting are regarded as in need of training. The neoliberal influence on parenting views it as a set of skills which can be learned. Neoliberalist views of parenting as deficit or "not good enough" is discussed in this chapter and will contribute to understanding the context in which parents attend parenting programmes.

2.2.1 The Changing Shape of Family in Irish Society

Family and parenting support have developed as a major focus for the Irish Government, policy, and initiatives in recent years. The change in the demographics and social issues experienced by families in Ireland have changed in recent decades. These changes, the shift to the international perspective on the role of parenting, the changing context of family, and a focus towards improved outcomes for children has influenced policy development and practice in the Irish context.

The Irish family has changed dramatically in recent times. These changes have influenced Irish policy development on the family and its approach to parenting support. In particular, the size and configuration of families today is significantly different from the traditional Irish family, which has impacted on parenting.

The Census data (Central Statistics Office, 2017) shows that 1,218,370 families were living in the State, an increase of 50% from the 1996 census. The traditional family unit of a married couple living together, rearing their children, and financially supporting the family (the nuclear family) was the leading representation of family in decades past. The family unit is now more diverse, with one-parent families, co-habiting couples, and same-sex couples with children (McKeown et al., 2004; Central Statistics Office, 2017) contributing to the makeup of families in Ireland.

There are now 75,587 co-habiting couples with children living in Ireland (Central Statistics Office, 2017). However, a family based on marriage continues to be the most prevalent family unit found, representing 52.8% of the family units. A large increase

was found in couples who do not have children. They now represent 29.2% of family units in Ireland (Central Statistics Office, 2017). The structure of the family has a bearing on parenting within the family, whether it is lone parenting or dual parenting or if the individual in the role of parent is not the biological parent of the child. The changing form of family life is of interest to this research project as it challenges the neoliberal influence of standardisation and one-size-fits-all approach. Specifically, the research will examine if family forms presenting to evidence-based parenting programmes influence the practitioner's delivery of the programme.

2.2.2 A Reduction in the Size and Membership of the Traditional Family Unit

Article 41.2.1 of the Irish Constitution recognises the family unit as based on marriage. The Article positions the family based on marriage as more powerful than other family forms. There have been significant changes in the family since the writing of the Constitution in 1937. These include the emergence of the nuclear family, separation and divorce and the reduction in the traditional family unit, same-sex marriage, and the introduction of contraception. Additionally, the increase of births outside of the institution of marriage and the employment of parents off-farm and outside of the family home (Canavan, 2012) represent significant changes to the family since 1937.

In 1996, the Constitution Review Group recommended that Article 41 be amended to provide equal recognition to married and unmarried families. The Equality Authority (2002) recommended that diverse family forms should be recognised and should include issues such as fostering, guardianship, etc. Whilst some change has taken place, it is asserted within this research project that it has not gone far enough in the inclusion of the diversity of families now found within the Irish State.

Significantly intertwined with the Irish Constitution, the State and the family is the Catholic Church. Considine and Dukelow (2009) and Fahey (1998) note that the Catholic Church has been one of the most significant influences on policy development and service delivery, particularly in the area of health and education. Of importance in relation to policy is the principle of subsidiarity. This advocated that State interference regarding the family should be minimal. It supported basic State intervention and cautioned that the State should not take on unnecessary roles (Fahey 1998; Considine

and Dukelow, 2009). This approach positioned the family as responsible for itself and that any assistance would only be provided on a very basic level.

The Catholic Church positioned the family as central to society and heavily promoted the only family unit as based on marriage, with the father the breadwinner and the mother positioned in the home to rear children. The Catholic Church issued moral directives on contraception, which were also tied into State legislation, e.g. to disallow the sale of contraceptives in Ireland (Criminal Law Amendment Act, 1935). In addition, it opposed the introduction of the Mother and Child Scheme in the 1960s (Browne, 1986). It also provided services such as Reformatory Schools and Magdalene Laundries for those who operated outside of the law or outside of society's moral expectations, as directed by the Catholic Church (Crowley and Kitchin, 2008). Through its teachings and its involvement in Irish policy development, the Catholic Church maintained a position of power and control over the behaviour of Irish Catholics.

However, in recent years the prevalence of non-Catholic Irish families has increased through immigration and emigration. The number of individuals identifying as Muslim has increased to represent the third largest religion in the country (Central Statistics Office, 2017). The second largest religion in the country is the Church of Ireland (Central Statistics Office, 2017). In addition, those who do not identify with any religion has risen to just under 10% of the population (Central Statistics Office 2017). This represents a decrease in the influence of the Catholic Church on the family. Arguably, the changes in demographics has diluted the influence of the Catholic Church and its influence on family policy and parenting.

The Catholic Church in Ireland has lost much of its influence, as demonstrated by the decline in the population who identify as Catholic, which fell to 78.3% (Central Statistics Office, 2017) in the last census. While individuals may identify as being Catholic, their attendance at mass and at other Catholic rituals has reduced (McGarry, 2016). Consequentially, the mechanisms to control societal, moral behaviours, and parenting have changed.

Inquiries of investigation into child abuse by the clergy and State, including the *Madonna House Report* (Department of Children and Health, 1996) called for increased accountability, transparency, and governance in relation to the Catholic Church's

dealings with children and the family. This assisted with the transition towards neoliberalism and managerialism in relation to family policy and parenting, as agencies and practices were found to be inadequate or deficit within the investigations.

2.2.3 Development of Family and Parenting Policy

Since the 1990s, the development of family policy has gathered speed with a few key international and national policy developments, sowing the seeds for the current focus on parenting and the need to provide training to parents. The United Nations General Assembly *Convention on the Rights of the Child (UNCRC)* (1989) encouraged national governments to create a framework for children's rights within the State's policies. The UNCRC highlights that it is the parent who bears the responsibility for the parenting, while the State takes on a regulatory role in providing support. The *UNCRC* has been an influencing factor on the development of Irish policy (Connolly and Devaney, 2018), in particular in the area of parenting and family policy.

In tandem with the *UNCRC* was the development of the *Child Care Act, 1991*, which was the first piece of Irish legislation overseeing services for children and families. This Act positioned children as the focus of legislation for the first time in the State, and while the Act sought to safeguard children, it also positioned the family as the source of problems regarding poverty and safety.

The implementation of the *UNCRC* and the *Child Care Act, 1991* were hastened as a result of a number of high-profile abuse cases reported in the 1990s. The role of the State in relation to the protection of the family and children within the family was re-examined following other enquiries, including the Kilkenny Incest Case (McGuinness, 1993) and the Kelly Fitzgerald case (Western Health Board, 1996). All enquiries highlighted the topic of abuse and welfare in the media. This ensured the full implementation of the *Child Care Act, 1991* by 1996.

These cases highlighted to the State and to the public that in some cases parents were not fulfilling their moral duty as parents. The idea of "good" and "bad" parenting emerged at this time, driven in part by the media. The investigations and subsequent reports identified parents as lacking in their responsibilities and care of their children. The instances of abuse and the subsequent scandals highlighted inadequacies and

failings of parents (Department of Health, 2009) and of the State. These highlighted inadequacies, arguably positioned parenting as deficient and in need of support (Buckley and O' Nolan, 2013), and training and oversight leading to the acceleration of several significant policy developments.

Children First: National Guidance for the Protection and Welfare of Children (Department of Health and Children, 1999) was developed from the need for guidance around issues of abuse and welfare as identified in the various abuse inquiries (McGuinness (1993); Western Health Board (1996); Department of Health and Children (1996)). The subsequent version, *Children First: National Guidance for the Protection and Welfare of Children* (Department of Children and Youth Affairs, 2011) and *The Child Protection and Welfare Practice Handbook* (HSE, 2011) outline the need for early intervention and the need to support families. These are the foremost policy documents promoting the safety and wellbeing of children. They highlight that additional supports are needed at times for parents. They also identify that the State has a role in supporting such parents.

The report of the Commission on the Family, *Strengthening Families for Life* (1998), highlighted the importance of family support, parental education, and the need for increased investment in preventative services for children and families. This report highlights that parenting is deficit in some instances, and promotes the importance of supporting parents when working with families. It suggests that parenting can be learned through the teaching and training of those parents who lack skills. The report influenced further documents in the area of family support, such as *A Guide to What Works in Family Support Services* (McKeown, 2000) and *Family Wellbeing Review* (McKeown & Sweeney, 2001), which draw attention to the role of parents and competency and skill of parents. The reports positions parenting as a role that can be upskilled and supported through the introduction of parenting programmes.

The Agenda for Children's Services: A Policy Handbook (Department of Health and Children, 2007) advocates that interventions must be carried out in partnership with families in order to effectively protect children and young people in crises and to promote their wellbeing.

The National Children's Strategy Ireland (Department of Health and Children, 2000) and the *Better Outcomes, Brighter Futures* (Department of Children and Youth Affairs, 2014) highlight the contextuality of the lives of children and their families. The documents highlight the need for cross-sectoral working and cooperation amongst agencies, and the need to support families and parents.

These documents have informed the approach of Tusla, the Child and Family Agency, in their work with supporting parents, and their parenting strategy (Child and Family Agency, 2013). That document acknowledges the complexities of parenting and the need for some families to have tailored supports. It views parenting support as an important role of the Agency and acknowledges that families may shift positively or negatively in terms of their support needs.

The development of family and parenting policy in Ireland in recent years highlights the changing context of the family, and recognises the complexities and context within which families live. This is significant to this research, as it highlights a challenge for neoliberal ideas and whether the family context has bearing on the delivery of an evidence-based programme. Additionally, it poses challenges to implementation science as to whether the dissemination of a programme developed in a different national context has adequately taken into consideration the Irish context of family and parenting.

2.2.4 Divorce, Gender and Poverty and their Impact on Parenting

Ireland has a comparatively low divorce rate in comparison to other European countries - 0.6% (Eurostat, 2017). Regardless of the low divorce rate in the Irish context, it is suggested that the parenting and family context for those who are divorced may be different.

Divorce has a considerable effect on the family, on the roles undertaken by the parents, and on the finances of the home (Coulter, 2007). The parenting capacity may be reduced following a separation or divorce, as parents may be preoccupied with their own concerns, such as the loss of the relationship. Additionally, Fahey (2011) argues that the relatively recent development of divorce in Ireland means that marital

breakdown is still stigmatised, as the traditional views of marriage and family are strongly held in society.

The emotional and financial implication of separation and divorce will also impact on the relationship between parents and children. This points to additional challenges for parents who are experiencing relationship breakdown and the context of their parenting practices. Parental conflict and conflicted children may pose challenges when attending parenting programmes. The role of individuals who are parenting while involved in a separation or divorce may be significant in how the family engage with a manualised, evidence-based programme. The role of separation and divorce and parental conflict is of relevance to this research project, which will seek to ascertain if it plays a part in how practitioners deliver the Strengthening Families Programme to a group which includes separated/divorced parents and their children.

The role of gender is important when linked to parenting roles and in considering the traditional roles of the past, where gender roles and the expectations around family were influenced heavily by the teachings of the Catholic Church (Crowley and Kitchin, 2008). The role of fathers in relation to parenting has historically been linked to that of the breadwinner, while the role of the female was as nurturer and primary carer of the children.

Today, gender roles are more fluid, possibly assisted by the number of dual-earning households with children. Data from the Central Statistics Office (2017) shows that the employment of women rose in the period 2003 to 2007 to 60.6% before falling for the next five years during the economic downturn, when it fell below the EU averages for female employment. The *Growing Up in Ireland* study found a substantial loss of employment among secondary caregivers (generally men) from 91% to 83% between 2007/8 and 2012 as a result of the recession (Department of Children and Youth Affairs, 2018). Interestingly, the majority of one-parent families (84%) in Ireland are led by women (Central Statistics Office, 2017). Parenting alone is an area where increased parenting support has been identified as beneficial (CES, (2016); Department of Children and Youth Affairs, (2014); Family Support Agency, (2013); Child and Family Agency, (2013); (Halpenny, Nixon, and Watson, 2010).

Gender has been identified as a significant factor in the context of parenting (Holden, 2010), as it can influence the attitudes and responsibility of those in the parenting role. This highlights the challenge to neoliberalism and standardised interventions. It raises the question as to whether prescribed evidence-based programmes accommodate the contextualised nature of parenting. This research project seeks to understand if there is a connection between the gender of those attending the programme and any changes made to the delivery of the programme by the practitioners.

Poverty and limited income have very significant effects and impacts on family life. Living on a limited income presents families with many challenges. It is an issue that must be considered and managed in every aspect of family life, including food, clothing, education, healthcare, recreational activities, and family activities. Families experienced increases in financial strain between 2008 and 2012 (Department of Children and Youth Affairs, 2018), relating to the recession.

The challenges and barriers that a limited income presents to families are numerous. It may affect the functioning of a family, its wellbeing, and the ability of parents to meet the needs of their children and adequately care for them, as well as maintaining their parenting capacity under such circumstances. McKeown et al., (2004) asserts that poverty is a factor that can directly impact on a family and on family life. Families who are living on limited incomes face significant challenges in relation to food, fuel, bills, and housing security (March et al., 2011). Some family forms are more likely to experience poverty (Daly and Kelly, 2015). These include those with a disability, those where a parent is a carer, those from a minority background, lone-parent families (Department of Children and Youth Affairs, 2018), and large families. A report from the Central Statistics Office (2017) found that over 80% of one-parent families were headed by a female.

The impact of a limited income puts children and family members at risk of poor nutrition, obesity, developmental delays, ill health, and poor outcomes (March et al., 2011). Poverty or family income can have a significant bearing on parenting, as it impacts on the community within which families live, access to education, parenting beliefs and styles. Poverty and the conditions within which families live has an impact on family life and when economic resources are not available, this can create strain or

stresses on family life, again which has bearing on the parenting of children within the family.

March et al. (2011) outlines that there is a strong correlation with negative physical and mental health and reduced family income, particularly for mothers who are parenting alone. McClelland (2000) has also highlighted the social impact of reduced income on a family, where members experience isolation and exclusion from activities that others take for granted. In their study, Daly and Leonard (2002) highlighted that daily family life is impacted by low income or poverty. It raises the question as to whether prescribed evidence-based programmes require changes to accommodate the contextualised lives of the families who engage with the programme. It is of interest to this research project to explore if poverty experienced by families who attend the Strengthening Families Programme influences practitioners when they deliver the programme.

2.2.5 Parenting Support

Parenting has been identified as one of the key challenges of modern Irish life and parents have said they need support on issues ranging broadly from queries about how to address parental authority to societal pressures (Daly, 2004). Parenting support is one area which has garnered much interest and a substantial investment of funds in recent years, as it is now viewed as an influencing factor on the social, emotional, and physical outcomes for children (Department of Children and Youth Affairs, 2015, p. 825).

Parenting as a policy issue in Ireland was initially identified within financial policy (Fahey and Nixon, 2014), such as child poverty initiatives, and sought to include children as contributing individuals to the economy in the future (Sneddon and Owens, 2012). This approach was followed by the move towards prevention and early intervention approaches to child and family life, as well as recognition of the rights of children (Connolly and Devaney, 2018). The recent focus on parenting has concentrated on achieving better outcomes for children, which has led to an increased awareness and vigilance of parenting (Sneddon and Owens, 2012).

Many of the policy documents in recent years identify parents as needing support or of not having the capacity to parent (Department of Children and Youth Affairs, 2014; Child and Family Agency, 2013; Department of Health and Children, 2007; Halpenny et al., 2010; Department of Health and Children, 2000; McKeown et al., 2004). This challenges neoliberalism as to whether standardised packages can adequately respond to the varied parenting needs. It poses questions of implementation science and the ability for an intervention developed decades previously to still be of relevance to the issues within family and society today.

Parenting has been shown to influence children's social and emotional development, as well as their behaviour, education, and physical health (Sneddon and Owens, 2012). Effective parenting relates to positive outcomes such as pro-social attitudes and communication skills (Forgatch et al., 2009). Conversely, ineffective or "deficit parenting" is linked with negative outcomes, including behavioural or conduct problems, non-attendance at school, and engagement with criminal activity (Forgatch et al., 2009).

There is much written about what style of parenting is "best" and influences outcomes for children. However, *The Irish Parenting Strategy* (Child and Family Agency, 2013) sets out the approach to supporting parents, with a focus on improving the outcomes for children. The strategy does not speak of "good" or "bad" parenting, but identifies that an effective parent:

- *"Is authoritative, not authoritarian;*
- *Emphasises strong support, warmth and responsiveness;*
- *Promotes an in-depth understanding of the child's daily life;*
- *Expects the child to follow rules within a space of understanding, not control;*
- *Is democratic and reciprocal: encourages communication and discussion;*
- *Is non-violent;*
- *Is underpinned by dignity, where the adult recognises the individual child and adjusts accordingly, and assumes full responsibility for the quality of the relationship with the child;*
- *Involves the child in decision-making".*

(Child and FamilyAgency, 2013, p. 10)

While the strategy describes effective parenting, the description itself does not refer to the subjective nature of parenting, the multiple influences on parenting, or contextual factors as previously mentioned in this chapter.

2.2.6 Parenting as a Contextualised Practice

Parenting is considered to be a key element of child development (Bornstein, 2006) and its practice is contextualised. Additionally, different styles of parenting exist, the application of which may also be influenced by context, such as religion and gender. Baumrind (1991) identifies four categories of parenting: authoritarian, authoritative, permissive, and neglectful.

Under the authoritarian style of parenting the parent has high demands of the child and the child has low response to the parent. There are clear and supportive expectations of the child under this style. Authoritative parenting exists where the parent has high demands of the child and the child has high demands of the parent. Rules and consequences are a feature of this style of parenting. The parent, when permissively parenting, has low demands of the child, but the child has high demands of the parent. This style tends to be lenient and may not implement boundaries to the parent-child relationship. Neglectful parenting features low demand from the parent and low response from the child. The neglectful parenting also includes having a lack of structure and support, no supervision of the child, or a lack of involvement in the child's life (Baumrind, 1991).

Research shows that parenting styles are related to child behaviour. The authoritative parenting style is identified as the style that achieves optimum outcomes for children, including: self-identity, self-esteem and pro-social behaviour (Rudasill, et al., 2013; Uji, et al., 2014). Children who experience authoritarian or permissive parenting have been found to lack independence and find difficulty assuming responsibility (Asmussen, 2012). Neglectful parenting has been found to provide the most negative outcomes for children (Asmussen, 2012; Baumrind, 1991; Lamborn et al., 1991). This poses challenges for neoliberalism and packaged interventions, given the varying styles parents have utilised prior to engaging on such programmes, as they may not have the same skill levels or insight into their practice.

It is suggested that there is considerable variation in parenting (Kotchick and Forehand, 2002). The ability to parent is influenced by a broad range of factors including: education, knowledge, personal experience of being parented, parenting alone or as a couple, culture, gender, and socioeconomic position. Such factors and their implications on parenting are outlined in the research of Gillies (2006) on parenting in the United Kingdom. The study examined parents in relation to disinvestment from their children's school, defence and protection of children's behaviour, and provision of treats that are deemed inappropriate. The research study, while not generalisable, found that parenting practices in these areas were influenced by culture, ethnicity, educational experience, and class position. The research highlighted disparity between parenting approaches by middle-class parents and those in the disadvantaged parent sample (Gillies, 2006).

The neoliberal ideal of parenting scrutinises the parenting based on middle-class ideals, which include a family which is sustainable and does not require State intervention and contributes to society. Neoliberalism does not view parenting as a contextualised practice, which presents a challenge for the application of interventions in a 'real-life' delivery context. Neoliberalism applies the concepts of accountability and managerialism into the realm of parenting and those who are cannot manage are viewed as marginalised or "at risk".

Parenting is a contextualised practice, as it differs from individual to individual and changes over time. Halpenny et al. (2010) argue that parenting does not occur in a vacuum, but rather evolves within specific social and cultural contexts. This contextualisation also relates to the ecological systems theory as developed by (Bronfenbrenner, 1979, 1958). Within the model, it is presented that five systems - micro system, meso system, exo system, macro system, and chrono system - influence the development of the child. The micro system includes family, school, and the neighbourhood and, according to the theory, if such relationships break down or are at a deficit, the child will not have the tools to engage with other aspects of the environment.

The theory highlights that parenting is a multidimensional process within which the contextual elements assist or hamper parents to fulfil their role, which has a knock-on

effect on the needs of the child being met. However, it could be argued that the context within which parenting is undertaken and within which families live is being ignored in the delivery of supports to parents and families. The provision of such support appears to be focused on the middle-class ideals. This includes both parents being present within the family unit, a specific level of communication skill, and an attainment of a level of education in order to read or follow the instruction of the parenting intervention.

Parenting strategies or interventions do not appear to take account of the neighbourhood within which the family is living, or social issues which may present in these areas or within the family, as found in research undertaken by Clarke and Churchill (2012).

The family unit and parenting can positively or negatively influence children and their ability to contribute positively or negatively to society. This presents a challenge for neoliberalism and the application of standardised interventions in a 'real-life' delivery context. Additionally, it highlights an issue for implementation science and the dissemination of programmes to other contexts where the family unit and parenting contexts may be different to the development and evaluation contexts of the programme.

2.2.7 Deficit Parenting

Where parenting is viewed as ineffective, neoliberalism attributes this as a cost to society. Parents are often blamed for the behaviours of their children, in particular conduct issues in children and young people. Conduct problems among children are a common problem (Gardner et al., 2006) and neoliberalism positions them as costly to the individual and society (McKee et al., 2008).

There is a growing conversation, particularly in the UK, around the concept of parenting being at a deficit or inadequate in some way (Shildrick et al., 2016). In 2011, in the UK, there were riots across a number of London boroughs, which, in the aftermath, reignited a conversation on parenting effectively. This prompted the launch of The Troubled Families Programme, which focuses interventions on disadvantaged families who experienced multiple disadvantages (Turner, 2017). Such families were

positioned as posing a monetary threat to the welfare state in the UK, as well as to disorder in society by Prime Minister David Cameron (Cameron, 2011). Parenting is also problematised where parents are constructed to be 'unaware' or 'out of touch' (Lee et al., 2010). Jensen (2010, cited in Turner, 2017, p. 939) argues that:

> *"the problem and solution of the 'troubled family' (and the social disorder they reproduce) is fixated on the intimate relations of the family home. Rather than a problem of unemployment, inequality, poor housing stock, etc., this is presented as a problem of internal governance, organisation and discipline – the absence of patriarchal order and sympathetic motherhood."*
>
> (Turner, 2017, p. 939)

Factors including ill health, poverty, and poor housing formed part of the original calculation of troubled families, but were replaced in subsequent publications with issues such as truanting and antisocial behaviours as documented by Levitas (2012b). The language used in The Troubled Families Programme deliberately places the blame on parents and does not apportion blame or responsibility to the Government (Bailey, 2012). In particular, Levitas (2012b, p. 5) points to the use of language which implies that without intervention, children will lead "*the same disruptive and harmful lives as their parents".* It positions the issue of troubled families as an intergenerational issue requiring intervention.

Research about deficit parenting and societal costs in the Irish context is limited. Recent research from the *Growing Up in Ireland Report* (Department of Children and Youth Affairs, 2018) found the prevalence of antisocial behaviour among 13-year-olds was quite low. It found that 17% had *'hit, kicked or punched someone on purpose in order to hurt or injure them, and 14% had not paid the correct fare on a bus or taxi'* (Department of Children and Youth Affairs, 2018, pp. 18-19). The report found that smoking prevalence was highest among 13-year-olds from more socially and educationally disadvantaged families (Department of Children and Youth Affairs, 2018). The incidence among the cohort who had consumed an alcoholic drink was also associated with those from more socially and educationally disadvantaged families (Department of Children and Youth Affairs, 2018).

Bunting, Webb, and Shannon (2017) argue that The Troubled Families Programme uses a deficit approach and dismisses the explanations and interpretations given by parents for their situations. In their study, they found adversities experienced by parents included: abuse, domestic abuse, substance misuse, mental health, loss and separation, health, disability, and special needs.

The issues found are not explicitly the fault of the parent, nor is the solution in the realm of the parent. Bunting et al. (2017) highlight the difficulty in establishing a causal link between adversity and poor parenting, but argue that their study shows that family has complexity. This is in stark contrast to The Troubled Families Programme and similar policies which ignore the complexities of the struggles faced by the families they target. This highlights the challenge for neoliberalism and standardised programmes and whether these interventions can accommodate and 'train' those who experience such complex adversities.

Bunting et al. (2017) argue that their study highlighted the multi-complexities within families and how nuanced these complexities are from family to family. They posit that we (as a society) are being offered a simplistic view of complex social problems which *"ignore structural inequality as a contributing factor"* (Bunting et al., 2017, p. 38). Additionally, Levitas (2012a) claims that the Government misrepresented the research on such troubled families. This claim would appear to be upheld by Shildrick et al. (2016, p. 825), who were unable to find any family in their selected research location where three generations of the same family had never worked. This may indicate that perhaps the British Government's class of worklessness is not as prevalent as was presented.

The perception that there are many families who for generations have not worked were not upheld by the findings of Shildrick et al. (2016). In their research, Churchill and Clarke (2009) strongly advocate that it is important to acknowledge the issues which impact on parents when working with them and how this impact differs from parent to parent. This is of relevance to this research project to understand whether such issues within the family are considered by practitioners when delivering the Strengthening Families Programme.

It is suggested that there is an overemphasis from Government policies on a negative focus on risk, to the point where the strengths of families and individuals are being overlooked – an almost pathologizing of families who experience poverty and disadvantage (Gillies, 2005; Broadhurst, 2009). They claim that this intense focus on such families amounts to control, by impressing upon them the middle-class ideals of families. The spotlight on parenting and parenting deficits as well as troubled families is instilling a fear that "this type of family" is non-contributing and a cost to society.

While The Troubled Families Programme is specific to the United Kingdom, the approach is mirrored within the Irish context, with much funding for child and family services being driven by terms such as "at risk" or "disadvantaged" or targeted towards specific groups in society, such as lone parents. Some funding and supports for parents and families are led on an area-based approach (Department of Children and Youth Affairs, 2014), for example, areas such as Ballymun, Tallaght, and South Hill, which are deemed to be experiencing disadvantage. It also attributes parenting problems to a particular class in society, i.e. those who are dependent on State payments.

The neoliberal influence positions these families as a drain or a cost on society and so must be targeted to reduce this cost using other neoliberal influenced interventions, including evidence-based programmes. It does not consider the challenges faced by middle-class parents, where problems remain in the private sphere due to their ability to access private supports, thereby remaining under the radar of State agencies. Middle-class parents are not coming under the scrutiny of the State, as they have the social capital and knowledge of how to keep the State agencies at bay.

The neoliberal view on parenting is that there is a monetary cost when parenting fails and that parenting is a skill which can be learned. Particularly in recent years, the idea of parenting deficits has been of concern for policymakers, and parenting skills are *"methods that must be taught for the public good"* (Gillies, 2005, p. 79). This view of parenting is oversimplified and provides only a very general view of parenting and of the skills required to parent. It ignores the ecological factors which impact on and influence how a parent parents. The context within which parenting takes place is being overlooked by neoliberalist policy and the development of neoliberal influenced parenting interventions.

This uncomplicated, uncontextualized view of parenting presumes that all individuals and families are the same and that the multifaceted and complex issues experienced by parents are not taken into consideration. The context of parenting is minimalised under neoliberalism, as it positions parenting and parenting deficits as issues which can be fixed by implementing new behaviour techniques. Practitioners are then faced with the challenges of applying policy, practice directives, and societal constructs relating to the perceived universal skills and responsibilities that parents should demonstrate in their parenting practice. This is a significant concern for neoliberalist influences on family support work and the dissemination of programmes in contexts different to evaluation settings.

2.3 Family Support in Ireland and Interagency Cooperation to Deliver Evidence-based Parenting Programmes

While Irish policy demonstrates the importance of parenting in various documents (Department of Children and Youth Affairs, 2011; Department of Children and Youth Affairs, 2015; Commission on the Family, 1998a; Department of Health and Children, 2000), there is no clear overarching policy and so parenting support to date has developed on an *ad hoc* and local basis. Parenting support has developed under the umbrella of family support. This emerged from the failure of agencies and the State to protect children and families. The enquiries into abuse identified the need to support parents and for agencies to work collaboratively to mitigate the likelihood of such events taking place. Family policy and parenting support, including the development of family support, as a style of working with families has developed in the Irish context and has made substantial progress in recent decades.

2.3.1 Family Support

The provision of parenting support, including the delivery of evidence-based programmes, are delivered under the umbrella of family support in the Irish context. Family support involves working with the family to improve its situation to ensure the best possible outcomes for the child. The way in which family support is provided varies. Pinkerton and Dolan (2007) identifies that family support can take place through self-help or advice and guidance. It can be delivered by statutory agencies as

well as organisations who work in the community and voluntary sector, such as family resource centres and youth work projects.

The development of family support mechanisms were called for following some of the reports into abuse (Western Health Board, 1996; McGuinness, 1993). The development of family support has also been heavily influenced by the need for accountability among those who work with children, parents, and families, and increased collaboration and communications between agencies (Western Health Board, 1996; Department of Health and Children, 2007; Department of Children and Youth Affairs, 2011; Commission on the Family, 1998a; Department of Health and Children, 2000; Department of Health and Children, 1999; McGuinness, 1993).

The Family Support Agency Act was passed into law in 2001, which paved the way for the establishment of the Family Support Agency. The functions of the Agency included: the provision of family mediation services, the promotion of marriage counselling, family support services, and to promote the family resource centre programme. The Family Support Agency and its work was subsumed into Tusla, the Child and Family Agency, operations following its establishment in 2014. Tusla's Parenting Support Strategy (Child and Family Agency, 2013) and identification of evidence-based parenting programmes as suitable interventions is situated within the family support work promoted by Tusla.

While the term 'family support' is one that is widely used in child protection and work with families, there isn't an agreed definition. This is problematic, as the term can be interpreted differently by individuals. Penn and Gough (2002) argue that 'family support' is a term which has been used so frequently that its meaning is lost. McKeown (2000) describes family support as an umbrella term covering a wide range of interventions. A number of academic writers contend that the term 'family support' is so broad and encompassing of so many varieties of programmes that it does not allow for a single explanation (Weissbourd and Kagan, 1989; Weissbourd, 1994). At the request of the Department of Health and Children, Pinkerton, Dolan, and Canavan (2004) developed the current working definition:

> *"Family support is both a style of work and a set of activities; which reinforce positive informal social networks through integrated programmes; combining statutory,*

> *voluntary, community and private services, primarily focused on early intervention across a range of levels and needs with the aim of promoting and protecting the health, wellbeing and rights of all children, young people and their families in their own homes and communities, with particular attention to those who are vulnerable or at risk."*
>
> Pinkerton, Dolan, and Canavan (2004, p. 22)

At a basic level this definition frames the various activities which are undertaken under the umbrella of family support, which might include: parenting programmes, support groups, provision of information, etc. Principles were developed to guide the work of family support (Pinkerton et al., 2004). Significant among the principles is *"Working in partnership with children, families, professionals and communities"* (Pinkerton et al., 2004, p. 17). It advocates that children and families should be involved and engaged with professions and the development and engagement with interventions.

Of interest to this research is the promotion of working partnerships among professionals and communities. This aligns to the interagency working model used in the Irish delivery context of the Strengthening Families Programme. Additionally, the principle of utilising a strengths-based perspective (Pinkerton et al., 2004, p. 17) is also a feature of the Strengthening Families Programme, as outlined in the next chapter. While it is not explicitly a feature of family support, more recent literature positions reflective practice as an area which is viewed as central to family support practice (Thompson et al., 2006; Devaney, 2015; Devaney and Dolan, 2017). This practice contrasts with the promotion of evidence-based programmes, as they are prescribed and packaged interventions.

McGuinness (1993) highlighted the importance of supervision of practitioners, following the inquiry into child abuse. Saltiel (2017, p. 533) states that *"good quality supervision is essential to good outcomes for service users and to developing practitioners' expertise"*. Additionally, Munro (2011) highlights effective practice, includes skills to form relationships, theoretical knowledge, as well as reflective practice and the availability of supervision. Halton, Powell, and Scanlon (2015) refer to reflective learning as a way in which to oppose the shift towards neoliberal and managerialist approaches.

One of the objectives of this research project is to engage practitioners in reflecting on their practice. Of interest is how the practitioners engage with the neoliberal influences in their delivery of the programme. Given that the Strengthening Families Programme is delivered on an interagency basis, it is of interest to the research project to examine if the practitioners receive supervision.

Those involved in the delivery of family support include many professions such as: social worker, social care worker, community worker, family support worker, youth worker, and may represent the statutory or community and voluntary sector. The practitioner and their relationship with the parent and family is a key element in the provision of family support interventions. However, the demands on the practitioner and their services in relation to waiting lists, administrative responsibilities, and workload can all significantly impact on the worker's professional practice.

During the delivery of the Strengthening Families Programme, the practitioners continue to carry out their professional roles in addition to their delivery of the programme, which is detailed in the next chapter. It highlights concerns about practitioners engaging reflective practice and if it is taking place in relation to their delivery of the programme. It is also interesting to note that Thompson et al. (2006) explain that family support practitioners are invited to engage in reflective practice, which involves examining practice based on learning from past experience. This research project seeks to understand if practitioners make changes to their delivery of the Strengthening Families Programme. This study requires the practitioner to engage in reflection. It also poses challenges for evidence-based programmes, as it positions practitioners as 'active participants' in the delivery process and critiquing the suitability of the programme for the families.

The building of resilience among families is another feature of family support (Pinkerton et al., 2004) and is an underlying concept in the provision of many evidence-based parenting programmes. Resilience is *"the capacity for successful adaptation to disturbances that threaten system function, viability, or development"* (Masten, 2016, p. 297). Resilience is the ability of an individual to cope with the difficulties and challenges that occur in life. Some individuals manage these situations, while others find it too difficult.

Three factors were identified by Rutter (1987) within the concept of resilience and include a sense of self-esteem and confidence, a belief in one's own self-efficacy and an ability to deal with change and adaptation, and the possession of problem-solving approaches. Resilience is a complex concept and is intertwined with risk and protective factors that every child experiences (Rutter, 1999; Rutter, 2007; Gilligan 2008). Risk factors include issues such as poverty, poor educational opportunity, lack of access to or interest in hobbies or leisure, and poor parenting.

In opposition to the risk factors, a young person can have a wide range of protective factors, such as family, friends, interest in school, hobbies and pastimes, ability to problem solve, and parenting practices. The use of evidence-based parenting programmes is one intervention used to develop and enhance the parenting practices and resilience within family support. It raises issues for the implementation of evidence-based programmes that are prescribed and whether dissemination processes reflect the resilience and risk factors presenting among families.

2.3.2 Interagency Working and Family Support

The principle of partnership, as previously discussed, is a feature of family support work (Pinkerton et al., 2004) and was also a recommendation from an inquiry into abuse (McGuiness, 1993). The rationale for interagency working is identified as the need for a coordinated response to be made by professionals when working with a child and family/carers (Department of Children and Youth Affairs, 2011). While there are benefits to agencies and practitioners working collaboratively, such as improved outcomes for children and families (Department of Children and Youth Affairs, 2014; Department of Children and Youth Affairs, 2011), there are also challenges.

In relation to the British context, Gasper (2010) identifies effective communication as necessary to effective interagency working; however, when a number of agencies are involved in the communication chain, this can present difficulties. Statham (2011) undertook an examination of international interagency-working for the purposes of informing the development of children's services committees in Ireland. It was found that common issues occurred in the process of interagency working, which included: different agency policies, procedures and systems, different agency remits, lack of explicit commitment to interagency working, and different levels of 'buy in' across

professionals, managers, and agencies. Additionally Statham (2011), found that in some situations where managers are not experienced in interagency working it may not be maintained as a priority.

It is of interest to this research to understand if interagency working presents challenges to the delivery of the Strengthening Families Programme. It challenges implementation science and the dissemination and maintenance elements of the Strengthening Families Programme in the Irish interagency delivery context.

The provision of family support requires agencies to communicate and collaborate across sectors, agencies, and disciplines, which is a complex task. Devaney and Dolan (2017) identify that building a working relationship and trust among practitioners is a key piece of work in family support. Several agencies engage to deliver the Strengthening Families Programme using an interagency delivery model, which will be detailed in the next chapter.

The cross-sectoral representation by practitioners is of interest to this research project and whether it influences practitioners in their delivery of the programme. It also raises questions of implementation science and the dissemination and maintenance of the programme, given the interagency model of delivery. In the context of the delivery of parenting programmes, specifically the Strengthening Families Programme, this involves interagency working. In their review of interagency working, Duggan and Corrigan (2009) found that there was no universal agreement on a definition of interagency working; however, Lloyd, Stead, and Kendrick (2001) explain interagency working as involving more than one agency working collaboratively in a planned and informed manner. It is of relevance to this research to understand how practitioners experience interagency working when delivering an evidence-based programme. The following section will discuss evidence-based practice and parenting programmes.

2.4 Evidence-based Practice and Parenting Programmes

2.4.1 Evidence-based Practice

The neoliberal direction has led to a flourishing of *"rational technical practice"* (Ingram et al, 2014 cited in Fenton, 2016, p. 152) in social work and family support work, which includes programmes of manualised work such as evidence-based parenting

programmes. Evidence-based practice is underpinned by some form of a structured enquiry which can produce information, which can be generalised (Marsh and Fisher, 2005). It is thought that such practice is a more effective intervention, as it provides a quantitative and scientific approach to the work. Parrish and Oxhandler (2015) state that evidence-based practice incorporates the available evidence, participant characteristics, and practice context. The practitioner relies on research to make decisions regarding their own practice, assessments, and decisions regarding case progression, which supports reflection as part of practice.

It is of significance to this research to understand what is the evidence that practitioners consider when making decisions regarding their delivery of the Strengthening Families Programme. Webb (2001) asserts that evidence-based practice is appealing as a practice, as its methodology and scientific base appeals to the audit and accountability culture of recent years. The view of evidence-based practice and interventions fits with the new managerialism, as it can be measured by standardised norms (Webb, 2001), another influence of neoliberalist policies. The neoliberal idea of standardisation and standardised interventions raises a question for implementation science and dissemination processes to achieve adequate cultural and societal adaptations when importing programmes.

The application of evidence-based practice in practice settings varies, as outlined by Parrish and Oxhandler (2015). It may be introduced through a bottom-up approach, where practitioners assess the evidence base and its relevance for the particular client and decide the appropriate action (Parrish and Oxhandler, 2015). This is of relevance to this research project, as it seeks to understand the factors that influence practitioner decision-making in their delivery of the Strengthening Families Programme.

Secondly, a top-down approach may be used in the application of evidence-based practice. Under this approach, management or government instruct on the use of a specific intervention or package which has a scientific evidence base (Parrish and Oxhandler, 2015). This approach to evidence-based practice is based on an evidence hierarchy which includes systematic reviews, meta-analysis, and randomized control tests. These are considered the best or ideal way to work with people, as the evidence can be generalised to some extent across the population (Reynolds 2008). The narrow

approach has led to the use of packages when undertaking family support, social work, justice work, youth and community work, etc., which strongly links with the neoliberalist agenda. It is the narrow view or top-down approach of evidence-based practice which is of interest for this research project to understand if practitioners view the Strengthening Families Programme as an appropriate intervention or if it is one which they feel has been imposed on them.

2.4.2 Evidence-based Parenting Programmes

Parenting skills training interventions are recommended and implemented across the world (UNODC, 2009; WHO, 2010). Evidence-based programmes are introduced by funders and agencies as optimum and preferred interventions (Child and Family Agency, 2013; CES, 2016; Family Support Agency, 2013). An evidence-based programme is a programme which has consistently been shown to produce positive results by independent research studies conducted to a particular degree of scientific quality (Devaney, 2011). It comes in the form of a:

> *"discrete and organized package of practices, spelled out in guidance – sometimes called a manual or protocol – that explains what should be delivered to whom, when, where and how."*
>
> Axford and Morpeth (2013, p. 268)

Such evidence-based programmes include: Incredible Years, Parents Plus, Triple P, and the Strengthening Families Programme, etc. Evidence-based parenting programmes are a means of supporting parents in a formal capacity, which is underpinned by the basic assumption of a *'parenting skill deficit'* (Barlow and Stewart-Brown, 2000). Parenting programmes have been defined as focused, short-term interventions, which are typically aimed at helping parents to deal with their children's emotional and behavioural development (Barlow, Shaw, and Shaw, 2004). Substantial evidence exists that parenting interventions, such as evidence-based programmes can improve parent child relationships and behaviours (Gardner et al., 2016). The programmes teach parents techniques to manage problem behaviours (Cotter et al., 2013), can reduce antisocial behaviours (Scott, 2005) and lead to improvements in youth outcomes (Sandler et al., (2011). Evidence based programmes are viewed as an extremely

valuable and useful intervention. Some programmes are designed to be delivered on a one-to-one basis, while others are for delivery in a group context.

Group-based parenting programmes are typically delivered by two practitioners who are trained in the particular programme, and run weekly for a period ranging from 4 to 24 weeks (Sanders and McFarland, 2000). These programmes aim to improve pro-social behaviour by strengthening the management skills of the parent and encouraging a positive relationship between the child and the parent. The programmes typically address elements regarding: behaviour, rewarding appropriate behaviour, and setting boundaries (Bywater et al., 2011; Eames et al., 2009). Effective parenting behaviour is modelled through roleplay, rehearsal, assignments, and group discussion. Many programmes address the barriers to attendance by providing transport assistance, childcare facilities, and providing meals for participating parents (Gardner et al., 2006). This is replicated in the Strengthening Families Programme, which will be outlined in the next chapter.

A range of universal, group-based parenting programmes now exists to enable parents to acquire competencies in order to effectively manage children's behaviour and learn to respond in a new way. There are different forms of parenting programmes: relationship or behavioural or a combination of both (Barlow and Stewart-Brown, 2000 p. 357). While parenting programmes generally do not specify the particular theory underpinning the programme, the majority of programmes follow psychological theories and models of child development which include: attachment theory (Bowlby, 1971), social learning theory (Bandura, 1989), and cognitive development theory (Piaget & Inhelder, 1973) as outlined in (Lucas, 2011; Furlong and McGilloway, 2011; Furlong et al., 2012; Webster-Stratton and McCoy, 2015). The Strengthening Families Programme is also underpinned by such theories and will be presented in the next chapter.

2.4.3 Research Underpinning Evidence-based Programmes

The research presents evidence-based parenting programmes as effective interventions because they have been found, through some form of quantitative enquiry, to work and the results can be generalised. Differing evidence-based parenting programmes offer different validation for their programme effectiveness,

often through randomised control trials. However, Haggerty, McGlynn-Wright, and Klima (2013) point out that there are different types and levels of evidence for efficacy to exist, and that all evidence in support of the varying programmes available is not of an equal value.

In many cases, the evaluations of the programmes are undertaken by the creators or developers of the programme with a high level of oversight, as the evaluations are undertaken in controlled or "test" settings (Furlong and McGilloway, 2015). Where programmes are not conducted under the same conditions, the positive outcomes attributed to participants are difficult to verify. This is significant in terms of implementation science, as the Strengthening Families Programme is implemented using an interagency delivery model which is different to the programme development and evaluation.

The development of evidence-based parenting programmes has led to practitioners being presented with the programme and assessment tools by funders and decision-making bodies who may have limited experience of working with the clients but favour the neoliberal and managerialist agenda of increased standardisation.

The use of such programmes is a move away from relationship-based work. It removes the context from decision-making and it reduces the autonomy of practitioners (Gray et al., 2009; Axford and Morpeth, 2013). Practice responses must change in response to changes which take place in relation to issues presenting among clients (Webb, 2001), as well as the social, political, economic, and organisational changes to context which practitioners work within.

The use of such evidence-based programmes poses challenges for practitioners in their implementation, as the intervention is not adaptable to the changing circumstances of the parent/family. Additionally, the practitioner is not delivering the evidence-based programme in the same test conditions under which it was developed. This is the basis for the development of this research project. It is a concern of this study to understand the delivery of evidence-based programmes in the 'real-life' practice settings. It is important to this study to identify the construction of professionalism in relation to the practitioner.

Despite the adoption of evidence-based programmes as preferred interventions by funders and agencies, there is no strategy or framework on the provision of evidence-based programmes in Ireland (Start Strong, 2010). There are many programmes available in the Irish context; however, there is no framework on the implementation or evaluation of these programmes. The lack of policy direction or guidance in this area has led to a rather *ad hoc* adaption and implementation of programmes by various agencies. This highlights a need to understand the factors in the delivery of such programmes.

Evidence-based programmes use implementation frameworks to implement the programme outside of the test conditions. The frameworks consider the clinical outcomes and also the implementation outcomes. There are many frameworks within the field of implementation science; however, one which is of interest to this research is RE-AIM.

While this framework is mainly associated with health interventions, it has been used in many settings (Holtrop et al., 2018). The RE-AIM framework offers a broader context of implementation rather than a focus on effect measures. Holtrop et al. (2018) assert that full use of the RE-AIM framework requires both quantitative and qualitative methods to understand the various dimensions related to implementation. This view of qualitative methods informing on implementation aligns with the focus of this research, which is to understand the context within which an evidence-based programme is delivered. Some questions cannot be answered through quantitative measures (Holtrop et al., 2018) and it is suggested that some questions need contextual answers. The conceptual elements of the RE-AIM framework, as explained by Holtrop et al. (2018), include:

Reach. While quantitative measurements examine the numbers engaging with the programme, qualitative methods can provide an understanding of why clients engage with an intervention. This might be referred to as a process evaluation in other models.

Effectiveness. Quantitative measures focus on outcome measurements. The use of qualitative methods assists with adding understanding and context to the results.

Adoption. This examines the adoption of the intervention by the practitioners. Quantitative measures provide information on numbers and years of experience of practitioners. It does not reflect on the important organisational factors that influence the extent to which an intervention is adopted by a practitioner or agency.

Implementation. Quantitative assessments such as fidelity checks have been the standard approach to this element. However, qualitative examination provides an understanding of how and why programmes are altered over time.

Maintenance. This looks at the sustainability of the programme beyond funding or grant availability. It seeks to understand why agencies or practitioners may continue or discontinue to implement a programme.

The elements of this model provide a scaffold on which evidence-based programmes can be scaled up and systems put in place for the delivery of the programme outside of test conditions. It is accepted that adaptations occur in the implementation of programmes (Glasgow and Harden, 2019); however, the extent to which this happens is often unknown. The RE-AIM framework provides a frame on which to examine the implementation of the Strengthening Families Programme in the Irish context. This research seeks to challenge implementation science and gain insight into adaptations by practitioners in one programme. Implementation science and qualitative methods of enquiry provide understanding of the conditions under which consistency and non-consistency is achieved.

Axford and Morpeth (2013) contend that it is often unclear as to what issues and challenges arise in the course of trials and evaluations of evidence-based programmes. This creates difficulty understanding and implementing the intervention. They assert that such programmes are developed in one scientific or evaluation context and consequently do not transfer easily to real-world services and settings. The service context within which a programme is delivered is of importance because this may be different to the setting the programme was developed in. In particular, the organisation, quality, and leadership, prevailing values, and expectations related to family services may be substantially different in practice settings (Gardner, Montgomery, and Knerr, 2016; Axford and Morpeth, 2013), compared to the test settings.

The Strengthening Families Programme was developed and tested primarily in the United States. As a number of other evidence-based programmes were developed in one context and transferred to another, the values and expectations related to family services may differ. This raises questions of implementation science and the dissemination of programmes. It challenges the maintenance of programmes in real-life delivery contexts, when the programme development context is significantly different. Such a factor is of significance in the Irish context, where there has been a tendency in some geographical areas to work on an interagency basis to deliver parenting programmes, specifically the Strengthening Families Programme. Service factors such as ethos, sectoral representation, and experience of delivery may differ for those agencies involved.

This is a significantly different context within which to deliver the programme compared to the test conditions under which it was developed. This is a significant concern for implementation science and has informed the development of this research project. This raises questions relevant to this study with regards to how such interagency work is undertaken, how practitioners are prepared for the programme, and how their agency provides support to practitioners. This study aims to understand how practitioners experience the actual delivery of an evidence-based parenting programme using an interagency delivery model.

Evaluations of evidence-based parenting programmes are problematic, as they tend to use highly-trained, skilled staff who may be paid by the programme developers to deliver the programme (Scott et al., 2006) and who may be not representative of the individuals who normally deliver the programme (Furlong and McGilloway, 2015).

In an examination of eleven parenting programmes, Scott et al. (2006) found the main leader of programme delivery for eight of the group programmes had a psychology degree, a master's degree in child development, and considerable experience of delivering the Incredible Years Programme. The other three leaders who delivered the content had psychology degrees and experience of delivering the programme.

Webster-Stratton and McCoy (2015) state that individuals who deliver the Incredible Years Programme should have higher-level degrees and master's in areas such as child development. They also assert that practitioners should have prior training in child

development, behaviour management, and cognitive social learning theory. The research teams involved in the delivery and evaluation of evidence-based programmes are educated to doctorate level, which may make them better qualified and more motivated than those who are involved in the regular delivery of the programme (Axford & Morpeth, 2013).

In their research, Gardner et al. (2016) found that parenting programmes were generally implemented by senior local practitioners and researchers. This echoes the findings of Scott et al. (2006), where in the 'real-life' practice setting the programmes are implemented by practitioners, often without enhanced training on evidence-based practice. This relates to the current research project, which seeks to uncover if the same representation of skill and knowledge exists in the delivery of the Strengthening Families Programme following dissemination into the wider community. This poses a challenge to implementation science and the transferability and dissemination of programmes to practice settings.

2.4.4 Adapting Evidence-based Programmes

When adapting programmes from other countries or contexts, some challenges are identified. Kumpfer et al. (2012) in Turner et al. (2014) highlight that parenting programmes have a relatively low uptake in diverse populations such as migrant or ethnic minorities. While discussion exists on the ways in which to culturally adapt a programme to ensure its suitability (Kumpfer et al., 2012), Sanders et al. (2014) argue that there is no uniform way in how this is transferred or achieved.

In their study of the impact and cultural adaption of the Triple P Programme for the Aboriginal community in Australia, Turner et al. (2007) highlight the obstacles experienced by practitioners working with indigenous services in delivering an imported programme. Obstacles included: a mismatch with community priorities, lack of trained professionals, lack of supervision following training, and the challenge of rearranging a workload to deliver the programme.

Whilst a programme is tested and found effective in one country, this does not necessarily equate across ethnic and cultural differences, as argued by Axford and Morpeth (2013). This suggests that a programme may benefit one group but not

necessarily others. Practice contexts typically differ from the initial contexts in which programs were evaluated (Freire et al, 2015). Most evidence-based programmes were developed and found to work in rarefied conditions (Axford and Morpeth, 2013). Consequently, they do not translate into real-world children's services systems; therefore, alternative approaches are needed. In their research on parenting programmes, Gardner et al. (2016) note that there was little information about adaptions to content (if any).

This is of relevance to this research project to understand if the practitioners who deliver the programme find that in their professional opinion the programme has been appropriately culturally adapted to suit the families attending and whether or not their delivery of the programme is influenced accordingly.

2.4.5 The Practitioner and Evidence-based Programmes

It is argued that practitioners' critical analytical and decision-making skills are being undermined by the use of packaged evidence-based programmes which have been introduced into social work, youth work, and family support fields of work. Webb (2001, p. 71) asserts that evidence-based practice *"entraps professional practice within an instrumental framework which regiments, systematises and manages social work within a technocratic framework of routinized operations".*

The positivist underpinnings of evidence-based programmes do not consider the changing context and dynamics of families. Additionally, it does not facilitate practitioners to change evidence-based programmes in response to the needs of the family.

Little evidence exists on the perspectives of practitioners on implementing or delivering such programmes (Aarons and Palinkas, 2007; Brady and Redmond, 2007). Research undertaken on case manager perspectives regarding implementation of evidence-based practices in a child welfare system found that the implementation of the programme within the real-world setting was perceived by providers to be in need of adaption and for providers to adapt to accommodate the intervention (Aarons & Palinkas, 2007). It is suggested that where programmes have not been updated to

reflect contextual changes, it forces the practitioner to make changes to the programme.

The role of the practitioner is significant in the delivery of evidence-based parenting programmes, but arguably the role has been overlooked beyond fidelity checks. Reid (2001) cited in Gray et al. (2009) informs that there is a tendency for practitioners to alter the reported evidence-based intervention to fit their own practice context. This poses challenges to evidence-based programmes, their veracity, and outcomes if practitioners are changing the programme during delivery. This is significant to this research project, as it explores the factors that influence practitioners' decision-making in the context of delivering the Strengthening Families Programme.

Practitioners encounter barriers when attempting to implement interventions, which include: material resources, language barriers, scheduling issues, and the adaption of the intervention (Bohr et al., 2010; Barth et al., 2012). In their investigation of six evidence-based parenting programmes, West et al. (2013) found that there were inconsistencies in who and how parents were targeted for particular interventions and that programmes were not always delivered as specified, which raises questions for this research project. The delivery of these evidence-based programmes is carried out by practitioners often not from the training and backgrounds of those who have developed the intervention or been involved in its evaluation (Axford and Morpeth, 2013; Scott and Dadds, 2009).

In their study, Christian et al. (2014) identified that practitioners did not feel supported by their agencies or that agencies seemed slow to adequately staff the particular intervention. As supervision is a key component of the delivery of parenting support, including the delivery of parenting programmes, it raises questions about its role within evidence-based programme delivery. This is particularly relevant for the interagency delivery model used for the delivery of the Strengthening Families Programme, as practitioners represent different agencies, varying remits, and ethos.

In their examination of adherence to fidelity, Furlong and McGilloway (2015) found that practitioners stated that their high level of adherence to the programme protocols may have been due to the regular expert supervision and weekly fidelity checklist. It is

of interest to this study to understand the supervision arrangements of practitioners delivering the Strengthening Families Programme.

Axford et al. (2012) highlight the need for all staff, particularly managers, to support the programme delivery and the practitioners. The skill of the practitioner in the delivery of evidence-based programmes is an important element to the success of the programme. It is argued that the outcomes from evidence-based programmes are dependent on the skill of the practitioner. Practitioners who deliver the Incredible Years Programme are advised by Webster-Stratton and McCoy (2015) of the need to provide responsive implementation so that the content is contextualised for the participants' lives. Axford and Morpeth (2013) and Cross and West (2011) argue that practitioner competence in the delivery of programmes is as important as the content delivery. There is a need for a practitioner to be able to use different strategies according to the demands of the situation (Scott & Dadds, 2009), drawing upon previous training and personal experience of what has worked when a parent or family is not benefiting from an intervention. However, this is a challenge for neoliberalism and evidence-based programmes which do not accommodate changes to the programmes, as they are prescribed interventions.

Practitioners may not have the additional skills required to deliver evidence-based programmes. Dependent on the focus of the programme, the theories underpinning the programme, and delivery methods outlined, the skillset required of practitioners may vary across programmes. This is a challenge for implementation science and the dissemination of the programme, the adoption of it by practitioners, and the maintenance of the programme. The prior experience and training required by practitioners before they engage in the programme training differs (Lucas, 2011). The training of practitioners on the evidence-based programmes tends to be focused on the programme and how to deliver it to parents, rather than upskilling or enhancing the skillset of the practitioner. The training and skillset of practitioners varies:

> *"a lot of staff at the beginning who were doing group work with parents but who hadn't been offered any training around facilitation skills, hadn't done any adult education training."*
>
> Cotton et al (2009) in Lucas (2011, p. 183)

Sufficiently skilled practitioners can positively influence programme delivery and outcomes (Whittaker and Crowley, 2012). However, it could also be argued that insufficiently skilled practitioners might negatively influence programme delivery and outcomes. Practitioners should be familiar with the programme's theoretical principles and relevance and, additionally, they should be competent in facilitating group processes to ensure that the experience remains relevant to each parent (Whittaker and Crowley, 2012). The training strategies and adoption by practitioners is a challenge for implementation science and the dissemination of programmes, particularly in a context of interagency delivery. It raises questions for this study to understand if this is a factor which impacts on the practitioner's delivery of the Strengthening Families Programme.

2.5 Conclusion

This chapter has presented a general overview of the cultural context, policy trends, and practice development which have led to the use of evidence-based parenting programmes to provide parenting support. Packaged interventions such as evidence-based programmes have emerged as preferred interventions, as their methodology and scientific base appeals to the audit and accountability culture of neoliberalism (Webb, 2001).

The contextualised lives of families who engage with such evidence-based programmes was discussed in this chapter. The adversities and risks that some families live with has been examined, and the challenge of a one-size-fits-all intervention such as an evidence-based programme has been highlighted. Implementation science is challenged by this, as the context within which families live will vary. The use of evidence-based parenting programmes, particularly those which are imported, raises issues for implementation science. Programmes have been developed within one societal, environmental, and policy context and then imported and delivered in a different context where the societal values and expectations related to family services and delivery may differ significantly. It poses challenges for implementation science to accommodate this within dissemination strategies.

Family support as an approach to working with families is described and the key principles as they relate to delivery of interventions has been discussed. The alignment of the Strengthening Families Programme with family support principles has been highlighted. The interagency delivery model has been examined within this chapter. It further complicates the delivery of the Strengthening Families Programme.

This approach to the programme delivery is a significant feature of the Irish context. It is also considerably different to the programme evaluation context. This highlights the applicability of the systems and processes that have developed around the programme in one context and its transferability and suitability for the Irish context, given the variation.

Evidence-based programmes are viewed as an extremely valuable and useful intervention. This research does not contest their value or validity under test settings; rather, it explores how practitioners deliver these interventions in real-world settings. It challenges the adoption, implementation, and maintenance of the evidence-based programmes when practitioners are representative of different services. It also raises challenges for reflective practice as to whether practitioners are engaging in reflexivity in the delivery of an evidence-based programme using an interagency delivery model.

This chapter has provided a comprehensive overview of the legislative, policy, practice, and delivery contexts. The next chapter will detail the Strengthening Families Programme, its development, and implementation in the Irish practice context.

Chapter 3

The Strengthening Families Programme: An Overview

3. Introduction

The Strengthening Families Programme is a manualised, evidence-based parenting programme which was developed in the United States of America and has been promoted as an appropriate support for parents and families (Child and Family Agency, 2013, p. 52; CES, 2016; Sneddon & Owens, 2012), in the Irish context. This chapter begins by describing the background and design of the Strengthening Families Programme. The evidence base for the programme will be presented and the limitations of this discussed. A review of Irish research on the Strengthening Families Programme will be presented, which will also position this research study.

The unique Irish delivery context of the Strengthening Families Programme in the interagency model of delivery will be explained and explored. The theories underpinning the programme and the content of the programme will be outlined. Cultural adaptation, training, and supervision of practitioners will be discussed, and attention will be drawn to the variations in the Irish context of delivery.

The neoliberal influences on the programme development in Ireland will be described throughout this chapter. The implications for implementation science regarding the programme and the Irish delivery context will be highlighted. Reflective practice pertaining to the practitioners and their engagement with the Strengthening Families Programme will also be outlined. This chapter will provide a comprehensive overview of the Irish delivery context of the Strengthening Families Programme and sets the context for this study's research.

3.1 Background to the Strengthening Families Programme

The Strengthening Families Programme was originally developed by Karol Kumpfer using a research grant from the National Institute on Drug Abuse (NIDA) in the early 1980s. The programme was designed specifically for the children of parents who were addicted to drugs in the United States of America. This is a very specific cohort with specific needs relating to addition and recovery. The 14-week intervention was aimed at 6 to 11-year-old children of substance abusers. It was found to improve parenting

skills and family relationships. It was also found to reduce problem behaviours and alcohol and drug abuse in children (Kumpfer et al., 2002; Kumpfer et al., 2010).

Following the initial programme development, the programme creator subsequently collaborated with Richard Spoth and Virginia Molgaard, through Project Family, to revise the original programme. They created a version of the programme which could be used across the general population. This version was originally named the Iowa Strengthening Families Programme (Molgaard and Spoth, 2001) and was later renamed the Strengthening Families Programme for Parents and Youth 10-14. This version of the programme is a 7-week intervention for lower risk 10 to 14-year-olds (Kumpfer et al., 2010) and is designed to be a universal prevention programme for the target age group. This version of the programme is owned by the Iowa State University. The original creator, Dr Karol Kumpfer, has continued to develop the programme. The suite of Strengthening Families Programme options has grown considerably since the development of the original programme. The programmes are organised according to the child or young person's age. The available programmes now include: 3-5 years programme, 6-11 years programme, 12-16 years programme, and 7-17 years programme.

All the programmes follow the same format and aim to improve family relations, increase parenting skills, develop the child/teen's life skills and their behaviour, increase child/teen's social competencies, and reduce or prevent alcohol and drug abuse. The curriculum is adjusted in each programme to reflect the age group of the participants. The programme content is delivered using a number of methods, including lectures, activities, discussion, and roleplays (Kumpfer et al., 2010). Homework, called home practice, is set for families to engage with each week outside of the programme and is discussed at the beginning of the following week's session. The home practice aims to get families to practice the skills they learn on the programme from week to week.

In 2012, a 7-17 years programme was created. The 11-session programme is a combination of the 6-11 years programme and 12-16 years programme and is a digital DVD programme for use in the home or in a group setting. The DVD lessons are 30

minutes in duration. They are accompanied by downloadable handouts and are intended to be used alongside guidance from trained group leaders.

This researcher has been unable to locate any peer-reviewed publications evaluating the effectiveness of this format. The creators advise that it contains the same content as the original programme, with the addition of material on mindfulness, the impact of alcohol and drugs on the adolescent brain, and parenting skills to address this. While there are several programmes within the suite, the Strengthening Families Programme 12-16 Years is generally delivered in the Irish context. When engaging with the interested Irish agencies and discussing the adaption of the programme for the Irish context, the 12-16 Years programme was deemed the most appropriate (Kumpfer, Xie, and O'Driscoll, 2012). The Strengthening Families Programme 6-11 Years is also delivered in Ireland.

3.2 The Evidence Base for Strengthening Families Programme

There is a considerable evidence base that supports the Strengthening Families Programme and its effectiveness. A number of randomised control tests undertaken in the United States of America have demonstrated the effectiveness of the Strengthening Families Programme (Fox et al., 2004; Gottfredson et al., 2006). It is worth noting that much of the research undertaken on the programme is from the USA in the 1980s and 1990s and relates to drug and alcohol use rather than parenting. The current research study relates to the implementation of the Strengthening Families Programme as a parenting intervention. The studies presented below highlight those relevant to parenting, as fits the scope of this research.

The original randomized controlled trial of the Strengthening Families Programme, completed in the 1980s, found that participants had improved parenting skills and reduced problematic child behaviours (Kumpfer et al., 2010). This research involved a randomized four group dismantling design among 218 families from Utah, USA. The study found that the combination of the child, parent, and family components of the programme resulted in the greatest impact and lowered the risk factors of the children, parents, and families and reduced drug use among children and parents (Kumpfer et al., 2002).

Following the collaboration with Richard Spoth and Virginia Molgaard with Project Family, the original programme was revised to produce a universal programme, initially named the Iowa Strengthening Families Programme (Molgaard & Spoth, 2001), later renamed the Strengthening Families Programme 10-14 years. The programme was initially tested through Project Family with 445 Midwestern families from Iowa who resided in economically disadvantaged areas. A randomised control test was used among participating families, where they were assigned to one of three groups: those who received the Strengthening Families Programme, those who received another parenting intervention, and those who received parenting guidelines (Molgaard & Spoth, 2001). Participants were pre-tested and data was then collected at a number of time points after the programme ceased, at 6 months, 1 year, 1.5 years, 2 years, 2.5 years, and 4 years post-programme (Molgaard & Spoth, 2001). Comparisons between the intervention and control groups showed improved parenting behaviours related to more effective discipline and positive parent-child interactions. In the follow-up evaluation, Spoth et al., (2004) found significant reductions in substance abuse, and other conduct problems were maintained over an 18-month period.

The same research team, using the same research setting and research population, was used for another randomized trial. This examined the aggressive behaviour of the adolescents four years after they completed the 10-14 years programme. Data collection methods included observations, self-reports, and parent reports. The results from this study found that there were significant reductions for the intervention group compared to the control group in the independently observed aggressive and hostile behaviours between the interactions of adolescents and parents. However, the findings were limited to mothers (Spoth et al., 2000). It is notable that the sample group were predominantly white two-parent families; therefore, the research may not be generalisable across other, more diverse populations.

In an examination of substance use six years after the baseline data was collected, Spoth et al. (2004) found a significant effect on drinking initiation. The study included 667 sixth grade students from Iowa and examined the effects of two different parenting programmes, one of which was the Strengthening Families Programme 10-14 years (Spoth et al., 2004). In the study, substance use among the sixth grade students was assessed against composite alcohol and tobacco lifetime behaviours (Spoth et al.,

2004). The research found a reduction in lifetime cannabis use among the young people who engaged with the Strengthening Families Programme six years after the data was collected when compared to those who engaged with the other programme and the control group (Spoth et al., 2004).

An Iowa state-wide outcome evaluation of the Strengthening Families Programme involved a quasi-experimental, repeated measures, pre- and post-test design. Standardised instruments were administered to parents and children attending the programme (Kumpfer et al., 2010). A total sample size of over 1,600 families participated in one of four age versions of the programme (3-5 years, 6–11 years, 10–14 years, and 12–16 years) over 3 years between 2004 and 2007. The effect sizes were calculated from standardised retrospective pre- and post-tests. They examined parent, child, and family outcomes for each age group. An average to large effect size was reported for all conditions. This supports the Strengthening Families Programme as an effective risk-reduction program across various age groups. The analysis of the data gathered found that the SFP 12-16 years was most effective for reductions in the parents' alcohol and drug use. Kumpfer et al. (2010) also found that the effect size for parenting changes was greatest among those who undertook the SFP 6-11 years, followed by those who enrolled on the 12-16 years programme.

Using the Cochrane Systematic Review Method, Foxcroft et al. (2003) found that the Strengthening Families Programme showed promise as an effective prevention intervention in the longer-term follow-up (3+ years). A meta-analysis using the Cochrane Systematic Review Method was used to examine non-school-based substance-use prevention. It found that the Strengthening Families Programme 10-14 years was twice as effective in preventing alcohol and drug misuse as any other programme, with two years of post-programme data (Gates et al., 2006).

The Substance Abuse and Mental Health Services Administration (SAMHSA) hold a National Registry of Evidence-based Programmes within the United States of America. It has rated the Strengthening Families Programme as strongly meeting the requirements of quality research, quality of research ratings, and dissemination readiness (SAMHSA, 2018). The programme is evaluated under four criteria: rigour,

size effects of the programme, fidelity of the programme, and conceptual framework (Orte et al., 2016).

The Iowa Strengthening Families Programme was rated as 'exemplary' by the US Department of Education and included in the National Institute of Drug Abuse's guide of 'research-based' programmes (Gorman et al, 2007). In addition, the United Nations Office on Drugs and Crime (UNODC) advises that the current level of evidence on the Strengthening Families Programme include: eight independent randomized control trials, ten randomized control trials, over one hundred quasi-experimental studies (UNODC, 2010, p. 18), and promotes it as an effective evidence-based programme because of the level of evidence supporting the programme.

An evidence hierarchy for evidence-based programmes includes randomized control tests, process evaluations, and meta-analysis (Reynolds, 2008), many of which support the evidence for the effectivity of the Strengthening Families Programme as an intervention. The evidence base for the Strengthening Families Programme is reflective of the evidence base encouraged by funders and policy (Child and Family Agency, 2013; CES, 2016; Family Support Agency, 2013) in Ireland in recent times. This positions Strengthening Families Programme as appropriate for agencies who wish to engage with the managerialist agenda and neoliberal influence. This study is not an investigation of the effectiveness of the Strengthening Families Programme. It queries how the practitioners deliver the programme and to what extent it is implemented as prescribed.

3.3 LutraGroup – Evaluators of the Strengthening Families Programme

LutraGroup are the contractors for the Strengthening Families Programme, providing trainings, evaluations, and programme development. LutraGroup maintains a very interesting and arguably compromised position, as the evaluation director for the agency, Dr Karol Kumpfer, is also the creator of the programme.

LutraGroup carry out outcome and process evaluations of the programme at a cost for each site in which the programme is run. Process evaluations are an examination of whether a programme has been implemented as set out. They assist with adherence to

the fidelity of programmes, while an outcome evaluation measures the effects of the intervention.

LutraGroup present a multi-method and assessment strategy for participants and those delivering the programme, to examine the process and outcome evaluation. The evaluations produce information on effect sizes among families who engage with the programmes. This includes three primary interview instruments for use with the parent, child, and facilitator to assess the outcomes from the programme. In addition, there is a process element to the evaluation. This includes the attendance, participation, and homework completion for each session for each participant, and the group leader session rating for each session.

In terms of administering the questionnaires, Ireland differs, as it has been the practice to implement the questionnaires pre- and post-programme. In other areas, both the pre-and post-questionnaires are completed retrospectively. The variation in the completion of the evaluations raises questions for its generalisation of the results. The evaluation results provide little in the way of contextual information about delivery. In addition, as the practitioners gather the information, it also highlights a variation in the gathering of such information in 'test' settings and in the 'practice settings'.

The practitioner training does not address the implementation of the evaluation tools, which may be a concern for consistency and standardisation with regards to the gathering of the information. The data gathered is sent to the LutraGroup, who analyse the information and return a standard report. The data gathered is analysed using mean standard deviations, and change scores are calculated for each question. A statistical significance is calculated by comparing the changes in the families participating in the programme with the comparison group. Where no comparison group exists, then the mean from the pre- to post-test questionnaires is calculated.

The retrospective pre- and post-data collection is a limitation of the data analysis, as retrospective questions often ask respondents for information that they may not recall with any validity. Additionally, there may be a recall bias when asking individuals to complete retrospective questionnaires. Also, within the Irish context it is often the practitioner who has delivered the programme who is also assisting the families to complete the questionnaires, thus raising the question whether or not families feel they

can be honest in their responses, as they may not wish to represent a poor or worsened situation.

It is also of note that there is no explicit or clearly articulated connection between the findings of these evaluations supplied to LutraGroup and programme revisions. This is of concern to the efficacy and maintenance elements of implementation science frameworks. It is somewhat unclear as to what purpose the evaluations serve if there is no connection to informing revisions or programme changes by the developers.

Initially, when the Strengthening Families Programme was implemented in Ireland, many agencies engaged the LutraGroup to undertake the evaluation of the programmes. These outcome and process evaluations have been outlined above. The LutraGroup reports provide information on effect sizes for the families who engaged with the programme. The reports from the evaluations do not clearly identify any feedback loop from practitioners to programme developers regarding contextual issues regarding implementation. However, due to funding constraints, many agencies pared back the LutraGroup evaluations to just include the outcomes evaluation for the families and not the process evaluation. Other agencies did not use the LutraGroup tools or any other measures.

The influence of the neoliberalist agenda, as well as the recent economic recession, required agencies to make budgetary decisions about programme delivery. In the case of the Strengthening Families Programme, many agencies decided to cut back on evaluations. This decision was arguably short-sighted, as there is now a void of information on many programmes that were run in recent years. It is unclear how many families engaged with the intervention. The programme effect size is mostly unknown. There was no systematic collection of data by the LutraGroup in the Irish delivery context during this time. The lack of recent evaluations highlights a gap in the information around effectiveness and implementation fidelity in the Irish context.

Outside of changes to effect sizes it does not appear that the LutraGroup evaluations provided a feedback mechanism; therefore, there is a gap in contextual information. There is no mainstream pathway for practitioners to inform on practice and adaptations. This presents an interesting opportunity for this research to investigate the Strengthening Families Programme and the processes which influence

practitioners to make changes to the programme. It highlights the opportunity to examine the implementation of the Strengthening Families Programme within a real-life delivery context. It provides a platform within which to examine the adaptation and maintenance element of the programme among practitioners. The current study offers a framework within which the contextual delivery of the programme can be tracked and examined, which somewhat bridges the practice gap.

3.4 Overview of Irish Research on the Strengthening Families Programme

In addition to the reduction in LutraGroup evaluations since 2011/2012, there is limited independent research on the effectiveness of the Strengthening Families Programme in Ireland. The neoliberal influences of managerialism, cost saving, and accountability in relation to funding cutbacks in recent years, coupled with the interagency model of delivery, means that no one agency is the driving force behind programme delivery or research and development. Research on the programmes in the Irish context has been *ad hoc.*

In Ballymun, a quantitative research study was undertaken based on information of 40 of the 56 families who engaged with the Strengthening Families Programme 12-16 Years between 2008 and 2010. A retrospective pre- and post-programme questionnaire was administered to the parent or carer of the family attending the programme by their referral agent – the individual who referred the family to the programme. Baseline information was not established. The retrospective pre and post programme questionnaire approach may be limited by recall bias among the families.

After completing the Strengthening Families Programme, 92.3% of the families felt that they were now considerably strong or very strong in the areas of family supportiveness, love, and care (Burrows, 2011). In addition, 69.3% of the parents reported positive communication within families, with increases in parenting and organisational skills also reported after the programme was completed (Burrows, 2011). The report found that 69.2% of parents felt that they could now handle their stress levels on a continuous basis (Burrows, 2011). The research does indicate that the parents and teens developed their skills in communication, effective parenting, family organisation, and reinforcement of positive behaviours. However, it must be noted that the information supplied in this study was completed by parents only.

A mixed methods design was used in the evaluation of the Strengthening Families Programme 12-16 Years across four sites in the area covered by the Western Regional Drugs Task Force, a funder of the Strengthening Families Programme. The use of this design provides some initial information on the context within which the Strengthening Families Programme is delivered. It also raises further questions for the delivery context and dissemination of programmes.

The impact evaluation phase of the research involved questionnaires being administered by researchers on the first and last night of the programme. The questionnaires included questions from the Family Environment Scale, the SLÁN Survey, and the Health Behaviours in School-aged Children (HBSC) study questions about consumption of alcohol and drugs (Sixsmith and D'Eath, 2011). The report found that no statistical differences were found between the family environment data scores (Sixsmith and D'Eath, 2011), which implies that no significant impact was found on the families in terms of family cohesion, expressiveness, and conflict between the pre- and post-test data collection points.

The qualitative element of the research project found that participants reported that the programme had impacted positively, both individually and as a family (Sixsmith & D'Eath, 2011). With regards the SLÁN questions the report found that no statistical differences were found between the pre- and post-test responses, indicating that the programme had no measurable impact on adults' alcohol intake and behaviour (Sixsmith and D'Eath, 2011). The amount and consistency of the data generated by the HBSC could not be analysed for statistical significance, as there was not enough data and there was a lack of consistency in the data available.

A mixed methods evaluation of the Strengthening Families Programme (12-16 years) in Tallaght was undertaken to examine the extent to which the Strengthening Families Programme contributed to the enhanced parenting skills, parent-child relationships, and adolescents' strengths and hopefulness (Redmond, 2015). Six parents and seven young people completed the pre- and post-programme questionnaires, which included: strengths and difficulties questionnaire, children's hope scale, parent-child relationship scale, and the parenting scale. The focus groups were attended by five parents and five young people.

The evaluation found statistically significant improvements in the parenting style and the parent-child relationship, which was supported by the data from the focus group (Redmond, 2015). However, the small sample size in this study does not offer a generalisability for the Irish context. It is also worth noting that the Tallaght area is an area of high socioeconomic disadvantage. The families from this area may not be representative of the general population. While this research project does not examine the outcomes for the participants of the programme, it will provide an in-depth investigation into the process practitioners engaged with when delivering the programme.

53 families who participated on the Strengthening Families Programme in Ballymun from 2008-2014 engaged with a mixed method follow-up study. As part of the research design, a questionnaire was administered to all individuals aged 18 years or over. 58 participants returned completed questionnaires (Roe, 2015). The respondents reported that their engagement with the Strengthening Families Programme had significantly positive impacts on their families. Specifically, the report found:

- *"Improved communication and relationships were the most common impacts of SFP on families.*
- *98.1% agreed or strongly agreed the programme helped improve relationships in their families.*
- *94.3% agreed or strongly agreed SFP helped their family communicate better.*
- *88.6% agreed or strongly agreed SFP had helped reduce conflict in their family.*
- *97% of parents thought their parenting skills had improved as a result of the programme.*
- *100% of teenagers thought their parents' parenting skills had improved.*
- *Parents were most likely to still use communication skills.*
- *Teenagers were most likely to still use listening skills.*
- *Questionnaire respondents highlighted changed behaviours and attitudes towards drugs rather than alcohol."*

(Roe, 2015, p. 26)

While the findings are extremely positive, it is worth noting that such follow-up studies can have limitations. These may include: participants recalling incorrectly or

differently, being affected by subsequent relationships, or individuals maturing. In addition, there is no intermediate research data at any other time point after completing the programme. The Ballymun follow-up study further highlights the need to examine the relationship between the practitioner and their practice (Roe, 2015) in delivery of the programme to families.

Several evaluations of the Strengthening Families Programme have been undertaken in the Irish context, of varying focus and mixed methods. However, the question that arises relates to the purpose and function of the evaluations, as they do not appear to inform revisions or updates to the programme. It does not appear that the recommendations from the evaluations are included or trialled elsewhere in the Irish context. This highlights the challenge of the interagency model of delivery, as no one agency 'owns the programme'. This poses issues for implementation science and the dissemination and maintenance of the programme, as neither agencies nor the interagency model are championing the need to examine or change the programme in response to the reports and evaluations.

An investigation was undertaken of three programmes in the Kildare region between 2013 and 2016 (Furlong et al., 2017). The research used questionnaires, interviews, and some outcome and process evaluation data previously collected during programme delivery. Some of the previously collected data included the LutraGroup pre- and post-questionnaires. This research found that parents reported their family was functioning positively following their engagement with the programme. The child measure on family functioning is the name given to the result from the retrospective pre- and post-evaluations by the child on the functioning of their family. It found statistically significant improvements in aspects of family functioning (Furlong et al., 2017).

Some of the questionnaire data had already been collected and analysed by the LutraGroup. When Furlong et al. (2017) re-examined this data, they found that there were no statistical differences across any of the measures; however, this data only relates to four respondents. The qualitative element of this research found the reported benefits of engagement with the programme to include: improved communication and

relationships among the family. Parental competencies and confidence were also found to have improved, as well as child behaviour and wellbeing (Furlong et al., 2017).

With the exception of one report (Gorman, 2017), the Strengthening Families Programme has been found to be a positive and beneficial intervention for families. However, it is worth noting that Sixsmith and D'Eath (2011) found that while a number of independent evaluations were carried out in Ireland, none have verified the improvement in the young person's outcomes found by the creator, during evaluations of the programme. This may have been due to the considerable variation in study sizes or the variation in the way in which the evaluation tools are implemented in Ireland and in other jurisdictions. It may relate to the cultural relevance and effect of the programme in the Irish context. It may also relate to the difference in the interagency model of delivery that is used in Ireland and not in other delivery contexts.

This raises questions for the implementation, dissemination, and maintenance strategies of the programme. While available reports provide a strong representation of the Strengthening Families Programme, the evaluations in the Irish context are varied in their approaches and focus. However, the majority are concerned with the outcomes for participants of the programme. This highlights a gap in the available implementation science literature relating to the Strengthening Families Programme in Ireland. This provides a strong rationale for the current research project to investigate the relationship between the practitioner influences on their delivery of the programme.

3.5 The Irish Context, Interagency Collaboration

The interagency delivery model is a defining characteristic of the Irish delivery context. The Strengthening Families Programme is generally implemented by one agency, where staff are provided by the agency or contracted to deliver the programme on behalf of the agency. This occurs in the United States of America, the United Kingdom, Italy, Sweden, and Germany. This context contrasts significantly with the Irish context which Kumpfer et al. (2012) describe as the unique implementation and dissemination process in Ireland.

The current environment for the programme delivery was influenced by two primary issues (Kumpfer et al., 2012). No one agency was able to provide all the staff for the programme, and several agencies wanted to offer the programme to their clients. Additionally, no one agency has responsibility for child and adolescent development problems in Ireland. An interagency collaboration model was agreed among the agencies who sought to bring the programme from the United States of America to Ireland.

The interagency working model aligns with some of the principles and key goals of family support, including: early prevention and intervention, working in partnership with other agencies, and working from a strengths-based perspective (Pinkerton et al., 2004). The model is also influenced by the effect of neoliberalism in seeking economic and commercial common sense, including accountability and rational provision of resources (Carey and Foster, 2013; Dominelli, 1999) and resource sharing. The model of programme delivery in Ireland is unique to other jurisdictions and contexts in which the Strengthening Families Programme operates (Kumpfer et al., 2012). While the programme has not changed, the context and issues around the programme implementation has changed, which is reflected by the nature of the interagency model of delivery.

It should be noted that no research has been undertaken to understand how the unique delivery context has bearing on the adaptation, implementation, and maintenance of the programme. The interagency context of programme delivery in Ireland reflects our service delivery model more broadly within the mixed economy of welfare, and warrants further investigation to understand how it may influence programme delivery.

3.6 Delivery of the Programme in Ireland

As previously explained, the Irish context for delivery of the Strengthening Families Programme is different to other jurisdictions. An interagency collaboration model is used to deliver the programme. This involves several agencies forming a steering committee in an area where a need for a Strengthening Families Programme has been identified. The steering committee oversee the delivery of the programme. This challenges implementation science, as the delivery context is different to other delivery

contexts and to the evaluation context. This raises questions about the systems and processes that have developed around the programme to aid its dissemination and application in the Irish context.

In some instances, a steering committee may be established to run one programme, while in other areas the steering committee is permanent, as programmes run regularly. There is no standard funding stream for the costs to run the Strengthening Families Programme. Funding is usually sourced by a steering committee or by one agency from the committee, with steering committee collaboration, on a programme by programme basis. The interagency collaboration model used for the Strengthening Families Programme asks that agencies who wish to engage with the programme refer families. It would also provide staff members to deliver the programme, including: a Site Coordinator, practitioners, and back-up practitioners.

A Site Coordinator manages and is responsible for the implementation of the Strengthening Families Programme in each location to ensure that it is implemented according to standards set by the programme creators (WCSC, 2012). A Site Coordinator is typically released by one of the agencies on the steering committee to oversee the programme delivery. The role is to *"manage the overall delivery of the Strengthening Families Programme"* (O'Leary et al., 2015, section 1.1) and encompasses a broad range of responsibilities, including budget management, facilitator management, and site management. They do not deliver the programme content.

Until recently there was no training or specific role support for the Site Coordinator, unlike that of the practitioners. In Ireland the Site Coordinator, like the practitioners of the programme, are not specifically contracted for the role. Instead, an organisation or agency will release a staff member to undertake the role for the duration of the programme.

Gaps were identified in the programme implementation manual and articulated verbally to steering committees. In response, a Site Coordinator Support Manual and workshop was developed by practitioners and has been delivered to Site Coordinators since May, 2015 to support individuals in undertaking the role (O'Leary et al., 2015). The development of this process-related manual evidences the gap in the

implementation science for the interagency delivery context of the Strengthening Families Programme.

Site Coordinators do not deliver the content of the programmes of which they are a Site Coordinator. Generally, the Strengthening Families Programme is delivered by four practitioners: two practitioners for the parent training programme and two for the children's training programme (Kumpfer et al., 2003). However in the Irish context, where the programme is delivered on an interagency basis (Kumpfer et al., 2012; Kumpfer et al., 2010), it is commonplace for a team of up to eight practitioners to be involved in the delivery of the programme, particularly if the teens group is divided into two – early teens and late teens. This challenges implementation science, as the delivery context is different to other delivery contexts and to the evaluation context.

3.7 Training of Practitioners

The two-day Strengthening Families Programme Group Leader Training provides an overview of the theories underpinning the programme, the scientific base for the programme, and core programme messages. It also includes a practical delivery element for practitioners. The training, however, does not require any minimum standard of education or training in any discipline. It does require practitioners to have group work experience; however, this is a vague requirement. The level and type of group work experience held by practitioners may vary significantly.

The lack of specific instruction regarding practitioner education or training is significant for implementation science, the adoption of the programme by practitioners, and the maintenance of the programme. The same skill levels may not be found among practitioners who are delivering a programme on an interagency basis, given the different agency ethos and focus that they present from. Skillset and practitioner capacity will always be a variable for delivery. It highlights the challenges of whether or not the programme training can adequately prepare practitioners to implement the programme.

In the Western Regional Drugs Task Force Evaluation of the Strengthening Families Programme, it was recommended that practitioners should have additional group facilitation skills in order to deliver the programme (Sixsmith and D'Eath, 2011). The

investigation of programmes run in Ballymun found that while many practitioners are trained in the programme, there is not a wide availability of practitioners to deliver the programme (Roe, 2015). Drawing from the same pool of practitioners is advantageous, as they may have a lot of experience. However, it poses problems if there are not enough practitioners to run a programme. Are less skilled, less experienced individuals then delivering the programme as a result?

This raises questions for the dissemination processes and maintenance concerns within implementation science to understand the challenges around practitioner recruitment and retention. The report from the Ballyfermot Strengthening Families Programme highlighted that families noticed that the practitioners did not seem familiar with the content and referred to their notes (Burrows, 2011). The families noted that the practitioners appeared uncomfortable with some elements of the programme delivery (Burrows, 2011). The training of the practitioners is the one common denominator among all practitioners who deliver the programme. Therefore, it is of interest to this research study to investigate whether practitioners felt adequately trained and prepared to deliver the programme, and if this has a bearing in their delivery of the programme.

The Family Competence Programme is a Spanish cultural adaption of the Strengthening Families Programme. In an examination of the programme it was recommended that *"personal skills, programme knowledge, understanding of the theory of change of the programme and experience in family prevention"* (Orte et al., 2016, p. 101) should be considered important skills and traits that the practitioners should possess. The programme creators state that a practitioner does not need high levels of education (Kumpfer et al., 2010) to deliver the programme content; however, in the Irish context, in practice, there are individuals delivering the programme who have completed the two-day Strengthening Families Programme training but have no other training or experience. It is interesting that Furlong et al. (2017), in looking at Strengthening Families Programmes run in Kildare from 2013 to 2016, found that those practitioners who were inexperienced indicated that they felt out of their depth for the first number of sessions. While the report did not clarify the statement, it might be reasonable to assume that the practitioners did not feel skilled to deliver the programme over the initial sessions. The lack of information available in this regard

provides a rationale for investigation and raises questions for implementation science and maintenance of the programme within the delivery context.

3.8 Interagency Working and the Strengthening Families Programme

Interagency collaboration is a way of working with individuals across agencies on a specific project or case. Delivering the Strengthening Families Programme in this way fits with the principles of family support (Pinkerton et al., 2004). Given the interagency working model, there are many agencies involved in the delivery of the Strengthening Families Programme in Ireland. They represent statutory, community, and voluntary agencies. While there is no definitive list of agencies, examples of those who are frequently involved include: the HSE, Tusla, the Probation Service, drug and addiction services, youth projects, family resource centres, and school completion programmes, etc.

The information available on the interagency collaboration of the Strengthening Families Programme provides mixed feedback. A report on a programme run in Ballyfermot encountered interagency work as a challenge; however, some practitioners referred to being supported by each other, their Site Coordinator, and their organisation (Holden, 2010).

In contrast, Sixsmith and D'Eath (2011) report that it was expected that referring agencies would release staff to facilitate the programme, which did not happen, and so the practitioners of the programmes in the Western Regional Drugs Task Force were sourced through education programmes and information meetings. This raises concerns for implementation science and the maintenance for programmes to understand the challenges around practitioner recruitment and retention.

The practitioners are a significant variable on the delivery of these programmes. In the Irish context they represent a diverse pool, which is not necessarily reflective of the scientific settings under which the programme has been evaluated. In their report, Sixsmith and D'Eath (2011, p. 20) noted that the practitioners identified that they did not feel supported, and made particular reference to having a different opinion on the appropriate disciplinary measure within the group. This researcher failed to identify any further research on this issue and the gap highlights a need to pursue further

investigation as to whether the interagency element of the delivery model influences practitioners in their delivery of the programme. This raises questions for implementation science and adaption processes of the programme relating to the practitioners.

When reflecting on their experiences of delivering the Strengthening Families Programme in Ballymun in 2008, and in referring to the interagency working of that specific programme, McGagh et al. (2009) advise that it was not wholly positive. Practitioners represented a number of different agencies and McGagh et al. (2009, p. 119) found *"that people did not know each other very well and often appeared reluctant to speak openly and freely about matters that might need changing or improving".* This identified issue is an important element in the process of decision-making.

The experience of McGagh et al. (2009) raises questions relevant to this particular study related to how such interagency work is undertaken, how practitioners are prepared for the programme, and how their agency provides support to practitioners. These questions relate to the processes which practitioners engage with in their delivery of the Strengthening Families Programme.

The interagency delivery model used in Ireland has considerable implications for delivery, as it brings together several practitioners who represent different agencies and may work with differing client groups, e.g. early school-leavers, young offenders, family support, and community groups. It highlights the challenge that the interagency model of delivery poses for implementation science and adaption and maintenance processes. These agencies may, in practice, utilise significantly different interventions than those of the Strengthening Families Programme. It raises questions for this research project to understand if content delivery by practitioners is influenced by the role of their agency within the community.

3.9 Supervision of Practitioners Delivering the Strengthening Families Programme

The Site Coordinator manages the delivery of the programme, the allocation of practitioners to their participant groups, and the supervision of the programme process. They do not supervise the practitioner, as that is the responsibility of their agency. There is no recommended framework for supervision provision within the

Strengthening Families Programme, nor is there a requirement for agencies to provide supervision. In practice, the provision of supervision and the nature of supervision is at the discretion of the agency and the focus of their work. It is unclear as to whether practitioners are, in fact, supported by their agencies and organisations by the provision of regular supervision related to their role in the Strengthening Families Programme.

This provides a rationale for the exploration of the matter within this research project. The need for staff, in particular managers, to support programme delivery and those who deliver it is highlighted within the literature (Axford et al., 2012) as an element of good practice in family support (Thompson et al., 2006; Devaney, 2015) and the development of practice (Halton, Powell, & Scanlon, 2015). The available information on whether practitioners of the Strengthening Families Programme are receiving supervision related to their specific role in the programme rather than their general role warrants further investigation, as the available information is vague and provides mixed feedback. This raises challenges for implementation frameworks and the support processes and systems of the programme and whether the current practice assists with practitioner adoption of the intervention.

In their examination of the Kildare programmes between 2013 and 2016, Furlong et al. (2017) found that while some practitioners felt supported by their own line managers, a few advised that line managers should be versed in the programme so that they can supervise more effectively. One of the recommendations from the 7-year follow-up study on the Ballymun Strengthening Families Programme is for ongoing support for practitioners delivering the programme (Roe, 2015). In the report on a Kilkenny programme, one practitioner notes that it is *"important that your agency sees the value of the programme and build it into your work to allow time for it"* (KSC, 2011, p. 6).
Supervision, or reflective practice, is not an explicit element of family support (Devaney, 2015; Thompson et al., 2006). However, good quality supervision is a fundamental process to developing practitioners' expertise and obtaining good outcomes for parents. This warrants its inclusion as an area of investigation in this research project. It raises challenges to reflective practice as to whether practitioners are engaging in reflexivity in the delivery of an evidence-based programme using an interagency delivery model.

3.10 Theories Underpinning the Strengthening Families Programme

The Strengthening Families Programme's etiological theory is based on the Social Ecology Model of Adolescent Substance Abuse (Kumpfer et al., 2003; Kumpfer et al., 2012; Kumpfer, 2014). This finds that substance use can be prevented or decreased through family attachment and bonding, supervision, and communication of family values and norms.

Similar to other parenting programmes and the psychological theories underpinning them (Gottfredson et al., 2006; Kumpfer et al., 2012; Kumpfer et al., 2003), the Strengthening Families Programme is underpinned by Bandura's social cognitive theory. This provides that training interventions can assist individuals to engage with behaviour change and contribute to increased self-efficacy (Bandura, 1989). Social cognitive theory provides an explanation around how individuals develop, how this links with others around them and the environment in which they live, and allows us to understand, predict, and promote the change of human behaviour.

Behaviours are learned through observation and modelling of behaviour under the framework of cognitive social theory. Elements of this are presented throughout the Strengthening Families Programme, where the children and parents learn new behaviour by modelling that of others; therefore, the behaviour is reinforced and is likely to be repeated. This aligns with family support (Pinkerton et al., 2004) and development of parenting skills (CES, 2016).

The Strengthening Families Programme does not focus on specific negative behaviours of the presenting families, but uses roleplay during skills sessions to assist parents to understand and model appropriate behaviour. The new skills are practiced using roleplay and home practice assignments to reinforce modelling (Furlong et al., 2012). The Resilience Framework Theory (Kumpfer and Bluth, 2004; Kumpfer and Summerhays, 2006) is also included in the Strengthening Families Programme intervention. This promotes positive adaption when encountering adversity, through the promotion of dreams and goals, positive time, and one significant adult in a child's life. The parent to child relationship process is very important in negating biological or environmental risks and promoting resilience with the child. The Resilience Framework Theory promotes the use of socialisation processes among parents to

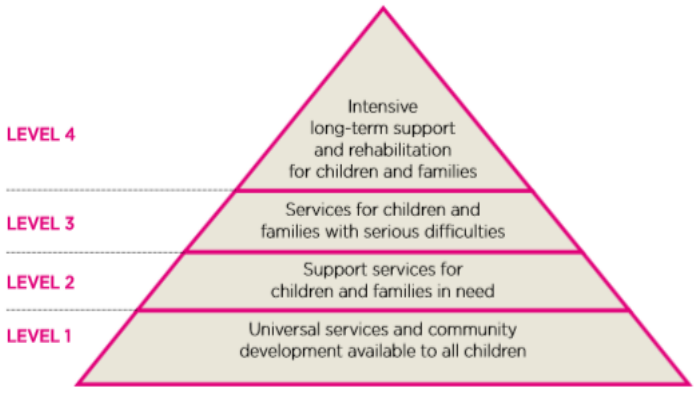
improve the child's resiliency areas, including their motivation, cognitive development, behaviour, emotional, and physical health (Kumpfer and Summerhays, 2006, p. 157). The building of resilience among families is another feature of family support (Pinkerton et al., 2004, p. 17) and is an underlying concept in the provision of many evidence-based parenting programmes.

A key difference between the Strengthening Families Programme and other parenting programmes is that it involves the whole family (parents/carers and children) (Kumpfer et al., 2012; Kumpfer et al., 2010). The Strengthening Families Programme seeks to address and mitigate the barriers to attendance in the form of transport, meals, and childcare assistance, which the programme developer identifies as unusual in a parenting programme (Kumpfer et al., 2010). However, Gardner et al. (2006) argue that these are also elements of other parenting programmes.

3.11 Content of the Strengthening Families Programme

Families require different levels of support (Devaney et al., 2013) and so interventions are targeted based on the level of support required. Some interventions are relevant on a universal level or population approach, while other interventions are tailored to those with higher levels of need. The levels of need in the Irish context of family support are outlined in Figure 1.

Figure 1 - Levels of Need



(Devaney et al., 2013, p. 24).

Initially, the motivating factor for disseminating the Strengthening Families Programme into the Irish context was the need for a programme to respond to a wide range of poor and at-risk behaviours as articulated by drug and alcohol services and the Probation Service. Since 2007, the Strengthening Families Programme has been delivered by many organisations across the statutory, community, and voluntary sectors using the interagency working model. Following this dissemination, the 7-week Strengthening Families Programme 10-14 years is identified as a level 1 or 2 intervention programme, while the longer versions, such as the 14-week 6-11 years and 12-16 years programmes are targeted at high-risk families (Devaney et al., 2013).

High-risk teens were identified as the target group for the Strengthening Families Programme by the Irish agencies (Kumpfer et al., 2012). Even though the target group of the intervention are high-risk families, there is a preventative element to the programme by engaging with families who may be at risk of future difficulties. The Irish Strengthening Families Programme is a 14-week culturally-adapted programme (Kumpfer et al., 2012) and inbuilt in the approach of the programme is the belief that by improving the family relationship and the parents' ability to nurture their teenager a decrease in risk factors in young people will occur (Kumpfer and Bluth, 2004). While many parenting programmes offer a skills-based approach, few offer a whole family approach (Kumpfer et al., 2012).

The programme consists of three curricula: parent skills training, children's skills training, and family life skills training. The families attend the venue where the programme is being held and commence each session by having a meal together as a family. This is an incentive for families to attend the programme on time. The promotion of the family meal as a facet of family life, eating together and communicating together, is an important part of the weekly programme. This provides a platform for families to work together to practice their new skills. Following the meal, the parents and children then go to their own individual skills training groups. In the second hour they come back together for the family life skills training. This component of the programme includes family meetings, family communication, and effective boundary setting (Kumpfer et al., 2003).

The initial sessions of the Strengthening Families Programme are designed to focus on the positive elements of the family and children rather than the negative reasons as to why they are attending the programme (Kumpfer et al., 2012). The weekly sessions are approximately 2.5 hours in duration, including the meal (Kumpfer et al., 2003). Figure 2 below outlines the various sessions of the three curricula of the 12-16 years programme.

Figure 2 - Outlines of the SFP 12-16 Years Programme

	Outline of Parent Skills Sessions	**Outline of Teens Skills Sessions**	**Outline of Family Skills Sessions**
1	Introductions and Group Building	Getting Started and Dreams	Introduction and Group Building:
2	What Teens Are Like & How to Manage Stress	Speaking and Listening	Appreciating Family Members
3	Encouraging Good Behaviour	Staying Cool in Conflicts	Our Time and Rewards
4	Goals and Objectives	Being Who You Want to Be	Goals and Objectives
5	Communication for Better Relationships	Speaking for Yourself	Communication for Better Relationships
6	Communication and Family Meetings	Speaking Up in Your Family	Communication and Family Meetings
7	Helping Your Teen Handle Peer Pressure	Handling Peer Pressure and Temptation	Supporting Teenagers' Resistance 8. Learning from Parents
8	Alcohol, Drugs and Families	Alcohol and Drugs	Learning From Parents
9	Solving Problems and Giving Directions	Problem Solving	Problem Solving, Giving Directions
10	Relationships, Love and Sexuality	Friends, Dating and Sexuality	Relationships, Love and Sexuality
11	Setting Limits I	Managing Emotions	Empathy – The other person's shoes
12	Setting Limits II	Handling Criticism	Family Values
13	Contracts for Changing Behaviour	Coping with Anger	Managing Anger
14	Remembering All You Have Learned	Resources, Review and Graduation	Graduation & Celebration

Kumpfer et al. (2010)

The Strengthening Families Programme is delivered by trained practitioners using manuals which detail the lesson plans (Kumpfer et al., 2010), timings, activities and all handouts for the parents and children. A Strengthening Families Programme Implementation Manual provides guidance on recruitment of families, group issues that may arise, and solutions for same.

In presenting a complete package it removes the client as the focus of the work and positions the package as the primary concern (Jenkins, 2005). Such an approach ignores the realities of those who deliver the programme and those who are participants on the programme. Practitioners are not encouraged or required to make decisions regarding the issues presenting among participants of the programme, which presents challenges. The Strengthening Families Programme as an evidence-based

programme cannot respond to changes which take place in the clients' lives or in the social, political, economic, and organisational context within which the programme is delivered. This presents an opportunity for this research project to investigate how practitioners experience this challenge in their delivery of the Strengthening Families Programme.

3.12 Cultural Adaption of the Strengthening Families Programme

The Strengthening Families Programme has been disseminated across countries and cultures and is culturally adapted with *"surface structure"* changes to take account of cultural variations in communication, enrolling of families (Kumpfer et al., 2010, p. 217). Such cultural adaptations are undertaken by *"culturally sensitive group leaders"* (Kumpfer, 2014, p. 15). Cultural sensitivity acknowledges the differences in families, communities, cultures, as well as group values, beliefs, customs, and an appreciation of the differences (Gorman and Balter, 1997).

Kumpfer et al. (2002) reviewed five research studies conducted in the 1990s. They compared the effectiveness of the original version of the Strengthening Families Programme to versions that were culturally adapted. The adapted versions included: African-Americans from urban and rural areas, Latinos, Asian/Pacific Islanders, and American Indian families in the USA.

The American Indian families engaged in an adapted 8-session programme that had more relational content (Kumpfer et al., 2002). While positive results were associated with family and child risk and protective factors, the findings of these studies showed no evidence of decreased substance use among the young people (Kumpfer et al., 2002).

A 20-session programme was developed for the Asian/Pacific Islanders, of which 10 sessions were dedicated to Hawaiian family values and the other 10 were dedicated to the Strengthening Families Programme content. The outcomes on the adapted programme were not as favourable against the original programme's outcomes and so the programme was returned to the 14-week original version (Kumpfer et al., 2002).

After adaptations to the programme for African-Americans in an urban area, the adapted version found a minor increase in outcome results when compared to the

universal programme. The retention of rural African-American mothers in Alabama who abused drugs improved from 61% to 92% after adapting the stories to be more culturally relevant and after reducing content to a lower reading level (Kumpfer et al., 2002).

Axford & Morpeth (2013) argue that while a programme is found to be effective in one country this does not necessarily translate directly to another country. The Strengthening Families Programme has been adapted and found robust in multiple replications, with positive results among many different ethnic minorities and special populations (Kumpfer et al., 2003). An evaluation of the Strengthening Families Programme 12–16 years was focused on the outcomes involving cultural adaption for families and children in Ireland (Kumpfer et al., 2012). The evaluation examined the pre- and post-test questionnaires from 250 high-risk young people and their families who engaged with the programme. It found that statistically significant effect sizes were reported (Kumpfer et al., 2012), providing support for cultural adaptation and implementations of the Strengthening Families Programme for reducing substance use (Lindquist and Watkins, 2014). This suggests that the Strengthening Families Programme is effective in reducing problem behaviours among adolescents and improving family relationships among Irish families.

The majority of the research available in the Irish context is based on the LutraGroup recommended outcome and process evaluation (Kumpfer et al., 2012), which is concerned with the outcome effects following adaption. However, there is little known as to whether practitioners consider that a programme has been sufficiently adapted for the participants and their cultural and social environment. This raises questions for this research project whether the practitioners who deliver the programme consider that the Strengthening Families Programme is sufficiently adapted for the families who engage with it.

3.13 Implementation Science and the Strengthening Families Programme

Implementation of evidence-based programmes is complicated by the context within which it is delivered. Implementation science is the study of the barriers and methods to systematically implement research settings in practice settings. It supports the neoliberal agenda as it provides for a standardised implementation of interventions

such as evidence-based programmes. Implementation science and its influences such as standardised implementation, results, quantitative measures are reflective of the neoliberal ideals of standardisation and efficiency savings. Implementation science, frameworks and evaluations are often used to provide evidence on the effectiveness of an intervention on results and affect rates. Funders use these in consideration of applications for future funding. The use of frameworks provide details on how to carry out interventions to provide for consistency of delivery. However, such frameworks do not recognise the contextual change in programme delivery and quite often do not provide for the capture of contextual information in 'real life' settings. This is particularly significant in the delivery context of the Strengthening Families Programme, as it is distinctly different to the test conditions under which the programme has been developed and evaluated.

There are many implementation frameworks; however, within the numerous studies of the Strengthening Families Programme, the use of an implementation framework does not emerge clearly. This presents a challenge to the implementation of the programme in different settings, such as the interagency context. This research provides the opportunity to capture contextual information relating to implementation of the programme.

The concept of implementation fidelity encompasses the extent to which an intervention is implemented as originally designed. It is commonly characterised as containing four elements: therapist adherence to session protocols, exposure of participants to the full programme, participant responsiveness and engagement with the programme, quality of delivery, which may include the level of skill, and preparedness demonstrated by the practitioner (Webster-Stratton et al., 2011).

There is a challenge to bridge the gap between research trials and real-world settings. There are many factors to be considered when transporting programmes from one cultural setting to another. Such factors include experiences of clients/participants, practitioners who deliver the programmes, programme structure, and organisational structure, all of which are of interest to this research study. They highlight concerns for the implementation and dissemination of the programme in delivery contexts that differ from the one in which the programme was created.

Generally, assessments of implementation fidelity may be undertaken using observations, self-reports, fidelity check lists, or recordings of delivery. Such methods fail to capture the process of implementation as a research focus. This gap in the literature provides validation for this research project.

As programmes are developed and initially examined in test settings with well-trained and highly-skilled staff (Axford & Morpeth, 2013), it may be more challenging to adhere to fidelity in real-life settings (Scott, et al., 2006). The Irish delivery context differs considerably from other contexts. It raises important issues in relation to the model of delivery and implications for the dissemination and maintenance of the programme in relation to implementation science. Numerous factors affect implementation fidelity, including the characteristics of practitioners, their background, their experience in delivering the programme, including motivation and attitudes toward the evidence-based practice, belief in the intervention, self-efficacy, and skill in delivering the intervention (Cooke, 2000). Such factors, particularly related to the interagency delivery model, raise questions for implementation science. The practitioners' delivery may also be influenced by their perceptions and beliefs about how the new programme fits with their existing priorities or their organisation's priorities.

Implementation fidelity may also be affected by leadership within their organisation and decision-making structures among staff (Aarons et al., 2012), as well as community infrastructure and community support for such interventions. This raises important questions for this research project about the challenges of interagency working and its impact on implementation science in the delivery of the Strengthening Families Programme.

There is little evidence available in the Irish context in relation to implementation fidelity and the Strengthening Families Programme. In Ballyfermot, however, the practitioners reported they adapted the language, as it had too many Americanisms. They also divided the first session into two sessions to provide greater time for families to get to know each other. The reasons given for these changes were made on the basis of the needs of the participants on the programme. Sixsmith and D'Eath (2011), in their examination of the programmes run in the Western Regional Drugs Task Force, found that some deviations were made to the programmes, which were noted to be in

response to the group needs. In this study, the practitioners identified that 50% to 60% of the programme was implemented with fidelity (Sixsmith and D'Eath, 2011, p. 20). The report lacks specific details on the reasons that changes were made and provides another reason for further investigation into the process of delivery of the programme, as is the aim of this research project.

In the Kilkenny Report on the Strengthening Families Programme, the practitioners noted that many changes were made to the delivery of the programme to encourage more interaction among programme participants (KSC, 2011). Once again, this report highlights the basic information that changes were made; however, no information on the context for the decision to make changes is available.

As programmes are developed and initially examined in test settings with well-trained and highly-skilled staff, it is reasonable to assume that it may be more challenging to adhere to fidelity in real-life settings. This challenge may be further compounded by the interagency delivery model used in Ireland. It raises a further layer of complexity to maintaining programme fidelity for several reasons - different service focus, different service ethos, experience of co-facilitation, and experience of delivering evidence-based programmes - all of which contribute to the delivery of the programme. This raises important questions for this research project to investigate whether interagency delivery is a variable of influence in the delivery of the Strengthening Families Programme.

Parenting interventions and programmes do not take place in a vacuum and are influenced by the neighbourhood within which the family lives and social issues within these areas or within the families (Clarke and Churchill, 2012). Participants on such programmes, particularly in an interagency collaboration model, may face adversities, such as abuse, domestic abuse, substance misuse, mental health, loss and separation, health, disability, and special needs, as found by Bunting et al. (2017) in The Troubled Families Programme.

Evidence-based programmes do not consider the context within which the programme is being run, the context within which the parents are living, and the context within which the skills learned must be implemented. The information available from the Irish reports, while providing some information, are reflective of the findings of West et al.

(2013), where changes are made to such programmes by those delivering them. Implementation science is challenged by this. It poses significant challenges for implementation, reach, effectiveness, adoption in target settings, and maintenance. It suggests that greater examination needs to be undertaken within the practice context when disseminating the programme. This study is designed to address the current gap in research. It sets out to investigate the relationship between the facilitator and their implementation practice and the factors which affect their delivery of the programme.

3.14 Conclusion

This chapter has presented a general overview of the Strengthening Families Programme. A discussion on the programme's theories and content was provided and its alignment with family support was noted. The unique context of the Strengthening Families Programme delivery using the interagency model of delivery was examined in depth. The model has developed against a backdrop of neoliberal influences and focus on increased standardisation and cost effectiveness. This approach to the programme delivery is a significant feature of the Irish context. It is also considerably different to the programme evaluation context. This highlights the applicability of the systems and processes that have developed around the programme in one context and its transferability and suitability for the Irish context given the variation. This research does not contest the Strengthening Families Programme as an evidence-based programme; it explores how practitioners deliver these interventions in a real-world setting through the interagency model of delivery.

The lack of specific instruction regarding practitioner education or training is significant for implementation science and the transferability of programmes to practice settings. The staffing of the programme within the Irish context raises a further layer of complexity to maintaining programme fidelity. It challenges the adoption, implementation, and maintenance of the programme when practitioners are representative of different services, service focus, ethos, experience of co-facilitation, and experience of delivering evidence-based programmes. It questions other elements of implementation, such as changes to protocols or participants who may not be exposed to the full programme by virtue of changes made to the programme.

The lack of process-related evaluations of the Strengthening Families Programme highlights a void in the available evidence for the implementation of the programme. This highlights a significant challenge for implementation science and the maintenance of evidence-based programmes when they are implemented in different service delivery contexts. Additionally, the Irish delivery context of the Strengthening Families Programme raises challenges to reflective practice as to whether practitioners are engaging in reflexivity in the delivery of an evidence-based programme using an interagency delivery model.

This chapter provides a comprehensive overview of the Strengthening Families Programme and particularly the Irish delivery context. This chapter and Chapter 2 have positioned the Strengthening Families Programme within the legislative, policy, practice, and delivery contexts. This highlights the unique situation of the Strengthening Families Programme and the gaps that this research seeks to address. The next chapter will detail the methodology employed in this study and the position of the research design within the delivery context of the programme.

Chapter 4

Methodology

4. Introduction

This chapter opens with a comprehensive account of the positionality of the researcher and the implications of this for the current research project. It outlines the methodology designed and implemented in this research project. A brief discussion of the key ontological and epistemological issues is presented, and the research project is positioned around these. Next, constructivist grounded theory as an appropriate inductive approach is discussed, while alternative approaches and implications are outlined. Key ethical matters are noted in the chapter. The use of reflective journals and interviews as the research tools are presented and their appropriateness for the present research project are discussed. A comprehensive account of the data collection and data analysis processes are detailed. The chapter concludes with a discussion of the evaluation criteria for constructivist grounded theory studies (Charmaz, 2006, 2014) as applied in this research project.

The purpose of this research is to explore the factors that influence practitioner decision-making in the context of delivering the Strengthening Families Programme. As reviewed in the previous chapters, neoliberalism has significantly influenced the delivery of parenting support as evidence-based programmes are introduced by funders and agencies as optimum and preferred interventions (Family Support Agency, 2013; CES, 2016; Child and Family Agency, 2013). The influence and delivery of such parenting programmes in 'real-world settings' is often unclear and unknown (Axford & Morpeth, 2013). This gap presents an interesting opportunity for this research project to investigate the delivery of a parenting programme which is considered appealing and appropriate to the neoliberal agenda.

In addition, quantitative methods are generally used to examine efficacy and effectiveness in implementation science (Holtrop, et al., 2018). Conversely, qualitative methods can identify trends or outcomes which might not have been examined by the quantitative measures. This provides a strong opportunity for this research project to examine the implementation of the programme in a 'real-life setting' using qualitative

methods. It could be argued that the topic under exploration is unknown and complex and the gaps identified would benefit from investigation.

4.1 Positionality of the Researcher

An actor in the area of family support in Ireland, the researcher has worked as a practitioner and manager in youth and community organisations for over 14 years. This practice experience has provided a detailed knowledge of the implementation of evidence-based programmes. This has provided the researcher with practice-based knowledge of the challenges that practitioners face when delivering prescribed programmes. Such insights have raised questions that have influenced the researcher's choice of research subject.

Based on these experiences, the researcher initially sought to examine the level of implementation fidelity among the practitioners of the Strengthening Families Programme. Whilst the creators of the programme have undertaken numerous evaluations which measure the outcomes for families who engage with the Strengthening Families Programme (Ashery et al., 1998; Kumpfer et al., 2010; Kumpfer et al., 2003), the researcher was unable to find any research on programme implementation in "real-life settings" or related to the programme's dissemination into the wider community. This gap provided a sound rationale for investigation within this research project.

In reading the literature, no information or research could be located which informed on the factors or processes that influence practitioners' decision-making regarding their delivery of the Strengthening Families Programme. Prompted by the lack of available information, the researcher engaged in an online discussion with the programme creator, who advised that she was also unaware of any research in this area.

The researcher considered the gap in the literature and knowledge of the area as well as the researcher's own experience of programme implementation - specifically the Strengthening Families Programme. The researcher was unable to locate any specific research which examined practitioners' decision-making in relation to their delivery of manualised programmes. Based on their practice experience, the researcher deemed

that the original research idea - the examination of implementation fidelity - could not provide contextual information about the decisions made by practitioners regarding their delivery of the Strengthening Families Programme.

The researcher's position as practitioner researcher, previous academic training, practice experience, and involvement with the Strengthening Families Programme across several roles has greatly informed the approach to this research. It has also given weight to the selection of a qualitative methodology and a constructivist grounded theory approach. The selection of methodology and method was significantly influenced by a lack of information on the subject matter. The absence of information provided a strong rationale to pursue a qualitative methodology. This allowed for the collection of rich, contextual information within an area about which little is known. An inductive method, constructivist grounded theory provided a comprehensive opportunity to investigate the contextual influences on the decision-making of practitioners when delivering the Strengthening Families Programme.

The researcher is a practitioner who has worked since graduating from university in the area of youth and community work. They occupied the role of Site Coordinator in the delivery of several Strengthening Families Programmes. The cooperating agencies involved in the delivery of the programmes included statutory, voluntary, and community organisations who had a remit in child or family welfare. As a member of the Strengthening Families Programme Steering Committee, the researcher engaged in decisions regarding the geographical location of programmes, identifying suitable venues for the programme, promoting the programme to referral agencies, organised training for practitioners, reporting on the attendance of families, and overseeing the budget. The researcher was also a member of a regional Strengthening Families Programme Steering Committee. This provided support to agencies and site coordinators on implementation issues, guidance on budget, preparation of families to engage with the intervention, and, when required, training of practitioners to deliver the programme.

At the time of initiating this study, the researcher worked for an agency funding the programme. The researcher also delivered the Strengthening Families Programme Group Leader Training. While doing so, the researcher observed practitioner

discussions around possible changes to the programme. The researcher noted the variation in the delivery style of the practitioners. As a trainer, the researcher encountered practitioners who did not implement aspects of a session when engaging in roleplay. When queried, the practitioners advised that they did not think it relevant for the purposes of the training or that it could be included in the time allocated. These observations and conversations initiated consideration of the role the practitioner plays in the delivery of the Strengthening Families Programme and what influences the delivery. This is central to implementation science and the neoliberal agenda for use of evidence-based programmes, as little is known about the transferability of such interventions and their dissemination.

The researcher, with other practitioners, developed a Site Coordinator Support Manual (O'Leary et al., 2015) and a Support Workshop for individuals taking on this specific role. The manual addressed practical issues relating to the management of the interagency delivery of the Strengthening Families Programme. These resources provide a basic level of information about the role and the responsibilities involved when undertaking the role of Site Coordinator. The need for this resource arose from feedback provided to steering committees by Site Coordinators who stated that when undertaking the role, they felt ill-prepared and unaware of the number of duties required of them. While the programme creators provide an implementation guide, anecdotally it was reported by practitioners that it was more relevant to the role of the practitioner than that of the Site Coordinator.

Several agencies had developed resources to support the role, but Site Coordinators reported that they were still spending considerable time trying to contact those who had occupied the role previously and seeking their templates and resources. Many individuals contacted the researcher seeking support for the role in the form of templates for promotional leaflets, letters to families, presentations to referral agents, attendance records, etc.

Through discussions with other Site Coordinators about their experiences of managing the programme, anecdotal evidence of variation in the delivery of the programme content emerged. This is significant, as it raises questions about the rationale for

standardisation and consistency of programme implementation and the transferability of programmes from research settings to practice settings.

The role of Site Coordinator offered the researcher an insight into the views, opinions, attitudes, and experiences of practitioners who delivered the programme. Some practitioners implemented parenting programmes regularly in the course of their role; others had little experience of facilitation or group work. The researcher encountered practitioners who highlighted that their professional training was focused on therapeutic approaches rather than the skills-based approach contained in the Strengthening Families Programme. Those practitioners noted the delivery of the manualised session plans as challenging. These issues highlighted the need to examine the role of the practitioner and the varied influences on their delivery of the programme. This is significant for implementation science, as the practitioner is a central element of the programme delivery process. It is necessary to examine the practitioner's delivery of the intervention in a practice context and separate to the typical fidelity checks to understand the contextual landscape for delivery from the perspective of the practitioner. In addition, this is also an important consideration for the interagency approach utilised in the Irish context, where practitioners present from different agencies and backgrounds.

The researcher is a Train the Trainer in other manualised programmes, including Parents Plus and Putting the Pieces Together. In the delivery of these trainings the researcher observed practitioners who have argued that elements of the training should be omitted or changed. Practitioners have explicitly asked co-facilitators to deliver specific segments of the programme, as they advise they are not confident in delivering the content. These issues pointed to the need to investigate the role of the practitioner and the influences on their delivery of manualised evidence-based programmes.

It is imperative to the research process and analysis that the researcher is aware of their own biases and must take steps to alleviate them and interrogate them. This researcher is aware of 'insider status' in relation to this research project. The researcher acknowledges that there are challenges associated with this 'insider status' because of the qualitative methodology engaged for this project.

This 'insider status' was interrogated by the two academic supervisors on a regular basis at supervision. The researcher maintained a research journal throughout the research process, which provided a basis to examine positionality in relation to elements of the research process Samples of the research journals are included in the appendices. The employment of reflexivity, interrogation from the academic supervisors, and adherence to Charmaz (2006; 2014) guidelines on doing grounded theory helped to minimise the possibility of forcing data or forcing concepts. Reviewing the researcher's positionality and reflexivity regularly throughout the study provided a context and rationale for the development of the research project.

4.2 Research Paradigm, Ontology and Epistemology

The approach and decisions made in relation to the research design, methods, and tools was informed by the researcher's positionality. Given the researcher's position as a practitioner researcher, encompassing varied experiences and roles in relation to the Strengthening Families Programme, it was not possible to maintain a totally objective stance in relation to this area of research. The rationale for undertaking this research project emerged through the researcher's practice experience. It was identified that practitioners make changes to manualised programmes. The researcher failed to locate specific research in this subject area; therefore, this research project has been designed to address the gap.

This research project is situated within the interpretivist research paradigm, which is most suited when looking at matters of context, and seeks to understand and interpret behaviours. Within the interpretivist paradigm, individuals are aware of the world and "*conduct our affairs in accordance with our motives, meanings, life-goals and self-concepts, and we co-create cultures with shared patterns of feeling, thinking, believing and doing"* (Humphrey, 2013, p. 7). Interpretivism recognises that each individual operates within a context. It takes account of experiences, cultural issues, and background. Subjective meanings are influenced by events and objects based on an individual's experiences.

Interpretivism, as argued by Ferguson (1993, p. 36), is the *"the belief that 'facts' are not things out in some objective world waiting to be discovered, but, rather, are the social constructions of humans who comprehend the world through interpretive activity".* The

goal of research within the interpretivist paradigm is to *"rely as much as possible on the participants' view of the situation"* (Creswell, 2013, p. 25). Given the interagency approach and numbers of practitioners delivering the Strengthening Families Programme, the issue of context is of great importance to this research project. While interpretivism does not align with neoliberalism or implementation science, it does align and accommodate the context within which the practitioners operate, and reflection on practice and context. The significance of context in practitioners' decision-making is an important element that this researcher sought to capture; therefore, an interpretivist paradigm is the most appropriate choice of paradigm and offers an alternative to positivist research approaches.

A relativist ontological position was adopted in this study, which is linked with the interpretivist paradigm. This acknowledged the position of the researcher and acknowledged the role of practitioner researcher and their varying roles within the Strengthening Families Programme. The relativist ontological position accommodates the representation of the practitioners' voice. This position also influenced the design of the research methods used within this study.

A social constructivist epistemological position was adopted in this research, which again links to the interpretivist paradigm (Denzin & Lincoln, 2000). This position highlights the subjective nature of reality, whereby different meanings can be attributed to a subject by diverse individuals. This position provides that meanings, interpretations, cultural, and historical experiences determine behaviour. In relation to this research it allows the complex interactions, experience, and circumstantial constraints experienced by different practitioners to be investigated. It emphasises socially constructed realities, rather than subjective realities (Franklin, 1995).

Reality is constructed in the discourse and interactions between individuals. Constructivism does not assume that the reality between a group of people and a concept develops artificially. It takes the view that over time, certain behaviours, language, and nuances take on importance and generate meanings, as deemed relevant by those involved. In terms of this research project, a social constructivist epistemology takes the view that the delivery of a Strengthening Families Programme changes over time. These changes can occur due to changes in various cultural and contextual issues

and in addition to interactions that the practitioners have experienced to generate meanings. This is significant to this research project and its design as reflective practice can provide contextual information on changes to the delivery of the Strengthening Families Programme which contrasts with neoliberalist views on standardisation, consistency, and implementation science.

4.3 Selection of a Qualitative Research Approach

As previously explained, this study sought to understand the contextual factors that influence practitioners when making decisions about the delivery of the Strengthening Families Programme. Quantitative approaches which are widely used in implementations science were considered for this research but, given that this was an exploratory piece of research, the need to understand the context was of most importance. The answers from quantitative research may be too limited and may not provide the contextual information that this research sought to uncover. This researcher deemed that a quantitative approach would not permit the interrogation of context; therefore, a qualitative design seemed most appropriate for the purpose of this study.

Qualitative approaches enable us to *"to explore the behaviour, perspectives and experiences of the people they study"* - Holloway in (Savin-Baden & Major, 2012, p. 11). Qualitative research is essential to understanding how, when, and in what context that change occurs. It outlines that *"qualitative research allows for the study of both anticipated and unanticipated outcomes, changes in understandings and perceptions as a result of the efforts of the programme*" - Rist (2000, p. 1009). In particular, qualitative data can provide information on complex behaviours and processes that quantitative data cannot provide, which is not accommodated in much of the implementation science literature (Holtrop et al., 2018).

An inductive approach was identified as the most appropriate technique to use, as this is a 'bottom-up' approach which could facilitate the practitioner voice and practice experience. It fits with the ontological and epistemological position of this research, as it provides that the context, dynamics, and behaviours can be accommodated within. According to Katz (2001, p. 164), *"analytic induction is a way of building explanations in*

qualitative analysis by constructing and testing a set of causal links between events, actions, etc., in one case and the iterative extension of this to further cases".

This is suitable for generating information where little is known. It facilitates a different approach to the examination of the delivery of evidence-based programmes, as it is not a deductive approach which is frequently found in fidelity checks in implementation science. In considering the appropriate methodological framework to adopt for this study, the researcher considered the suitability of other qualitative, inductive approaches before deciding upon constructivist grounded theory. The approaches considered for this research project are briefly outlined below.

The researcher explored the suitability of ethnography for this research project. Ethnographic studies observe, question, and listen to research participants to investigate "what is going on" (Hammersley, 1983). Ethnographic observation studies explore the social behaviours and patterns of a specific group of people to reach a more informed understanding. *"Ethnographers study the meaning of the behaviour, the language, and the interaction among members of the culture sharing group"* (Creswell, 2013, p. 90).

The researcher's personal views, opinions, and experiences about the area of study are deemed to be relevant and may be incorporated into the data, which is relevant to the positionality of the researcher. However, having examined the key features of ethnography, it was decided not to adopt an ethnographic approach, as it tends to be focused on cultural discourses, which is not the only focus of this research. Such a focus on cultural discourse would narrow the research project and may not serve to capture all the factors that influence practitioners' decision-making.

This research project sought to provide an insight into the experiences of practitioners of the Strengthening Families Programme. It was deemed by the researcher that the ethnographic approach would not effectively capture the context in which the practitioners were making decisions. Given the researcher's previous involvement with the Strengthening Families Programme, it was considered that this may 'sway' the practitioner or cause anxiety on their part, or indeed that a 'false' environment would be created where the practitioner would do everything "by the book" if they were being observed by this researcher. In addition to this, it was a personal decision by the

researcher that they did not want to interrupt or affect the Strengthening Families Programme environment for the families engaging with it by observing the sessions.

A case study methodology was also considered for this research project, as it enables a researcher to closely examine the data within a specific context. In most cases, a case study method selects a small geographical area or a very limited number of individuals as the subjects of study. There are several different types of case studies: collective, intrinsic, and instrumental case study. However, all case studies explore and investigate contemporary real-life phenomenon through detailed contextual analysis of a limited number of events or conditions and their relationships.

The case study research method *"is an empirical inquiry that investigates a contemporary phenomenon within its real-life context; when the boundaries between phenomenon and context are not clearly evident; and in which multiple sources of evidence are used"* (Yin, 1994, p. 23). The case study approach is particularly useful for describing how a practice is implemented and can offer a real-world view. However, Walker in (Savin-Baden & Major, 2012, p. 164) argues that the case study *"can lead to a simplistic and incorrect world view and it can be viewed as an intrusion on subject's lives".*

The data collected during a case study is extensive and may include documents, archival records, interviews, direct observations, participant observation, and physical artefacts (Yin, 2009) in (Creswell, 2013, p. 100). In addition, an in-depth case study would have allowed for the exploration of practice-related nuances which influence the delivery of the Strengthening Families Programme. When considering this method, the researcher noted that there was no agreement with past practitioners or families who engaged with the Strengthening Families Programme in the selected region to collect and use archived data for research purposes. For this reason, it would be unethical to use such information for research purposes; therefore, this researcher discounted case study as an appropriate methodology for this research project. Furthermore, the use of a case study approach has the potential to significantly affect the delivery of the programme by the practitioners and may cause distress to vulnerable families participating on the programme, who may not be comfortable with a researcher present during the programme delivery.

Grounded theory was considered for this research as an approach that can be utilised in inductive research, which develops theory from empirical data (Charmaz, 2006; Glaser and Strauss, 1967; Strauss, 1998). The intention of grounded theory is to develop a theory which may be recognisable to those involved with the phenomenon, in a way that can be identified as a fit with their experience (Glaser and Strauss, 1967). The distinguishing feature of grounded theory is the constant comparison technique of analysis. This technique involves revisiting coding regularly and comparing the codes throughout the analysis process. The resulting theory is therefore said to be grounded in the data and discovered from the data, not preconceived by the researcher (Glaser and Strauss, 1967; Charmaz, 2006).

Grounded theory was first developed by Glaser and Strauss (1967) and was devised for medical sociology and health research (Glaser and Strauss, 1967; Strauss, 1998; Charmaz, 2006). It is viewed as appropriate for emerging research areas or for issues about which little is known, as it allows for the development of concepts and theory from data. The process of data collection, researcher bias, and the coding of data are all extremely important and contribute to the integrity of the information gathered. Grounded theory can provide a rigorous analysis of a problem, as it incorporates procedures such as the use of open coding, constant comparison, memo writing, theoretical coding, and theoretical saturation. Grounded theory was viewed as appropriate for this research, as the concepts and theories that emerge from the data are specific to the context from which it has developed or that the theory is grounded in the data from where it has been gathered. Three approaches to conducting grounded theory are widely accepted within the academic community, developed by Glaser (1978b), Strauss (1998), and Charmaz, (2006).

According to Glaser and Strauss (1967), Glaserian grounded theory *"comes from data but does not describe data from which it emerges"* (Glaser, 2001, p. 4) and *"does not generate findings: it generates hypothesis about explaining the behaviour from which it is generated"* (Glaser, 2001, p. 4). Glaser's grounded theory supports the use of coding, memo writing, and conceptualisation. The generated theory is then evaluated under the model for its "fit" with the data, credibility of respondents, relevance, and modifiability (Glaser, 1978a; Glaser & Strauss, 1967). Glaserian grounded theory does not allow for the process of a literature review to be undertaken until the data analysis

has been completed and a theory generated. Glaser views the literature review as problematic and argues that the review stifles the research process, as it forces the data/theories from the literature. Glaserian grounded theory places the researcher in an objective position so as not to introduce any biases and preconceived ideas to the research. Due to the objective stance of this approach to grounded theory, it is incompatible with the philosophical, ontological, and epistemological position of this research.

The development of Straussian Grounded Theory emerged when Strauss came to hold differing views and opinions to that of Glaser. While Glaser advocated strict adherence to the features of the grounded theory method (Glaser and Strauss, 1967), Strauss promotes a grounded theory method that should evolve in accordance to pragmatic situations (Strauss, 1998). The difference in opinion led to a renaming of Strauss' method and to Glaser opposing this method and others, referring to the original method as 'true grounded theory' (Glaser, 2001).

In this second approach, research bias is recognised as an issue for the development of grounded theory. It is acknowledged that one cannot enter into every situation without any preconceptions (Strauss, 1998); however, they advise that researchers try to stay as objective as possible during interactions with participants but do not offer guidance on how this may be achieved. Again, the objective stance of this approach to grounded theory deems is incompatible with the ontological and epistemological position of this *research.*

4.4 Selection of Constructivist Grounded Theory

Constructivist grounded theory, as developed by Charmaz (2006; 2014), offers a different view of the position of the researcher in relation to the research and analysis as offered in other versions of grounded theory (Glaser, 1978a; Strauss, 1998). Constructivist grounded theory (Charmaz, 2006; 2014) places the researcher and the participants at the centre of the research process. It views grounded theory as a co-construction, co-productive process where the researcher and the participant both contribute the development of meanings and generation of a theory.

Constructivist grounded theory not only is a method for understanding research participants' social constructions, but also is a method that researchers construct throughout inquiry (Charmaz, 2000). Charmaz's constructivist grounded theory method adheres to a constructivist philosophical approach, where both the researcher and participants mutually co-construct meaning during data collection and analysis. This contrasts with the previous methods (Glaser, 1978b; Strauss, 1998) which treat the researcher as distant and an objective observer during the data collection and analysis.

According to Charmaz, (2006), the positivist approach to grounded theory lends itself to the objectivist and deterministic approach to research, where it considers the existence of a single interpretation of reality. Charmaz views both the Glaserian and Straussian approaches to grounded theory as treating the researcher as an objective observer. In opposition to this approach, Charmaz (2006) argues for the constructivist approach, which contends that the researcher cannot be neutral to the research process and that knowledge is mutually constructed through active engagements between the researcher and participant(s) in the interview process as ideas are raised and discussed (Mills, Bonner, and Francis, 2006).

Both Charmaz (2006) and Mills et al. (2006) advocate that non-hierarchical intimacy, reciprocity, and open interchange of ideas and negotiation should all form part of the model of grounded theory. Charmaz (2006; 2014) in contrast to Glaser (1978) highlights that the researcher has already been exposed to theories and literature within the area of research and it is not logical to assume that if one stays away from a literature review then one does not have preconceptions about the area of study. Charmaz argues that the researcher should take care not to start from theories they have come across in the literature. Charmaz also concurs with the views of Glaser (1992; 1998) and Strauss (1998) that the theory should emerge from the data, but advocates strongly that theory emerges from the active engagement between the researcher and participants and data collection stages.

After examining the features of each approach, this researcher believes the social constructivist approach advocated by Charmaz (2006; 2014) is most appropriate for this research project. The choice to use constructivist grounded theory is in line with

the interpretive paradigm which views that there is no one definite reality and that reality is subjective. It argues that the researcher and practitioners co-construct the meaning rather than objectively verifying an existing hypothesis (Charmaz, 2006; Mills et al., 2006). This also sits well with the focus of the research, which seeks to understand the context within which practitioners are delivering the Strengthening Families Programme. This offers a unique approach to examining the implementation of evidence-based programmes following their dissemination into the community.

The social constructivist approach to grounded theory (Charmaz, 2006; 2014) emphasises the need for flexible guidelines, not methodological rules. The subjectivity within constructivist grounded theory also extends and acknowledges the researcher (Charmaz, 2006; 2014). Charmaz argues that researchers bring their own opinions, attitudes, beliefs, values, ideas, and past experiences to the process of generating theory from data. Thus, consideration must be given to both the researcher's and participants' backgrounds when data is being collected, selected, and analysed. A reflective, interpretive approach to the data must be taken at all points in the process to maintain the ongoing understanding of it being socially produced between the researcher and the participant. This element of constructivist grounded theory accommodates the positionality of the researcher as documented earlier in the chapter, and reflection as a key element of understanding practice. Therefore, Charmaz's constructivist approach to grounded theory seemed to be the most fitting with this particular 'world view'.

The main feature of Charmaz's social constructivist approach to grounded theory is the argument that no theory is objectively created without consultation and consideration of one's (the researcher's) own experiential, social context. *'The discovered reality arises from the interactive processes and its temporal, cultural and structural contexts'* (Charmaz, 2000, p. 524).

Constructivist grounded theory offers a framework to investigate the relationship between the practitioners of the Strengthening Families Programme and their practice. It allows the exploration of processes, decisions, views, and perspectives of practitioners, which contrasts with the quantitative methods utilised in implementation science. As these are subjective, a constructivist grounded theory

approach is most suited for the research of these attributes rather than the more objectivist Glaserian or Straussian versions. This researcher believes that the various procedures involved in grounded theory, such as coding, comparison, and memo-writing, can be used to conceptualise the information and can help to generate theory, which can explain patterns in behaviour (Mills et al., 2006). The adoption of the constructivist approach and a grounded theory method allows this researcher flexibility within a rigorous framework from which to gather and investigate the views of practitioners while incorporating the researcher within the data gathering and data analysis.

The constructivist grounded theory sets out to *"to form a revised, more open-ended practice of grounded theory that stresses its emergent, constructive elements"* (Charmaz, 2000, p. 510). Philosophically, the constructivist grounded theory approach sits within the interpretivist paradigm. The researcher's perspective is integral to the process of collecting the data and influences the theory (Charmaz, 2000) that emerges, because it arises from the participants' accounts and the researcher's. Theories are constructed through interactions within the world we live. *"We construct our theories from our past and present involvements and interactions with people, perspectives and research practices"* (Charmaz, 2000, p. 10). This again resonates with reflection as a theme within this research and the use of reflection among practitioners as a guide for practice and understanding delivery to inform implementation science. Constructivist grounded theory aligns with the research projects ontological and epistemological position.

On a practical level, the researcher identified that by using this constructivist grounded theory it did not directly interfere with the programme delivery, it did not place the researcher in a position of power, assessing practitioner performance during the programme delivery, and it did not distract from programme delivery, as the researcher was not on site.

4.5 Reflexivity and Reflection

Constructivist grounded theorists take a reflexive stance toward the research process and analysis of data (Charmaz, 2014). Reflexivity *"is a process that helps researchers to consider their position and influence during the study, and it also helps them to know how*

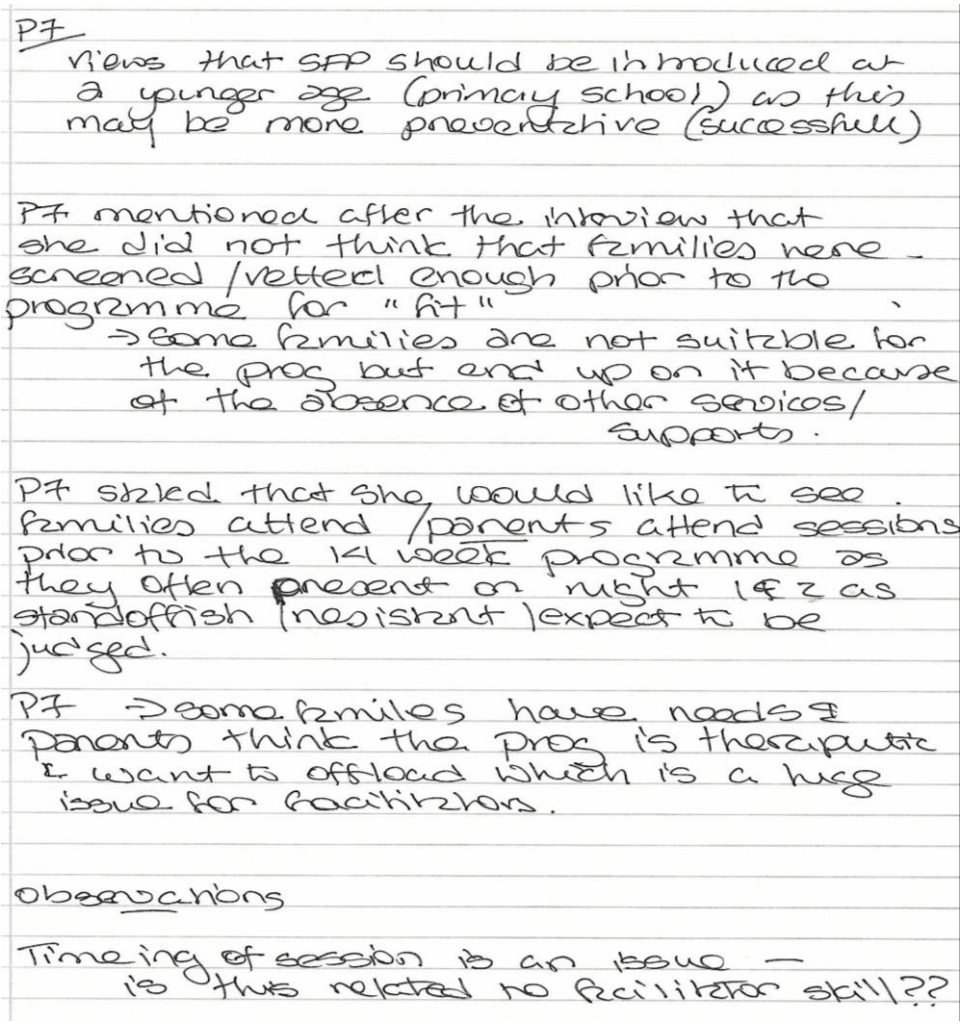
they have constructed and even sometimes imposed meanings on the research process" (Savin-Baden & Major, 2012, p. 76). It is a feature of the interpretivist paradigm and it is appropriate to acknowledge and draw on within this research, particularly given the researcher's positionality and selection of reflective journals as a research tool, which will be discussed later in this chapter.

Through engaging in reflexivity and reflection, the researcher takes account and documents their own assumptions and views and how they may impact the data collection process or analysis process. *"Being reflexive in doing research is part of being honest and ethically mature in research practice"* (Ruby, 1980, p. 154). Reflexivity, as Bonner (2001, p. 267) notes, raises a fundamental issue for modern social enquiry, while Finlay (2003, p. ix) describes it as *the 'thoughtful self-aware analysis of the inter subjective dynamics between researcher and the researched'*.

Constructivist grounded theory positions the participants and researcher as co-authors of the research project; however, there is some inequality within this relationship by virtue that the practitioners are anonymous and the researcher is not. In addition to this, the researcher, by the nature of their role, is in a position of power within the researcher-participant relationship. Reflexivity requires *"thinking critically about what you are doing and why, confronting and often challenging your own assumptions, and recognizing the extent to which your thoughts, actions and decisions shape how you research and what you see"* (Mason, 2007, p. 5).

Considering the numerous roles which this researcher held and detailed earlier in this chapter, the application of reflexivity throughout the research process and particularly to the data collection and analysis was a necessary component to assuring research validity. The researcher maintained a journal throughout this research process, which will be outlined later in the chapter. In addition to this, the researcher reflected on the journal entries and noted any extra information or non-verbal observations following interactions with practitioners during interviews. This process enabled ideas, thoughts, and feelings to be recorded and revisited as the research process and analysis progressed.

Figure 3 - Excerpt of Researcher Notes Following Interview



P7
views that SFP should be introduced at a younger age (primary school) as this may be more preventative (successful)

P7 mentioned after the interview that she did not think that families were screened / vetted enough prior to the programme for "fit"
→ some families are not suitable for the prog but end up on it because of the absence of other services/ supports.

P7 stated that she would like to see families attend / parents attend sessions prior to the 14 week programme as they often present on night 1 & 2 as standoffish (resistant) expect to be judged.

P7 → some families have needs & parents think the prog is therapeutic & want to offload which is a huge issue for facilitators.

observations

Timing of session is an issue —
is this related to facilitator skill??

4.6 Research Information Group

The Regional Strengthening Families Programme Steering Committee promotes the development of the programme and oversees the allocation of funding throughout the region. The organisations on this steering committee represent funding agencies, including those who provide staffing for the programme delivery and agencies who refer families to the programmes. As this group funds the Strengthening Families Programme and strategically decides on the location of programmes, it is appropriate that they received information on the progress of this research project. However, the Steering Committee were not informed of the identities of the research practitioners or site location.

For the purposes of this research study the steering group were named as the Research Information Group and were briefed on the progress of this research project by the

researcher. The group advised on the design of the research and the implementation of the data collection in terms of how the research may affect programme delivery, how the research may affect the families engaging with the programme, and examination of possible ethical issues. In the context of this research study:

- The Research Information Group had a gatekeeping role, where they allowed the researcher approach programme locations within their region.
- The researcher had a reporting relationship to the Research Information Group in terms of the progress of the data collection.
- The Research Information Group did not know the identity of the research participants.
- The Research Information Group did not have access to the information or data provided by the research participants.

4.7 Research Participants & Research Site

The participants were determined using purposeful sampling. The researcher selected sites for study, as they could purposefully inform an understanding of the area of research (Creswell, 2007). This approach fitted the purpose of this study. The participants in this research project are the practitioners of the programme and will be referred to as such. Practitioners in the selected site were approached to engage with the programme. All practitioners who engaged with the study had completed the two-day Strengthening Families Programme Training for Group Leaders.

Initially, two research sites were identified where the programmes were running within the same timeframe. It was originally intended that practitioners (approx. 12) from both sites would complete reflective journal entries and engage with interviews. It was intended that all the information would be analysed using constructivist grounded theory. The researcher encountered 'gatekeepers', and access to the second site was denied as other research was taking place. The delivery of the Strengthening Families Programme and the reflective journaling element of the research had already commenced in one site location before the researcher became aware that access was denied in the second site. This revelation had a bearing on the research design, tools, and analysis, which will be outlined below.

The researcher addressed this barrier to the research by undertaking discussion with the academic supervisors. Consideration was given to trying to secure another research site within the region; however, no other programmes were running or scheduled to begin. The researcher contemplated approaching a site location in another part of the country; however, programmes had already commenced implementation in most other locations. The possibility of waiting until the following year to engage another site location and practitioners was deliberated upon. However, given the interagency nature of the programme, *ad hoc* funding arrangements, and no one lead agency with responsibility for the programme, there was also a likelihood that no programme might run in the region the following year or the researcher might find themselves in a gatekeeper situation again. Accordingly, the decision was taken to adapt the research design.

While another research site could not be identified, a request for practitioners to engage in one-to-one interview was sent by a member of the Research Information Group to the database of trained practitioners. Practitioners who had delivered the Strengthening Families Programme within the previous two years and who would engage in a one-to-one interview on their delivery were sought. This resulted in the recruitment of 6 practitioners. As these practitioners had not engaged in the reflective journaling element of the research, some amendments were made to the research design to take account of this. These changes will be outlined in the reflective journal, interview, and analysis sections.

4.8 Research Tools

Reflective journals and one-to-one interview were selected as appropriate tools to examine practitioners' experiences of implementing a Strengthening Families Programme.

4.8.1 Reflective Journal

The practitioners delivering the Strengthening Families Programme at the research site completed online reflective journals. Journal-writing is regarded as an opportunity for reflection and documentation of inner dialogue. The documentation of thoughts helped to track any changes that may occur in beliefs and practice. This type of

narrative writing is a tool which assists with researcher development and thinking over time.

A research journal is a research tool which can capture the decisions made through writing down reflections on the research (Shumack, 2010). A journal may be used to provide primary research data as a precursor to interviews or to follow-up on interview data (Bray, 2007; Välimäki et al., 2007). Journaling allows people to look back at what they have done. It provides an opportunity to reflect on their attitudes, feelings, and actions from writing about the experience. Processes can be tracked through journaling, as they are written day by day or week to week.

This presented a unique and alternative way in which the process of delivering a parenting programme could be examined. It fit well with the focus on the practitioner and their reflection on their own practice, as well as being a qualitative way in which implementation science can be examined. Additionally, as writers are not under observation when writing the journal entry (Blodgett, 1988), it was an appropriate tool for this study, as it could, without interfering with the programme delivery, discover if and what changes were made to the delivery by practitioners. Journaling also provides details and concrete voices, unlike verbal reflections (Bagnato, 2013; Ritchie, 2003). Journal-writing was deemed a suitable data collection method in this study to gather information about how practitioners reflect on their practice. This highlights another way to capture the process of implementation which contrasts the quantitative, prescribed fidelity checks which are often found in implementation science and process evaluations.

The researcher utilised innovation in information technology to support the gathering of the reflective journals. The practitioners completed an online reflective journal via Survey Monkey for each session of the Strengthening Families Programme that they delivered. This represents an interesting and unique development whereby the journal entries could be submitted weekly and received by the researcher without delay. The same questions were sent to the practitioners each week. This also presented the opportunity to provide consistency and standardisation of the reflective journal questions throughout the data collection process. It was interesting to use a standardised reflective journal template as a data collection tool within this research

which examines the neoliberalist idea of standardisation within social work The reflective journal posed a number of questions, which are linked to Kolb's learning cycle (Kolb, 1984[1]).

The questions included:

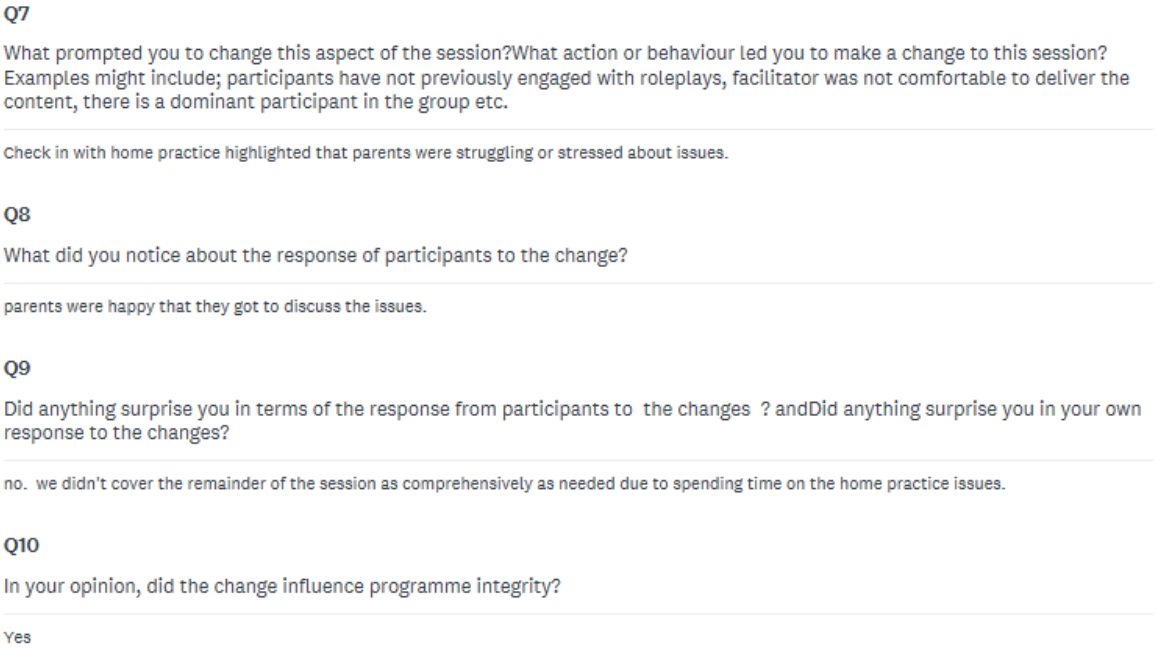
- Did you make any changes to the session? Yes ☐ No ☐
- What in particular did you change?
- What prompted you to change this aspect of the session?
- What did you notice about the response of participants to the change?
- Do you believe that the change influenced the programme integrity? Yes ☐ No ☐
- Did anything surprise you in terms of the response from participants?
- Did anything surprise you in your own response?
- What would you do in the future? / How might your future action be influenced by this reflection?
- What does the change mean in terms of the programme?

Note: The learning cycle was explained to practitioners during the briefing session.

Six practitioners participated in the journaling of their delivery of the Strengthening Families Programme. The collection of the journals was undertaken through the online platform www.surveymonkey.com. The researcher sent the reflective journal template to the practitioners after each weekly delivery of the Strengthening Families Programme.

[1] The model of reflection is also known as the experiential learning model (Kolb, 1984). The basis of the model is that learning takes place through our own experience, which is reviewed and analysed systematically through the stages; experience, reflection, conceptualisation and active experimentation. It posits that all learning is relearning, as when the process has been undertaken completely, the new experiences form the starting point for a new cycle. Within the model, learning cannot take place without reflection and feedback to reinforce learning is significant.

Figure 4 - Screenshot Excerpt of a Practitioner's Online Journal Entry



Q7

What prompted you to change this aspect of the session?What action or behaviour led you to make a change to this session? Examples might include; participants have not previously engaged with roleplays, facilitator was not comfortable to deliver the content, there is a dominant participant in the group etc.

Check in with home practice highlighted that parents were struggling or stressed about issues.

Q8

What did you notice about the response of participants to the change?

parents were happy that they got to discuss the issues.

Q9

Did anything surprise you in terms of the response from participants to the changes ? andDid anything surprise you in your own response to the changes?

no. we didn't cover the remainder of the session as comprehensively as needed due to spending time on the home practice issues.

Q10

In your opinion, did the change influence programme integrity?

Yes

Web-based data collection has become more popular in recent years. The advantages of using an online approach to the journal collection included: low cost, easy to administer and manage, and a faster and more secure way to collect the data (Eysenbach & Wyatt, 2002). Again, this is reflective of the neoliberal emphasis on greater efficiencies and cost savings. On a purely practical level, the submission of the reflective journals, typed via Survey Monkey, made for clearer reading and understanding of the text, mitigating the likelihood of misunderstanding handwritten entries.

In the development of the online reflective journaling element of this research project, the researcher piloted the tool on two occasions. The first piloting took place on 8th June, 2017. The examination of the results from this led to changes being made to the questions. The researcher identified that respondents were not fully articulating the rationale for why decisions to change the delivery of the programme were taken. The researcher discussed these issues with the academic supervisors and refined several of the questions to gain further information.

The online reflective journal was piloted a second time on the 19th July, 2017. The results from the second pilot contained more in-depth information in the answers to the questions. The utilisation of www.surveymonkey.com for the reflective journaling

provided an unaccounted advantage that the journal could be piloted and tweaked. This could not have been facilitated if the journaling was submitted in a handwritten format after the programme had started or even ended.

It had been intended that the data collected from the reflective journals would be analysed together with the interviews using the constructivist grounded theory guidelines as set by Charmaz (2006; 2014), which are outlined later in this chapter. However, due to the change in the research design, some practitioners did not have the opportunity to engage with the reflective journaling element. It would not have been appropriate to amalgamate or merge the reflective journal entries and interview data together for analysis purposes. Instead, the journal entries were examined to identify if changes were made by practitioners during the programme delivery. The emerging trends from this analysis informed the development of interview questions.

4.8.2 Interview

The information gathered from the online reflective journals was used to inform the development of the interview questions. Interviews are a conversation which can provide insights into phenomena which may not be available through the written documentation of a process. Interviews are useful if the researcher seeks information based on *'insider experiences, privileged insights and experiences'* (Wisker, 2001, p. 165). While interviews are time-consuming, they are a suitable approach to gather rich data on experiences and attitudes.

5 of the 6 practitioners who completed the reflective journaling elected to engage in a one-to-one interview with the researcher. 6 other practitioners recruited through the email request participated in interviews. The interviews were held at locations nominated by the practitioners. In total, 11 interviews were carried out with practitioners of the Strengthening Families Programme. The interviews offered an opportunity to gather in-depth information from practitioners about their practice. It enabled practitioners to *"speak in their own voice and express their own thoughts and feelings"* (Berg, 2007, p. 96). According to Dörnyei and Skehan (2003, p. 140) a 'good' qualitative interview has two key features: *"(a) it flows naturally, and (b) it is rich in detail",* and to attain this it is important to listen rather than speak. The interviews provided a greater and in-depth understanding of the delivery context of practitioners

and of the process they engage with when delivering the programme. This provides qualitative information that many of the process evaluations or quantitative approaches of implementation science do not capture.

4.9 Consultative Peer Group

A consultative peer group was formed to enhance the veracity of analysis of the data and to examine bias or prejudice by the researcher towards the data. The consultative peer group assisted the researcher by examining the analysis of the data to mitigate the risk of bias by the researcher. The membership of the consultative peer group was limited to three individuals who were experienced in programme delivery, although not in the Strengthening Families Programme.

Initially, it was intended to recruit the consultative peer group from the National Strengthening Families Programme Steering Committee; however, it was viewed that this might pose a conflict of interest, as it may potentially expose the research site and practitioners. The researcher had a peripheral existing professional relationship with the members of the consultative peer group. The researcher did not know any of the members in a personal or professional capacity. When designing the research, it was intended that the transcripts could be posted to the consultative peer group; however, on a practical basis this was deemed to be cumbersome. Additionally, the researcher feared that posting transcripts might be a risk to confidentiality should the post be delivered to the incorrect address or should an unintended recipient open it.

The consultative peer group met on two occasions. They read the journal entries and the transcripts of the interviews and examined the analysis of the data. The entries were anonymised before being presented to the group. In addition, any identifying information or site location was obscured in the text.

4.10 Ethical Considerations

The researcher designed this research project in such a way that the families participating in the Strengthening Families Programme were not directly affected by the choice of data collection tool. The researcher was a member of the Regional Strengthening Families Programme Steering Committee and was a trainer of the programme, as explained earlier in this chapter. The researcher withdrew from

providing support on the delivery of the Strengthening Families Programme while the research was ongoing. This decision was undertaken as the researcher recognised that her professional role may expose a conflict of interest.

Informed consent was obtained from the practitioners who engaged in the research project. Informed consent refers to the voluntary agreement to participate in a study based upon full and open information (Christians, 2005). Providing detailed information about the purpose of the study and what will happen to the person if they participate allows practitioners to make a careful and informed choice about whether or not they want to take part (Goodwin, 2013). In accordance with good practice, it is a requirement of the UCC Ethics Committee that all participants in social research are sufficiently informed about the scope and nature of the research they engage with. This researcher developed the Research Participant Information Pack - a suite of information documents about the study. It included:

- Participant Information Sheet detailing the project, requirements of participants and the possible benefits and negatives to participants.
- Participant Consent Form.
- Agency Information Sheet.
- Agency Consent Form.
- Participant Withdrawal Form providing a process where the participants could choose to withdraw from the research project up to fourth week of delivery and not have to approach the researcher directly.

In addition, the researcher held a Participation Briefing Session at the research site. The presentation offered an overview of the research, the commitment sought from practitioners, and the implications of participation in the research. At the session, all attendees were provided with the Participant Information Pack. An additional effort to mitigate the influence and power of the researcher was undertaken, whereby the practitioners were asked to return the completed consent forms by post using pre-paid envelopes so that they did not feel pressured to commit to the study at the briefing session. The practitioners were also assured at the Participant Briefing Session that no information relating to the families engaging with the Strengthening Families Programme would be sought or should be provided.

Engendering trust in the research setting facilitates practitioners' openness, which is important in a constructivist grounded theory study seeking information regarding practice. The principle of confidentiality encompasses the expectation that information disclosed during a research relationship will not be shared with unauthorised parties without the participants' consent (Jones et al., 2006). The information provided by the practitioners was treated confidentially. The practitioners were assured that their individual responses, opinions, and actions would not be reported to other practitioners or to funders.

Anonymity ensures that when information is shared or published it will contain no identifiable personal information about participants (Jones et al., 2006). In contrast to qualitative studies (Goodwin, 2013), the nature of grounded theory is more conducive to achieving anonymity. This is because grounded theory focuses on concepts rather than people. This researcher committed to maintaining the anonymity of the practitioners in this research study and to protect the anonymity of the organisations for whom they work and represent. The research site was not identified. Any names mentioned in the journal entries or the interviews were obscured in the transcripts and presentation of the findings. The researcher is the only person who knows the identities of the practitioners.

4.11 Data Analysis

As previously mentioned in this chapter, the intention regarding the data gathered through the reflective journaling and one-to-one interviews was to analyse it using grounded theory, as described by Charmaz (2006; 2014). Instead, the reflective journals were examined for evidence of changes to the delivery of the programme. This was undertaken manually by the researcher. The Peer Consultation Group also provided oversight on this to mitigate against oversight or bias towards the information within the journals by the researcher. The researcher used the industry standard package NVivo 12 to support the organisation and explication of the data. The process of coding the data was undertaken as described by Charmaz (2006; 2014), as outlined below.

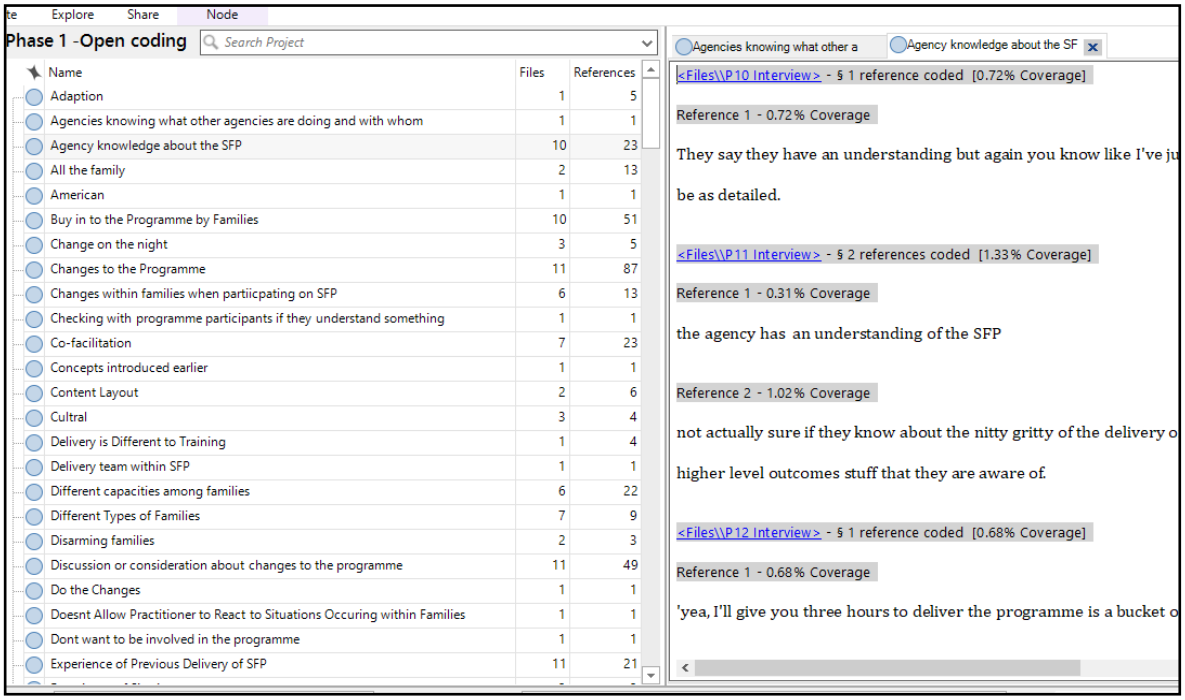
4.11.1 Line by Line Coding

The first stage of coding resulted in the establishment of codes which were deemed pertinent to the data collected. Line by line coding provides for an in-depth and systematic approach to the analysis of the data, which minimises the risk of missing ideas (Charmaz, 2014).

Labels were attached to the transcript to capture what had been said. These labels corresponded closely to the text and frequently used the participant's own words, known as in vivo codes. Codes were assigned to practitioners' words and statements to develop concepts, constituting the start of the analytic process. The selection of words to code was a significant decision and the researcher followed Charmaz's recommendation of coding "actions" (Charmaz, 2006, p. 9). This recommendation fitted well with this research project, as the initial question asked of practitioners is action-based and asks them to inform on changes they made to the manualised programme.

In order to mitigate against identifying labels for codes at the initial stages, the researcher frequently returned to the guidelines (Charmaz, 2006; 2014) and availed of online workshops. The researcher also attached notes to the desktop which posed the questions 'what is this about?' and 'what is actually happening?' to assist the process of coding. The following Figure shows the initial codes and the corresponding snippet of the text on the right.

Figure 5 - Codes Generated from Line by Line Coding Stage Using NVivo 12



As presented in the figure, the initial code relates to the *'Agency knowledge about the SFP'*. Any other interview text that deals with agency knowledge was also associated with this. Likewise, with each of the 118 codes that were established, each one is associated with a segment of interview transcript. This provides a scaffold to bring together related responses from other transcripts. The coding remains open for establishing new codes and concepts and is grounded in the data.

The initial stages of coding and focused coding was completed for each interview before moving to the analysis of the next interview, following in the order in which the interviews were undertaken.

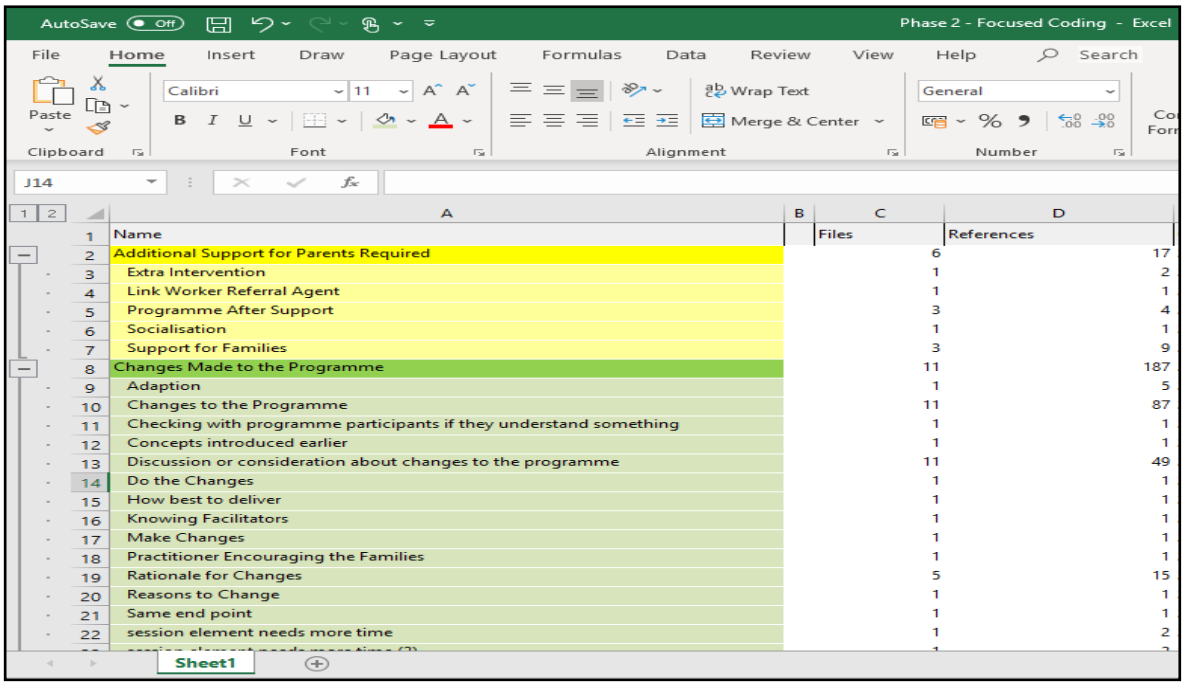
4.11.2 Focused Coding

Focused coding is a more directed, selective, and conceptual process than the open coding process. It involves using the most significant or frequent earlier codes to sift through this data (Charmaz, 2014). An examination of the codes was undertaken by the researcher to identify emerging core categories. Nvivo software supported the process. The interview transcripts were revisited and reread carefully against the codes and categories identified from the line by line coding. During the focused coding, the research questions were kept in mind, focusing on what factors influence

practitioners' decision-making when delivering the Strengthening Families Programme. Questions were posed by the researcher to assist with the process. They included 'what is actually happening here?' and 'what is this about?'. Explanations were sought from the data, e.g. the codes 'tweaked' and 'tailored' were refined into a category of 'Changes Made to the Programme'. This process was beneficial to understand the varying perspectives of practitioners while ensuring the conceptual development about 'Change'. The researcher sometimes kept the initial codes intact, sometimes collapsed several of the initial codes under one and coded the initial codes as a focused code. The memo-writing assisted with the merging of categories and analytical thought processes of the researcher.

The next figure is an export from Nvivo to Excel and highlights two focused code categories, highlighted in the bold yellow and green colours, with the lighter colours indicating the codes that make up that focused code.

Figure 6 - Focused Coding Stage Using NVivo 12



	Name	Files	References
2	Additional Support for Parents Required	6	17
3	Extra Intervention	1	2
4	Link Worker Referral Agent	1	1
5	Programme After Support	3	4
6	Socialisation	1	1
7	Support for Families	3	9
8	Changes Made to the Programme	11	187
9	Adaption	1	5
10	Changes to the Programme	11	87
11	Checking with programme participants if they understand something	1	1
12	Concepts introduced earlier	1	1
13	Discussion or consideration about changes to the programme	11	49
14	Do the Changes	1	1
15	How best to deliver	1	1
16	Knowing Facilitators	1	1
17	Make Changes	1	1
18	Practitioner Encouraging the Families	1	1
19	Rationale for Changes	5	15
20	Reasons to Change	1	1
21	Same end point	1	1
22	session element needs more time	1	2

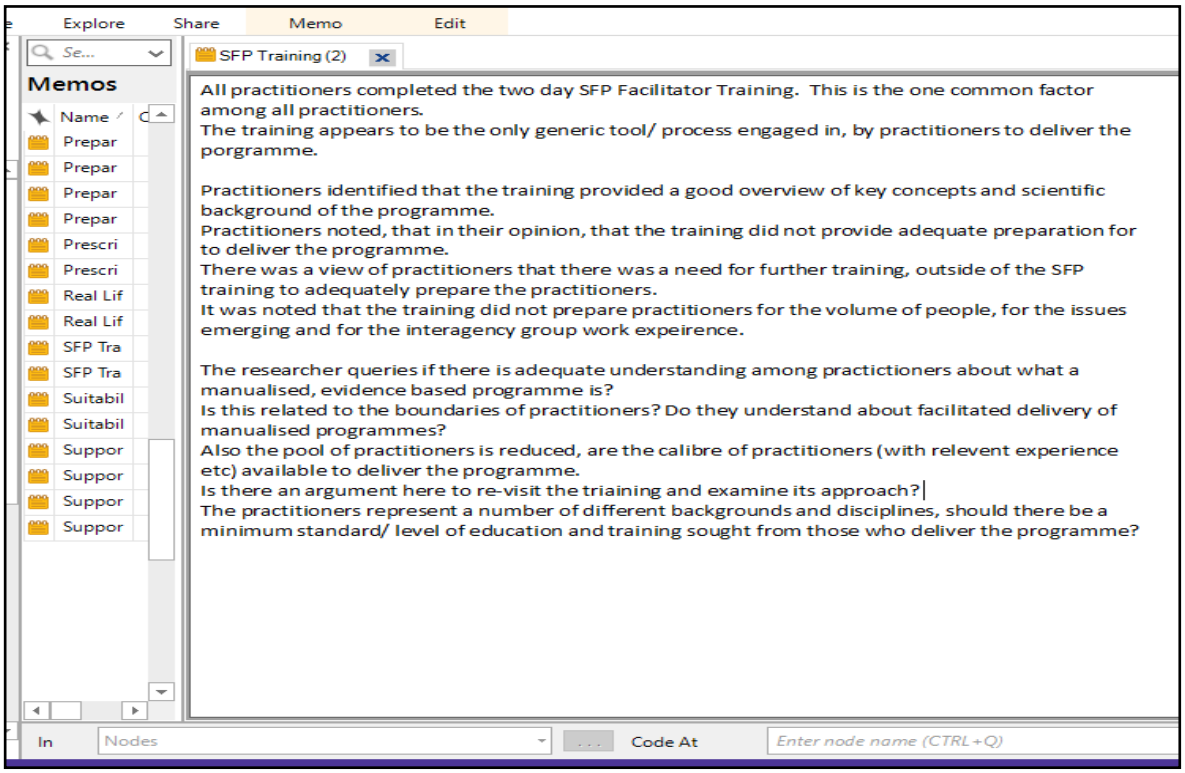
4.11.3 Memo Writing

Memos are a set of notes which continuously support the researcher by providing a record of thoughts, ideas, and queries (Charmaz, 2006). Memo-writing is an important

step in constructivist grounded theory between data collection and writing drafts. It is where researchers stop and analyse their ideas about their codes and emerging categories. It enabled the thoughts of the researcher regarding the similarities, differences, and anomalies in the data to be noted and developed. Memoing was used to develop meanings from the practitioners' interview transcripts. It also allowed the researcher to pose questions as the analysis progressed and to consider them within the process.

The memo-writing provided a platform for the researcher to examine their own ideas about their codes and the emerging categories. Given the previously mentioned involvement of this researcher with the Strengthening Families Programme, the memo-writing tool provided evidence of the researcher's position and engagement with the data. As coding progressed, the memo was updated.

Figure 7 - Example of Memo Use on NVivo 12



The memo highlights the links the researcher is making between other categories. It outlines the thought process and questions arising from the coding. It assisted with identifying commonalities related to the training, e.g. the belief that the training did not

adequately train practitioners to implement the programme. The memo assisted with the development of the higher theoretical category of "Practitioner Readiness".

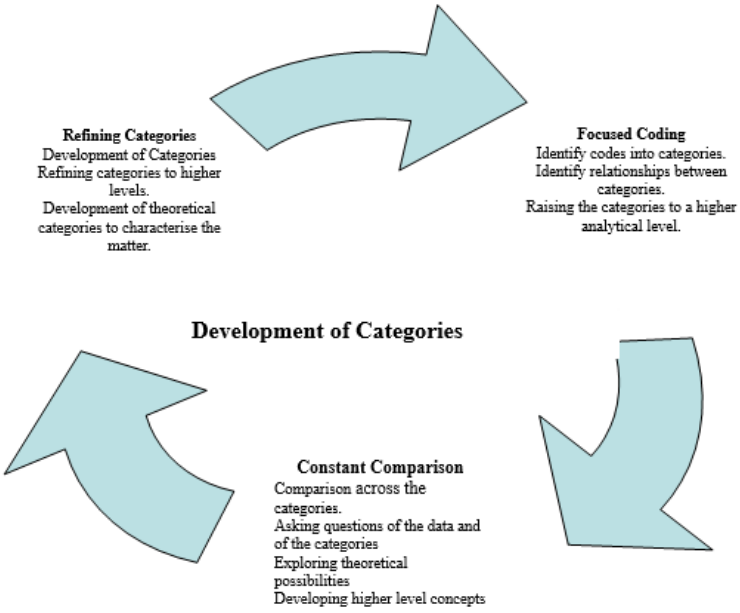
4.11.4 Constant Comparative Analysis

Constant comparative analysis is an ongoing comparison process. It required the researcher to continuously return to the data, to the words of the practitioners, and analyse it, *"making comparisons between data, codes and categories"* (Charmaz, 2006, p. 179). Constructivist grounded theory utilises constant comparative analysis to establish analytic distinctions and to determine if the data supports and continues to support the categories that are emerging (Holton, 2007, p. 277). Time and care were taken by the researcher to progress slowly through the analysis, rather than rushing or forcing the codes and categories. The process contributed to the establishment of uniformities and varying conditions (Charmaz, 2006, p. 179). The researcher engaged in the following combinations of comparisons:

- Sets of data within the same interview.
- Data of different interviews.
- Data of the practitioners who completed the reflective journals and those who did not.
- Initial codes between the same interviews.
- Initial codes between different interviews.
- Data and initial codes of the same interview.
- Data and initial codes between different interviews.
- Data and initial codes between the practitioners who completed the reflective journals and those who did not.

The consultative peer group (described earlier the chapter) examined the coding and the development of the coding processes to investigate the positionality and possible bias or prejudice within the analysis. The coding processes were also discussed with both academic supervisors during regular supervision meetings to scrutinise the researcher's analysis of the data.

Figure 8 - Development of Categories



The figure above highlights the development of categories within constructivist grounded theory and, particularly, constant comparison. As outlined, the researcher continuously returned to the data to analyse the content.

The codes generated from the data analysis are not exhaustive. They reflect the researcher's interactions with the research and interpretation of the data. This is reflective of the process outlined by Charmaz (2006; 2014).

4.11.5 Theoretical Saturation

Saturation has been defined as *'data adequacy'* that involves collection of data until no new information is obtained (Morse, 1995, p. 147) or when new data no longer triggers new theoretical insights, and new properties of core theoretical categories are no longer revealed. However, saturation does not simply mean the repetition of the same events or stories. According to Charmaz (2006), the notion of saturation of categories supersedes that of sample size. Within some studies, the sample size may be quite small, yet still achieve the requirements for a project. A layered analytical approach was utilised in this study until theoretical saturation was achieved. No new data could be generated from the data and no new insights emerged. The focused coding identified patterns, with the comparative analysis continuing until it failed to produce any new

discernment. The theoretical categories were developed with constant comparative analysis continuing to build the codes and memos.

4.11.6 Substantive Theory

A grounded theory is directly related to the data from which it has been generated; it is therefore grounded in the data. Two types of theory are identified: substantive and formal theory. Substantive theories provide a theoretical interpretation or explanation for a particular issue. By combining and conceptualising the results from several substantive theories, a more general formal theory is formed (Charmaz, 2006). Each substantive theory can help to refine the formal theory, or a formal theory can relate to several substantive ones. This type of theory is used to explain and manage problems in a specific setting. Formal theories are more abstract and provide a theoretical dealing of a generic issue, which can be applied to a wider range of disciplinary concerns and problems (Strauss, 1998).

The data has been developed to theoretical categories within this study and a substantive theory has emerged. The understandings within this have been derived from research with practitioners who deliver the Strengthening Families Programme. This is context-specific and is concerned with the process from the perspectives of the practitioners who participated in the research.

4.12 Maintaining Quality in this Constructivist Grounded Theory Research Project

Charmaz (2006; 2014) developed criteria for maintaining quality in the data collection and analysis phases of conducting constructivist grounded theory. The researcher committed to undertaking and maintaining quality within this research project and operated in line with the criteria for quality, as outlined by Charmaz (2006; 2014).

In addition, the PhD supervisors provided a layer of oversight and interrogation on a regular basis throughout this study. They questioned the researcher's approach and application of the research method and analysis. The consultative peer group was utilised during this research. They examined the data analysis and provided an additional layer of external oversight to the analysis of this project. This researcher examined the data collection and analysis undertaken during the course of the research

project against Charmaz's (2006; 2014) criteria for maintaining quality following the data collection and analysis. This will be presented in the appendices.

4.13 Conclusion

This chapter described the methodology designed and implemented to answer the aim and objectives of this research project. A comprehensive account of the positionality of the researcher and the implications of this current research project was provided, including a comprehensive rationale for locating the research within the interpretivist paradigm. The project is situated around the key ontological and epistemological issues. The rationale for the use of constructivist grounded theory has been comprehensively discussed. The use of online tools to facilitate the reflective journaling was detailed, as well as the suitability of one-to-one interviews. The changes to the original research design were explained. The ethical considerations of this research have been described. The data analysis process followed in this study was described, as applied in this research, in detail. Each element of the coding processes was explained. Figures were used to illuminate and provide clarity on the coding processes. The iterative process was complex, and the outlining of the steps taken during the coding processes supports the validity of the findings, as it demonstrates rigour of the design. The next chapter outlines the findings of this research.

Chapter 5

Findings

5. Introduction

This chapter presents the findings of the data analysis from this study. The theoretical categories have been developed using constructivist grounded theory, as outlined in Charmaz (2014) and described in the previous chapter. The analysis reflects the practitioners' accounts of their perceived experience of implementing the Strengthening Families Programme and how their construction of meaning influences their delivery of the programme. Excerpts from the interviews are provided throughout the chapter. The findings developed provide a contextual explanation for the factors that influenced practitioner decision-making in the context of their delivery of the Strengthening Families Programme. The analysis led to the development of five categories. These were considered to have the highest analytical value and relevance to the research question.

The five categories which have emerged from the analysis are:

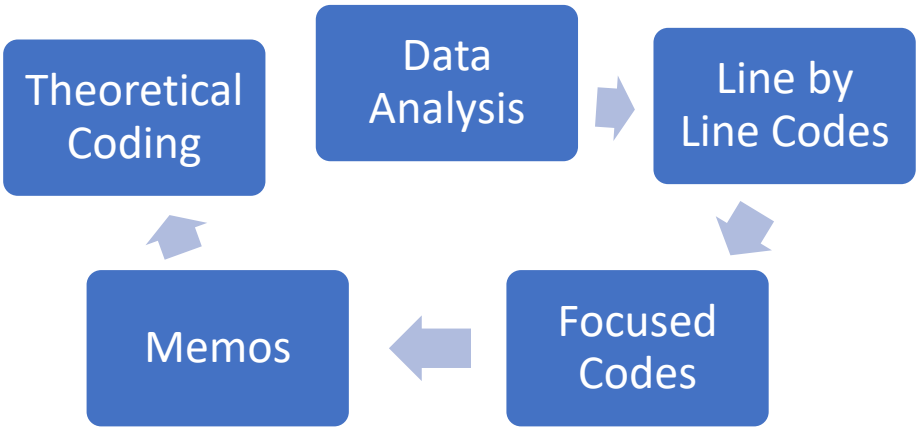
- Readiness for the Programme.
- Sufficient Cultural and Language Adaptation.
- Interagency Model of Delivery.
- The Prescribed Nature of the Programme.
- The Practitioner and Their Experience of Delivering the Strengthening Families Programme.

The development of categories using constructivist grounded theory seeks to understand the phenomenon from the perspective of those who experience it. The data collection tools, as outlined in the previous chapter are: reflective journal entries, interviews and memos (including observations and the researcher's reflective journal entries).

The findings of this research project have been arrived at by using the coding analysis process as outlined by Charmaz (2006; 2014). The iterative method as outlined by

Charmaz (2006; 2014) has led to the generation of theoretical categories which will be detailed later in the chapter. The data analysis is illustrated in Figure 9 below.

Figure 9 - Data Analysis



Each of the categories were built on several focused codes which were constructed from the initial coding. Each category will be presented in the following sections. The categories are perceived to be interactive with each other and meaningful only in the context of the total analysis. Each category will be split into smaller sections to detail the focused codes which, when combined, construct the category. The analysis of the data has contributed towards the development of theoretical categories, which together form the substantive theory. Each of the categories will be reported in turn.

5.1 The Practitioners

Figure 10 presents an anonymised overview of the qualifications and role of the practitioners at the time they undertook the delivery of the Strengthening Families Programme.

Figure 10 - Qualifications and Experience

Code	Qualifications	Role/Profession
P1	Degree in Counselling & Addition and many other certificates	Family Support Coordinator
P2	B. Comm, Higher Diploma in Education, Diploma in Social Care	School Completion Officer
P3	BA Liberal Arts, Diploma Youth & Community Work	Education Outreach Officer
P4	B. Arts	Youth & Community Worker
P5	Leaving Certificate & Diploma	Does not want to disclose
P6	Fetac Level 5 Childcare & Diploma in Youth & Community Work	Volunteering my time, not part of my job
P7	Diploma in Addiction Studies	Did the programme delivery as part of a student placement
P8	Diploma in Youth & Community Work	Family Support Worker
P9	B Early Childhood Education	Community Work
P10	Counselling Course	Family Support Worker
P11	Fetac Level 5, Diploma in Addiction Studies, Counselling Course	Drugs Worker
P12	Leaving Certificate, Student of Social Work	Did the programme delivery as part of a student placement

1. The column labelled 'code' contains the anonymised reference to the practitioners.
2. The column labelled 'qualifications' relates to the academic qualifications held by the participants, as identified by the practitioners.
3. The column 'role/profession' relates to the role held by the practitioners when they delivered the Strengthening Families Programme.
4. Practitioners P1 to P6 completed reflective journals and an interview while Practitioners P7 to P12 completed an interview.

The educational qualifications and professions are significant, as it highlights the 'real-life' implementation team and their experience and expertise.

5.2 Overview of Findings from the Reflective Journals

Reflective journal entries were completed by 6 practitioners who delivered the Strengthening Families Programme on one site. They completed a journal entry for each night they delivered programme sessions. In total 79 journal entries were received. Each practitioner recorded changes to the delivery of the programme, which included: omitting sections of the prescribed content, changing delivery methods, changing suggested icebreakers and roleplays, and omitting discussions.

From the research journals no completed sessions of the programme were delivered absolutely, as prescribed in the Strengthening Families Programme manuals. A change was identified in the delivery of all sessions of the programme. This is an important

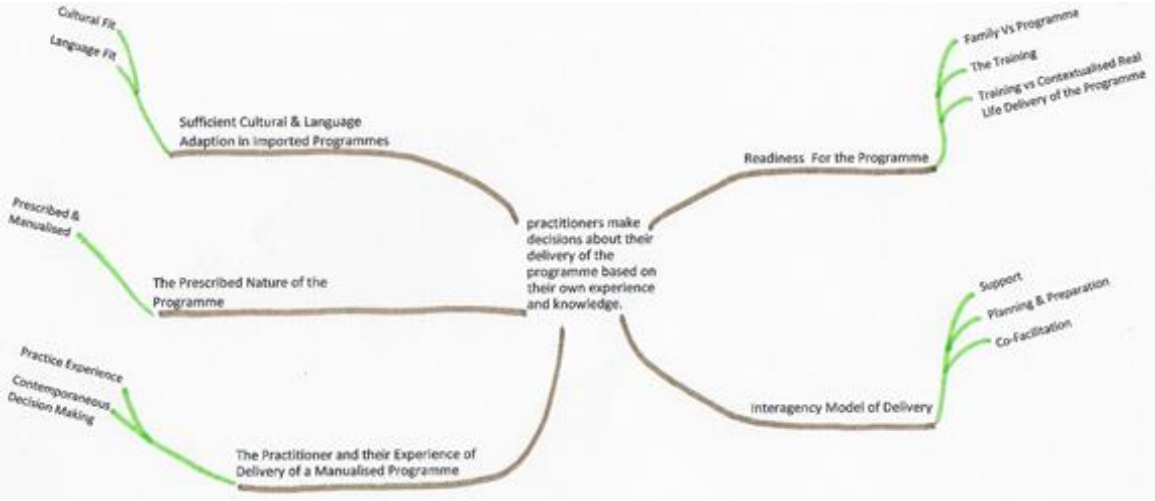
finding, as it highlights challenges in the delivery of the programme in a 'real-life' context, compared to delivery in test conditions.

All practitioners except one, Practitioner 4, viewed their changes to the sessions as not affecting the integrity of the programme. Practitioner 4 notes in some sessions that the changes may have affected the integrity, did affect the integrity, or didn't know if they affected the integrity. In some of the reflective journal entries, when asked, practitioners state that they made no change to the delivery, as prescribed by the manuals. However, within the same reflective journal entries they refer to changes made. This demonstrates the adaptation of the programme unconsciously by practitioners. Again, this is a substantial finding as to the planned and reviewed delivery of the manualised programme by practitioners.

5.3 Development of Categories

The following describes the development of the theoretical categories and the focused codes that contribute to the categories. The image below highlights each of the categories and focused codes that contribute to the substantive theory emerging from this research.

Figure 11 – Categories Developed Within this Research Project that Contribute to the Substantive Theory



At the centre of the image is the substantive theory, developed from the application of constructivist grounded theory to the data collected. The theoretical categories that

make up the substantive theory are denoted by the brown lines. The focused codes that contribute to each theoretical category are highlighted by the green lines.

The theoretical categories and focused codes contribute to the substantive theory and will be described next.

5.4 Theoretical Category One: Readiness for the Programme

This category developed during the coding and analysis of the data gathered during the interviews. Readiness for the programme emerged as a complex category relating to both the practitioners and the families who engage with the programme. Both will be explained separately in the following sections.

5.4.1 Readiness for the Programme (Families)

This concept was developed from codes relating to the contextuality of families, family life, and issues encountered by the families who participate in the Strengthening Families Programme. The category contains the following focused code:

- Family vs Programme.

This focused code encompasses several initial codes.

5.4.1.1 Code: Family Vs Programme

Practitioners expressed a belief that the programme did not always *'fit'* the families who engage with it. The code 'family vs programme' emerged from the data whereby all of the practitioners had highlighted that, based on their experience, they perceived that the programme required some tailoring to fit the families who presented. A range of codes informed this focused code: family, diverse, fit, programme, manuals, not for everyone, needs, respond, issues, and context.

The findings highlight that the practitioners recognise differences among the families who attend the Strengthening Families Programme.

> *"Families are coming in diverse* forms." - Practitioner 10

They point to the diversity between the family forms who attend the programme. The diversity among the families appears to influence the need to change the programme. Additionally, they highlight that the sessions as they are set out do not fit for those who engage with the programme.

Practitioners refer to the application of their professional judgement when delivering sessions of the programme. They speak of considering the family context as an influencing factor when they consider the need for changes to the programme.

> *"You have to size up who your group are, where they are coming from, what are the issues in the families."* - Practitioner 4

In addition, they note that the parenting status is a consideration when planning the delivery of the programme.

> *"Have you a mixture of single parents, or non-parents or are there couples?"* - Practitioner 4

Consideration is given as to whether the parents are single or presenting as a couple to the programme. Consideration is given to the presentation of the parents when considering changes to the programme delivery.

Practitioners speak of the contextualised lives of the families who engage with the Strengthening Families Programme. All practitioners refer to the varied and numerous issues presenting among the families.

> *"Things are chaotic. They're high risk. There is relationship breakdown."* - Practitioner 9

As highlighted in the above quote, they remark that the lives of the families are chaotic. They note that there is a communication breakdown among the families who engage with the programme.

> "*There's communication breakdown."* - Practitioner 9

Practitioners identify sexual behaviours among participants as well as attention-seeking behaviours.

"There would be risky sexual behaviours." - Practitioner 9

This is a consideration for making changes to the programme. They note that some families' lives are unmanageable.

"Their life was totally unmanageable, and they were out of control." - Practitioner 1

The term 'out of control' within the above quote offers a perceived context by the practitioner. The practitioners perceive that the contextualised lives of the families do not 'fit' with the programme and require them to exercise their judgement to implement changes to the programme.

Practitioners identify that families have a different capacity to engage with the programme.

"There is a capacity difference among families" - Practitioner 10

They note that different families have different capacities. They perceive it necessary to make changes to the programme to reflect the different capacities among families. The practitioners do not view the sessions as suitably broken down for the families. They acknowledge that additional support is required for some families. Practitioners note that families:

"need support" to reiterate what they've learned on the programme." - Practitioner 4

They view families as requiring support, outside of their attendance on the programme, to implement the learning from the programme. Consequently, they view it as necessary to implement changes to the manualised delivery of the programme.

Practitioners note that the changes to the programme are based on the perceived needs of the group:

"Once you get to know the group you know what you want to deliver and what's to tailor." - Practitioner 7

They provide a context to the rationale to change the programme delivery. The reason for change was to make the content and key message more relevant for the families who engage with the programme.

"*You need to make some changes for the good of the group."* - Practitioner 7

Practitioners were concerned about the presenting issues among families and the needs of those families. However, the practice knowledge and experience of the practitioners was also perceived to be a significant influence in relation to making change to the delivery of the Strengthening Families Programme, using phrases such as:

"from my work I know" - Practitioner 7

and:

"from experience of working with groups" - Practitioner 8

This focused code has emerged from the individual practitioners' constructions around the 'fit' of the programme and how the programme is at odds with the perceived contextualised lives of the families. The practitioners perceive that this misfit between programme and the contextualised lives of the families require them to implement changes to the programme content and delivery.

5.4.2 Readiness for the Programme (Practitioners)

Practitioners are agents of change within their delivery of the Strengthening Families Programme. They seek to engage the families in a process of change through their engagement with the programme. The issue of the practitioner 'being ready' for the programme delivery emerged from the data analysis. The following focused codes contribute to this category:

- The Training.
- Training Vs the Contextualised Real-Life Delivery of the Programme.

5.4.2.1 Code: The Training

The training is undertaken by all practitioners of the Strengthening Families Programme. It is a common factor among the delivery team. All practitioners

referenced the Strengthening Families Programme training during their interviews. This focused code includes: training, delivery, preparation, manual, programme, interagency, needs, real-life, context.

Practitioners identify areas that the training does not cover. They identify that there are other training needs aside from the specific programme training

> *"It doesn't give you very much of the group work skills."* - Practitioner 4

They note that group work skills are not adequately covered within the training programme. The practitioner implies that more time should be given to group work skills during the training of facilitators.

Practitioners speak about gaps within the Strengthening Families Programme training. Specifically, they consider a gap in the training related to the different types of families who engage with the programme.

> *"The training is good for the manuals but not for all the problems that the families bring with it."* - Practitioner 1

The practitioners feel that the training does not address the types of problems families encounter. They are of the view that the complexities of the families' lives are not addressed in the training.

There is a perception that the training alone is not adequate to prepare a practitioner to deliver the programme. Practitioners identify that:

> *"You do need additional skills; you do need additional training."* - Practitioner 8

They note that additional skills are required. They specify that additional practitioner training is required. While the training is necessary, it does not adequately prepare one to undertake the delivery of the Strengthening Families Programme. This is significant, as the training is one common factor between the practitioners, particularly in the Irish delivery context.

5.4.2.2 Code: Training Vs the Contextualised Real-Life Delivery of the Programme.

The code Training Vs the Contextualised Real-Life Delivery of the Programme emerges from the data and encompasses codes, including: preparation, manual, facilitation,

families, gap. There is a view among practitioners that the training is not reflective of the real-life setting that practitioners find themselves in when delivering the programme.

There is a perception among the practitioners that the Strengthening Families Programme Training does not adequately prepare one for the delivery of the programme. The practitioners highlight different elements of the programme that they view are not covered within the training. The training:

> "*doesn't in anyway whatsoever prepare you for the sheer volume of people."* - Practitioner 8

They identify that the training doesn't address the volume of people engaging with the programme. This refers to the size of the groups. This is interesting, as it points to a gap in the training based on the practitioners' 'real-life' implementation of the programme. Additionally, it is noted that the training doesn't prepare practitioners for:

> *"all of the chaos and issues that are presenting […] I don't think the programme training prepares you."* - Practitioner 8

They perceive that there is chaos and other issues presenting among the families who engage with the programme. They opine that the chaos and issues found among families are not addressed within the training. Again, this is interesting, as the deficit in the training is highlighted by a practitioner who has undertaken the training and delivery of the programme.

There is a view from the practitioners that the training is not reflective of the 'real-life' delivery setting. The practitioners distinguish a difference between the training and the delivery of the programme to families.

> "*You're prepared to deliver the programme. But I don't necessarily think you're prepared to deliver the programme to families."* - Practitioner 10.

The training is viewed as providing information on content, rather than on delivering the training to families. Additionally, they reference families with:

> "*presenting behaviours with fierce complexity and issues." - Practitioner* 10

This is a different practice context to what the training presents. This is significant, as it highlights a practice-based mismatch between training and implementation. The training is also identified as:

> *"an artificial situation."* - Practitioner 10

The training platform does not represent or replicate the presenting complexities of family life as encountered by the practitioners when they deliver the programme. Again, this highlights the perceived gap between the training methods used, the preparation, and 'real-life' delivery of the programme from the perspective of the practitioner.

There is a perception that the Strengthening Families Programme training does not sufficiently prepare them for the 'real-life' implementation setting. Given that all practitioners undertake the training and that it is the one common factor among them, it is significant that they identify deficits in the training based on their practice experience of engaging with the training and delivering the programme.

5.5 Theoretical Category Two: Sufficient Cultural and Language Adaption of the Programme

The adaptation of the Strengthening Families Programme for the purposes of making the content 'more Irish'-appropriate emerged from the data analysis. The focused codes within this concept are:

- Cultural Fit.
- Language Fit.

The development of these codes is outlined next.

5.5.1 Code: Cultural Fit

This emerged from the codes where practitioners highlighted culture and the cultural context relating to the delivery of the Strengthening Families Programme. A range of initial codes within this focused code include: Irish, American, culture, rural, not adapted.

The cultural relevance of the programme to the Irish context was perceived by the practitioners to require some work, as it did not 'fit'. Specific instances of cultural

misfits were identified by practitioners who perceived the programme to not fit currently with the cultural frame in Ireland.

> *"There's a cultural piece that needs to go in there as well."* - Practitioner 10.

They highlight that there is a cultural element which needs to be considered in the delivery of the programme. The need to provide Irish-appropriate cultural context is identified as a reason for which changes are made to the programme.

Practitioners distinguish between the American development of the programme and the Irish young people to whom it is delivered.

> *"Some things are very American and life is different for Irish young people, especially ones in rural areas."* - Practitioner 10.

They note that life for Irish young people is different. The practitioner further elaborates that living in a rural area is different again, even for Irish young people. This is a significant finding for programmes that are created in one cultural context and imported to another. They explain that the programme is not adequately adapted based on their experience.

> *"It's not relevant for the Irish context in its format at the moment."* - Practitioner 6

Practitioners note that they make changes to the programme to make it relevant to the Irish context. This again is particularly significant, as the Strengthening Families Programme has undergone updates to make the programme more Irish-appropriate.

The practitioners view that the American context of the programme requires changes. This is based on their practice experience of working with families in the Irish context and their experience of the delivery of the Strengthening Families Programme. They perceive that the contextualised lives of the Irish families who engage with the Strengthening Families Programme do not 'fit' with the manualised content. This requires the practitioners to exercise their judgement and to implement changes to the programme.

5.5.2 Code: Language Fit

Language fit emerged as a focused code during the analysis of the data. All practitioners viewed the language within the programme as requiring change. They viewed the language as 'very American'.

The practitioners perceive the language in the programme to be too American. This is quite significant, particularly as the programme has been adapted for the Irish context.

> *"I don't like a lot of the language as it is still quite American."* - Practitioner 8

They note that the language within the programme content and manuals is still quite American. Additionally, they opine that the language has not been sufficiently adapted for use within the Irish context.

> *"The language of the programme and the way in which the concepts are put forward are still very American."* - Practitioner 9

Practitioners note that the language and concepts are still American. As a result, they make changes to the programme to make it easier to understand for an Irish context.

The practitioners note that the language requires change when delivering the programme, which is a significant finding. They remark that the programme is very wordy and that there is too much talking and discussion.

> *"The programme is very wordy [.] and a lot of talking and discussion going on."* - Practitioner 11

They view some of the content as unnecessary and:

> "*fluffing it out for the sake of it."* - Practitioner 11

They note making changes to the programme content to make it more relevant and comprehensible for the families.

The practitioners view that the language of the Strengthening Families Programme requires change. This arises from their practice experience of working with families in the Irish context and their experience of the delivery of the Strengthening Families Programme. They perceive that the language of the programme does not fit with the

Irish context and is still 'too American'. This requires the practitioners to exercise their judgement and to implement changes to the programme.

5.6 Theoretical Category 3: The Interagency Model of Delivery

The interagency model of delivery, as having specific considerations, emerged from the analysis as a theoretical category. This category is supported by the following focused codes:

- Support.
- Planning and Preparation.
- Co-facilitation.

The development of these categories from the data are outlined as follows.

5.6.1 Code: Support

The code support has emerged from the data and includes: support, supervision, team meetings.

The data from this research project suggest that the practitioners of the Strengthening Families Programme associate their support for the role with the Site Coordinator, as noted by Practitioner 11:

> *"The Site Coordinator sorted out the small things." – Practitioner 11*

This is particularly interesting, as the Strengthening Families Programme is delivered using an interagency basis in Ireland. Each practitioner will have a manager within their own agency with whom they can engage for support. However, the extent to which the Site Coordinator was utilised or provided support to practitioners varied. The Site Coordinator was viewed as a significant support resource by some, as outlined in the following quote:

> *"I had a very good relationship with the site coordinator, they've been very supportive."* - Practitioner 6

Practitioners note that the Site Coordinator has been very supportive. The extent to which they felt the need to engage with the Site Coordinator varied. Some advised that they did not feel the need to engage with the Site Coordinator:

"I didn't need that much support [.] the coordinator who was there at the time was there if I needed support." - Practitioner 13

Some practitioners perceived that they did not need much support. They acknowledged that the Site Coordinator was there if they needed support. Support was available for practitioners; some chose not to engage with it. This is an interesting finding, as it highlights the differences among the support levels needed as perceived by the practitioners.

Peer support provided the support platform for one of the practitioners.

"My support came from my peer facilitators in that group." - Practitioner 12

Some practitioners identified that their support was provided by co-facilitators, rather than the Site Coordinator or support within their own organisation. Additionally, some practitioners view support for their involvement with the Strengthening Families Programme arising from management structures within their own agency.

"We meet for a staff meeting on a weekly basis and if there's anything that has come up, we can discuss it there." - Practitioner 3

The support of practitioners to engage with the Strengthening Families Programme is interesting, as a number of support mechanisms have been identified. However, given the interagency nature of the delivery of the programme, it is significant that no formal process is noted by practitioners.

Mixed levels of understanding of the Strengthening Families Programme among agencies was noted by practitioners. There was a perception that some agencies, while they have a broad knowledge of parenting programmes, they do not understand the workings of the Strengthening Families Programme. Practitioners perceive that there is a disconnect between their agencies and their understanding of the delivery of the programme.

"I don't think they get what it's like to be on the ground delivering." - Practitioner 4

They believe that the manager or agency doesn't have an understanding of what is involved. Additionally, the practitioner notes the delivery of the Strengthening Families Programme as a:

> *"lived experience"* - Practitioner 4

The practitioner has constructed the experiencing of implementing the Strengthening Families Programme as a lived experience. This asserts that one has to live or go through an experience to understand that experience. They note that:

> **"***there is a lot of pressure"* - Practitioner 4

when delivering the programme. They describe feeling a lot of pressure when engaging in the delivery of the programme.

The demands of the programme are misunderstood by line managers, according to practitioners. They describe how the expectations of the agency do not understand the impact that delivery of the programme has in relation to their workload. The practitioner notes that they are thinking about the delivery of the programme before they attend the preparatory session.

> *"I basically spend my whole day thinking about SFP on the day its being delivered."* - Practitioner 9

They highlight that even though they are delivering the programme, their agency seeks to assign additional work.

> "*Then when there's extra work [...] I'm not really able to respond to that."* - Practitioner 9

Lack of understanding by the agency of what delivering the Strengthening Families Programme entails is indicated as an issue. Additionally, the agency does not appear to balance their workload to reflect involvement in the programme, as the practitioner refers to the assignment of additional work. This is particularly significant given the interagency delivery model used in the Irish context.

5.6.2 Code: Planning & Preparation

This focused code was developed from a number of other codes including: preparation, meetings, pre-programme meetings, knowing your family, support from agencies.

Planning and preparation were illustrated in such phrases as:

> *"You'd be checking with your co-facilitators, saying what do you think, this might work better, what if we did this instead of this?"* - Practitioner 11

They are checking with their co-facilitators and asking questions about what changes may be made to the delivery of the programme. They are exploring the application of changes with the other practitioners. Changes to the programme are made during the planning of session delivery, based on practitioner discussion.

Practitioners highlight that the current preparation time allocated to deliver the programme is unsatisfactory. The current delivery time of three hours given by agencies to practitioners to deliver the programme is insufficient.

> *"I think this piece of 'yeah, I'll give you three hours to deliver the programme' is a bucket of shit."*- Practitioner 12

The delivery time given by agencies does not reflect the real-life setting and what is required to deliver the programme. This is interesting to the interagency nature of delivery in the Irish context. Additionally, another practitioner highlights that their role within the Strengthening Families Programme is in addition to their job.

> *"It's not part of our job, we do it outside of working hours, but we would get time back."* - Practitioner 3

The involvement with the Strengthening Families Programme delivery is not part of their role. It is in addition to their work. However, their agency operates time off in lieu for their facilitation of the programme. This again is interesting to the interagency nature of delivery.

5.6.3 Code: Co-facilitation

Co-facilitation emerged from the data analysis as a focused code. This focused code includes: co-facilitator, facilitation, interagency, agencies, organisations, ethos, style, training, approach.

Practitioners notice that some of their co-facilitators are inflexible in their delivery of the programme. They highlight that some practitioners only wish to deliver the programme to one group. Some practitioners are viewed as *"not willing"* to deliver the programme to specific groups or don't wish to facilitate specific groups.

> *"They're not willing to get involved in the facilitation of the teen groups.* - Practitioner 11

This is interesting given the interagency nature of the programme delivery.

In contrast, some practitioners point to their co-facilitator and the wider delivery team as a great source of support. They view their co-facilitators as "*very helpful*". It is noted that some practitioners imparted the benefit of their experience and provided them with tips about changing the programme.

> *"The other facilitators were very helpful to me and gave me tips with changing the programme as some of them had run it before."* - Practitioner 7

This is interesting, as it demonstrates that the changes made are not made by an individual only, rather by collaborative decision-making. They are sharing information and discussing the programme and changes based on their practice experience.

Practitioners additionally inform that they view themselves or their colleagues as *"strong"* (Practitioner 6) or *"weak" (*Practitioner 11) with regards delivery of certain elements of the programme and with particular groups. This is significant, as it points to the level of experience within the delivery team. The practitioners advise that delivery of the programme is planned around the strengths and weaknesses of their co-facilitators. They are required to exercise their judgement and consider what changes should be made to the session content based on the strengths and weaknesses of the practitioners.

Practitioners recognised that sometimes co-facilitation is a consideration regarding making changes to the programme. This is an important point. They note the different backgrounds of the delivery team and how their backgrounds and practice experience have implications for delivery.

> *"Facilitating with somebody who was from an [...] background previously. They would have really struggled to manage the group because in their [...] setting they were in a position of authority, whereas you're trying not to be authoritarian."* - Practitioner 9

It is significant that they view the education and background of the practitioners as a consideration when making changes to the programme. This is also interesting in terms of the training and how such differences might be managed during the training.

The recruitment of practitioners to deliver the Strengthening Families Programme is noted as challenging.

> *"It's really hard to get facilitators."* - Practitioner 11

It is highlighted that it is the same individuals who are engaged in the programme delivery regularly.

> *"It's the same people from the same agencies all the time."* - Practitioner 10

This is significant to the interagency delivery context. This is also pertinent to the recruitment of practitioners with suitable skills and experience to deliver the programme.

Practitioners highlight the interagency co-facilitation relationship as a consideration for delivery on their part. They note that the agendas of the agencies who deliver the programme are not always the same.

> *"Sometimes you have to be politically aware in that the agendas don't necessarily match."* - Practitioner 4

They perceive that other practitioners may have different 'agency agendas' which one should be aware of. It is noted that the management of the different agency agendas requires consideration during implementation.

"How you navigate that then is important." - Practitioner 4

The practitioners perceive this as an additional element of consideration when delivering the Strengthening Families Programme. This is a curious consideration, as it raises questions for the interagency context of delivery of the programme and for the training of practitioners.

5.7 Theoretical Category 4: The Prescribed Nature of the Strengthening Families Programme

The prescribed nature of the Strengthening Families Programme emerged from the data analysis as a theoretical category. The focused code supporting the category is:

- Prescribed and Manualised.

The details of this focused code are outlined next.

5.7.1 Code: Prescribed and Manualised

The code emerged from the data and describes the prescribed manner of the programme. This focused code includes other initial codes, including: rigid, manual, manualised, too long, repetition.

The practitioners speak about the duration of the programme. They perceive that the 14-week intervention is too long in some instances.

"I wonder is the 14 weeks a little bit long." - Practitioner 3.

The practitioners query if the 14-week duration of the programme is too long. They also articulate frustration around the manualised programme, its length, and when concepts are introduced to the programme.

"The concepts for the families need to be brought in sooner." - Practitioner 13

The need to introduce the concepts or content at an earlier point in the programme is highlighted. Additionally, the practitioners note their frustration with the prescribed programme, as in their view:

"*you're not doing very much for a good few weeks and then you're kind of overloading them with concepts."* - Practitioner 10

The pacing of the programme is identified as an issue for practitioners, as they consider the key issues are being introduced all together. There is a perception that the programme is overprescribed and a view that the key messages should be introduced at earlier points in the programme.

The prescribed timings of the session plan, as set out in the manuals, is questioned by practitioners. They identify reasons as to why the timings are not always appropriate.

> *"The capacity of the parents is always different. Where they're coming from, their life experience is different as well, so you have to take that into account."* - Practitioner 9

They point to the capacity of parents and their life experience and perceive these as needing consideration when delivering the Strengthening Families Programme. This is an interesting finding, as it highlights the practitioners' perception that the manualised programme is an ill fit with the contextualised lives of the families who attend the programme.

The prescribed and manualised nature of the programme was viewed negatively by the practitioner. They view the manualised programme *"like lectures"* (Practitioner 8). They view the delivery methods of the programme to be similar to lectures. For this reason, practitioners identify that changes to the delivery methods of programme are required. It was assessed that the parents would not appreciate programme delivery in the form of lectures. Practitioners' perceive that the prescribed approach, as set out in the manuals, requires change.

The practitioners view the programme as deficient in terms of its relatability and relevance to the lives of the families who engage with the programme.

> *"I think the programme needs to be updated to reflect what's really happening."* - Practitioner 12

It is viewed that the prescribed nature of the programme does not consider the context or culture within which it is delivered. Additionally, the programme does not take account of contextual or cultural changes that may have taken place in recent years. The programme is not viewed as engaging for the families.

"If you want the programme to be current and engage young people and relevant to parents, it has to shift." - Practitioner 12

The programme is perceived as not having an impact on the young people and parents because of its prescribed and manualised nature and for this reason requires change.

5.8 Theoretical Category Five: Demonstrated Autonomy of the Practitioner

The application of decision-making skills throughout the delivery of the Strengthening Families Programme emerges as a theoretical category. The focused codes that make up this category are:

- Practice Experience.
- Contemporaneous Decision-making.

5.8.1 Code Practice Experience

The focused code 'practice experience' developed from the practitioners' references to their work experience, previous experience of delivery of the Strengthening Families Programme, or other experiences which inform their delivery of changes made to the programme.

Practitioners reference their jobs in relation to the delivery of the Strengthening Families Programme, demonstrated by the following:

"I'd always be bringing my own job in the (anonymised) to SFP and using that in how to plan the SFP." - Practitioner 11

This evidences the practitioner's autonomy in relation to the delivery of the content and changes made to the programme. They explain that their practice experience influences their delivery of the programme.

"I've used my own experiences to enhance the programme." - Practitioner 12

Again, their practice experience is highlighted as a rationale for making changes to the programme. The practitioners argue that changes to the programme, based on their experience, are necessary to enhance the programme for the families.

"I'm going on my experience, from what I know." - Practitioner 9

They demonstrate their autonomy and engagement in reflection when making a change made to the programme. They explain that practice experience with groups is important within the context of delivering the programme.

> *"I suppose I would always make changes ultimately [...] doing the teen group previously or parents' group previously."* - Practitioner 6

Previous learning, from doing the teen group or parents' group, feeds into the process of delivering the programme and informs the practitioner in relation to changes made to the programme.

All practitioners relayed changes that they had made to the programme during delivery. They regularly make note that the needs of the family or the needs of the group are significant in terms of why revisions and changes are made to the prescribed programme content.

> *"We have to tweak the programme to make it fit for the groups we have or the issues that are coming up for the families in those groups."* - Practitioner 4

Again, this is significant, as it demonstrates the reason why changes are made to the programme.

The practitioners identify that they are applying multiple layers of experience and learning to their delivery of the Strengthening Families Programme. They identify the factors that influence their decision to make changes to the programme.

> *"I take into account what the manuals tell us to do."* - Practitioner 4

The practitioner notes that they consider the prescribed programme content when considering making changes to the programme. In addition, previous experience of working with teenagers or parents informs their decisions:

> *"Working with teenagers or working with parents, you take that into account."* - Practitioner 4

Also, other general experience of group facilitation is considered when deciding what changes to make to the prescribed programme delivery.

> *"Previous experience of facilitating groups and things like that all feeds into how you deliver the programme."* - Practitioner 4

Practitioners speak about various elements of practice experience that influence their decision-making in the context of programme implementation.

5.8.2 Code: Contemporaneous Decision-making

This emerged from the data and relates to references about changes made to the programme contemporaneously. This focused code contains codes including: families, needs, issues, presenting, on the night, change, go with it.

Practitioners perceive that changes are required "in session" without prior planning and that the adaptation that occurs during a session is required.

> *"Sometimes in the group the parents, they go off on a tangent about something and its good for them to follow with that, so we just have to go with that."* - Practitioner 8

The "in session" changes are in response to the family's needs, as perceived by the practitioners. The practitioners also demonstrate a judgement about the need of the family - *"it's good for them"* (Practitioner 8) - by allowing the change to take place. This is significant in the context of the manualised programme, the contextualised lives of the families, and the decision-making of the practitioner.

Practitioners reference the feelings and emotions of families who engage with the programme.

> *"They were frustrated, they were a little bit upset and they wanted to talk about what was going on."* - Practitioner 4

The practitioner perceives the families to be frustrated and upset. This is framed as a rationale to change the programme on that occasion. It:

> *"did not feel we could just say 'right that's grand that you're feeling like rubbish, but now we need to move on in this session.'* - Practitioner 4

The quote highlights the decision-making process of the practitioner, who opines that the participants, within their current state, were not going to be conducive to an

effective group work programme on this occasion. Reflection in practice and reflection on practice by the practitioners emerges as a significant finding. Practitioners are engaged in reflection contemporaneously while delivering the programme. This reflection is not undertaken by way of a formal process during the session, but rather on an *ad hoc* basis as issues emerge. The decision-making process is undertaken informally as groups engage with the programme, or not, or as issues emerge from the families. This is interesting, as it demonstrates the application of practice experience and decision-making by the practitioners.

The practitioners highlight the need to change the programme contemporaneously based on their perception of the family needs or group needs. These changes are viewed as necessary by the practitioners. They advise that this arises because the programme is not recognising or responding to the needs of the families who present on the programme. They describe their experience of using their own critical analysis skills and decision-making skills within the context of their delivery of the Strengthening Families Programme. They reference their experiences as a basis for making decisions about changing the programme. The reflection of the practitioners while in practice and on their practice emerges as a key finding, as the programme design does not accommodate practitioner reflexivity. This is significant in terms of reflective practice of practitioners and in the context of programme implementation.

5.9 Practitioner Positivity Towards the Strengthening Families Programme

This research examines the application of the programme by practitioners in 'real-life' settings and demonstrates that changes are made to the programme during the implementation. This is a significant issue that relates to the context and culture that programmes are exported to and implemented within. While practitioners have identified elements of the programme that they view are not reflective of the implementation context, they highlight positivity towards the programme as an intervention. Practitioners noted that the structured, manualised approach was a positive element of the programme.

The programme was identified as helpful for families to learn skills.

'a nice manageable way for families to be able to learn how to be families again.'
- Practitioner 1

The structured approach to lessons and learning was viewed as a positive way for families to learn skills and learn about being a family. In addition, practitioners also highlighted that they viewed the manualised programme positively.

'I like the structure and I like that it lays out exactly what you should be seeing and what you should be doing, it's a really detailed outline of how you should be delivering a program.'- Practitioner 6

The layout of the programme and implementation information for the practitioners was identified as detailed. It provided information about what the practitioners should be doing and delivering, which was recognised as positive.

In addition, practitioners view the programme as an effective programme for use with families.

'It's a very good programme and I think it's very effective and I've seen it to work really well for families.' - Practitioner 8.

The practitioner references their practice experience and experience of the programme as being effective with families.

Though this research highlights changes that have been made to the programme, the practitioners are quite positive about it, as a whole. As practitioners view the programme to be of benefit to families, but are implementing changes. This highlights the need to examine the integrity of the programme in a way that accommodates the collection of contextual information, rather than just quantitative information. This research has provided the opportunity to do so.

5.10 Conclusion

This chapter presents a detailed overview of the development of the analysis and the constructed categories. Five categories generated from the data provided an overview of the findings of this research project. The five categories include: 'Readiness for the Programme', 'Sufficient Cultural and Language Adaption', 'Interagency Model of

Delivery', 'The Prescribed Nature of the Programme' and 'The Practitioner and their experience of Delivering the Strengthening Families Programme'. The categories were constructed from a number of focused codes perceived to be interactive with each other.

The analysis shows that the influences on practitioner decision-making were complex. Some are directed by the families' presentation and others by the professional judgement of the practitioner. The practitioners engage across all categories with flexibility. The analysis highlights key findings significant to the delivery of the Strengthening Families Programme neoliberalism, reflection, and implementation science. The findings also identify that while practitioners engage in making changes to the programme, they are positive about the Strengthening Families Programme as an intervention. The next chapter will focus on a discussion of the findings with regard to the contextualisation of the analysis of the study.

Chapter 6

Discussion Chapter

6. Introduction

The principal aim of this research project is to create an understanding of the factors that influence practitioner decision-making in the context of delivering the Strengthening Families Programme. Within this chapter, each of the findings will be discussed. The theoretical categories that have emerged from the data analysis, as outlined by Charmaz (2006; 2014), are:

1. Readiness for the Programme.
2. Sufficient Cultural and Language Adaption in Imported Programmes.
3. Interagency Model of Delivery.
4. The Prescribed Nature of the Programme.
5. The Practitioner and their Experience of Delivering a Manualised Programme.
6. Implementation Fidelity.

The findings provide important insights into the delivery of evidence-based programmes as well as identifying the factors that influence practitioners when implementing the Strengthening Families Programme. This study is one of few qualitative studies in the international literature that have examined the process of delivery of an evidence-based programme and implementation issues using qualitative research tools.

The findings show practitioners demonstrate application of reflective practice in relation to the intervention and its suitability for the delivery context. This questions the neoliberal rationale and promotion of such interventions. It challenges implementation science and the dissemination of programmes into other delivery contexts.

It is necessary to examine each of the findings, as they have their own complexities and nuances that require specific attention for the purposes of discussion. These will be considered in relation to the literature presented in Chapter 2 and Chapter 3.

6.1 Theme 1: Readiness for the Programme

The Strengthening Families Programme is a manualised programme with the content delivered using a number of methods, including lectures, activities, discussion, and role plays (Kumpfer et al., 2010). Readiness for the programme emerged as a theme from the findings of this research project. The readiness of the families who engage with the programme as well as the readiness of practitioners to deliver the intervention are discussed in the following sections.

6.1.1 The Families and their Readiness to Engage with The Strengthening Families Programme, as Perceived by the Practitioners.

The families and their readiness to engage with the Strengthening Families Programme emerged as a key factor for consideration by practitioners when delivering the intervention. The Strengthening Families Programme does not offer specific guidance on the preparation of families who undertake the programme. An interagency model of delivery is used in the Irish context whereby a number of agencies release staff to deliver the programme. This contrasts with other jurisdictions, where one agency provides all the staff for the programme delivery. This is a challenge to implementation science, as the context for delivery is significantly different in the Irish setting than in the test settings.

The result of this unique implementation and dissemination process in Ireland (Kumpfer et al., 2012) is that some families will not have met any of the practitioners prior to attending the programme. In some instances, pre-programme meetings take place with families to establish needs regarding transport, catering, etc. (O'Leary et al., 2015).

The extent to which referral agents prepare families to engage with the programme also surfaces as a variable. This raises interesting questions for neoliberalism and its policies of manualised and standardised programmes. The neoliberalist policy is challenged by the variation in pre-programme preparation of families.

It was conceived by the practitioners that the programme required some tailoring to fit the needs of the families who presented. It emerged that, when preparing to deliver a session, practitioners considered how the programme could be changed or altered to make it easier to understand for those attending.

The findings show that practitioners identify families attending in diverse forms and in presenting behaviours. The contextualised lives of families are perceived by practitioners to be at odds with the manualised programme. Practitioners consider the contextualised lives of families when making changes to the programme. Additionally, practitioners make reference to families not being 'ready' for the programme, which is highlighted as another factor when making changes. This challenges neoliberalism and the move to utilisation of standardised interventions for families. It also raises issues for dissemination of evidence-based programmes. It may highlight the need for training for agencies who refer families to programmes, to ensure common understanding about families 'being ready' to engage with the intervention.

Traditionally, the nuclear family was the leading representation of family in decades past. The family unit is now more diverse, with one-parent families, co-habiting couples, and same-sex couples with children (McKeown et al., 2004; CSO, 2017) contributing to the makeup of families in Ireland. The findings highlight that the practitioners perceive differences among the families who attend the Strengthening Families Programme.

> *"Families are coming in diverse forms and presenting behaviours..."* - Practitioner 10

It highlights the varied types of families who attend the programme and issues affecting the families, as perceived by the practitioners. This influences their view of the need to change the programme.

Practitioners identify that the programme doesn't *'fit'* (Practitioner 4). They view the diversity among families as a rationale to change the programme. This challenges neoliberalism and the idea of the standardised intervention in relation to the changing context and behaviours of families.

Practitioners' representation of families as *'out of control'* (Practitioner 1) highlights the lived context of the families who engage with the programme as perceived by the practitioners. The practitioners refer to some families that *"need an awful lot more work than what the SFP can deliver"* (Practitioner 1). This again highlights the contextualised lives of the families. It challenges the ideal of standardised and manualised parenting

programmes as an optimum intervention, as families require more than a programme, as highlighted in this research.

The practitioners represent the lives of the families who engage with the programme, as contextualised. The practitioners view the contextualised lives of the families at odds with the programme, which they perceive as somewhat simplistic. The Strengthening Families Programme is positioned by practitioners as a 'one-size-programme-fits-all'. This does not align with the contextualised lives of the families who engage with the programme.

The use of the phrase *'handling their lives'* (Practitioner 1) also points to the struggles of parents and not just the children. The design of the Strengthening Families Programme is built on the premise that both parents and teenagers need to engage in training and learn skills. The practitioners note that the issues within the parents' lives are a factor which they consider in making changes or revisions to the session content. Practitioners reference chaos within the lives of the families. Many issues present among families, as highlighted in the findings:

> *"things are chaotic"* - Practitioner 9

The family context is a significant consideration for practitioners when considering changes to the programme. The findings of this research show that changes are made to the programme in response to the perceived context of families. This highlights a challenge for the dissemination and importation of evidence-based programmes, as the context of family will be different in each service delivery context. Where changes are made to such programmes, it is very difficult to measure the positive or negative impact on the effectiveness of the programme.

The practitioners highlight a wide range of issues affecting the families who participate in the programme. It should be noted that gender and poverty did not specifically emerge as issues from this research. However, the issues noted by the practitioners in this study are reflective of adversities such as abuse, domestic abuse, substance misuse, mental health, loss and separation, health, disability, and special needs found by Bunting et al. (2017) in The Troubled Families Programme in the UK.

Within the interagency delivery model, referrals to the programme are taken from a number of agencies, with varying areas of practice. While the Site Coordinator should engage in a pre-programme meeting with the families (O' Leary et al., 2015), it is unclear if family needs are established before the programme commences. There is arguably a difference between a referral from a mental health agency and an addiction agency in terms of their service focus and their perceived suitability for the programme by practitioners. This may have a bearing on the families who ultimately engage with the programme.

The contextualised lives of the families who engage with the Strengthening Families Programme, as represented by practitioners, also highlights the role of parenting and competency of parents. This echoes McKeown (2000), where the need for parent upskilling and training is highlighted.

Within this research, the practitioners further note that whether the issues present in one family or a number of families within the group, these are additional factors to be considered in delivery. The family context is a rationale for change, as identified by practitioners. This practice also echoes Scott and Dadds (2009), who argue that practitioners should use different strategies according to the demands of the situation when a parent or family is not benefiting from an intervention.

The research highlights that family context is a rationale for change by practitioners. This contradicts the premise that evidence-based, manualised, prescribed programmes can be implemented in different contexts.

The Strengthening Families Programme does not offer a view of the 'types of families' who should engage with the programme; however, high-risk teens were identified as the target group for the programme when Irish agencies initially contacted the programme creators (Kumpfer et al., 2012). No further information about the target group other than 'high-risk teens' has been located.

The Strengthening Families Programme was imported by the drug and alcohol services into the Irish context to address the need for a programme to respond to a wide range of poor and at-risk behaviours. These included social exclusion, crime, delinquency, substance abuse, educational disadvantage, homelessness, child protection, and

welfare issues (Kumpfer et al., 2012) as articulated by the drug and alcohol services and the Probation Service. The prescribed nature of the programme does not acknowledge the context of parenting or of behaviours of programme families. Parenting is a contextualised practice and differs from individual to individual and changes over time as highlighted by Halpenny et al. (2010) and Bronfenbrenner (1979; 1958). They argue that parenting evolves within specific social and cultural contexts.

Practitioners within this research note that changes are made to the programme based on the contextualised lives of the families. The findings of this research argue that the context within which parenting is undertaken and within which families live is being ignored in manualised programmes. This is a significant factor for implementation science in terms of the wider dissemination of manualised programmes into different familial and neighbourhood contexts.

There is also a perception among practitioners that families have a different capacity to engage with the programme.

> *"There is a capacity difference among families"* - Practitioner 10

The findings do not distinguish between the organisational capacity, time capacity, or the emotional capacity of families to engage with the programme. However, practitioners' understanding of capacity is significant when considering if and which changes should be made to the programme. The findings resonate with the view of Churchill and Clarke, (2009) who argue that it is important to acknowledge variables that impact on parents.

Evidence-based parenting programmes are a means of supporting parents in a formal capacity, which is underpinned by the basic assumption of a 'parenting skill deficit' (Barlow and Stewart-Brown, 2000). Given this assumption, and the complex needs within and between families, it seems somewhat unrealistic to expect that families have the same level of skill deficit, capacity, or education which is conceptualised by the manualised programme. While the Strengthening Families Programme does not specifically note a skills deficit among parents, it is a programme focused on developing skills among parents, teens, and families. By virtue that the programme develops skills, it could be argued that there is a skills deficit.

Within this study, the practitioners draw attention to the complex nature of the lives of families, requiring varying levels of support.

> *"... need support to reiterate what they've learned on the programme."* - Practitioner 4

Manualised programmes do not take cognisance of the fact that parents may have different baseline starting points and different support needs when undertaking such an intervention. Instead, manualised evidence-based parenting programmes impose standard starting points, standard learning of key messages, standard learning timeframes, and standard pace of learning on the families. Standardisation is the value, belief, and premise upon which manualised programmes are built. They do not take into account the varying complexities and contexts within which families live, which is a key consideration for practitioners in this research project. This is a challenge for the neoliberalist-favoured evidence-based programme, implementation science, and the dissemination of the programme to different contexts.

Discourse in current Irish child and family policy reports (McKeown, 2000; Department of Health and Children, 2000; Department of Children and Youth Affairs, 2014; Family Support Agency, 2013; Child and Family Agency, 2013) highlight the contextuality of the lives of children and families. The practitioners acknowledge that additional support is required for some families. This is significant, as it highlights a discrepancy between the standardised and prescribed nature of the programme and the practice experience and professional judgement of the practitioners.

The findings of this research project show that the practitioners perceive that different and varying levels of support are needed for families, to assist them in their learning of the parenting skills or key messages of the programme. This is reflective of Webb (2001), who argues that practice responses must change in response to the changed circumstances of families. Practice responses must take account of wider structural challenges, such as the social, political, economic, and organisational contexts, rather than rigid, inflexible interventions.

It is recognised in this research that parenting is a contextualised practice; however, parenting programmes have been developed at one place in time, often in different

countries with different familial contexts. This research highlights the challenges experienced by practitioners in practice when the value and belief premise on which the Strengthening Families Programme is built varies significantly from the profile of families who participate on the programme. This difference is a substantial issue for implementation science as to how evidence-based programmes can be relocated across context and adequately respond to the context and the profile of families who participate on the programme.

6.1.2 The Readiness of Practitioners to Deliver the Strengthening Families Programme

The readiness of practitioners to deliver the Strengthening Families Programme has emerged as a factor in the delivery of the programme. Little is known about the role of the practitioner in the delivery of manualised programmes in the practice context.

6.1.2.1 Qualifications and Experience of Practitioners

The Strengthening Families Programme does not provide a baseline criterion of what, if any, academic standard should be accomplished, or experience required by practitioners prior to their delivery of the Strengthening Families Programme. In the Spanish cultural adaptation of the Strengthening Families Programme, Orte et al. (2016) recommend that *"personal skills, programme knowledge, understanding of the theory of change of the programme and experience in family prevention"* (p. 101) should be considered when selecting practitioners to deliver the programme. This research project uncovered that there were varying levels of academic achievements and experience among the practitioners, as highlighted in Chapter 5.

The practitioners in this study, given the interagency delivery context of the programme, represent several different disciplines, most of whom have varied approaches to client-based work. It is worth noting that 5 of the 12 practitioners of this study hold third-level degrees. In addition, 2 practitioners delivering the programme were students. The knowledge and skillset among practitioners varies significantly within this one delivery site. Arguably, where there is a significant variation in education, knowledge base, and experience, the impact is unknown.

This highlights the difference between the teams delivering the programme in 'test conditions' under which evaluations are carried out. Such evaluations use highly-

trained and skilled staff (Scott et al., 2006), but this does not represent the 'typical' delivery teams. It does not represent the practice setting delivery teams. Evaluations are not representative of the available skillset and experience available when the programme is disseminated. In addition, the same skill level cannot be expected of two separate individuals delivering the programme, one of whom has academic qualifications or training three levels higher than another. Skillset and practitioner capacity will always be a variable for delivery.

It highlights the question as to whether the programme training can adequately prepare practitioners to implement the programme. It poses the question about the applicability of the intervention for 'real-life implementation settings' and how the Strengthening Families Programme, and evidence-based parenting programmes in general, can take account of the implementation team skillset post-evaluation phase. The training, experience, and skills base of the practitioners delivering interventions within the community may need to be examined a few years after the dissemination of a programme. This research suggests that the 'typical' delivery team does not reflect the delivery team within the programme evaluations. This has implications for implementation science and the validity of programmes following the dissemination of the programmes into the community to achieve the same outcomes.

The findings of this research project resonates with that of Gardner et al. (2016), who found that in their research sample of the parenting programmes examined these were generally implemented by senior local practitioners and researchers. Conversely, this research also reflects the findings of Scott et al. (2006); Axford and Morpeth (2013); Scott and Dadds (2009), who found that programmes are implemented by practitioners often without enhanced training on evidence-based practice. It is worth noting that that Furlong et al. (2017) found that practitioners of the Strengthening Families Programme who were inexperienced indicated that they felt out of their depth for the first number of sessions. While the report did not offer specifics, it may be reasonable to assume that the practitioners did not feel skilled to deliver the programme.

The findings of this research highlight a significant difference in the 'real-life' delivery teams and those who deliver programmes under evaluation settings. This is a

significant factor of variation. The delivery of the Strengthening Families Programme is carried out by practitioners who do not have representative levels of training and practice backgrounds of those involved in its evaluation. This is a concern for implementation science and the adequate dissemination of programmes, as well as maintaining fidelity, veracity, and outcomes of the programme.

6.1.2.2 Training

The programme creators require that practitioners undertake a two-day training to equip them to deliver the programme content to families (Kumpfer et al., 2010). The training, however, does not require any minimum standard of education or training in any discipline. It does require practitioners to have "group work experience"; however, this is a vague requirement, as the level and type of group work experience may vary significantly.

The findings highlight that practitioners identified gaps in relation to the training provided to practitioners. It was noted that *"it doesn't give you very much of the group work skills"* (Practitioner 4). The perception among practitioners is that additional skills are required to undertake the delivery of the Strengthening Families Programme. Specifically, facilitator training and experience of working with groups. "*You need a lot more skills" (*Practitioner 12).

While the training programme provides an overview of the scientific background of the programme, it does not provide any additional skills. This echoes other Irish research of the Strengthening Families Programme which found that practitioners should have additional group facilitation skills in order to deliver the programme (Sixsmith and D'Eath, 2011) and the need to re-examine the recruitment process of practitioners in a similar way. This resonates with wider discussion on the training of practitioners on the evidence-based programmes. The trainings of manualised programmes tend to focus on the evidence base of the programme and how to deliver the programme to parents, rather than upskilling or enhancing the skillset of the practitioner (Cotton et al., 2009) in Lucas (2011, p. 183). This poses the question of whether it is reasonable or acceptable to provide training to practitioners on the scientific basis of a programme and not on the group work skills, delivery style or method.

Even though the programmes are prescribed and manualised, this research highlights that it is not as simple as delivering content from the manuals. There is skill, analysis techniques, and contextual decisions involved in the delivery process of the programme by the very nature of the complexities of the families who engage with the programme. This challenges implementation science and highlights the need to look at the implementation of the programme from an alternative view and provide training on the implementation delivery process of the programme.

This research project also found that there was an ontological contradiction existing between programme design and practitioners' experiences of delivery. The practitioners identify a deficiency in the training related to the issues presenting among the families undertaking the programme. This research highlighted that the training did not prepare the practitioners for "*all the problems that the families bring with it"* (Practitioner 1). It identifies that training is not reflective of the real-life setting that practitioners encounter when delivering the programme. The research identifies that practitioners encounter families who present in "*diverse forms and presenting behaviours"* (Practitioner 10). The practitioners did not feel that the training sufficiently prepared them to deliver the programme to the families, who they perceived to have many issues. This raises the question as to whether practitioners view the programme as therapeutic, rather than skills-based. Do practitioners have unrealistic expectations about what they think the programme might be about and are they getting caught up in the presenting issues of families, rather than the delivery of a skills-based programme? As many practitioners use various therapeutic models within their professional roles, this raises questions for implementation science and for the adaption of programmes by practitioners.

Interestingly, the report from the Ballyfermot Strengthening Families Programme (2010) highlighted that families noticed that the practitioners did not seem familiar with the content and referred to their notes. The families note that the practitioners appeared uncomfortable with some elements of the programme delivery. This research identifies that many more skills are required to deliver the Strengthening Families Programme than the two-day training. This research also highlights a gap in the training for the programme whereby practitioners are not prepared for "*the sheer volume of people coming into the programme"* (Practitioner 8).

Given the interagency model used in Ireland, the various practice backgrounds, and experience of the practitioners, the training is the only consistent variable among the practitioners. The local contextual information regarding the numbers attending the programme emerges as a gap in the training within this research. The training and perceived deficiencies is a significant issue for manualised programmes, as this may be a barrier to achieving standard practice. It also has implications for implementation science and the development of training that encompasses the needs of practitioners in 'real-life' practice settings.

It clearly emerges from this research that the two-day Strengthening Families Programme training does not prepare practitioners for the real-life delivery setting. This research has identified deficiencies in the training. This lends argument to the need to re-examine the training for the Strengthening Families Programme practitioners. This may go some way towards ensuring a common skillset and experience level of practitioners who deliver the programme. In addition, the needs of practitioners and the skillset required to deliver a manualised parenting programme needs further investigation to establish if it is a specific programme issue or if it is replicated in other such manualised programmes. The training and perceived deficiencies is a significant issue for manualised programmes to achieve standardisation in the delivery of the programmes. It also has implications for implementation science and the development of training that encompasses the needs of practitioners to deliver evidence-based programmes in 'real-life' practice settings.

6.2 Theme 2: Sufficient Cultural and Language Adaption in Imported Programmes

The Strengthening Families Programme has been disseminated across countries and has been culturally adapted with "surface structure" changes to take account of cultural variations in communication, etc (Kumpfer et al., 2010, p. 217). Such cultural adaptations are undertaken by *"culturally sensitive group leaders"* (Kumpfer, 2014, p. 15). The adaption of the Strengthening Families Programme for the purposes of making the content more culturally and language appropriate emerged as a key factor for practitioners when making changes to the content and delivery.

6.2.1 Language Adaptation

The language as set out in the manuals and concepts is not viewed as appropriate or understandable by the practitioners based on their experience. All practitioners viewed the language used within the programme as requiring change. The practitioners perceive the language in the programme to be "too American". Practitioners view that the language has not been sufficiently adapted for use within the Irish context, despite having been adapted for the Irish context. The practitioners highlight that the language of the programme requires change, as the content is *"still very American"* (Practitioner 9).

While Kumpfer et al. (2010) inform that the language did undergo some surface changes to make it more relevant to the Irish audience, this research highlights that further adaptions are required. Little evidence can be located in the Irish context about language adaption of the programme. However, the findings of this research project also support that of the Ballyfermot Strengthening Families Programme (2010), where practitioners also reported adapting the programme as it had too many Americanisms. This is a significant finding, as it highlights the importance of language for the transferability of manualised programmes to other contexts. This research highlights the need to consider language adaptation of programmes when disseminated. It is a consideration for practitioners when delivering the programme content. The need to adequately adapt the language contained in manualised evidence-based programmes for the language context of the practitioners and the families emerges clearly within this study. This represents a considerable challenge for implementation science and imported manualised programmes, as it highlights the importance of adequately adapting the language to the context of those engaged with the intervention.

The practitioners highlight that some of the language used to deliver the key messages and programme content is a consideration for them when delivering the programme. They note that the programme is *"very wordy"* (Practitioner 11). The practitioners note that there are simpler ways of communicating the information that the programme prescribes, based on their practice experience.

The language used to communicate key messages is a consideration for the practitioners when considering changes to the programme. Language plays a crucial

role in communicating the learning and understanding of concepts. The use of language is linked directly to outcomes of programmes. This is significant in terms of all manualised programmes and particularly for imported programmes. The language context for practitioners and the families who engage with such programmes is a challenge for imported manualised programmes to ensure they are relevant and understandable for the families to whom the programmes are delivered.

A key finding of this research is that manualised programmes are adapted, rather than taking the lessons/key messages of the programme and adapting those for the Irish cultural setting. Practitioners note struggling with the American language and the language around key concepts. This finding lends strength to the argument that the surface adaptations carried out on the programme were not adequate or sufficient for practitioners to implement with ease and without change. The need for adequate and successful language adaptation is highlighted by practitioners in this research. This is a challenge for implementation science. Language adaptation of manualised programmes is a cultural concern for imported programmes. Programme designers and importing agencies must ensure that they are relevant to the new context and mitigate the risk that practitioners or families view them as inappropriate or unconnected with their lived experience.

6.2.2 Cultural Adaptation

The Strengthening Families Programme has been adapted and found robust in multiple replications, with positive results, among many different ethnic minorities and special populations (Kumpfer et al., 2003). The cultural adaptation of the programme emerged as a significant element from this study. The significance of cultural adaptation is represented in the literature. Axford and Morpeth (2013) argue that while a programme is found to be effective in one country, this does not necessarily translate directly to another country. The practice contexts are different to the 'test settings' (Freire et al., 2015) and the narrow quantitative examinations which are often used to examine outcomes in different settings.

The Strengthening Families Programme has been disseminated across many countries and different cultures. The programme creators advise that the programme was culturally adapted with "surface structure" changes to take account of cultural

variations in communication and enrolling of families (Kumpfer et al., 2010). This study offers a different view of the cultural adaptation by examining the views of the practitioners who deliver the programme in 'real-life' practice settings. It identified that it is a factor of consideration for them in their delivery of the programme. The findings from this research identify the cultural adaptation within the Irish context as insufficient.

Practitioners view elements of the programme, such as relationships and sexuality, as contextually different between the American culture, where the programme was developed, and the Irish culture. Practitioners view the programme as irrelevant for the context in which it is delivered.

> "*It's not relevant for the Irish context."* - Practitioner 6

Examples of such differences include the general cultural acceptance of various types of relationships in America and Ireland. There are different legal implications for relationships across cultures. Divorce has been available in America longer than it has been in Ireland. Gay marriage was legalised in Ireland in recent years; the same is not replicated equally across America. The age of consent differs between Ireland and America. Immigration and the cultural mix among the population is an element in Irish society in recent years, while it has been an element of the American society for much longer.

The findings of this research highlights that the Irish cultural context is different to the context within the prescribed manuals. The need to change the programme and make cultural adaptations emerges clearly from this research. Culture and cultural context play a crucial role in the communication and understanding of learning from the programmes. Cultural adaptations of manualised programmes are a concern for implementation science to ensure that they are relevant and appropriate to the new context.

The practitioners further note that there is an additional cultural context for Irish young people who live in rural areas. Within the Irish cultural context, practitioners identify a different cultural context related to the rural areas within which families live.

> *"Life is different for Irish young people, especially ones in rural areas."* - Practitioner 10

This is an interesting and significant finding. It points to the microculture within which a programme is delivered, rather than just the broad Irish cultural context. This is significant for implementation fidelity and the cultural adaptation and importation of manualised programmes. The cultural adaptation of programmes is an important factor of concern following the formal adaptation and dissemination process to ensure it is relevant and appropriate to the context. In addition, practitioners indicate that they are unsure or unclear about the delivery of the programme, as they viewed a particular lesson as irrelevant for the Irish context.

This is a significant for manualised programmes and implementation. As the programme is prescribed and manualised, if the practitioners are unsure or unclear about the contextual relevance of an element of the programme, it lends itself to the argument that the programme is insufficiently adapted. The need to change the programme and make cultural adaptations is highlighted again and highlights a challenge for implementation science and dissemination of programmes.

The majority of the research available in the Irish context is based on the LutraGroup recommended outcome and process evaluation (Kumpfer et al., 2012), which is concerned with the outcome effects following adaptation. The extent to which the intervention is sufficiently culturally adapted is not explored, rather the focus is on the outcomes. Within the current project, the cultural relevance of the programme to the Irish context was perceived by the practitioners as a misfit. Gorman and Balter (1997) highlight that cultural sensitivity acknowledges the differences in families, communities, cultures, and countries. This lends strength to the argument for more significant adaptations than the surface adaptations as undertaken in the Irish context of the Strengthening Families Programme (Kumpfer et al., 2010). The findings from this research highlight that the cultural adaptation undertaken is not sufficient and lacks the understanding of values and customs. Specific instances of cultural misfits were identified by practitioners, who perceived the programme to not fit currently with the cultural frame in Ireland.

"There's a cultural piece that needs to go in there as well as the legal elements and implications of relationships." - Practitioner 10

The findings of this research highlight the differences that practitioners perceive between the cultural background of the programme and the cultural context within which the programme is delivered. These findings are similar to Clarke and Churchill (2012), who argue that interventions and programmes are influenced by the neighbourhood within which the family lives. The practitioners within this research project are Irish and familiar with the Irish context within which the programme is delivered. Their view is that the American context of the programme is at odds with the Irish context and requires changes, based on their practice experience of working with families in the Irish context and their experience of the delivery of the Strengthening Families Programme.

In their research on parenting programmes, Gardner et al. (2016) note that there was little information about adaptations to content (if any). Much of the available literature about cultural adaptations looks at the effectivity of the programme before and after delivery (Holtrop et al., 2018; Glasgow et al., (2019). However, it may be argued that such measurements are possibly obtained in 'test settings' similar to the programme evaluations. This research offers a different insight into the delivery of a programme following adaptation to a cultural context. This research offers the insight of the practitioners post-dissemination phase of the programme, in the 'real-world setting'. The findings from this research project highlight that practitioners are making changes to the Strengthening Families Programme because they view it as insufficiently culturally adapted across some areas or issues. It also challenges the traditional view of implementation science and the use of quantitative methods or quantitative process-related questions which do not provide context to the implementation of evidence-based programmes.

The findings from the current research add further weight to the Ballyfermot Strengthening Families Programme Report (2010), which identified that further cultural adaptation is required to the Strengthening Families Programme. The extent to which a programme has been culturally adapted is a subjective experience in terms of the experiences of practitioners and families who engage with a programme. This

lends strength to the argument of how programme creators can determine if a programme is significantly adapted for a different cultural setting.

Given that programme creators may not have experience of the culture for which they are making programme adaptations, how can they determine if a programme is sufficiently adapted? Similarly, if the adaptation of a programme is delegated to an agency from the identified culture, what process is undertaken by that agency? Have they experience of working with the programme target group? Questions arise regarding how they can determine if a programme is sufficiently adapted. While this research doesn't specifically answer this, it may offer an insight into some strategies which could be considered. This is significant in terms of the examination of cultural adaptations of manualised, evidence-based programmes in general, given the large number of programmes available and the importation of such programmes across many disciplines.

6.3 Theme 3: The Interagency Model of Delivery (The Irish Context)

The Strengthening Families Programme is generally implemented by one agency, where staff are provided by the agency or are contracted to deliver the programme on behalf of the agency in sites such as the United States, United Kingdom, Italy, Sweden, and Germany. This contrasts significantly with the Irish context (Kumpfer et al., 2012). In Ireland, the Strengthening Families Programme is delivered using an interagency model of delivery. Each agency releases staff to deliver the programme. This model arose through necessity and neoliberal influences, as no one agency could release all staff to deliver the programme and no one agency had responsibility for the funding and dissemination of the programme (Kumpfer et al., 2012).

Little research or information is available on the interagency element of the programme delivery. This study offers a unique view of the model of delivery. It was identified as a factor of consideration for practitioners when delivering the programme. The findings from the research project highlight challenges associated with the model which contribute to influencing practitioner decision-making in the context of the delivery of the Strengthening Families Programme.

6.3.1 Support for Practitioners During Delivery

There is no recommended framework for the provision of supervision for practitioners who deliver the Strengthening Families Programme, nor is there a requirement for agencies to provide supervision. In practice, the provision of supervision and nature of supervision for those engaged with the Strengthening Families Programme is at the discretion of the agency. This is in contrast to the principles of family support, which advise that practitioners should engage in reflection during interventions (Thompson et al., 2006). The importance of supervision and reflective practice has emerged as a key issue within this research. The importance of supervision has been highlighted following the McGuinness (1993) enquiry into abuse. Additionally, Devaney and Dolan (2017) highlight the reflexivity and supervision of staff in family support work as important to the process of implementing interventions. The interagency model of delivery in the Irish context offers no framework for supervision or reflective practice and has emerged as an issue from this research.

The experiences of practitioners in this study found a mixed experience of supervision and support while delivering the Strengthening Families Programme. Practitioners refer to having significant support from the Site Coordinator or co-facilitators; however, there was little or no formal representation of a supervision processes noted. The Site Coordinator was viewed as a significant support resource by some practitioners, as outlined in the following quote:

> *"I had a very good relationship with the site coordinator."* - Practitioner 6

However, the role of the Site Coordinator is to manage the practical elements of the delivery, such as transport, catering, etc (O'Leary et al., 2015).

Other practitioners viewed that their supervision needs were met through the debrief process, which is also not a platform for the supervision process. Practitioners may have a supervision or reflective practice within their own agency; however, they identified that line managers often do not understand all elements involved in the delivery of the programme. It seems likely that where line managers do not understand the implications of programme delivery then they may not be able to undertake engaged supervision with a practitioner regarding the Strengthening Families Programme. It is reasonable to assume that where supervision is not a defined or

recognised process for practitioners then they lack an avenue within which to discuss their experiences and considerations of their delivery.

This research highlights the need for a common framework for supervision and reflective practice when implementing programmes using an interagency model of delivery. Additionally, this research challenges implementation science and includes reflective practice for practitioners as a consideration for the dissemination of programmes.

The findings highlighted that some practitioners identified that their support was provided by co-facilitators. This also echoes the findings from Holden (2010). One of the practitioners identified that *"support came from my peer facilitators in that group"* (Practitioner 12). While it is positive that practitioners feel supported among their peers and this is a welcome element of teamwork, there does seem to be a lacking in the support available, as the practitioner describes it as *"not a great level"* (Practitioner 12). This also resonates with the work of Sixsmith and D'Eath (2011), who also found that practitioners identified that they did not feel supported in their delivery of the programme.

The findings of this research highlight the different cultures of practice which develop. It highlights the need to examine the reflective practices utilised across programmes. Practices may need to be moderated, supervised, or established. This research challenges the developers of standardised interventions to consider a reflective practice framework for the practitioner when developing programmes. Implementation science is also challenged by this. The practice context should be considered, and dissemination plans should address the supervision framework for practitioners.

The findings from this research show that some practitioners view the support for their involvement with the Strengthening Families Programme as coming from management structures within their sponsoring agencies. This again resonates with another Irish study which also found that some practitioners were receiving support from their line managers (Furlong et al., 2017). One practitioner (Practitioner 3) references the team meeting as a platform of support within their own agency. While it is positive that the practitioner views their team meeting as a supportive place, this is a general team

meeting and not related specifically to the Strengthening Families Programme or delivery of manualised programmes. Again, this demonstrates the varied and *ad hoc* practices experienced by those who deliver the programme.

The findings of this research highlight agency understanding of the Strengthening Families Programme as an issue for practitioners and their engagement with the programme. This study found that there was a perception among practitioners that some agencies do not understand the workings of the Strengthening Families Programme.

> *"I don't think they get what it's like to be on the ground delivering."* - Practitioner 4

The requirements of the programme appear to be misunderstood, in the practitioners' views. The findings highlight the expectations of their agencies, which does not reflect an understanding of the impact that delivery of the programme has in relation to their workload. Practitioners reference *"extra work coming at me"* (Practitioner 9), which highlights that the agency does not appear to balance their workload to reflect involvement in the programme. It challenges the extent to which a practitioner can be supported or supervised by their agency if there is a lack of understanding about the intervention and associated workload. This highlights a challenge for the interagency model of delivery and for the delivery of manualised interventions and ensuring that agencies have a thorough understanding of the programme and its delivery requirements.

This research highlights the mixed perceptions among the practitioners about the levels of support they receive when delivering the Strengthening Families Programme. This resonates with the literature. Christian et al. (2014) also identified that practitioners did not feel supported by their agencies. They perceive that their manager or agency does not have an understanding of what is involved. This echoes the findings of Furlong et al. (2017), where practitioners advised that managers should be versed in the programme.

This raises the question as to whether the perceived lack of support and supervision among practitioners is replicated in other delivery contexts. This adds weight to the

need for a framework of supervision and reflective practice to be agreed for the interagency delivery model. It further highlights the need for implementation science to consider the delivery context for practitioners and address this in implementation frameworks and in dissemination plans.

This research highlights variation in support and supervision practices of practitioners. The research also identified changes to the programme delivery in every session of the programme. It is significant to consider this against Furlong and McGilloway (2015), who found that practitioners stated that their high level of adherence to the program protocols may have been due to the regular supervision and fidelity checklists. In addition, Axford et al. (2012) highlight the need for all staff, particularly managers, to support the programme delivery and the practitioners. This research does not specifically examine the connection between supervision practices and changes made to the programme during the delivery. It would be beneficial to implementation science to examine whether the mixed support structure for the programme is linked with the practitioners' perceived need to make changes to the programme.

The need to develop a culture of reflective practice for practitioners engaged with the Strengthening Families Programme emerges from this research. Reflective practice promotes systematic inquiry and the documentation of the inquiry process and its outcomes (Schon, 1987). It is an important element of practitioner practice and assists with the interrogation of practice and delivery (Devaney and Dolan, 2017). If this is not an element of the practitioners' discipline and is not provided for within the interagency model of the programme delivery, then it affects the practitioners' competence.

Practitioners are implementing changes to the programme. If they are not facilitated to examine different strategies according to the demands of the situation (Scott and Dadds, 2009) then there is a dearth of information about the rationale for making changes. Without a supervision framework, the rationale for change is unchallenged. It highlights the importance of the need for practitioners to document the evidence that informs their delivery of changes to elements of the programme. This is significant to

the development of manualised programmes and implementation science and the adaptation of programmes to reflect the delivery context.

6.3.2 Preparedness of Practitioners to Work on an Interagency Basis

The Irish context for delivery of the Strengthening Families Programme is unique. It differs significantly to other delivery contexts (Kumpfer et al., 2012). An interagency collaboration model, which sees a number of agencies form a steering committee in specific areas where a need for a Strengthening Families Programme has been identified, oversees the delivery of the programme. However, even within the interagency collaboration model there are variations. In some instances, a steering committee may be established to run one programme, while in other areas the steering committee is permanent, as programmes run regularly in an area.

The interagency collaboration model, as described in Chapter 3, requests that agencies who wish to engage with the programme refer families to it and provide practitioners to deliver the programme. Generally, the Strengthening Families Programme is delivered by four practitioners, two for the parent training programme and two for the teens training programme (Kumpfer et al., 2003). However, in the Irish context there is yet another variation to the delivery, where the programme is delivered on an interagency basis (Kumpfer et al., 2012; Kumpfer et al., 2010). It is commonplace for a team of up to eight practitioners to be involved in the delivery of the programme, particularly if the teens group is divided into two. There is little information available about the Irish context of interagency delivery. This study provides a unique insight into how practitioners are prepared to engage with this model.

6.3.3 Planning and Preparation

The rationale for interagency working is identified as the need for a coordinated response to be made by practitioners when working with the child and family/carers (Department of Children and Youth Affairs, 2011). There are benefits to agencies and practitioners working collaboratively, such as improved outcomes for children and families (Department of Children and Youth Affairs, 2014; Department of Children and Youth Affairs, 2011). However, the findings of this research project identify challenges with such interagency working specifically related to the planning and preparation of the programme delivery.

The study provides insights into the real-world planning and preparation for the delivery of an evidence-based manualised programme. The 'real-life' context of planning is demonstrated through the use of phrases such as *"you'd be checking with your co-facilitators"* (Practitioner 11), which point to a somewhat casual or informal arrangement used by the practitioners in relation to planning and preparation of session delivery.

The findings also suggest that the practitioners do not always prepare the session delivery together in a group. It is done in isolation due to the day-to-day commitments of the practitioners. The planning and preparation process are described as agreeing with co-facilitators who was going to deliver elements of the programme the following week:

> "*We used to have a discussion on who was doing what for the following week."* - Practitioner 3

However, no reference to any discussion about making changes to the content is made. In addition, planning of the programme delivery was also undertaken through the use of *"an email group"* (Practitioner 3). While such an approach is innovative in utilising tools available to the practitioners, this is not identifying any discursive platform regarding delivery or changes to the programme. Sessions appear to be planned and prepared on an individual basis, despite a few practitioners sharing the session delivery. The planning and preparation processes, as represented in this study, do not indicate that a formal discussion about content assignment, suitability of content or changes to content are discussed in the week prior to the session delivery. This is a concern for practice, as any changes to the programme are unchallenged. The interagency model of delivery poses a challenge for implementation science and must be considered within the dissemination plan and process.

While the programme itself does not specify an appropriate preparation time for delivery of the sessions, the findings indicate that practitioners view that the time given by agencies to deliver the programme is insufficient.

> *"Three hours to deliver the programme is a bucket of shit."* - Practitioner 12

This research highlights that some agencies are somewhat reluctant to release staff for preparation time and delivery time of the programme. This study found that not all practitioners had the same 'terms and conditions' regarding their delivery of the programme. Some agencies allow staff to deliver the programme as part of their core hours, while others do it in addition to their work and incur time off in lieu. It may be that agencies view the programme as an 'add on' to their agency agenda rather than a core piece of work, and so do not resource it or arrange resources sufficiently. Such a variation in the expectations of the practitioners by their agencies and balancing this with the programme delivery has implications for the planning and preparation processes.

The interagency nature of the delivery surfaces in this research as one of the reasons that the planning and preparation processes are varied. As practitioners represent different agencies with different work practices, this impacts on the time that practitioners can meet their co-facilitators to plan the session delivery. This is a challenge to the neoliberal influence of 'shared resources' and the implementation of a manualised programme using an interagency approach.

6.3.4 Co-facilitation

The Strengthening Families Programme training includes an element of co-facilitation practice. As an interagency model is used to deliver the programme in Ireland (Kumpfer et al., 2012), practitioners may deliver the programme alongside individuals with whom they have no previous working relationship. Their co-facilitators may represent agencies with a different ethos and focus of work. There is no specific research in relation to co-facilitation or co-delivery of programmes.

This research offers a unique insight into this. The findings of this research highlight that co-facilitation has been challenging for some practitioners. They perceive that some of their co-facilitators are inflexible within their delivery of the programme and refuse to deliver the programme to a specific group. In contrast, some practitioners point to their co-facilitator and the wider delivery team as a great source of support, as the following quote highlights:

"The other facilitators were very helpful to me and gave me tips with changing the programme, as some of them had run it before." - Practitioner 7

This echoes Holden (2010), where delivery teams were also viewed as supportive. Practitioners identify different work styles and practices as a challenge. This resonates with other findings, where the practitioners identified that they did not feel supported, and made particular reference to having a different opinion on the appropriate disciplinary measure within the facilitator group (Sixsmith and D'Eath, 2011, p. 20).

As highlighted in Section 6.1.2.1, the practitioners have different professional backgrounds and practice experience. Additionally, they work with agencies that have different approaches. This is a challenge to the interagency model of delivery. It also poses challenges to implementation science to consider the local delivery context and the staffing context when disseminating programmes. Currently there is no framework within the training or preparation of the practitioners for these issues to be explored. This is significant to implementation science and the adaption of programmes by practitioners and their maintenance using an interagency model of delivery.

Additionally, the findings of this research highlight that delivery of the programme is planned around the strengths and weaknesses of the practitioners. Co-facilitation emerges as a consideration of practitioners when making changes to the session delivery or the prescribed content. Practitioners refer to a co-facilitator who "*really struggled"* (Practitioner 9), which was a rationale for changing the programme delivery. The context of the struggle related to the experience of the practitioner among the particular group they were delivering the programme to and their experience of the programme. In addition, they did not have a lot of experience in the delivery of evidence-based programmes.

The experiences noted within this research project resonate with the available literature. Statham (2011) found that different agency policies, procedures and systems, different agency remits, and lack of explicit commitment to interagency working were common issues among practitioners involved in interagency working. This problematises the interagency model of delivery, particularly in relation to the delivery of a manualised programme.

Practitioner shortages within the delivery team emerge from this research as an issue for the delivery of the programme. Practitioners note that the same people from the same agencies are delivering the programme all the time.

> *"It's really hard to get facilitators."* - Practitioner 11

This also echoes the available Irish research. Roe (2015) found that there is not a wide availability of practitioners to deliver the programme. Again the challenges of obtaining practitioners to deliver the programme is reflected in Sixsmith & D'Eath, (2011), who report it was expected that referring agencies would release staff to deliver the programme, which did not happen. Where practitioners are less available in some areas, the skills and expertise of the available practitioners may be greatly reduced. This is significant in terms of the delivery of the programme.

Agency involvement with the Strengthening Families Programme is voluntary. Given that no one agency 'owns' the delivery of the programme, perhaps the limited pool of practitioners may be an unexpected outcome of an interagency model and a perceived 'lack of ownership'. This poses a challenge for implementation science, their dissemination of programmes, and their integration into practice contexts. It highlights the need for the delivery model to be considered as part of the dissemination strategy, as this may be a considerable factor in the adoption of the programme by practitioners and agencies and the maintenance of the programme.

Practitioners also note that the interagency relationship requires consideration on their part. *"Sometimes you have to be politically aware"* (Practitioner 4), as practitioners may not have existing relationships with their co-facilitators. Their processes and procedures may be different, as well as the focus of their work, which can pose challenges to co-facilitation using an interagency model. The need to establish and share a common understanding of what interagency work is and how it is undertaken in the context of manualised programme delivery emerges from the discussion and echoes McGagh et al. (2009).

This complexity is noted within the literature, where Devaney and Dolan (2017) identify that building a working relationship and trust among practitioners from cross-sectoral representation is a key piece of work in family support. The interagency

working or co-facilitation across agencies is not accounted for within the practitioner training or programme delivery. The need to include co-facilitation and interagency working as an element of the preparation of practitioners who engage with delivery in an interagency context has emerged as significant. It challenges the interagency context and implementation science, as it requires consideration of the delivery context and, accordingly, accommodation within programme training.

6.4 Theme 4: The Prescribed Nature of the Programme

The Strengthening Families Programme is a prescribed and manualised programme. The session plans are specified, as well as the method of delivery and timings of the sessions. The findings of this research show that practitioners are making changes to a prescribed programme. Practitioners view the Strengthening Families Programme as requiring change. They noted changes made to the prescribed programme were based on their practice experience and view of the appropriateness of the prescribed content and format and its fit for families who engaged with the programme.

The findings show that practitioners consider some elements of the programme to be irrelevant and out of context with the families who engage with the programme. Practitioners demonstrate their engagement in reflective inquiry when considering changes to the prescribed programme. This is a significant finding, as it challenges the premise of implementation science, fidelity, and the view that the delivery of such programmes should be as prescribed. It highlights the challenge of the delivery context in relation to the programme development context and whether or not programmes become 'out of date'.

The practitioners express frustration about the prescribed length of the programme. The findings show that some practitioners view the 14-week intervention as too long in some instances. This contrasts with the changes outlined in the report on the Ballyfermot Strengthening Families Programme (2010), where practitioners divided the first session into two to provide greater time for families to get to know each other. Findings from this study show that practitioners describe their use of reflection when considering changes to the prescribed programme and what is appropriate for the families. The changes made in the Ballyfermot programme and by practitioners of this study are all undertaken based on the needs of the group engaged with the

intervention. However, this raises challenges for implementation science, particularly in relation to validity and veracity. Where practitioners are changing the dosage of the programme in the service delivery setting, the impact on the programme effectiveness is unknown.

The prescribed format of delivery emerged from this study as a factor of change by practitioners. They demonstrate their engagement in reflective inquiry when reconsidering the prescribed methods of delivery within the programme, believing some sessions were 'like lectures'. This echoes Gibbons and Henriksen (2012), who view that the use of technical methods removes the client as the focus of the work and positions the tool or package as the focus. Practitioners perceive that the prescribed approach as set out in the manuals requires change. The prescribed nature of the manualised sessions was again viewed negatively in terms of the content and its repetition throughout the programme.

"There's a lot of repetition, especially in the first few weeks." - Practitioner 11

This emerges as a factor of change from the research. It highlights the difficulty of adherence to the prescribed programme. This is a considerable challenge for implementation science and the dissemination of programmes into the community.

The need to make the programme relevant to the families emerges as a finding from this research. The practitioners view the programme as deficit in terms of its relatability and relevance to the lives of the families who engage with the programme. It emerges from this research that the changing trends in society are not reflected within the programme. Practitioners demonstrate reflection in their consideration of issues within society, such as social media, and the relevance of the programme to this.

The prescribed nature of the programme is not seen as a 'fit' with the practice context, as identified by the practitioners, and changes have been made to the programme for this reason. The findings of this research challenge the premise that a programme developed over thirty-five years ago can reflect societal trends of today. This is relevant to other manualised programmes. It challenges the delivery and fidelity of programmes. Given that such changes may be subjective and relevant to a micro

context, it highlights the need to re-examine prescribed programme content at regular intervals and include societal updates.

6.5 Theme 5: The Practitioner and Their Experience of the Delivery

The Strengthening Families Programme is an evidence-based programme, delivered by trained practitioners using manuals, which detail the lesson plans (Kumpfer et al., 2010) and include the timings, activities, and all handouts for the parents and teens. Practitioners are not encouraged or required to make decisions regarding such evidence-based and manualised programmes. The practitioner's experience of delivery is not reviewed in any qualitative format as part of the programme delivery. This research project offers a unique insight into the practitioner and their experience of the delivery of an evidence-based manualised programme. The findings of this research demonstrate that practitioners are making changes to the programme based on their practice experience.

6.5.1 Practice Experience and Delivery of Manualised Programme

The Strengthening Families Programme is an evidence-based programme. It offers a packaged intervention, which contains manuals that outline the content, timing, etc. Beyond the recruitment of the practitioners to deliver the programme content and a recommendation that practitioners should have group work experience, there is no reference made to the practice experience or practice wisdom of the practitioner.

This is reflective of evidence-based programmes generally. There is an argument within the literature that practitioners' critical analysis and decision-making skills are being undermined by the use of evidence-based practice (Webb, 2001). While little research is available on this area, this study goes some way towards bridging the gap in the literature. The practitioners demonstrate their application of critical analysis and decision-making skills throughout the delivery of the Strengthening Families Programme. Practitioners demonstrate that they consider their professional training or roles in relation to their delivery of the Strengthening Families Programme. The findings of this research show that practitioners reflect upon their professional learning and experience when contemplating changing or adding a resource or experience from that to their delivery of the programme.

"I'd always be bringing my own job in the (anonymised) to SFP." - Practitioner 11

It does raise the question as to whether the expectations of practitioners are in line with the delivery of an evidence-based programme. Are practitioners seeking deficiencies in an evidence-based programme? Do practitioners feel obliged to take on their professional role, and does this further complicate the delivery of the programme?

The findings of this research demonstrate that practitioners reflect upon their practice wisdom, which is significant, as the practitioners are actively demonstrating that additional skillsets are required and additional experience needs to be drawn upon to deliver the programme. This seems to contradict with the approach within the programme context in Ireland, where there is no minimum experience level required of practitioners. This poses a challenge for adoption and implementation of programmes in relation to the training of practitioners to deliver interventions. This is significant to evidence-based programmes and implementation science and the dissemination strategies for programmes to operate in different contexts.

Previous practice experience emerges as a key factor within this research. It influences practitioner delivery and changes to the programme. The practitioners view that changes, based on their reflective practice, are necessary to enhance the programme for the families.

"I'm going on my experience, from what I know." - Practitioner 9

The practitioners highlight that previous experiences have bearing on their practice, which echoes the argument of Scott and Dadds (2009) that programme delivery is influenced by practitioners drawing on previous training and personal experiences. This is also known as practice wisdom (Schon, 1987). This is significant, as it has not been highlighted within evaluations of the programme to date. It may be that this is an element of delivery when the formal dissemination phase of a programme has ended and the programme is delivered in a 'real-life setting'. As the neoliberal approach to family support includes packaged, standardised interventions, this poses a particular challenge. Where changes are being made to evidence-based manualised programmes,

it questions the validity and veracity of the intervention as well as the outcomes for the families. It also points to the need to examine the evaluation frameworks in use.

Previous learning from doing the teen group or parents group also feed into the process of delivering the programme and the perception among the practitioners around any changes made to the programme. This also resonates with Cross and West (2011) and Scott and Dadds (2009), who assert that practitioner competence in the delivery of programmes is as important as the service delivery. Different strategies are required for different situations and these are learned through practice experience. An evidence-based manual cannot take account of all situations and there are times where practitioners need to make decisions with regards their delivery of the intervention within a specific context. Their application of their practice experience and critical analysis skills is required in the delivery of interventions. This challenges the premise upon which prescribed and manualised programmes are developed. It challenges the neoliberal influence on family support interventions which increasingly seeks standardisation and consistency.

Practitioners view previous practice experience as a factor for consideration when undertaking the delivery of the programme. They examine the prescribed content through the lens of their practice experience and evaluate whether an element is appropriate for the group. This practice has bearing not only for the Strengthening Families Programme but also for other manualised programmes.

6.5.2 Making Changes to the Session Contemporaneously

The Strengthening Families Programme is an evidence-based programme which by its nature should not be changed. The findings of this research show that practitioners perceive that changes are required "in session" without prior planning, and the perception amongst practitioners is that they should adapt to such situations. Practitioners reference parents who are *"going off on a tangent about something"* (Practitioner 8), and unplanned changes are introduced into a session as a result. The practitioners argue that the needs of the programme families and the issues they are experiencing are a rationale for changes to the programme during a session. However, this raises questions as to whether or not practitioners should engage with these issues given the group delivery context.

The impact on other families who attended the programme but do not have this same issue is unknown. In addition, it raises the question that if a family discloses issues, does that become a model for families engaging with the programme? Do other families then present issues, as a precedent has been established?

It is unknown whether such disclosures affect morale or the interest level of families attending, particularly if one parent or family dominates the group. Nonetheless, within this research project the practitioners reference their critical analysis skills when identifying the need for families to be able to articulate their issues within the group. This again highlights the contested nature of evidence-based parenting programmes and the jarring of these with the contextualised lives of the families and the practice context. It further raises questions about what constitutes evidence within evidence-based programmes. It highlights a gap in the evidence base where qualitative information is not being gathered with the same frequency as quantitative information. In addition, the evidence that practitioners may be able to provide in terms of implementation and practice wisdom is not accommodated within the Strengthening Families Programme and implementation frameworks. There is a significant gap where programmes have been disseminated within the community for a substantial period of time without any re-examination of the adaption and maintenance of the programme by practitioners and agencies.

Practitioners speak about the feelings and emotions of families who engage with the programme as a consideration for their delivery of the programme. The findings of this research project highlight that some elements of the evidence-based programme were viewed as inappropriate for families attending the programme. Practitioners reference parents who were *"frustrated"* and *"upset"* (Practitioner 4).

It has emerged through this research that the needs of the parents influence practitioner decision-making in relation to the programme delivery. The findings of this research highlight that the programme is perceived by practitioners as unsuitable on occasion for the families, and changes are made in response. This research contrasts with the assertion of Webb (2001, p. 7) that evidence-based practice *'regiments, systematises and manages social work within a technocratic framework of routinised operations'*. This research highlights that practitioners implementing the

Strengthening Families Programme demonstrate their autonomy through the provision of changes to the programme, as practitioners are making changes in response to the needs of the families. This highlights an issue for implementation science. It challenges the dissemination of the programme into other contexts.

The findings of this research identify that timekeeping emerged as an issue for some practitioners. They refer to programme changes while 'in session', based on timekeeping. Practitioners note being unable to cover all of the programme content, as they ran out of time. The issue of timekeeping or scheduling also resonates with Bohr et al. (2010), who note that scheduling and the adaptation of the intervention can be barriers when implementing interventions. This is significant for implementation science. It challenges the qualifications and practice experience of practitioners in the local delivery context who may not have the skills or expertise to deliver the content as per the timed outlines in the manuals.

6.5.3 Rationalisation of the Decision to Change

The nature of manualised programmes means that the content is prescribed. The ramification of that is that practitioners are not required to make decisions about the delivery of the programme, but rather implement the programme as it is. However, all practitioners relayed changes that they had made to the programme during delivery. The practitioners regularly note that the needs of the family or the needs of the group are significant in terms of why revisions and changes are made to the prescribed programme content.

> *"We have to tweak the programme to make it fit."* - Practitioner 4

This highlights the discrepancy between the practitioners' view of the programme as a fit for families and the programme premise. The findings from this research project resonate with that of Sixsmith & D'Eath (2011), who found that deviations were made to the programme in response to the group needs. 'Responding to the needs of the families' is identified by practitioners as a rationale for change.

> "*You need to make some changes for the good of the group."* - Practitioner 7

Practitioners are concerned about the presenting issues among families and the needs of those families. Practitioners demonstrated engagement in reflective inquiry and referenced their practice knowledge and experience as a rationale for changing elements of the programme. Phrases such as *"from my work I know"* (Practitioner 7) and *"from experience of working with groups"* (Practitioner 8) highlight consideration and reflection of practice experience. The rationale to make changes based on the needs of the group was also a finding of the Kilkenny programme evaluation (KSC, 2011), where practitioners reported a lot of changes to the delivery of the programme to encourage interaction from the families.

Within this research context the practitioner is positioning their practice experience or practice wisdom as a rationale for change within the programme. However, not every practitioner's practice experience and wisdom are the same. There is no process in place to examine whether or not the suggested changes or substitution are appropriate or suitable. This is a challenge for manualised programmes and their integration into other delivery contexts. Developers and agencies must give consideration to how changes are discussed and agreed upon and if they are appropriate to the intervention. There is a risk, where changes are implemented without question, that the outcomes for families may be affected.

Practitioners view the changes made as necessary to the programme, as it does not recognise or respond to the contextualised lives of the families who present. The practitioner describes their experience of using their own critical analysis skills and decision-making skills within the context of their delivery of the Strengthening Families Programme. Practitioners are engaged in reflective practice. They speak about their previous experiences as a basis for making decisions about changing the programme. This is also present within the literature.

Reid (2001) in (Gray et al., 2009) inform that there is a tendency of practitioners to alter the reported evidence-based intervention to fit within their own practice context, and that such changes have improved the intervention. The practitioners view the changes made as positive and have contributed to making the programme 'easier to understand', 'clearer', or 'more relatable'.

The autonomy of practitioners within this research project does not appear to be diminished within the delivery of this evidence-based programme. This is evidenced by the many changes made by practitioners when delivering the programme. The practitioners are also linking the changes made or planned with the rationale of their practice wisdom. The findings do not suggest that the autonomy of the practitioners has been reduced to 'technocrats', as some of the literature suggests (Webb, 2001, p. 71). This challenges the premise of implementation science, which seeks validity and veracity of interventions. Where decisions are implemented and made to evidence-based programmes without question, the implications of such changes made to the effectivity of the programme and outcomes for families is unknown. For this reason, programme developers must consider the role of the practitioner in the design of such interventions and in the training of practitioners. Additionally, a review of the interventions should be held with practitioners in the 'real-life' delivery setting to explore issues occurring in practice.

6.6 Implementation Fidelity

This research project did not directly engage with an investigation of the implementation fidelity of the Strengthening Families Programme. It offered an exploration of the process of implementation within a real-world setting. As mentioned in Chapter 2, there are different types of evidence and evaluations to support the effectiveness of evidence-based programmes. However, such evaluations are generally undertaken in controlled or "test" settings (Furlong and McGilloway, 2015) and therefore do not reflect the delivery contexts of the programmes. There is a difference between the developmental context of a programme (Axford and Morpeth, 2013) and the real-life practice setting, which can be more challenging (Scott et al., 2006). This research study offers a unique insight into the process of implementation in a 'real-life' delivery setting. It offers an understanding of the process undertaken by practitioners in their delivery of the programme.

There is little evidence available in the Irish context in relation to implementation fidelity and the Strengthening Families Programme. In Ballyfermot, however, the practitioners reported that they adapted the language, as it had too many Americanisms. They also divided the first session into two sessions to provide greater

time for families to get to know each other. Sixsmith and D'Eath (2011), in their examination of the programmes, found that some deviations were made to the programmes which were noted to be in response to the group needs. In this study, practitioners identified that 50% to 60% of the programme was implemented with fidelity (Sixsmith and D'Eath, 2011, p. 20).

This research project was not an investigation into the implementation fidelity of the practitioners of the Strengthening Families Programme. This project has used a qualitative methodology to understand the association between the prescribed manualised programme and the local delivery context. It found that practitioners are making changes to the delivery of the programme. These changes appear to be motivated or influenced by the perception among practitioners about what is in the best interests of the families, as based on their practice experience and their experience of the practice context.

This study highlights that many factors affect delivery of the programme by practitioners and, by extension, the implementation. These include family readiness to engage with the programme, practitioner experience, training, preparedness to work on an interagency basis, and practice experience, all of which have a bearing on practitioner decision-making on their delivery of the programme and, arguably, implementation fidelity.

The factors identified also echo Cooke (2000), who noted some of the numerous factors which affect implementation fidelity. These include the characteristics of practitioners, their background, and their experience in delivering the programme. Also included are motivation and attitudes toward an evidence-based practice, belief in the intervention, self-efficacy, and skill in delivering the intervention. How the programme fits with practitioners' existing priorities or their organisation's priorities, and leadership within the organisation for such programmes are all factors which influence the delivery of the programme. The impacts of this are unknown. How this can be managed without the programme effectiveness and veracity being affected is unknown.

The RE-AIM implementation framework may offer a guide on how to accommodate the contextual factors relating to the development of the Strengthening Families Programme. The model examines the quantitative and qualitative factors within the

implementation framework. It allows for the broader context of the implementation to be considered, rather than just the effect size. This would be appropriate to an examination of the Strengthening Families Programme, as the interagency model of delivery is a significant factor within the implementation and unique to the Irish setting (Kumpfer et al., 2012). The RE-AIM implementation framework can examine each area - reach, effectiveness, adoption, implementation, and maintenance - against quantitative and qualitative measures. These provide a structure which can be followed to provide an understanding of the factors involved in the implementation from the Irish context, but also of measures which may also contribute to understanding the overall effectiveness of the programme, rather than one measure.

6.7 Conclusion

This study has provided a unique insight into the delivery of an evidence-based programme in a 'real-life' delivery context. This study is one of few qualitative studies in the international literature that have examined the process of delivery of an evidence-based programme from the perspective of the practitioner. Innovative use of technology facilitated a standardised approach to the collection of reflective journals from practitioners. The findings of this research study have identified factors that influence practitioner decision-making in the context of delivering the Strengthening Families Programme.

Standardisation is the value, belief, and premise upon which manualised programmes are built. They do not take into account the varying complexities and contexts within which families live, which emerges as a key issue within this research. This is a challenge for the neoliberalist-favoured evidence-based programme. It is a concern for implementation science, implementation frameworks, and the dissemination of the programme to different contexts.

The delivery of the Strengthening Families Programme is delivered by practitioners who do not have the representative levels of training and practice backgrounds of those involved in its evaluation. This is a concern for implementation and the adequate dissemination of programmes, as well as maintaining fidelity, veracity and outcomes of the programme. While the neoliberal approach is to promote standardisation, this research highlights that adaptation happens in the practice setting. In order to

understand why adaptation occurs, it is necessary to capture what the adaptations are and also how they impact on the programme outcomes. It may be a consideration for further research to examine the impact of such adaptations on the programme outcomes.

The need for adequate and successful language adaptation is highlighted by practitioners in this research. This is a challenge for implementation science. Language adaptation of manualised programmes is a cultural concern for imported programmes. Culture and cultural context play a crucial role in the communication and understanding of learning from the programmes. Programme designers and importing agencies must ensure that they are relevant to the new context and mitigate the risk that practitioners or families view them as inappropriate or unconnected with their lived experience.

The interagency model of delivery in the Irish context offers no framework for supervision or reflective practice. This has emerged as an issue from this research. This study highlights the need for a common framework when implementing programmes using an interagency model of delivery. Additionally, the interagency nature of the delivery surfaces in this research as one of the reasons that the planning and preparation processes are varied. As practitioners represent different agencies with different work practices, this impacts on the time that practitioners can meet their co-facilitators to plan the session delivery. This is a challenge to the neoliberal influence of 'shared resources' and the implementation of a manualised programme using an interagency approach. The interagency model is not accounted for within the practitioner training or programme delivery. The need to include co-facilitation and interagency working as an element of the preparation of practitioners who engage with delivery in an interagency context has emerged as significant. It highlights the broader challenge of the delivery context in relation to the programme development.

Practitioners describe their engagement in reflection when considering changes to the prescribed programme and what is appropriate for the families. This questions the neoliberal rationale and promotion of such interventions, which are standardised and prescribed. There is no process in place to examine whether or not the suggested changes or substitution are appropriate or suitable.

This is a challenge for manualised programmes and their integration into other delivery contexts. Developers and agencies must give consideration to how changes are discussed and agreed upon and if they are appropriate to the intervention. There is a risk, where changes are implemented without documentation of rationale and the provision of evidence to support the changes, that the outcomes for families may be affected.

Overall, these findings represent a significant addition to the literature. They inform on the process of delivering an evidence-based programme from the perspective of the practitioner. This study identifies the factors that influence practitioners' decision-making in the context of changing an evidence-based programme. The findings should assist with future implementation of the Strengthening Families Programme in the Irish context.

Chapter 7

Conclusion Chapter

7.1 Overview

This study has provided a unique insight into the delivery of an evidence-based programme in a 'real-life' delivery context. This study is one of few qualitative studies in the international literature that have examined the process of delivery of an evidence-based programme from the perspective of the practitioner.

The current study was located within the context of Government policies that encourage the implementation of evidence-based programmes when working with young people and their families. The use of such programmes is a move away from relationship-based work and removes the context from decision-making and reduces the autonomy of practitioners (Gray et al., 2009; Axford and Morpeth, 2013).

Available evaluations of evidence-based parenting programmes are problematic (Scott et al., 2006), as they may be not representative of the individuals who normally deliver the programme (Furlong and McGilloway, 2015). The role of the practitioner is significant in the delivery of evidence-based parenting programmes, but arguably, the role had been overlooked, beyond fidelity checks. Little was known about the factors that influence practitioners when they deliver the Strengthening Families Programme. This research developed a systematic approach to gather information regarding the delivery of the Strengthening Families Programme. This is a significant contribution to the development of qualitative processes of understanding and measuring implementation for the Strengthening Families Programme and evidence-based programmes, as well as for implementation frameworks.

Innovative use of technology facilitated a standardised approach to the collection of reflective journals from practitioners. This research developed a qualitative framework to capture the process of implementation in a real-world setting. It found that the Strengthening Families Programme is delivered by practitioners who do not have representative levels of training and the practice backgrounds of those involved in its evaluation. This study developed a qualitative framework to capture the process of implementation in a real-world setting. This research found that there was no

session of the Strengthening Families Programme delivered exactly as prescribed in the manuals. This is a concern for implementation science and the adequate dissemination of programmes, as well as maintaining fidelity and veracity and outcomes of the programme. However, by using the reflective journaling process there is now a framework to document the delivery of the programme and the extent to which the programme is delivered as prescribed. In addition, the process developed during this research can systematically gather the evidence base for adaptations to the programme. This process could potentially be scaled up and replicated in other areas of programme delivery and contribute to an ongoing examination of practice through the reflective journaling.

7.1 Conclusions to the Research Question

A qualitative approach was taken to this research. The research questions developed within this study were appropriate to an exploratory piece of research on a subject matter where little was known. The questions were designed to gain an in-depth understanding of the programme delivery context where practitioners make decisions about the implementation of the Strengthening Families Programme. The questions posed were successful in achieving the aims for the research study.

Decision-making based on experience and knowledge has emerged from this research as the main factor of influence on the practitioner's decision-making in the delivery of the Strengthening Families Programme. Through the use of innovative research tools and the use of constructivist grounded theory in the analysis of the data, a number of theoretical categories were developed. These categories together form a substantive theory which provides an explanation (Charmaz, 2016; 2014) for a situation. The substantive theory emerging from this research is that practitioners make decisions about their delivery of the programme based on their own experience and knowledge.

The Strengthening Families Programme was developed within one sociocultural context and is delivered within another. The practitioners who deliver the intervention recognise that the contextual development of the programme is different from the delivery setting. They identify that some elements of the programme and some elements of the delivery context differ, which influences their decision-making regarding the delivery of the programme. In addition, the families are recognised as

diverse and presenting in complex forms, which differs from the original programme development context. Decisions are made regarding the delivery based on the presenting forms and behaviours of the families. The decisions about the delivery of the programme are influenced by the practitioners' experience and knowledge about what will make the programme relevant, relatable, and understandable for the families who attend.

Insufficient cultural and language adaptions are another influence on the practitioners when preparing to implement the programme. Their practice experience relating to cultural and language adaptation is used in the rationalisation of change during the programme delivery. The interagency nature of the delivery surfaces in this research as one of the reasons that the planning and preparation processes are varied and that this impacts on programme delivery. As practitioners represent different agencies, with different work practices, this impacts on the time that practitioners can meet their co-facilitators to plan the session delivery and discuss changes. In addition, the interagency nature of the programme is not attended to within the training context and this has been found to be of concern to practitioners when engaged in the real-life delivery setting.

Decisions about practice and delivery of the intervention were made mainly on an individual basis by practitioners. There is no streamlined process for engaging in discussion about changes to the content and delivery of the programme. In the main, it appears it takes place on an *ad hoc* basis, using locally agreed methods to discuss these with the co-facilitators. Decision-making based on experience and knowledge is demonstrated by practitioners within this study and emerges as the main factor of influence on the practitioners' decision-making in the delivery of the Strengthening Families Programme.

7.2 Contributions of this Research to the Strengthening Families Programme

This research developed a qualitative framework to capture the process of implementation in a real-world setting. The researcher could not identify what specific implementation framework or model was used when the Strengthening Families Programme was initially developed, and as an alternative this study has utilised the RE-AIM implementation framework to consider how the research design and findings

of this research could impact on the future implementation of Strengthening Families Programme. The RE-AIM model offers a broader context of implementation rather than a focus on effect measures. The use of both quantitative and qualitative measures is used within the RE-AIM model to provide an enhanced understanding of the context of delivery. This view of qualitative methods informing on implementation aligns with the focus of this research, which is to understand the context within which an evidence-based programme is delivered.

Reach and Effectiveness

This research provides qualitative information from the perspectives of the practitioners about the families who engage with the Strengthening Families Programme. Measurement of programme reach is generally focused on quantitative assessment tools (Holtrop et al., 2018), such as numbers attending the intervention, dropout rate, etc., while effectiveness is concerned with effect measures. This provides only one-dimensional information about the programme participants. There is a void in the contextual information. This research addresses the gap in information.

The family context is of significant consideration for practitioners when considering changes to the programme. The findings of this research show that changes are made to the Strengthening Families Programme in response to the perceived context of families. This is documented through the reflective journaling process. The evidence gathered through the reflective journaling process about changes made to the programme by practitioners highlights the significance and importance of examining the programme reach using both quantitative and qualitative measures to enhance contextual understanding. This also echoes Holtrop et al. (2018), who argue that both measures are required to thoroughly understand reach and effectiveness. The reflective journaling process also provides a basis to examine the appropriateness of referrals to the programme and preparation pathways for families who engage with the intervention.

Adoption

This research provides a qualitative framework to capture the process of adoption by practitioners which should be utilised in the mainstream delivery of the Strengthening

Families Programme. Quantitative approaches to the measurement of adoption examine data such as the number of staff implementing programmes (Holtrop et al., 2018). However, this research provides a way in which to capture qualitative measures of adoption. This study provides contextual knowledge about the practitioners in relation to their adoption of the programme. In addition, this research gives significant contextual information about the facilitators and barriers encountered by practitioners and their agencies when implementing the intervention.

The Strengthening Families Programme uses a different delivery model than other jurisdictions (Kumpfer et al., 2010), and so, arguably, the standard fidelity questions do not take account of this contextual change. This research has developed a qualitative framework whereby practitioners reflect upon their practice and delivery of the programme. Significantly, this framework could be adapted to include other stakeholders, e.g. referral agents or Site Coordinators. It provides a platform whereby practitioners can speak from different perspectives and enable key organisational factors to be considered. This is particularly useful to the interagency development model, where practitioners represent different agencies with a different ethos and service focus. This research provides a first step in addressing the void of information regarding the interagency model of delivery and adoption of the programme by practitioners.

Implementation

Implementation of the Strengthening Families Programme was measured qualitatively using online reflective journals in this study. This represents a new way to capture implementation, as it is a move away from quantitative measures and provides qualitative the implementation of the programme. It offers a systematic approach to the gathering of information regarding delivery of the programme.

As found in this research, some practitioners did not consciously recognise that they were making changes to the delivery of the programme. The research journaling provides a systematic approach to capture information about practitioner implementation. Without such an approach, the unconscious decision-making and implementation changes would not have been documented. Importantly, the contextual information around programme delivery and changes is tracked by the

practitioners, mitigating researcher bias or influence on delivery, which other qualitative methods may have done.

Crucially, the online reflective journals provide a rationale as to why changes were made to the delivery or not. This research found that not one session of the Strengthening Families Programme was delivered as prescribed within the manual. This is significant to the development of the Strengthening Families Programme, evidence-based programmes, and implementation frameworks. It offers a framework to gather and evidence the changes to the programme. It provides a mechanism for each practitioner to engage in reflective practice around implementation. Continued gathering of information would inform a central bank of changes made to the programme and the rationale for the changes, which may be used to evaluate the programme and inform on further developments to the programme or implementation.

Maintenance

The use of the reflective journals offers a method by which the maintenance of the programmes can be tracked and examined among practitioners and across geographical sites. Maintenance is concerned with the sustainability of the programme and whether the intervention is being implemented and adapted.

Many evidence-based interventions are not sustained in the longer term (Glasgow et al., 2003) and it is unclear what facilitates or hinders the sustainability and maintenance (Proctor et al., 2015). This research and the use of the reflective journals offers a method by which to understand the factors that affect sustainability and maintenance. Evaluations of process provide indication of sustainability (Aarons et al., 2016); however, the use of the online reflective journals offers a platform to track the implementation of the programme post-formal dissemination phase of the programme. This approach could be utilised within every Strengthening Families Programme delivery to examine the maintenance and sustainability of the programme, particularly as it moves further away from the formal dissemination phase of the programme.

Evidence-based

The use of manualised programmes is a move away from relationship-based work (Gray et al., 2009), which many practitioners utilise in their roles as social worker, youth worker, etc. This arguably reduces practitioner autonomy. This research study has demonstrated that the practitioners rely on research to make decisions regarding their own practice, assessments, and decisions regarding case progression, which supports reflection as part of practice (Axford and Morpeth, 2013). However, this research demonstrates that practitioners are implementing changes to the programme during delivery. This research has found that a number of variables influence practitioner decision-making regarding their delivery of the Strengthening Families Programme. Decision-making based on experience and knowledge has emerged from this research as the main factor of influence on the practitioners' decision-making in the delivery of the Strengthening Families Programme. This process has been documented through the process of online reflective journaling.

It is evident from this research that despite programmes being standardised and manualised, adaptation is occurring during delivery. It is important to capture such adaptations so as to inform on future programme development and adaptations. It is also necessary to capture how the adaptation may impact on the programme outcomes. This research provides a framework to capture the changes made and the rationale for making these changes.

The purposeful sampling worked well in this study. Using a site approach, it offered a view of whole programme delivery, rather than just one programme of delivery, e.g. parents/teens. The use of the reflective journaling provides a platform to develop an evidence base to inform future programme development and training for practitioners.

Developers and agencies must give consideration to how changes are documented and agreed upon. Examination of changes and their appropriateness to the programme and families who engage with the intervention should be undertaken. An assessment of the impact of the changes should also be investigated. The rationale for decision-making by practitioners needs to be documented so that the changes and their rationale can be used to review and revise the programme, thus ensuring ongoing relevance. By creating an evidence base for adaptations to the programme and documenting the

rationale, this contributes towards the implementation and maintenance of evidence-based programmes.

Overall, these findings and this research project represent an important addition to the literature. They inform on the process of delivering an evidence-based programme from the perspective of the practitioner. This study identifies the factors that influence practitioner decision-making in the context of delivering an evidence-based programme. The findings of this research study should help to inform the future adaption, implementation, and delivery of the Strengthening Families Programme in Ireland and elsewhere. Furthermore, the findings should also add to the broader development of imported manualised programmes within the Irish context.

7.3 Contribution to the Research in the Field

This research study contributes to the wider field of research and theorising in the area of family support work, evidence-based programmes, interagency working, and implementation science.

This study examined a qualitative aspect of programme implementation. It used a reflective process to capture the perspectives of the practitioner to understand the influences on their delivery of the Strengthening Families Programme. This adds to the literature on implementation science, as it provides a qualitative method in which to examine the delivery of an evidence-based programme. This type of qualitative approach can also be included within evaluation frameworks to provide information regarding the broader context of implementation by practitioners.

This approach provides vital qualitative information about the reach, effectiveness, adoption, implementation, and maintenance of evidence-based programmes by practitioners. It provides for enhanced accountability by practitioners in their delivery of evidence-based programmes, as they can document their rationale around implementation and any changes made. It provides a process by which changes and the rationale for change can be tracked by each individual practitioner for each session of a programme that they deliver. It provides a structure to gather and track information about the implementation and dissemination process of programmes, which appeals to the neoliberal influence on practice currently. This can be used to inform

programme developers and funding agencies on the dissemination and maintenance of programmes into a delivery context. In addition, it can be used to investigate the maintenance and adherence to the prescribed programme after the formal dissemination phase of a programme has concluded. This research offers a process to understand the broader context of implementation, which contrasts with the quantitative measures, such as fidelity checklists, which are frequently found in implementation science.

The neoliberal view and use of packaged evidence-based programmes was also challenged in the use of the reflective process of investigation. Firstly, the voice of the practitioner was accommodated within this research project, which is not a feature in the use of neoliberally influenced, prescribed interventions. Such interventions are viewed as standardised and as not requiring change. Secondly, this study found that practitioners are making changes to evidence-based programmes, which challenges the assumption and promotion of standardised interventions as favoured under neoliberalism.

This research design has developed an original and cost-effective way in which the implementation of evidence-based programmes can be examined. This study utilised a qualitative methodology and innovative use of the information and communications technology (ICT) package 'Survey Monkey' to gather the reflective journal information. This allowed for the session reflections to be gathered on a regular basis.

A standardised template was sent to the practitioners on a weekly basis, which asked the same questions of them each week. The use of survey monkey worked well for this research; however, given the developments in relation to GDPR compliance since the research took place, another survey product, possibly associated with the Google suite could be utilised.

The consistency in the approach to the reflective journal ensured consistency in the data collection approach for reflective journaling. The practitioners provided information and rationalisation about their delivery, which allow for detailed and contextual understanding of the factors that affect the practitioner decision-making when delivering the Strengthening Families Programme. The use of the reflective journaling provided a regular explanation of the process of delivery of the

Strengthening Families Programme. The use of online reflective journaling could be used to capture practitioners' implementation of programmes on a wider scale. This qualitative method of understanding the process of implementation offers new possibilities for implementation science and the dissemination of programmes, as well as their adoption by practitioners.

The research project utilised the process outlined by (Charmaz, 2014). The process followed was consistent with a constructivist grounded theory approach. This provided for a thorough examination of the experience of delivering the Strengthening Families Programme. By using the practitioners' own words in the data analysis, the categories and theories are grounded in the data. This provides an accurate portrayal of the practitioners' experience of their delivery of the programme.

The use of Nvivo software assisted with organisation and analysis of the data during the research. However, the researcher found Nvivo cumbersome to use and not intuitive. Further consideration of an alternative package might be of benefit for future research.

This research offers an understanding of the changes made to the Strengthening Families Programme during the delivery by practitioners and the reasons why such changes are made. Again, this highlights challenges for neoliberalism and implementation science, as this research provides a contextual rationale for the changes to delivery, as outlined by the practitioners within this study.

This study provides the 'real-world' delivery context. It found that the delivery of the Strengthening Families Programme is delivered by practitioners who do not have representative levels of training and the practice backgrounds of those involved in its evaluation. This is a significant challenge for implementation science and the adequate dissemination of programmes, as well as maintaining fidelity and veracity and outcomes of the programme.

The interagency nature of the delivery surfaces in this research as one of the reasons that the planning and preparation processes are varied within this research. This is a challenge to the neoliberal influence of cost effectiveness, resource management and shared resources (West and Heath, 2011), and the implementation of a manualised

programme using an interagency approach. Additionally, the interagency model is not accounted for within the practitioner training or programme delivery. The need to include co-facilitation and interagency working as an element of the preparation of practitioners who engage with delivery in an interagency context has emerged as significant. It highlights the broader challenge of accommodating the delivery context in the development of programme dissemination strategies.

Practitioners engage their professional judgement when making the identified changes. While represented as being in response to the 'needs of the family', the practitioners have demonstrated consideration of a number of issues, including: content, appropriate adaptation, previous professional practice experience, etc. This highlights the engagement of the individual practitioner with the process of making changes to the programme as a dynamic and ongoing process grounded in their own professional and organisational experiences.

This research highlights the need for practice responses to take account of wider structural challenges, such as the social, political, economic, and organisational contexts, rather than rigid, inflexible interventions. This is a substantial issue for implementation science as to how evidence-based programmes can be relocated and replicated across contexts and adequately respond to the diverse profile of families that participate in the programme. The methodology within this research and the use of reflective journaling as a means of gathering contextual information about programme implementation provides an innovative way of examining programme implementation.

The application of the qualitative approach alongside the quantitative implementation measures can provide a more comprehensive and contextualised view of programme implementation. It demonstrates that quantitative evidence is not always the best option to 'track' implementation over time and offers mechanism to 'overlay' on all quantitative measures of implementation science. Ideally, this research will help provide ideas or guidance for future evaluation efforts – whether specifically at a developmental level, programme delivery level or organisation level.

7.4 Limitations of the Study and Areas for Further Research

As with any research, there are limitations to this research project. Firstly, despite the original research plan to research across two sites, this research only offers an examination of one geographical location. By examining only one area, there is no way to know if the same themes and categories would have emerged from other practitioners in another geographical location. As this research focused on one site, the findings of this research are not generalisable. By having greater geographical scope and practice context the analysis may have offered a greater contextual understanding of the topic.

Secondly, practitioners were not recruited using random sampling procedures in this research study. Given the interagency delivery of the Strengthening Families Programme and the *ad hoc* delivery times the programme is run throughout the year, purposeful sampling was used in this project. All practitioners in a programme implementation site were approached to participate in this study. The sample size of practitioners in this study was modest in size. Information related to the 'role' of the practitioners outside of their delivery of the Strengthening Families Programme was removed from the reflective journal entries. This was done, as it could have compromised the anonymity of the practitioners and their confidentiality. A wider sample of locations would have addressed this matter.

Constructivist grounded theory (Charmaz, 2014) was used in the analysis of the data. This study was exploratory, as little was known of the factors that influence practitioner decision-making in the context of delivering the Strengthening Families Programme. As the constructivist grounded theory method of data analysis is rooted with the practitioner's experiences of this study, the transferability of this research is limited. As this study is conducted in one site, further research across multiple sites would benefit the understanding of influences on decision-making in the context of delivering the Strengthening Families Programme on a larger scale. The use of the reflective journals and interviews as research tools provided rich contextual data, which offers different insights to the typically used quantitative tools. Use of a wider range of data collection tools may allow for different insights on this topic.

There is a need to use client-centred approaches to research and acknowledge the experiences of families who engage with such interventions, in research. This fits with current family support policy and guidelines (Pinkerton et al., 2004; CES, 2016; Family Support Agency, 2013). This research project does not capture the voice of the families who engage with the Strengthening Families Programme. It does not engage with children and families on their experiences. This is a gap in the literature and a limitation of this study. However, this research project is a first step in the examination of the delivery of such programmes by practitioners.

This research was exploratory in nature and focused on the practitioners and their delivery of the programme. Future research in this area may consider the role of parents and teens (programme participants) and their influence on changes to the programme. Additionally, a tandem research project that examines the practitioners' and families' experience of the delivery of the programme should be considered to provide greater contextual depth to the implementation. Furthermore, research which includes both quantitative and qualitative measures of implementation would greatly enhance the contextual understanding of implementation in the Irish context.

This research project is somewhat limited by virtue of the researcher-practitioner role. While the researcher's practitioner role may have facilitated openness to the research project by the Site Coordinator and the Steering Committee, it is also likely that it facilitated openness among the practitioners. Also, the researcher had significant influence over the planning, process, and development of this research project. The researcher outlined the research project framework, developed the reflective journal template, selected the tools to facilitate journal submissions, developed and conducted the interviews, and developed the theories. Should another researcher undertake this research, they may conduct it differently.

While this research provided an initial exploration of the delivery of the Strengthening Families Programme in a 'real-life setting', further research might be pursued across multi Strengthening Families Programme sites. This could provide more in-depth contextual information about the programme delivery. Further research could be pursued in relation to organisational factors, specifically with regard to whether appropriate referrals of families are made to the programme. The preparation of the

families to engage with the programme and their understanding of evidence-based programmes, as well as the role of supervision for practitioners, could provide greater contextual information relating to the adaption of the programme by practitioners and agencies.

Moving forward, it would be valuable to conduct a similar study to include community members as interviewees, to gain the community perspective on SFP implementation and programme delivery. This would provide a balanced perspective between practitioners who deliver the intervention and the families who engage with the programme. Also, having more data sources could offer data triangulation opportunities. Although qualitative methods provide rich data, utilising the quantitative measures alongside this research design would enhance the design and further increase rigour in results.

Future research opportunities also exist in the utilisation and application of the research tools and methodology from this research across other evidence-based programmes. There are opportunities to utilise the research tools during 'test settings' and also during implementation across different delivery contexts. Other research opportunities lie in the use of the research tools and application by practitioners to examine implementation of evidence-based programmes over time.

7.5 Recommendations and Conclusions

Parenting skills training interventions are recommended and implemented across the world (UNODC, 2009; WHO, 2010). Substantial evidence exists that parenting interventions, such as evidence-based programmes can improve parent child relationships and behaviours (Gardner et al., 2016). The programmes teach parents techniques to manage problem behaviours (Cotter et al., 2013), can reduce antisocial behaviours (Scott, 2005) and lead to improvements in youth outcomes (Sandler et al., (2011).

Evidence based programmes are viewed as an extremely valuable and useful intervention. This research does not contest their value or validity under test settings. Rather, it explores how practitioners deliver these interventions in real world settings.

This research has examined the process of the implementation of the Strengthening Families Programme in the Irish context. The findings of this study highlight the factors that influence practitioners in their delivery of the programme. The findings from this research show that despite programmes being standardised and manualised, adaptation is occurring during delivery. Such adaptations should be captured and documented so as to inform on future programme development and adaptations.

Programme implementation is challenged by the interagency model of delivery in the Irish context. There is no framework for planning, preparation, and supervision of practitioners working on an interagency basis. As practitioners represent different agencies, with different work practices, this is a challenge to the neoliberal influence of 'shared resources' and the implementation of a manualised programme.

Further research on the interagency model of delivery as a variable to the delivery of evidence-based programmes should be undertaken. The programme developers should re-examine the model of delivery used in the Irish context and review their dissemination and maintenance strategies for the programme. Reviews of the implementation of programmes should be undertaken at intervals post-dissemination into new contexts to examine if any updates or revisions need to be made for contextual reasons.

Programme implementation is challenged by the findings from this research which show that changes are being made to the programme, as it does not reflect the Irish cultural and language context. While the programme has undergone language and surface cultural adaptation (Kumpfer et al., 2010), it emerges from this research that this has not done enough. The programme would benefit from Irish and cultural revision by the programme developers to reflect the current Irish context.

This research highlights the need for a common framework when implementing programmes using an interagency model of delivery. Services/agencies/line managers who release staff to deliver the Strengthening Families Programme should be provided with guidance and training regarding the programme. The training should provide context and understanding of the Irish implementation of the programme and how to support practitioners in their delivery. In addition, using a common framework should include agreement from agencies on preparation time required of the programme. All

practitioners should be allocated enough preparation time ahead of a session delivery. This would enable any suggested delivery variation or deviation to be discussed with the delivery partners, rather than notification of changes. Additionally, the interagency nature of the delivery surfaces in this research as one of the reasons that the planning and preparation processes are varied.

As practitioners represent different agencies, with different work practices, this impacts on the time that practitioners can meet their co-facilitators to plan the session delivery. This is a challenge to the neoliberal influence of 'shared resources' and the implementation of a manualised programme using an interagency approach. The practitioner training should be developed to include working practical guidance on the co-facilitation with practitioners from differing agencies and the implications of this practice. In addition, consideration should be given by relevant academic programmes, such as social work programmes, early years programmes, youth and community work programmes, etc., to develop a training module related to the delivery of evidence-based programmes. This is a different form of intervention delivery and a move from relationship-based approach to a focus on a programme delivery. As students are engaged in the delivery of evidence-based programmes in practice, the academic training should be developed to reflect this.

A national policy should be encouraged to reflect on the significance of adequate contextual, cultural, and language adaptations in the implementation of evidence-based programmes. As little is known about the changes and adaptations to practice in the delivery of evidence-based programmes, a central database of adaptations should be created and updated regularly to inform the overall context of changes undertaken in the Irish context. This may be useful to inform programme developers about the updating and adaptations required for the programme in the Irish delivery context.

Funding agencies and steering committees should take into account the findings of this research and the adaption of the reflective journal framework to gather information and inform on the Irish process of implementation. Funding agencies and steering committees should compile the journals in a central bank, and a national evaluation of these should be undertaken, the findings of which could be communicated with the

developers of the Strengthening Families Programme in an effort to argue for programme changes to reflect the different delivery context in Ireland.

This research highlights 'what's going on' in the real-world delivery of an evidence-based programme. This study provides a new way in which to examine the implementation of evidence-based programmes by practitioners. It shows how qualitative approaches to data collection can provide additional contextual information. It highlights that through examination of the qualitative element of implementation science, important contextual information can be uncovered which further informs on the reach, dissemination and maintenance issues associated with evidence-based programmes. This research clearly demonstrates that there are additional ways to consider the tracking of programme implementation. It is asserted by this researcher that both the quantitative and qualitative measures should be considered in the implementation frameworks and plans for evidence-based programmes . A unique feature of the qualitative method set out in this research is that it can support the examination of examining implementation at all times, in all contexts, and in addition to existing quantitative measures of implementation assessment. This provides a strong argument for the adaption of this alongside quantitative measures of implementation.

Evidence-based programmes are an extremely positive and useful intervention for the support of families. This research explored how practitioners delivered one such intervention in a real-world setting. The undertaking of this study has enhanced this practitioner researcher. Through the writing of a research journal throughout the process, my thinking and feelings were captured. Through supervision, these journal entries were examined, implications for practice and researcher's positionality interrogated by the academic supervisors. The process has provided a greater appreciation of research and the integrity of process that must be upheld within research.

The gap in practice research has emerged is sizable and in undertaking this study it has highlighted the need for research to become a building block of practice in practice. The mainstreaming of practitioner research and research in practice is significant to building the evidence base and broader understanding among practitioners. The need

to disseminate practice research opportunities to practitioners is clear to me so that such approaches can be embedded as 'normal'. In addition, the need for research to be tangible and communicated at all levels of practice, particularly 'on the ground' is important as it provides a different appreciation and understanding of research. Personally, it has been challenging professionally and personally to balance research with practice and this researcher has learned of their resilience as they undertook this process. Overall, on reflection, it has been a very rewarding journey.

This research makes a significant contribution to scholarship on implementation science and to the literature on evidence-based programmes. It provides a framework which can be used to examine the delivery of any evidence-based programme, alongside quantitative measures. This researcher strongly advocates for the use of both quantitative and qualitative methods to examine implementation of programmes and provide a comprehensive, cohesive and contextual overview of programme delivery. This research will be useful to practitioners, steering committees, and funding bodies, which will ultimately be of benefit to the families who engage with the Strengthening Families Programme and other evidence-based programmes

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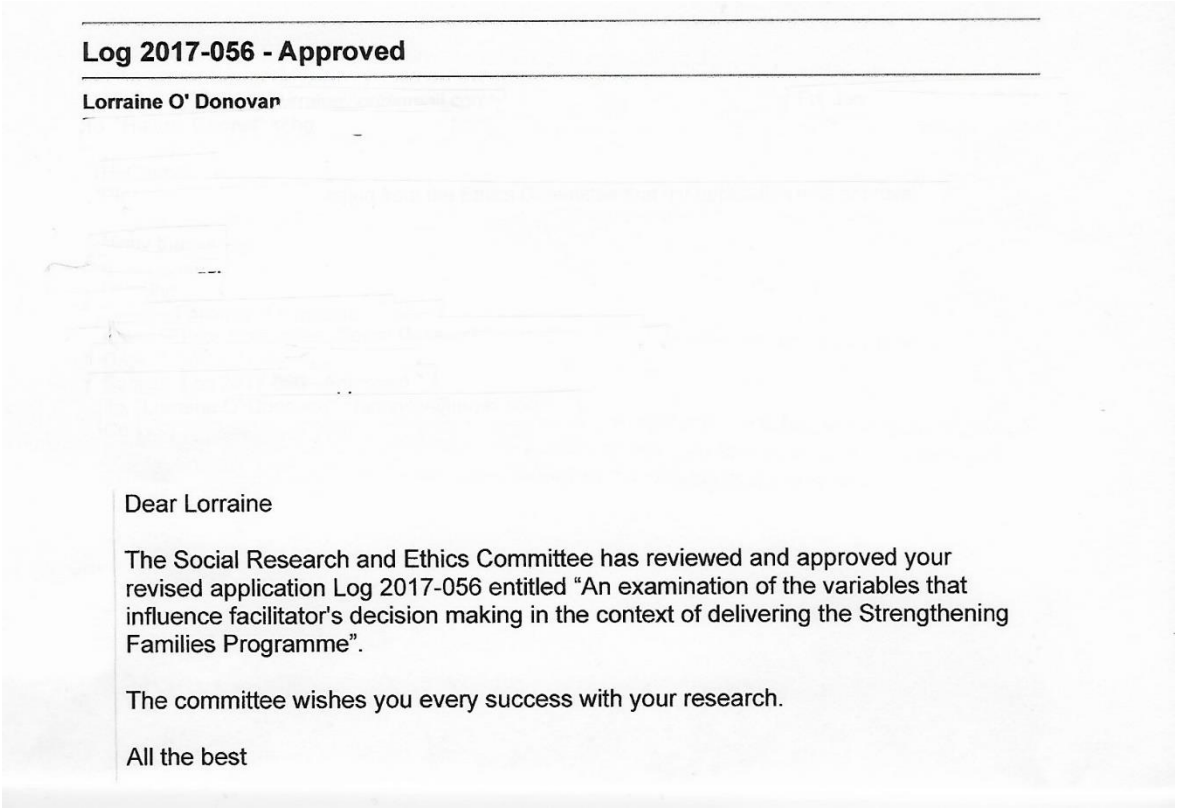
Appendix 1: Confirmation of UCC SREC Approval



Log 2017-056 - Approved

Lorraine O' Donovan

Dear Lorraine

The Social Research and Ethics Committee has reviewed and approved your revised application Log 2017-056 entitled "An examination of the variables that influence facilitator's decision making in the context of delivering the Strengthening Families Programme".

The committee wishes you every success with your research.

All the best

Appendix 2: Research Participant Information Sheet, supplied to Practitioners

Research Participant Information

- The researcher has consulted the Data Protection Commissioner in the consideration of the data obtained during the data collection phase of this research study www.datacommissioner.ie
- The researcher has also consulted the Code of Good Conduct in Research (UCC) and the Data Management Policy (UCC) in the development of this Participant Information Sheet.

Part 1 - Aim of the Research Study:

The aim of the research study is to examine the variables that influence facilitators' decision-making in the context of the delivery of the Strengthening Families Programme.

Part 2 – Invitation to take part in the Research Study:

You are being invited to take part in this research study. Before you make your decision, it is important that you understand why the research is being carried out and what it will involve. This participant information sheet will tell you about the purpose, risks and benefits of this research study. If you agree to take part, you will be asked to sign a consent form. If there is anything that you would like to have clarified, I will be happy to explain it to you. Please feel free to take as much time as you need to read through the Participant Information Sheet. You should only consent to take part in the research study when you feel you understand what is being asked of you, and you have had enough time to think about your decision.

Part 3 – Purpose of the Study:

This qualitative research study will use a grounded theory research methodology to examine the variables that influence facilitators' decision-making in the context of the delivery of the Strengthening Families Programme. You have been asked to take part because you are implementing the Strengthening Families Programme. I will ask you to complete online journal entries for each session of the Strengthening Families Programme that you facilitate and to participate in a focus group to further explore issues raised in the journal entries. This research is being undertaken as partial fulfilment of a PhD Programme. This research is not being undertaken in conjunction with any agency.

Part 4- Taking Part: What it involves.

Do I have to take part? It is up to you to decide whether or not to take part. If you decide to take part you will be given this information sheet to keep and you will be asked to sign a consent form.

If you do decide to take part, you are still free to withdraw up to week 4 of the delivery of the Strengthening Families Programme, without giving a reason. Participants should use the Withdrawal Form to withdraw their consent to participate in this research study. The information gathered up to the point of withdrawal at week 4 will be destroyed. A decision to withdraw or a decision not to take part will not affect your rights in any way.

What happens if I do decide to take part?

- If you do decide to take part in the research you will be given this information sheet to keep and you will be asked to sign a consent form.
- You will be asked to complete online journal entries for each session of the Strengthening Families Programme that you facilitate and to participate in a focus group to further explore issues raised in the journal entries.

- If you do decide to take part, you may withdraw from the research up to week 4 of the delivery of the Strengthening Families Programme without any questions being asked.

Are there any other expectations if I do decide to take part? If you do decide to take part in the research study, you will be expected to commit to attempt to implement the Strengthening Families Programme. You are not being requested to address any research questions to parents as the research is focused on exploring practitioner's decision-making when implementing the programme.

What are the benefits of my involvement? There may be some benefits to your participation if you do decide to take part. Your involvement would mean that you assist in the development of an understanding of the factors that influence facilitators' decision-making in the context of the delivery of the Strengthening Families Programme in Ireland. You may gain additional confidence and skills to complement your established approaches to your work with parents and families.

What are the possible disadvantages of taking part? The researcher does not envisage any negative consequences for you in taking part in this research study. The study involves the completion of journal entries which explores your practice. You might find while you are engaging with this research that you would like to speak with someone about some of the issues it raises. The researcher is available to clarify any procedural questions. The researcher can be contacted on 086 8768025 or 104091299@umail.ucc.ie.

Should you become distressed during the process you should contact the Samaritans. The Samaritans telephone number is 116 123.

What happens if I change my mind during the study? You are completely free to change your mind and withdraw your participation up until week 4 of the programme

implementation, during the study. You will be provided with a Consent Withdrawal Form which you can sign to confirm your wish to discontinue your participation in the research study.

Part 5 – Taking Part: After the Research Study

What happens at the end of the study? At the end of the study, the journal entries will be analysed by the researcher. The results and conclusions will form part of a PhD dissertation submission at University College Cork and may be published, for example, in peer reviewed journals. Participants in the research will be able to have a copy of the findings and conclusions on request. No participant identifying information will be contained in the PhD dissertation or in any subsequent publication that may arise. Participants in the research will be provided with copy of the findings and conclusions following the publication of the thesis. The findings will also be disseminated through publications such as journal articles and conference presentations. No participant identifying information will be contained in the PhD dissertation or in any subsequent publication that may arise. This researcher is committed to the anonymity and confidentiality of all transcripts in this research project.

Anonymity

- The information provided by you during this study will remain anonymous. The researcher will provide you with a participant ID number that will be used by you each time you complete a journal entry.
- I will ensure that identifying information with regards your identity or the programme on which you facilitated does not appear in the thesis.
- Extracts of what you write or say that are quoted in the thesis will be entirely anonymous.
- The locations of the Strengthening Families Programmes will not be identified in the thesis or any other publications.

Confidentiality

The researcher will be the only individual who will know the code assigned to you for this research project.

If you are interested in participating in this research project, you are asked to return the Participant Consent Form by post to the researcher to maintain the confidentiality of those who decide to proceed with participation on the project.

You are required to maintain strict confidentiality in relation to the families who are participating on the Strengthening Families Programme and are asked not to disclose any identifying information pertaining to the families in their reflective journals or in the focus group/interview.

Information provided by Participants

- The data collected will be anonymous for the duration of this research study.
- The data will be identified using a code which will be known only by the researcher.
- The researcher is the only person who knows the code assigned to you for this research project.
- The anonymised data will only be available to me, my two research supervisors and the three members of the Peer Consultation Group.
- The data provided will be held on the UCC Server.
- The researcher will use an encrypted computer for this project, which is located within the researcher's home.
- A hard copy of the data gathered will be stored in a safe within the researcher's home.
- Following on from the completion of this research study, the information will be stored for a further 10 years, as required by the UCC Data Management Policy.

Results/Findings

- The analysis, results and findings from this research project are owned by the researcher.
- The results/findings from this research study will be presented in the thesis. The results will be seen by my supervisors and external examiners.
- The results will be made available to the Cork & Kerry SFP Steering Group.
- It may be made available to the UCC Library and read by future students. It may be published online and in a research journal. The analysis, results and findings from this research project may also be presented at conferences.

What happens if I have a complaint or wish to provide any feedback about the research study? The researcher and the research project is overseen by two UCC academic supervisors. If you have a complaint or would like to make any comment about the research you can either speak with the researcher or the academic supervisor Dr Carmel Halton (contact details below). In the event that an issue concerning a reportable matter arises (for example, if a child protection concern arises during your work with parents and/or teens) you should follow the procedures established by your employing agencies.

Whom do I contact for more information or if I have further concerns? The researcher and the research project is overseen by two UCC academic supervisors. If you would like to speak with someone about any question in relation to the research study, you can speak with the researcher, Lorraine O' Donovan who can be contacted at 086 8768025 or 104091299@umail.ucc.ie. Should you have serious concerns about the ethical approach used in this study or wish to query the consent, please contact Dr Carmel Halton, University College Cork +353-21-490-3000 / chalton@ucc.ie.

Appendix 3: Research Participant Consent Form

Research Project Title: An examination of the factors that influence facilitators' decision-making in the context of the delivery of the Strengthening Families Programme.

- I have received the Participant Information Sheet with regards this study and it explains in writing, the purpose and nature of the study.
- I have been informed of and understand the purpose of the study.
- I have been given an opportunity to ask questions and seek clarification with regards this study.
- I understand that my participation in this study is voluntary and I can withdraw up to week 4 of the delivery of the Strengthening Families Programme, without prejudice.
- I have received the Consent Withdrawal Form, which will be used should I wish to with draw from the research study.
- I understand that participation in this research involves completing journal entries online. I understand that following the journal writing phase of the project, I can decide to engage in a focus group or one to one interview to discuss the concepts emerging from the analysis of the journal entries.
- I understand that this research is using a grounded theory approach.
- I understand that any information which might potentially identify me will not be used in published material.
- I understand that the locations of the Strengthening Families Programmes will not be identified in the thesis or any other publications
- **I understand and agree that disguised extracts from my journal entries may be quoted in the thesis and any subsequent publications. (Please initial) _____**
- **I understand and agree that disguised quotes from the focus group/interview may be used in the thesis and any subsequent publications. (Please initial) _____**
- I understand that the analysis, results and findings from this research project

are owned by the researcher.

- I understand that the analysis, results and findings from this research project will be seen by the researcher's supervisors and external examiners. I understand that it may be published online and in research journals. The analysis, results and findings from this research project may also be presented at conferences.
- I understand that I will provide the researcher with an email address which will be used by the researcher for the purposes of communication around the Survey Monkey and the journal reflection process. I understand that only the researcher will see and use this information. (Please initial) _____
- I understand that all of the information pertaining to me as a research participant and provided by me during the data collection phase (online reflective journal entries and the discussion at the focus group/interviews) will be stored on the UCC server for a period of 10 years.
- I understand that ethical approval for this research study has been granted by UCC.
- I understand that I can contact the researcher Lorraine O' Donovan 104091299@umail.ucc.ie should I have any questions about this research project.

  I agree to participate in this research. I have read the Research Participant Information Form and had any question I have about the research answered for me by the researcher.

Research Participant Name: _____

Research Participant Signature: _____

Date: _____ **Place: _____**

I believe the participant is giving informed consent to participate in this study.

Researcher Name: Lorraine O' Donovan

Signature: _____

Date: _____ **Place: _____**

Appendix 4: Research Participant Consent Withdrawal Form

Research Project Title: An examination of the variables that influence facilitators' decision-making in the context of the delivery of the Strengthening Families Programme.

You can withdraw your participation consent by returning this completed form to the researcher Lorraine O' Donovan at 104091299@umail.ucc.ie

I hereby wish to **WITHDRAW** my consent to participate in the research study described above and understand that such withdrawal **WILL NOT** jeopardise any treatment or my relationship with the researcher or the Strengthening Families Programme.

☐ **I agree** that any journal entries supplied by me up until this date can be used for the purposes of the research study.

☐ **I do not agree** that any journal entries supplied by me up until this date can be used for the purposes of the research study and will be destroyed by the researcher.

_____

Research Participant Name *(Print)*

_____ _____

Research Participant Signature Date

Received by the Researcher on (date) _____

Appendix 5: Research Advisory Group

Regional Strengthening Families Programme Steering Committee

Background

The Regional Strengthening Families Programme Steering Committee has been in existence for the past 9.5 years. The steering committee promotes the development of the programme and oversees the allocation of funding for the programme throughout the region. The researcher, through current and past employment, is a member of the steering committee.

The organisations on this steering committee represent funding agencies, agencies that provide staffing for the programme delivery and agencies that refer families to the programmes.

As this group funds the Strengthening Families Programme and strategically decides on the location of the programme it is appropriate that they receive information on the progress of this research project.

Ethical Approval

The Regional Steering committee has the authority to determine that no other ethical approvals are required. They have agreed that the UCC Ethical Approval process is sufficient for this project. This discussion and agreement has been minuted.

The steering committee will furnish the researcher with a letter stating that they endorse the research study.

This letter will be presented to research participants so that they can be assured that the research study has the support of the steering committee.

For the purposes of this research study, a number of members are forming a subgroup the Research Advisory Group who will meet and will be briefed on the progress of this research project by the researcher.

In the context of this research study;

- The researcher has a reporting relationship to the Research Information Group in terms of the progress of the data collection.
- The Research Information Group will not know the identity of the research participants.

- The Research Information Group will not have access to the information provided by the research participants

Appendix 6: Information on Consultative Peer Group

The purpose of this group is to enhance the veracity of analysis of the data and to examine bias or prejudice from the researcher towards the data.

Role

The consultative peer group will assist the researcher with the analysis of the data. The group will act as critical friends and will meet after the transcripts of the focus group/interviews have been analysed to examine the researcher's analysis of this information.

Membership

- The membership of the consultative peer group is limited to 3 individuals, and the researcher. These individuals have experience of programme delivery.

Conflict of interest/Declaration of interest

The researcher has a peripheral existing professional relationship with the members of the consultative peer group. The researcher does not know any of the members in a personal or professional capacity.

Frequency of Meeting

It is envisaged that the consultative peer group will meet approx. 3 times during the research project.

The group and the researcher will meet after approx. 4 weeks of the programme has been rolled out examine the researcher's initial analysis of the data. The group will meet after the programme has finished examining at the researcher's analysis of the data and the issues and themes emerging from the data.

Information available to the Consultative Peer Group

- The group will have full view of the journal entries and the transcripts of the focus group/interviews.
- The entries will be anonymised before being presented to the group. Any identifying information or site location will be obscured in the text.

- The entries will be sent as hard copies to the consultative peer group members by registered post.

The research participants will not know who the members of this group are.

The consultative peer group will not know who the research participants are.

Confidentiality

The members of the consultative peer group will be requested to complete a Confidentiality Agreement Form confirming that they understand and agree to respect the confidentiality and anonymity of the research participants and venues and all information collected.

Appendix 7: Statement of Confidentiality Consultative Peer Group

Research Project Title: An examination of the variables that influence facilitators' decision-making in the context of the delivery of the Strengthening Families Programme.

Name of Researcher: Lorraine O' Donovan

I understand the researcher has asked me to be a member of a consultative peer group.

I understand that the role of the consultative peer group is to examine the researcher's analysis of the data and to examine any possible bias or prejudice in this analysis.

By providing your signature below, you agree to the following.

- I understand that the group will be required to meet 3-4 times to examine the analysis of the text and transcripts from participants engaged in this research study.
- I understand the importance of confidentiality and anonymity for all research participants.
- I understand that the texts will be anonymised by the researcher in advance of my viewing them.
- I understand that the research information collected may contain references to individuals or organisations within the community, other than the participant(s). I understand that this information is to be kept confidential.
- I understand that the research information collected is not to be discussed or communicated to anyone other than the consultative peer group, in the presence of the researcher.
- I understand that I may not make any copies of the data files.
- I understand that the data files (hard copy) are to be secured at all times (not left unattended) and will be returned to the researcher when the examination of the data is complete.

- I understand that I am not to disclose the data or the emerging findings with anyone, other than the researcher.
- I understand that the analysis, results and findings from this research project are owned by the researcher.
- I understand that the analysis, results and findings of this project are owned by the researcher and will be used in the dissemination of this project through print, conferences and online medium.

I agree to the above statements and promise to respect the confidentiality and anonymity of the research participants and venues and all information collected.

Name of consultative peer group member: _____

Signature of consultative peer group member: _____

Date: _____ Place: _____

Appendix 8: Consenting Research Participant Contact Details

Research Project Title: An examination of the variables that influence facilitators' decision-making in the context of the delivery of the Strengthening Families Programme.

- I understand that I am providing the researcher with and email address which will be used by the researcher for the purposes of communication around the Survey Monkey and the journal reflection process. I understand that only the researcher will see and use this information. (Please initial) _____

- I understand that the locations of the Strengthening Families Programmes will not be identified in the thesis or any other publications.

- I understand that the information provided will be analysed and used in the researcher's thesis. I understand this information may be published in print, in online journals or other online publication tools or at conferences. (Please initial) _____

- I understand that all of the information pertaining to me as a research participant and provided by me during the data collection phase (online reflective journal entries and the discussion at the focus group) will be stored for a period of 10 years.

- I understand that I can contact the researcher, should I have concerns about this research Lorraine O' Donovan 104091299@umail.ucc.ie

- I understand that ethical approval for this research study has been granted by UCC.

Signed: _____ Date: _____

Research Participant Contact Details

Name of Research Participant:
Nominated email address for communication
TO BE COMPLETED BY THE RESEARCHER
Anonymised Code for Research Participant

Appendix 9: Letter to Consenting Research Participant

Date

Dear Research Participant,

Thank you for agreeing to be a research participant in the research study titled 'An examination of the variables that influence facilitators' decision-making in the context of the delivery of the Strengthening Families Programme'.

In the interests of preserving the confidentiality of the participants, each participant is provided with a unique code for the purposes of completing online reflective journal entries.

The unique code assigned to you is _____ .

You will be asked for this code each time you complete an online reflective journal entry. Please do not disclose this code to anyone else. The researcher is the only person who knows this code, apart from you.

I look forward to reading your reflections on your delivery of the Strengthening Families Programme.

Should you have any difficulty using this code or have any questions about the reflective journal entry, please do not hesitate to contact me at 104091299@umail.ucc.ie

Yours sincerely,

_____

Lorraine O' Donovan

Researcher

104091299@umail.ucc.ie

Appendix 10: Reflective Journal Template

Survey Monkey will be used as a platform for the research participants to log in and complete their online reflective journal. Survey Monkey is an industry standard open access survey creation and hosting platform.

Following the Participant Briefing Session and the return of the completed Participant Consent Form, the URL link generated by Survey Monkey will be distributed via email to the research participants.

The research participants will not be identifiable as they will be using their participant ID number, given to them in advance by the researcher.

The following information **(Section 1)** will be captured once, at the beginning of the data collection phase. This data will be used to create a profile of the participants

Section 1

Participant ID Number: _____

What is your job title? _____

Please outline your qualification(s).

A. _____
B. _____
C. _____

Please outline any facilitation skills training you have undertaken.

A. _____
B. _____
C. _____

How many years facilitation skills experience have you? Please include any relevant, previous roles. _____ years.

What year did you undertake the SFP 2 Day Facilitator Training? _____

How many times have you facilitated the delivery of the Strengthening Families Programme? _____

Have you previously facilitated the delivery of the;

Parents Skills Session ☐ Yes ☐ No Number of times _____

Teens Skills Session ☐ Yes ☐ No Number of times _____

Family Skills Session ☐ Yes ☐ No Number of times _____

What skills session are you currently facilitating on?

Parents Skills Session ☐ Yes ☐ No

Teens Skills Session ☐ Yes ☐ No

Family Skills Session ☐ Yes ☐ No

Section 2

The following information (Section 2) will be completed by the research participant for each session they facilitate.

1. The research participants will be provided with the following as a prompt but will have a free text box to write their reflective journal entry.

    - Did you make any changes to the session Yes ☐ No ☐
    - What in particular did you change?
    - What feelings prompted you to change this aspect of the session?
    - What did you notice about the response of participants to the change?
    - Did the change influence programme integrity? Yes ☐ No ☐
    - Did anything surprise you in terms of the response from participants?
    - Did anything surprise you in your own response?
    - What would you do in the future?/How might your future action be influenced by this reflection?

Thank you for providing a reflection on your delivery of the Strengthening Families Programme.

You are invited to take part in a discussion of the concepts emerging from the data analysis. If you would like to participate in a focus group/one to one interview, please tick the relevant box below and the researcher will email you to arrange this. This element of the research project is optional.

I would like to take part in a discussion of the concepts emerging from the data analysis.

	Yes	☐	No	☐
I would like to take part in a focus group	Yes	☐	No	☐
I would like to take part in a one to one interview	Yes	☐	No	☐

Thank you

Should you wish to discuss any aspect of this study with the researcher please find the relevant contact details below.

Researcher Contact Details

Lorraine O' Donovan

104091299@umail.ucc.ie.

Appendix 11: Research Participant One to One Interview

Research Participant One to One Interview Information

The research participants who complete the online reflective journal entries for their delivery of the Strengthening Families Programme will be invited to participate in a one to one interview.

It is recognised that some participants may wish to discuss the data analysis and emerging themes and concepts but would prefer to do so as part of a group or on a one to one basis. Both preferences have been accommodated for in this research project.

Purpose

This focus group/interview will analyse in greater depth, the concepts and themes that are emerging from the analysis of the journal entries.

Consent

Participants will be asked in the reflective journaling element of the research if they wish to engage in a one to one interview or focus group discussion on the data and themes that emerge from the journals. The participation in the interview/focus group is optional.

Participants will be furnished with the Participant Information Sheet for the One to One Interview. Participants will be required to sign a consent and confidentiality statement.

Format of the focus group/interview

The discussion for the focus group and interview is the same. Please see Research Participant Focus Group/Interview Discussion Template for an overview of the discussion.

Duration of the focus group

It is expected that the focus group/interview will run for approx. 1.5-2 hours.

Recording of the focus group

The focus group/interview will be audio recorded and the researcher may write additional notes.

Transcribing the discussion

The recording of the focus group will be transcribed.

Focus Group Participation Rules

The participants of the focus group will be informed of the Focus Group Participation Rules in the Research Participant Information Sheet for the Focus Group. The participants will be supplied with a copy of the Focus Group Participation Rules before the discussion commences. All participants will be asked to sign the form to indicate that they understand and agree to abide by these rules. The Focus Group Participation Rules are;

1. Participants will not reveal the identity of other participants in any other forum, at any time.
2. Participants will not reveal the identity of the families participating on the Strengthening Families Programme.

3. Participants are required to be respectful of each other and of the experiences and opinions of each individual.
4. Participants are not permitted to take photographs of other participants or the focus group.
5. Participants are not permitted to audio or video record the discussion. The researcher (only) will record the focus group.
6. Participants are not permitted to update social media with photos, audio, video recordings, status updates, check in etc on social media.

Discussions or issues outside of the emerging themes from the data are not appropriate for this platform.

One to One Interview Participation

The participants who engage with the one to one interview will be supplied with a copy of the Research Participant Information Sheet for One to One Interview. Participants will be required to sign a Consent and Confidentiality Statement. Research participants are required to maintain strict confidentiality in relation to the research participants and the families who are participating on the Strengthening Families Programme and are asked not to disclose any identifying information pertaining to the families in the interview. All participants will be asked to sign the interview attendance form to indicate that they understand and agree to abide by the confidentiality rules.

Venue

The focus group and one to one interviews will be held in neutral venues e.g. hotel, which has no connection with the Strengthening Families Programme.

Treatment of the Research Participants

This researcher recognises that the research participants are professionals working within specific fields which may or may not be similar to the researcher's own. It is not the focus of this research project, or the researcher to critique the research participant's practice, reflections or opinions. The purpose of the research project and the focus group and one to one interviewing element is to gather information from the participants. The discussions in the focus groups and one to one interviews will be guided by the questions as per appendix 13 and will only be re-directed if the discussion moves off topic.

Appendix 12: Research Participant Information Sheet One to One Interview

Research Project Title: An examination of the variables that influence facilitators decision-making in the context of the delivery of the Strengthening Families Programme.

- The researcher has consulted the Data Protection Commissioner in the consideration of the data obtained during the data collection phase of this research study www.datacommissioner.ie
- The researcher has also consulted the Code of Good Conduct in Research (UCC) and the Data Management Policy (UCC) in the development of this Participant Information Sheet.

Part 1 - Aim of the Research Study:

The aim of the research study is to examine the variables that influence facilitators' decision-making in the context of the delivery of the Strengthening Families Programme.

Part 2 – Invitation to take part in second phase of the research study, the one to one interview

You are being invited to take part in a one to one interview. Before you make your decision, it is important that you understand why the research is being carried out and what it will involve. This participant information sheet will tell you about the purpose, risks and benefits of participating in the interview. If you agree to take part, you will be asked to sign an agreement and confidentiality statement. If there is anything that you would like to have clarified, I will be happy to explain it to you. Please feel free to take as much time as you need to read through this Participant Information Sheet. You should only consent to take part in the research study when you feel you understand what is being asked of you, and you have had enough time to think about your decision.

Part 3 – Purpose of the Study:

This qualitative research study will use a grounded theory research methodology to examine the variables that influence facilitators' decision-making in the context of the delivery of the Strengthening Families Programme. You have been asked to take part because you are implementing the Strengthening Families Programme and have already completed online reflective journal entries for each session of the programme that you facilitated.

The one to one interview will discuss the data and the emerging themes from the journal entries.

This research is being undertaken as partial fulfilment of a PhD Programme. This research is not being undertaken in conjunction with any agency.

Part 4- Taking Part: What it involves.

Do I have to take part? It is up to you to decide whether or not to take part. If you decide to take part you will be given this information sheet to keep and you will be asked to sign an agreement and confidentiality form.

What happens if I do decide to take part?

- If you do decide to take part in the research you will be given this information sheet to keep and you will be asked to sign an agreement and confidentiality form.
- You will be asked to participate in a one to one interview to further explore the information emerging from the journal entries. The expected duration of the interview is 1-1.5 hours.
- The journal entries submitted by participants will not be shown during the one to one interview.

Are there any other expectations if I do decide to take part? If you do decide to take part in the research study, you will be expected to participate in the interview with the

researcher and discuss the data and emerging themes from the journal entry element of the research project.

What are the benefits of my involvement? There may be some benefit to your participation if you do decide to take part. Your involvement would mean that you assist in the development of an understanding of the factors that influence facilitators' decision-making in the context of the delivery of the Strengthening Families Programme in Ireland.

What are the possible disadvantages of taking part?

The researcher does not envisage any negative consequences for you in taking part in the one to one interview as the researcher will maintain confidentiality and anonymity. Each participant will be asked to read and confirm they will abide by the Agreement & Confidentiality Statement.

You might find while you are engaging with this research that you would like to speak with someone about some of the issues it raises. The researcher is available to clarify any procedural questions. The researcher can be contacted on 086 8768025 or 104091299@umail.ucc.ie.

Should you become distressed during the process you should contact the Samaritans. The Samaritans telephone number is 116 123.

Recording of the One to One Interview

- The one to one interview will be audio recorded by the researcher and the content transcribed.
- The identity of the participants will be anonymised by the researcher.

Part 5 – Taking Part: After the Research Study

What happens after the focus group? After the one to one interview, the discussion will be analysed by the researcher. The results and conclusions will form part of a PhD dissertation submission at University College Cork and may be published, for example, in peer reviewed journals. Participants in the research will be provided with copy of the findings and conclusions following the publication of the thesis. The findings will also be disseminated through publications such as journal articles and conference presentations. No participant identifying information will be contained in the PhD dissertation or in any subsequent publication that may arise. This researcher is committed to the anonymity and confidentiality of all transcripts in this research project.

Withdrawal from the research project (one to one interview element)

I understand that I have up to two weeks from the date of my interview to withdraw from this element of the research project, using the interview withdrawal form.

Should I withdraw, I understand that the researcher will destroy the data gathered during interview. The data will not be used in the research project described above or any other research project.

Anonymity

- By participating in the one to one interview your identity will only be known to the researcher.
- The researcher will ensure that identifying information with regards your identity or the programme on which you facilitated does not appear in the thesis.
- Extracts of what you write or say that are quoted in the thesis will be entirely anonymous.
- The locations of the Strengthening Families Programmes will not be identified in the thesis or any other publications.

Confidentiality

You are required to maintain strict confidentiality in relation to the research participants and the families who are participating on the Strengthening Families Programme and are asked not to disclose any identifying information pertaining to the families in the interview.

Information provided by Participants

- The information provided during the one to one interview will be held on the UCC Server. The researcher will use an encrypted computer which is located within the researcher's home.
- A hard copy of the information provided during the one to one interview will be held in a safe within the researcher's home.
- Following on from the completion of this research study, the information will be stored for a further 10 years, as required by the UCC Data Management Policy.

Results/Findings

- The analysis, results and findings from this research project are owned by the researcher.
- The results/findings from this research study will be presented in the thesis. The results will be seen by my supervisors and external examiners.
- The results will be made available to the Cork & Kerry SFP Steering Group.
- It may be made available to the UCC Library and read by future students. It may be published online and in a research journal. The analysis, results and findings from this research project may also be presented at conferences.

What happens if I have a complaint or wish to provide any feedback about the research study? If you have a complaint or would like to make any comment about the research you can either speak with the researcher or her academic supervisor Dr Carmel Halton (contact details provided below). In the event that an issue concerning a reportable matter arises (for example, if a child protection concern arises during your work with parents and/or teens) you should follow the procedures established by your employing agencies.

Whom do I contact for more information or if I have further concerns? If you would like to speak with someone about any question in relation to the research study, you can speak with the researcher, Lorraine O' Donovan who can be contacted at 104091299@umail.ucc.ie.

The researcher and the research project is overseen by two UCC academic supervisors. Should you have serious concerns about the ethical approach used in this study please contact Dr Carmel Halton, University College Cork +353-21-490-3000 /chalton@ucc.ie

Appendix 13: Research Participant Consent Form & Confidentiality Statement - One to One Interview

Research Project Title: An examination of the variables that influence facilitators' decision-making in the context of the delivery of the Strengthening Families Programme.

Purpose of the One to One Interview

The one to one interview will analyse in greater depth, the themes that are emerging from the analysis of the journal entries.

Optional Participation

I understand the researcher has asked me to participate in the one to one interview and that this is an optional element of the research project.

Interviewer

The interviewer is the research student, Lorraine O' Donovan

By giving your signature below, you confirm that;

- I have received the Participant Information Sheet with regards this study and it explains in writing, the purpose and nature of the study.
- I have been informed of and understand the purpose of the study.
- I have been given an opportunity to ask questions and seek clarification with regards this study.
- I understand that the purpose of the one to one interview is to analyse, in greater depth, the themes emerging from the data. I understand that any discussions or issues outside of this are not appropriate for this platform. **(initial _____)**
- I understand that my participation in this study is voluntary.

- I understand that any information which might potentially identify me will not be used in published material.
- I understand that the locations of the Strengthening Families Programmes will not be identified in the thesis or any other publications
- **I understand and agree that disguised quotes may be used in the thesis and any subsequent publications. (Please initial) _____**
- I understand the importance of confidentiality and anonymity for all of research participants.
- I understand the importance of confidentiality and anonymity for all of the families participating on the Strengthening Families Programme.
- I understand that the information or discussions is not to be discussed or communicated to anyone other than in the presence of the researcher.
- I understand that I am not to disclose the data or the emerging findings with anyone, other than the researcher.
- I understand that I have up to two weeks from the date of my interview to withdraw from this element of the research project, using the interview withdrawal form. Should I withdraw, I understand that the researcher will destroy the data gathered during interview.
- I understand that the analysis, results and findings from this research project are owned by the researcher.
- I understand that the analysis, results and findings from this research project will be seen by the researcher's supervisors and external examiners. I understand that it may be published online and in research journals. The analysis, results and findings from this research project may also be presented at conferences.
- I understand that all of the information pertaining to me as a research participant and provided by me during the data collection phase (will be stored for a period of 10 years.
- I understand that ethical approval for this research study has been granted by UCC.

- I understand that I can contact the researcher Lorraine O' Donovan 104091299@umail.ucc.ie should I have any questions about this research project.

I agree to participate in this research. I have read the Research Participant Information Form and had any question I have about the research answered for me by the researcher.

Research Participant Name: _____

Research Participant Signature: _____

Date: _____ **Place: _____**

Appendix 14: Research Participant Consent Withdrawal Form - One to One Interview

Research Project Title: An examination of the variables that influence facilitators' decision-making in the context of the delivery of the Strengthening Families Programme.

You can withdraw your participation consent by returning this completed form to the researcher Lorraine O' Donovan at 104091299@umail.ucc.ie

I hereby wish to **WITHDRAW** my consent to participate in the one to one interview element of the research study described above and understand that such withdrawal **WILL NOT** jeopardise any treatment or my relationship with the researcher or the Strengthening Families Programme.

I understand that the information supplied by me during the interview will be destroyed and not used in the research study described above, or any related research studies.

_____

Research Participant Name *(Print)*

_____ _____

Research Participant Signature Date

Received by the Researcher on (date) _____

Appendix 15: Participation Agreement One to One Interview

Research Project Title: An examination of the variables that influence facilitators' decision-making in the context of the delivery of the Strengthening Families Programme.

The one to one interview is a follow up element to the reflective journaling phase of the research project.

- The one to one interview will enquire into your practice of delivering the Strengthening Families Programme.
- It is expected that the interview will run for approx. 1.5-2 hours.
- The interview will be audio recorded and the researcher may write additional notes on their view of the discussion.
- The recording of the focus group will be transcribed.
- The information provided by you, the participant will be anonymised.
- I understand that I have up to two weeks from the date of my interview to withdraw from this element of the research project, using the interview withdrawal form.
- Should I withdraw, I understand that the researcher will destroy the data gathered during interview. The data will not be used in the research project described above or any other research project.

Date of interview: _____ **Location: _____**

Name of Research Participant _____

Thank you

Should you wish to discuss any aspect of this study with the researcher or query the ethics of this study, please find the relevant contact details below.

Researcher Contact Details

Lorraine O' Donovan

104091299@umail.ucc.ie

Dr Carmel Halton, University College Cork +353-21-490-3000 /chalton@ucc.ie

Appendix 16: Agency Information Sheet

Research Project Title: An examination of the variables that influence facilitators decision-making in the context of the delivery of the Strengthening Families Programme.

Part 2 – Purpose of the Study:

This qualitative research study will use a grounded theory research methodology to examine the variables that influence facilitators' decision-making in the context of the delivery of the Strengthening Families Programme. Participants have been asked to take part because they are implementing the Strengthening Families Programme. Participants are asked to complete online journal entries for each session of the Strengthening Families Programme that they facilitate. Following this element of the research, participants may choose to engage in a focus group discussion or a one to one interview. This research is being undertaken as partial fulfilment of a PhD Programme. This research is not being undertaken in conjunction with any agency.

Part 3 - Cork & Kerry Strengthening Families Programme Steering Committee

The Cork & Kerry Strengthening Families Programme Steering Committee is comprised or representative of agencies across the region. The steering committee's main concerns are making strategic decisions concerning the roll out of the programme across the Cork and Kerry areas. The steering committee is aware of this research and will be updated on the progress of the data collection but does not own the research. The researcher has a reporting relationship to the steering committee.

Part 4 – Invitation to take part in the Research Study:

Your staff member has been invited to take part in this research study. This participant information sheet will tell you about the purpose, risks and benefits of this research study. If you agree that your staff member may take part, you will be asked to sign a consent form. If there is anything that you would like to have clarified, I will be happy to explain it to you.

Part 4 - Taking Part: What it involves.

Taking part is voluntary. All participants who decide to take part will be asked to sign a participant consent form.

Element 1

Participants are asked to complete online reflective journal entries for each session of the Strengthening Families Programme that they facilitate.

Should participants wish to with draw, they can do so up to week 4 of the programme implementation using the Withdrawal Form. The information gathered up to this point will be destroyed.

This element of the research project should take 20-30 minutes per week.

Element 2

Participants may choose to engage in a focus group discussion or in a one to one interview. The purpose of this element of the research is to discuss the data that is emerging from the online reflective journals.

The expected duration of the focus group and interview is 1-1.5 hours.

Are there any other expectations if my staff member decides to take part? If your staff member decides to take part in the research study, they will be expected to commit to attempt to implement the Strengthening Families Programme and complete the online reflective journals. They may decide to participate in the focus group or one to one interviews. You, your organisation or your staff member are not being requested to address any research questions to parents as the research is focused on exploring practitioner's decision-making when implementing the programme.

What are the benefits of my involvement? There may be some benefits to participation in this research project. The involvement of your staff member would mean that you assist in the development of an understanding of the factors that influence facilitators' decision-making in the context of the delivery of the Strengthening Families Programme in Ireland.

What are the possible disadvantages of taking part? The researcher does not envisage any negative consequences for taking part in this research study.

The study involves the completion of journal entries which explores facilitator's practice.

Should the research participant decide to engage in a focus group discussion, their identity is no longer anonymous or confidential.

The researcher is available to clarify any procedural questions. The researcher can be contacted on 086 8768025 or 104091299@umail.ucc.ie. All research participants will be supplied with the Samaritans telephone number 116 123 should any issues arise for any participant during the research.

What happens if my staff member changes their mind during the study? Participants are completely free to change their mind and withdraw their participation up until week 4 of the programme implementation, during the study. Participants can

use a Consent Withdrawal Form to confirm their wish to discontinue participation in the research study. The information gathered from the participant is destroyed.

Following the one to one interview, participants may withdraw up to weeks after the date of the interview. Participants can use a Consent Withdrawal Form to confirm their wish to discontinue participation in the research study. The information gathered from the participant is destroyed.

Participants can withdraw from the focus group element of the research project at any time before the focus group takes place. However, once they have participated in the focus group discussion it is not possible to withdraw my contributions as it may not be possible to identify them on the audio recording.

Part 5 – Taking Part: After the Research Study

What happens at the end of the study? At the end of the study, the journal entries and focus group and interview responses will be analysed by the researcher. The results and conclusions will form part of a PhD dissertation submission at University College Cork and may be published, for example, in peer reviewed journals. Participants in the research will be able to have a copy of the findings and conclusions on request. No participant identifying information will be contained in the PhD dissertation or in any subsequent publication that may arise.

Anonymity

- The information provided by participants during the reflective journal element of this study will remain anonymous. The researcher will provide the research participant with a participant ID number that will be used by them each time they complete a journal entry.
- The researcher will ensure that identifying information with regards your identity, the organisation they represent or the programme on which you facilitated does not appear in the thesis.
- Extracts of what is written or said which are quoted in the thesis will be entirely anonymous.

- The locations of the Strengthening Families Programmes will not be identified in the thesis or any other publications.
- The organisations that facilitators represent will not be identified in the thesis or any other organisations.

Confidentiality

The researcher is committed to preserving the confidentiality and anonymity of all transcripts gathered during this research project.

The researcher will be the only individual who will know the code assigned to you for this research project.

The researcher will be the only one to know the identity of participants who engage in the one to one interview.

Should participants choose to engage in the focus group, the participants identity cannot be assured. Participants are asked to adhere to the focus group participation rules which are;

- Participants will not reveal the identity of other participants in any other forum, at any time.
- Participants will not reveal the identity of the families participating on the Strengthening Families Programme.
- Participants are required to be respectful of each other and of the experiences and opinions of each individual.
- Participants are not permitted to take photographs of other participants or the focus group.
- Participants are not permitted to audio or video record the discussion. The researcher (only) will record the focus group.
- Participants are not permitted to update social media with photos, audio, video recordings, status updates, check in etc on social media.

Consent

All research participants are provided with Research Participant Information Forms for each element of the research project. Each participant is asked to sign a consent form for each element of the research project.

Participants are required to maintain strict confidentiality in relation to the families who are participating on the Strengthening Families Programme and are asked not to disclose any identifying information pertaining to the families in their reflective journals or in the focus group/interview.

Information provided by Participants

- The data collected will be anonymous for the duration of this research study.
- The data from the journal entries will be identified using a code which will be known only by the researcher.
- The focus group and one to one interviews will be transcribed and anonymised.
- The anonymised data will only be available to me, my two research supervisors and the three members of the Peer Consultation Group.
- Following on from the completion of this research study, the information will be stored for a further 10 years, as required by the UCC Data Management Policy.

Results/Findings

- The analysis, results and findings from this research project are owned by the researcher.
- The results/findings from this research study will be presented in the thesis. The results will be seen by my supervisors and external examiners.
- The results will be made available to the Cork & Kerry SFP Steering Group.
- It may be made available to the UCC Library and read by future students. It may be published online and in a research journal. The analysis, results and findings from this research project may also be presented at conferences.

I am happy for my staff member to participate in this research, what do I do?

If you are content for your staff member to engage in this research project, please complete the agency consent release form and give it to your staff member to submit to the researcher.

What happens if I have a complaint or wish to provide any feedback about the research study? If you have a complaint or would like to make any comment about the research you can either speak with the researcher or the academic supervisor.

Whom do I contact for more information or if I have further concerns? If you would like to speak with someone about any question in relation to the research study, you can speak with the researcher, Lorraine O' Donovan who can be contacted at 086 8768025 or 104091299@umail.ucc.ie. The researcher and the research project is overseen by two UCC academic supervisors. Should you have serious concerns about the ethical approach used in this study or wish to query the consent, please contact Dr Carmel Halton, University College Cork +353-21-490-3000 /chalton@ucc.ie.

Appendix 17: Agency Consent Form

Research Project Title: An examination of the variables that influence facilitators decision-making in the context of the delivery of the Strengthening Families Programme.

Name of Research Participant: _____

Name of Agency/Organisation: _____

I confirm that I have responsibility for the management of the above named individual who has expressed an interest in participating in the above titled research project.

I understand that;

- I have received the Participant Information Sheet with regards this study and it explains in writing, the purpose and nature of the study.
- I have been informed of and understand the purpose of the study.
- I understand that participation in this research involves completing journal entries online. I understand that following the journal writing phase of the project, the research participants can decide to engage in a focus group or one to one interview to discuss the concepts emerging from the analysis of the journal entries.
- I understand that this research is using a grounded theory approach.
- I understand that any information which might potentially identify participants will not be used in published material.
- I understand that the locations of the Strengthening Families Programmes will not be identified in the thesis or any other publications.
- I understand that the name of the agency that the staff member represents will not be identified in the thesis or any other publications.

I understand that the researcher will not communicate any information to me regarding the staff member or the data supplied by them for this research project.

- I understand that the analysis, results and findings from this research project are owned by the researcher.
- I understand that the analysis, results and findings from this research project will be seen by the researcher's supervisors and external examiners. I understand that it may be published online and in research journals. The analysis, results and findings from this research project may also be presented at conferences.
- I understand that all of the information pertaining to the research participant and provided by during the data collection phase (online reflective journal entries and the discussion at the focus group/interviews) will be stored for a period of 10 years.
- I understand that ethical approval for this research study has been granted by UCC.
- I understand that the participation or withdrawal of the named staff member in this research project does not affect mine or the agency's rights.
- I understand the importance of confidentiality and anonymity for all of the facilitators participating in this research.
- I understand that I can contact the researcher Lorraine O' Donovan 104091299@umail.ucc.ie should I have any questions about this research project.

I confirm that I have read the participant information sheet. I confirm that the above named staff member has permission to participate in the research project named above.

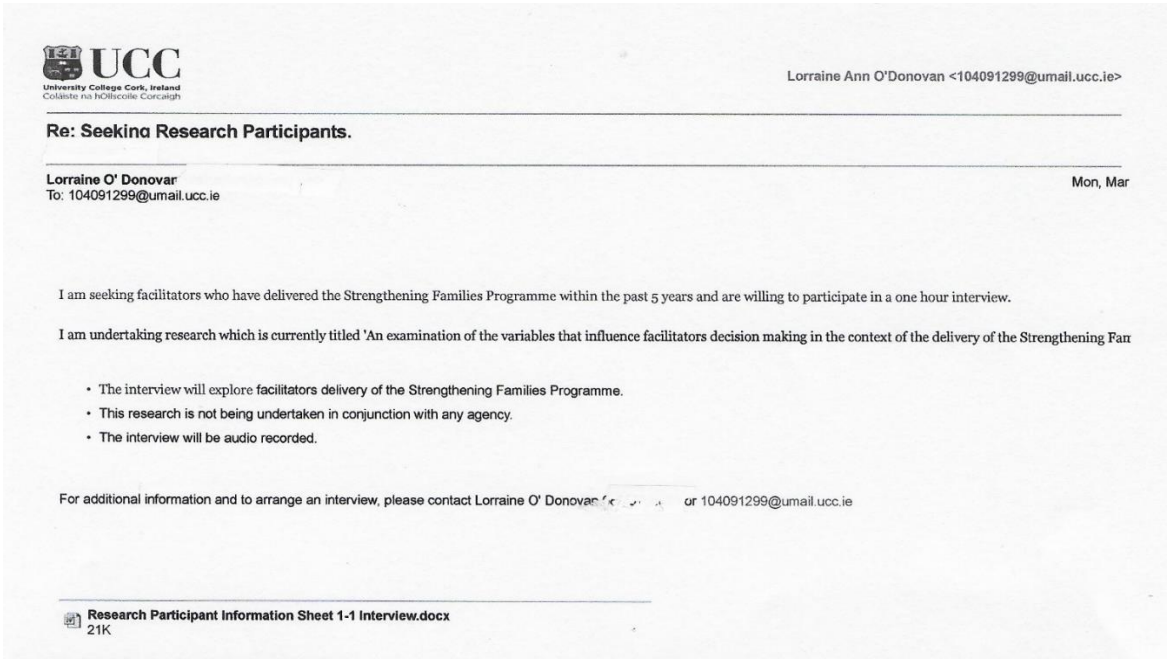
Name of Manager: _____

Signature of Manager: _____

Date: _____

Date received by Researcher _____

Appendix 18: Email sent to Practitioners within the Region, seeking participation in a one to one interview



UCC
University College Cork, Ireland
Coláiste na hOllscoile Corcaigh

Lorraine Ann O'Donovan <104091299@umail.ucc.ie>

Re: Seeking Research Participants.

Lorraine O' Donovan
To: 104091299@umail.ucc.ie

Mon, Mar

I am seeking facilitators who have delivered the Strengthening Families Programme within the past 5 years and are willing to participate in a one hour interview.

I am undertaking research which is currently titled 'An examination of the variables that influence facilitators decision making in the context of the delivery of the Strengthening Fam

- The interview will explore facilitators delivery of the Strengthening Families Programme.
- This research is not being undertaken in conjunction with any agency.
- The interview will be audio recorded.

For additional information and to arrange an interview, please contact Lorraine O' Donovan [redacted] or 104091299@umail.ucc.ie

Research Participant Information Sheet 1-1 Interview.docx
21K

Appendix 19: Briefing Notes Presentation

Research Project Title: An examination of the variables that influence facilitators decision making in the context of the delivery of the Strengthening Families Programme.

Researcher - Lorraine O' Donovan, PhD Candidate, UCC

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Briefing Session to Research Participants

The objective of the briefing session is to inform research participants on;

- the aim of the research study & the research questions
- the research method & selected data collection tools.
- the commitment and requirements of engaging with this research study.
- the usage of the data collected & anonymity
- the benefits & disadvantages to participation in this research study

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Agenda for Briefing Session

- About the Researcher
- Introduction to the Research Study, Aims & Research Questions
- Taking Part - Reflective Journal Entry
- What happens the data?
- Anonymity
- Benefits & Disadvantages
- Considerations
- Consent & Withdrawal
- Questions

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Aims

The key aim of this research study is to ascertain a detailed portrait of the experiences of facilitators and to learn of the attitudes, beliefs, perceptions and practices in relation to the Strengthening Families Programme.

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Ethical Approval

- Ethical approval has been sought and granted by the UCC Social Research Ethics Committee.
- The Cork & Kerry SFP Steering Committee have provided approval to the researcher for this project. The steering committee have an advisory and supportive role to the researcher of this study, providing suggestions and a quality control element to the research design and data collection tools and strategy.

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Research Methods

- Online reflective journals will be used to collect the data.
- This will be complemented by focus group/ one to one interviews after the programme has finished. (You can decide which you would like to do, if any)

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What is involved if I take part?

- 1) Each research participant will be asked to complete an online journal reflection for each session of the Strengthening Families Programme that they deliver. (This takes 10-12 minutes)

and

2) Participants will be invited to participate in a focus group (with other participants), which is facilitated by the researcher or in a one to one interview with the researcher.

The purpose of the focus group/ interview is to discuss the concepts emerging from the data.

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Journal Entry

- Participants are asked to use Survey Monkey to complete an online reflective journal entry on your delivery of each session of the Strengthening Families Programme.
- Some questions are multiple choice, some require comments.
- The researcher will send you a link after each week of the programme.

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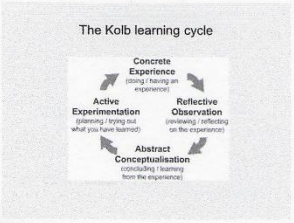
Reflective Journal Entry (based on Kolb)



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Some viewing

- https://www.youtube.com/watch?v=2xgkpP59UgM

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- What are your first thoughts on this clip?
- What did you see?

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Reflecting

Please write a piece on the clip you watched, using the following as prompts;

- Which part of the clip are you going to reflect on? What was going on?
- What were your feelings and reactions?
- What was good or bad? Did I make a value judgement? What was the judgement?
- What sense can I make of the situation?
- What are my conclusions from this analysis?
- What are my conclusions about myself, from this experience/ analysis?
- What might be your action plan for the future?

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Group Work

- 1) Please turn to the person next to you and please share both reflections.
- 2) Discuss the differences in your reflections.

- In the wider group;
- How did people find that exercise
- Did anything surprise you?

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Moving from the example to the research project

- The activity that you have undertaken on the video clip is a reflection.
- All reflections are slightly different as we have our own style of writing.

- **Each participate is asked to reflect on the decisions they made about delivering the Strengthening Families Programme and write a journal entry.**

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What happens to the data?

- The data collected will be anonymised.
- The data will be identified using a code which will be known to the researcher.
- The anonymised data will only be available to me, my two research supervisors and the three members of the Peer Consultation Group.
- The data provided will be held on an encrypted UCC server.
- Hard copy data will be stored by the researcher.
- Following on from the completion of this research study, the information will be stored for a further 10 years in accordance with UCC Ethics Committee Requirements.

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Anonymity

- The information provided by you during this study will remain anonymous. I will ensure that identifying information with regards your identity or the programme on which you facilitated does not appear in the thesis.
- Extracts of what you write or say that are quoted in the thesis will be entirely anonymous.
- The locations of the Strengthening Families Programmes will not be identified in the thesis or any other publications.
- Your journal entries will be completed using a personalised code, only known to you and the researcher

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Children First 2011

- You are being asked to reflect on your decision making when delivering the Strengthening Families Programme.
- **Participants are asked NOT TO identify those participating on the Strengthening Families Programme.**

Please Note:

- **Where the researcher identifies, in the journal entries or the focus group discussion, any concerns with regards the welfare and protection of children, the researcher will inform TUSLA, as per the Children First National Guidance for the Protection and Welfare of Children (2011).**

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Benefits to Participation

- Your involvement would mean that you assist in the development of an understanding of the factors that influence facilitators' decision making in the context of the delivery of the Strengthening Families Programme in Ireland. This project is addressing a gap in the research and the literature.

- You may gain confidence in utilising your skills of reflection which may complement your established approaches to your practice.

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Disadvantages to Participation

- The researcher does not envisage any negative consequences for you in taking part in this research study. The study involves the completion of journal entries which explores your practice. You might find while you are engaging with this research that you would like to speak with someone about some of the issues it raises.
- Should you become distressed during the process you should contact the Samaritans.
- The Samaritans telephone number is 116 123.

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Considerations for Participants

- Time commitment for the writing of journal entries (12 minutes per week) and the attendance at the focus group/ interviews.

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Research Participant Consent

- Should you wish to be a research participant for this study, please read the Research Participant Information Sheet and the Research Participant Consent Form & return them in the envelope provided to maintain confidentiality.

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Please remember

- Your participation in this study is

VOLUNTARY

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Questions?

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Further Information

- Researcher Contact Details
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Appendix 20: Example of Post-interview Notes

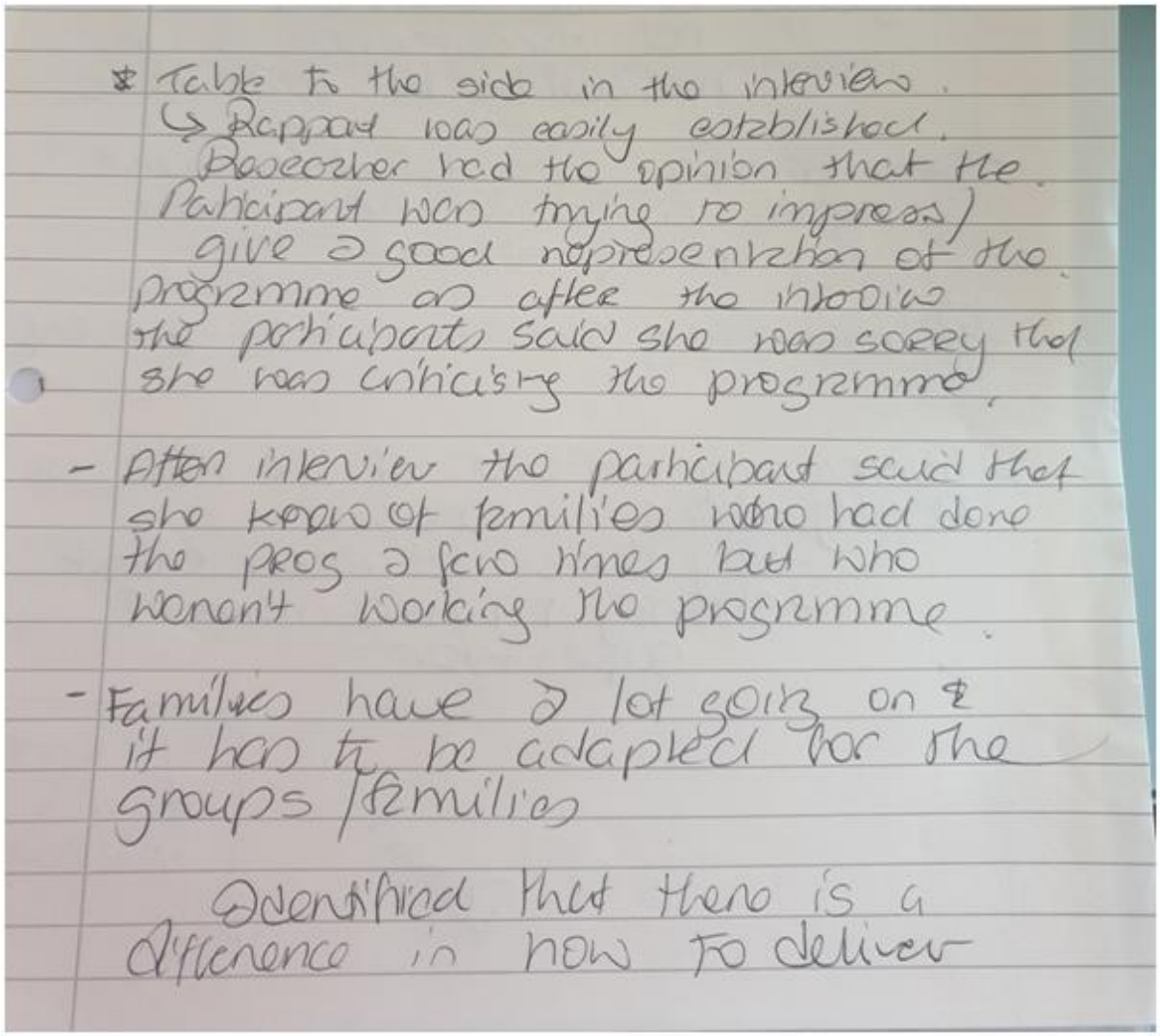
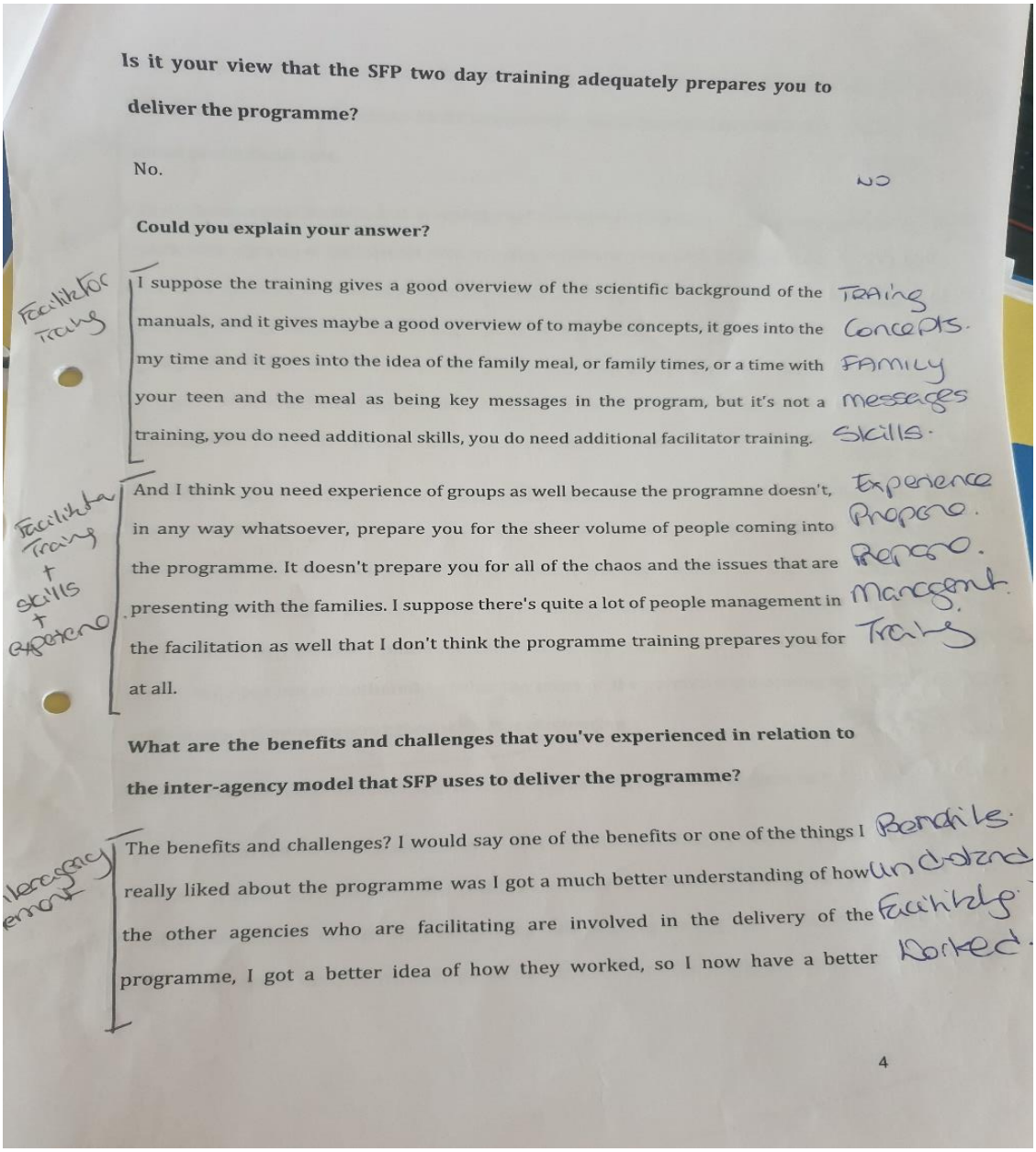


Table to the side in the interview.
Rapport was easily established.
Researcher had the opinion that the participant was truing to impress/give a good representation of the programme as after the interview the participant said she was sorry that she was criticising the programme.

After interview the participant said that she knew a lot of families who had done the programme a few times but who weren't working the programme.
Families have a lot going on and it has to be adapted for the groups/families.
Identified that there is a difference in how to deliver.

Appendix 21: Extract of Initial Coding



Is it your view that the SFP two day training adequately prepares you to deliver the programme?

No.

NO

Could you explain your answer?

Facilitator Training

I suppose the training gives a good overview of the scientific background of the manuals, and it gives maybe a good overview of to maybe concepts, it goes into the my time and it goes into the idea of the family meal, or family times, or a time with your teen and the meal as being key messages in the program, but it's not a training, you do need additional skills, you do need additional facilitator training.

Facilitator Training + skills + experience

And I think you need experience of groups as well because the programne doesn't, in any way whatsoever, prepare you for the sheer volume of people coming into the programme. It doesn't prepare you for all of the chaos and the issues that are presenting with the families. I suppose there's quite a lot of people management in the facilitation as well that I don't think the programme training prepares you for at all.

What are the benefits and challenges that you've experienced in relation to the inter-agency model that SFP uses to deliver the programme?

Interagency benefits

The benefits and challenges? I would say one of the benefits or one of the things I really liked about the programme was I got a much better understanding of how the other agencies who are facilitating are involved in the delivery of the programme, I got a better idea of how they worked, so I now have a better

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Appendix 22: Example of Memo

Memo SFP Training

All practitioners completed the two- day SFP Facilitator Training. This is the one common factor among all practitioners.

The training appears to be the only generic tool/process engaged in, by practitioners to deliver the programme.

Practitioners identified that the training provided a good overview of key concepts and scientific background of the programme.
Practitioners noted, that in their opinion, that the training did not provide adequate preparation for to deliver the programme.
There was a view of practitioners that there was a need for further training, outside of the SFP training to adequately prepare the practitioners.
It was noted that the training did not prepare practitioners for the volume of people, for the issues emerging and for the interagency group work experience.

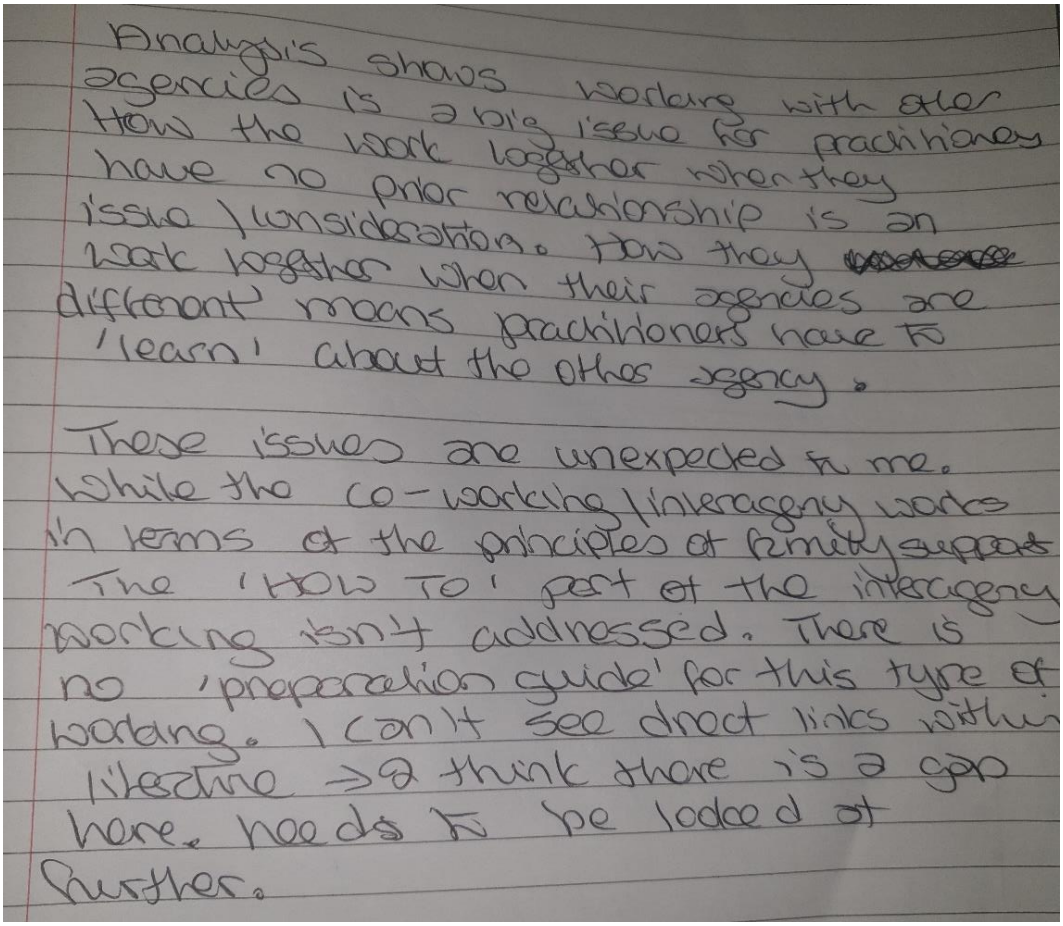
The researcher queries if there is adequate understanding among practitioners about what a manualised, evidence-based programme is?
Is this related to the boundaries of practitioners? Do they understand about facilitated delivery of manualised programmes?
Also, the pool of practitioners is reduced, are the calibre of practitioners (with relevant experience etc) available to deliver the programme.
Is there an argument here to re-visit the training and examine its approach?
The practitioners represent a number of different backgrounds and disciplines, should there be a minimum standard/level of education and training sought from those who deliver the programme?

Appendix 23: Evaluation of the Research

Criteria for the evaluation of constructivist grounded theory research have been developed by (Charmaz, 2014). These criteria have been examined against this study and the outcomes noted.

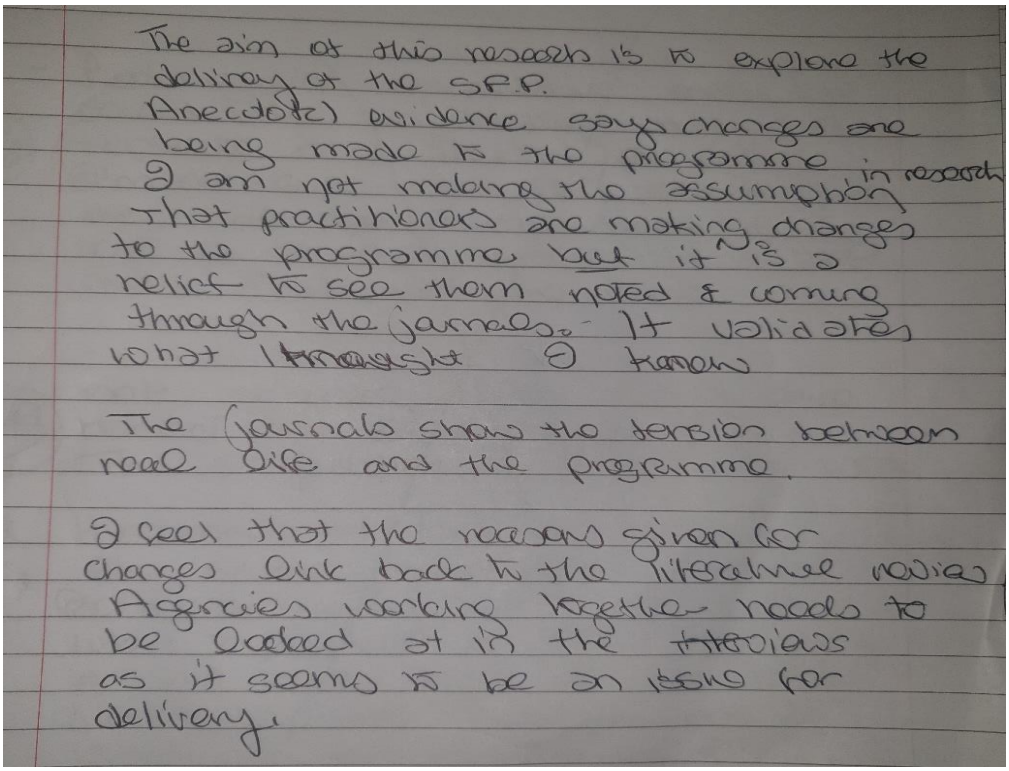
Evaluation Criteria	Outcome
1. Credibility	The categories are firmly rooted in the data and can be traced back through the levels of coding and constant comparative analysis.
2. Originality	The constructed categories have emerged from the data. The categories are unique to this study. The categories and analysis offer new understanding of the research topic and questions. The significance of the findings have been discussed, with the links made to the existing literature on the subject. The contributions of the research are noted later in this chapter.
Resonance	The constructed categories have been shared with colleagues and practitioners and have anecdotally been found to resonate with their practice.
Usefulness	The analysis has developed an interpretation of the influences on practitioners' delivery of the Strengthening Families Programme. This study identifies areas of further research, as discussed later in the chapter.

Appendix 24: Examples of Practitioner's Research Journal Entries


Analysis shows working with other agencies is a big issue for practitioners. How they work together when they have no prior relationship is an issue/consideration. How they work together when their agencies are 'different' means practitioners have to 'learn' about the other agency.

These issues are unexpected to me. While the co-working/interagency works in terms of the principles of family support. The 'How To' part of the interagency working isn't addressed. There is no 'preparation guide' for this type of working. I can't see direct links within the literature. I think there is a gap here that needs to be looked at further.

Appendix 25: Example of Researcher Reflective Journal Entry



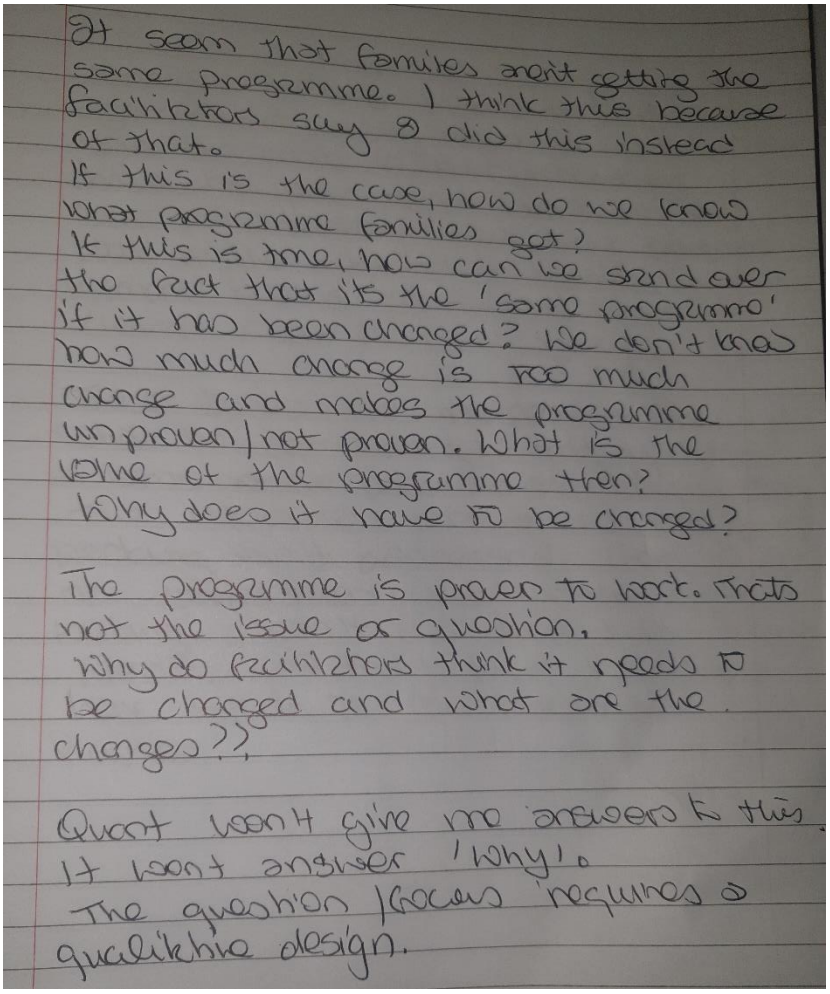
The aim of this research is to explore the delivery of the SFP.
Anecdotal evidence says changes are being made to the programme. I am not making the assumption in my research that practitioners are making changes to the programme, but it is a relief to see them noted and coming through the journals. It validates what I thought I knew.

The journals show the tension between the real life and the programme.

I feel that the reasons given for the changes link back to the literature review.

Agencies working together needs to be looked at in the interviews as it seems to be an issue for delivery.

Appendix 26: Example of Researcher Reflective Journal Entry



It seems that families aren't getting the same programme. I think this is because facilitators say I did this instead of that.
If this is the case, how do we know what programme families get?
If this is true, how can we stand over the fact that it's the 'same programme' if it has been changed? We don't know how much change is too much change and makes the programme unproven/not proven. What is the value of the programme then?
Why does it need to be changed?

The programme is proven to work. That's not the issue or the question. Why do facilitators think it needs to be changed and what are the changes?
Quant won't give me answers to this.
It won't answer 'why'.