

## Government Social Research

# Reducing Parental Conflict Programme 2018–2022

Final evaluation report

August 2023

DWP research report no. 1040

A report of research carried out by IFF Research Ltd on behalf of the Department for Work and Pensions.

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# **Executive summary**

## Background and methodology

The Department for Work and Pensions (DWP) introduced the Reducing Parental Conflict (RPC) programme to address parental conflict, because of the strength of evidence published prior to this programme linking parental conflict to negative outcomes for children. The original programme began in 2018 and was backed by £39m for the period up until March 2021. It was then extended with additional funding through to March 2022. After this, a further phase of funding for the programme was secured until up to 2025.<sup>1</sup>

The aim of the 2018–22 programme was to encourage local authorities across England to integrate services and approaches which address parental conflict in their local provision for families. There was also an aim to build evidence on what works to reduce parental conflict and understand best practice in this area.

To understand the process, experience and effects of the programme, DWP commissioned an evaluation to contribute to the wider evidence base on what works for families to reduce parental conflict. This was to support local authorities and their partners in embedding the reducing parental conflict agenda into their mainstream services.

The evaluation began in December 2018. To date, three reports have been published; this fourth report focuses on several quantitative surveys with parents<sup>2</sup> and qualitative research with parents and local authorities conducted in 2022, which was the final year of the original programme. This report builds on previously published findings.

There were three core strands to the evaluation, corresponding to three main programme elements:

- Intervention delivery: To assess how the provision of evidence-based interventions in 31 local authorities, clustered in 4 geographical areas, is implemented and delivered and the perceived effectiveness of the interventions in reducing parental conflict and improving child outcomes.<sup>3</sup>
- **Training**: To study whether and how the training of practitioners and relationship support professionals had influenced practice on the ground focusing on the identification of parents in conflict, building the skills and confidence to work with, or refer, parents in conflict and the overall support available.

<sup>&</sup>lt;sup>1</sup> However, this extension is out of the scope of this evaluation, with a separate evaluation being conducted.

<sup>&</sup>lt;sup>2</sup> DWP are also conducting a separate in-house evaluation regarding the effect of the programme on parent relationships which is published separately.

<sup>&</sup>lt;sup>3</sup> This element was previously referred to as "face-to-face". As a result of the coronavirus pandemic all delivery shifted to be remote, so it is now referred to as "intervention delivery".

• Local integration: To examine to what extent local authorities across England had integrated elements of parental conflict support into mainstream services for families, how and with what success.

# Evaluation

This is the final report from the commissioned evaluation of the 2018–22 RPC programme. This report focuses primarily on the quantitative surveys with parents that ran between summer 2020 and summer 2022, as well as final qualitative research conducted in 2022. Throughout the report, there are references to previous published findings to provide the full picture.

The following evaluation elements are the primary focus of this report:

- A telephone survey with parents who completed an intervention (hereafter referred to as 'completers') conducted around 4 to 6 months after they took part, involving a total of 878 interviews conducted between August 2020 and August 2022.
- A further follow-up telephone survey with completers, conducted around 12 months after they completed in an intervention, involving a total of 374 interviews conducted between May 2021 and August 2022.
- A telephone survey with 192 parents who started but failed to complete an intervention conducted between July 2020 and August 2022.
- A telephone survey with 66 parents who were referred but failed to start an intervention conducted between December 2021 and June 2022.
- A final set of 30 qualitative interviews with completers that were conducted between 7<sup>th</sup> March and 8<sup>th</sup> April 2022.
- Qualitative case studies across ten local authorities who received the Workforce Development Grant (WDG) and one non-bidding local authority, speaking to a total of 22 interviewees between May and June 2022.

## Intervention delivery

The original programme involved testing 8 evidence-based interventions to address parental conflict in 31 local authorities, in four geographical areas (Contract Package Areas). For the purposes of the test, the interventions were rated as high intensity or moderate intensity, based on the typical cost and duration of support provided to parents. Some interventions were for separated parents, some were for intact couples and others for both family types. A key part of the evaluation was to understand the effects of participating in these interventions on parents and their children.

#### Intervention delivery findings

This section draws on survey findings from parents who completed an intervention, those who started but did not complete an intervention and those who failed to start an intervention, despite being referred. These findings are supplemented with 30 qualitative interviews with completing parents.

- Earlier reports published as part of the RPC programme evaluation showed that referral staff and providers of interventions had found initial referral rates to be lower than expected. Reasons included delays in paperwork, lack of knowledge or awareness amongst referral staff and practitioners, and strict eligibility criteria for a couple of specific interventions. However, following initial teething problems, 2,694 parents went on to complete an intervention.
- Parents were referred to the sessions through a range of channels, most commonly, parents were referred by Family Support Workers, Health Visitors and Early Help teams. This was similar for parents who did not start or complete the intervention.
- Where parents failed to start an intervention, this was most commonly due to issues relating to their (ex) partner, such as the (ex) partner not wanting to go, not thinking it would improve their relationship and ongoing legal proceedings.
- Similar reasons were given by parents who started but failed to complete an intervention. However, the most frequently mentioned reason for stopping the sessions was that they felt the sessions were no longer helping.
- Despite this, parents who started but did not complete the sessions rated the convenience of the sessions and the quality of facilitators highly. Just under half of parents who did not complete (42%) felt they would be likely to return to an intervention in the future. The qualitative findings also indicated an appetite for future support amongst both 'non-completers' and parents who failed to start.
- As reported over the course of the evaluation, both qualitative interviews and quantitative surveys indicated that the experience of parents who completed the sessions was generally positive; they indicated that they learned new information and found discussions helpful.
- The key strengths of the interventions (session content and course facilitator) were consistent across all qualitative research with parents. Furthermore, six months after completing an intervention, almost all parents stated that their facilitator did a good job of explaining things. This tallied with the perceptions of providers of the interventions who praised the content and felt their staff were comfortable in delivering it.
- In qualitative interviews with parents, the key elements leading to successful delivery of the interventions were:
  - o the approach and demeanour of the practitioner running the intervention;
  - o tailoring the content to the parents; and
  - o providing practical tools, exercises and workbooks for parents.

- Around half (49%) of parents thought that their relationship had improved 6 months following completion of the intervention. This perceived improvement was sustained at the 12 months after completion point with 52% indicating an improvement.
- In addition, two-thirds (67%) of completing parents felt that the sessions had a positive impact on their children at 6 months after completion and this increased further by six percentage points at 12 months after completion (73%). This shift between the 6-month and 12-month point was solely driven by an increase in among separated parents (from 63% to 71%). Hence separated parents were less likely to see positive change in their children at 6 months after completion but were equally as likely as intact parents to see this by 12 months after completion.
- There were several other differences between intact and separated parents. Intact couples were generally more positive about the interventions than separated parents. In addition, they were more likely to state that the sessions improved their relationship both 6 months after completion and 12 months after completion.
- Qualitative interviews with parents in the final year of the evaluation echoed previously reported findings that the perceived effect of the interventions on the interparental relationship varied between families. Most reported that they had learned something and applied it in practice. A few parents reported no or limited impact on their relationship, mainly due to no behaviour change from their (ex) partner or believing that the relationship was beyond repair.

# Training

#### Introduction

A key part of the RPC programme was the training component for practitioners and other staff who work with parents, comprising of four modules and a Train the Trainer session. These covered an understanding of parental conflict and its impacts, recognising parental conflict, working with parents to resolve this and the role of supervising a team addressing parental conflict. Training was initially delivered faceto-face, but following restrictions introduced during the Coronavirus pandemic, the training was moved online from April 2020 and delivered via the Virtual Learning Classroom (VLC).

### Training findings

All components of the training evaluation were completed ahead of the third report on implementation<sup>4</sup> and hence have been reported previously. The key findings from this previous research were:

• Almost 16,500 practitioners took part in the RPC training between April 2019 and March 2021. Practitioners were evenly split between those attending face-to-face

<sup>&</sup>lt;sup>4</sup> <u>DWP(2022)</u> Reducing Parental Conflict Programme Evaluation: Third report on implementation, London: Department for Work and Pensions

and VLC sessions. Modules 2 (identifying conflict) and 3 (working with parents) had the largest take-up.

- Qualitative and quantitative research with practitioners showed the training was well-received. It was felt to be relevant to their work and to provide an appropriate level of detail.
- Survey findings showed that most practitioners felt it had significantly improved their knowledge, understanding and ability to address parental conflict (as demonstrated through changes in self-reported ratings on these measures). Most had also applied what they had learned to their day-to-day role. Although most practitioners felt they were applying their skills and knowledge less than they had expected, this could partly be due to the timing given the Coronavirus pandemic.
- Overall, the transition to digital delivery of training went well, the number of practitioners taking part in the training remained steady, though each practitioner generally took part in fewer of the four modules after the move to VLC.
- The VLC delivery method worked well for practitioners, with the convenience of this approach highlighted as a strength. However, the format was not generally felt to work as well as the face-to-face format and this was particularly the case for the Train the Trainer module.

# Local integration

#### Introduction

The local integration element of the programme aimed to encourage local areas to consider the evidence base around parental conflict and integrate support for parents in conflict into existing provision.

To support local areas with integration the DWP:

- recruited a team of six Regional Integration Leads (RILs) to promote the agenda and facilitate knowledge sharing and networking.<sup>5</sup>
- provided a Strategic Leadership Support (SLS) grant for local authorities and their partners to use in ways that best suited their aspirations around reducing parental conflict.
- provided a Practitioner Training (PT) grant for local authorities to use to book staff on to courses about reducing parental conflict designed by the DWP.
- encouraged access to information made available on the reducing parental conflict online hub hosted by the Early Intervention Foundation (EIF).<sup>6</sup>

<sup>&</sup>lt;sup>5</sup> These individuals were seconded from local authorities into the RIL role. Their role is to provide expert advice and support to local authorities and their partners and maximise the opportunities that the programme presents.

<sup>&</sup>lt;sup>6</sup> <u>https://reducingparentalconflict.eif.org.uk/about/hub</u>

• offered a Workforce Development Grant (WDG) in 2021/22 with the aim to enable local authorities to have a greater number of staff trained in reducing parental conflict capabilities.

#### Key integration findings

Key findings from previous integration focused research included:

- Prior to the RPC programme, local authorities typically had not thought about tackling parental conflict below levels amounting to domestic abuse.
- The SLS grant was well received by local authorities that appreciated the flexibility it afforded them to use it in the ways that best suited their plans.
- local authorities appreciated the PT's focus on training as they looked to develop and upskill their staff around RPC. However, they would have preferred to be able to use the funding with their own (local) training provider and/or use the grant to purchase venue space.
- The RILs were a valuable resource in embedding RPC in local authorities, offering support to drive the programme forward and advise on how to spend grant funding.

The new evidence in this report relates to the WDG and how this was used in 2021/22, with findings relating to other integration measures reported previously.<sup>7</sup>

- The WDG was used by all local authorities, including those that felt their RPC progress had stalled and wanted to re-launch activity, and those that had made significant progress and wanted to drive the agenda further forward.
- local authorities criticised the application process, describing it as involved and time-consuming, and therefore a burden to complete.
- local authorities viewed the WDG positively compared to previous grants, because they found it to be more flexible, allowing them to tailor spending to their specific needs.
- The WDG grant was spent in two key ways: delivering training to practitioners and developing support for parents.
- Without the WDG, the work undertaken would either not have happened at all or would have been on a smaller scale.
- There was an appetite among these local authorities for future funding to continue progress on the reducing parental conflict agenda. Most local authorities were aware of the Local Grant and had already started their application when interviewed in Spring 2022.

<sup>&</sup>lt;sup>7</sup> Early implementation: <u>Reducing Parental Conflict programme evaluation: report on early</u> <u>implementation - GOV.UK (www.gov.uk);</u>

Second report on implementation: <u>Reducing Parental Conflict Programme Evaluation: second report</u> on implementation - GOV.UK (www.gov.uk)

Third reporting on implementation: <u>Reducing Parental Conflict Programme Evaluation: Third report on</u> implementation - GOV.UK (www.gov.uk)

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# Glossary

Contract Package Area (CPA)	Delivery of RPC interventions took place across 31 local authorities, which were clustered in 4 geographic areas known as Contract Package Areas. These are Westminster, Gateshead, Hertfordshire, and Dorset.
Domestic abuse	Imbalance of power or control in a relationship, and one parent may feel fearful of the other.
Early Intervention Foundation (EIF)	The Early Intervention Foundation is an independent charity established in 2013 to champion and support the use of effective early intervention to improve the lives of children and young people at risk of experiencing poor outcomes.
Frontline Practitioner (FLP)	Local authority colleagues and their partners working with families including those who work for services such as social work, health visiting teams and early years' services.
Parental conflict	Harmful parental conflict behaviours in a relationship which are frequent, intense and poorly resolved can lead to a lack of respect and a lack of resolution. Behaviours such as shouting, becoming withdrawn or slamming doors can be viewed as destructive.
	Parental conflict is different from domestic abuse. This is because there is not an imbalance of power, neither parent seeks to control the other, and neither parent is fearful of the other.
Practitioner Training (PT) grant	The Practitioner Training grant was used to buy spaces for staff in the local authority area to attend bespoke reducing parental conflict training delivered by Knowledge Pool.
Reducing Parental Conflict (RPC) programme	The Reducing Parental Conflict programme is the subject of this evaluation. It aims to help avoid the damage that parental conflict causes to children through the provision of evidence- based parental conflict support, training for practitioners working with families and enhancing local authority and partner services.

Referral Stage Questionnaire (RSQ)	This is an assessment tool that was developed by subject matter experts to identify the types and levels of conflict parents experience, as well as examining child outcomes. Questions from this were also used in the 6-month and 12- month completing parent surveys.
Regional Integration Lead (RIL)	Six RILs in England were seconded from local authorities to DWP. They were available to provide expert advice and support to local authorities and their partners and maximise the opportunities that the programme presents.
Strategic Leadership Support (SLS) grant	The SLS grant was used to help local authorities and their partners to raise the profile of parental conflict and fund activities to integrate reducing parental conflict into their provision.
Child Maintenance Service (CMS)	Child Maintenance Service assists families with separated parents and ensures an arrangement is in place for how a child's living costs will be paid when one of the parents does not live with the child. There are two types of arrangements; 'collect and pay' where the Child Maintenance Service collects and pays the money and 'direct pay' where the CMS help to work out an appropriate amount but the parents make their own payment arrangements.
Workforce Development Grant (WDG)	The WDG grant was offered in 2021, to enable local authorities to build Reducing Parental Conflict capability amongst practitioners who come into contact with children and families. This aimed to develop local authorities capabilities and capacity around reducing parental conflict beyond the availability of funding.
Local Grant	The Local Grant, which began in April 2022, encourages local authorities to continue to integrate RPC, build the capability of frontline practitioners who support parents and families and improve the overall RPC support offer to families.
(Ex) Partner	The term is used throughout the report where findings are in relation to both intact and separated parents regarding their partner or former partner. Therefore, for intact parents

who responded, it refers to their current partner, and for separated parents who responded, they are responding in relation to their former partner.

# Chapter 1 Introduction, background, and methodology

This chapter outlines the background to the project and provides an overview of the evaluation methodology.

# Context

Parents play a critical role in giving children the experiences and skills they need to succeed. However, studies have found that children who are exposed to parental conflict can be negatively affected in the short and longer term.<sup>8</sup>

Disagreements in relationships are normal and not problematic when both people feel able to handle and resolve them. However, when parents are entrenched in conflict that is frequent, intense, and poorly resolved, it is likely to have a negative impact on the parents and their children. It can impact on children's early emotional and social development, their educational attainment and later employability – limiting their chances to lead fulfilling, happy lives.

The government wants every child to have the best start in life and reducing harmful levels of conflict between parents – whether they are together or separated – can contribute to this. Sometimes separation can be the best option for a couple, but even then, continued co-operation and communication between parents is better for their children. This is why the DWP introduced the Reducing Parental Conflict programme. Originally backed by up to £39m to March 2021, additional funding was then provided with an extension of the programme secured until March 2022. The programme encouraged local authorities across England to integrate services and approaches which address parental conflict into their local provision for families.

The RPC programme seeks to address parental conflict, not domestic abuse. Where there is domestic abuse there will be an imbalance of power, control, and one parent may feel fearful of the other. If domestic abuse is suspected or identified, a pathway of more specialised support should be offered in place of the RPC programme, and appropriate safeguarding measures implemented.

Evaluation is central to the Reducing Parental Conflict programme. Evidence from the evaluation of the programme will contribute to the wider evidence base on what works for families to reduce parental conflict and will support local authorities and their partners to embed the parental conflict agenda into their services.

This is the fourth evaluation report following a series of interim reports, which provides findings on programme implementation at the end of the delivery period.

<sup>&</sup>lt;sup>8</sup> Harold et al. (2016) What works to Enhance Inter-Parental Relationships and Improve Outcomes for Children. London: Department for Work and Pensions.

It is worth noting that further funding has been offered to local authorities called the 'Local Grant' following the initial RPC programme. The local integration chapter of this report briefly covers how local authorities felt looking ahead to this. A separate evaluation into the Local Grant launched in December 2022.

# Delivery of the Reducing Parental Conflict programme

The programme was designed to increase the support that is available and provided to parents in conflict through different activities:

- Intervention delivery: Testing a range of evidence-based interventions in four geographical areas in England that are designed to reduce parental conflict and improve child outcomes.
- Training: Provision of training for multi-agency practitioners in all local authorities in England such as Family Support workers, teaching assistants or Police officers to increase understanding of the parental conflict evidence base, enhance their confidence and ability to identify and discuss parental conflict with parents and apply the evidence base in family support practice. Provision for supervisors and managers to support their staff in integrating reducing parental conflict was also delivered.
- Local integration: Provision of funding and support to integrate elements of parental conflict support into mainstream services for families. This included the Workforce Development Grant (WDG) offered in 2021-22.
- A Challenge Fund to test innovative activity, including digital support (which is out of scope of this evaluation).<sup>9</sup>
- A package of measures, jointly funded with the Department of Health and Social Care (DHSC) and Public Health England (PHE) (now known as Office for Health Improvement and Disparities (OHID)) to improve outcomes for children of alcohol dependent parents.

# Evaluation

In January 2019, DWP commissioned a large scale, multi-method external evaluation of the programme. This was supported by other strands of analysis conducted by DWP analysts into the effect of the programme on parent relationships.

The external evaluation was largely a process evaluation through which the range of activities supported by the programme were examined to build the evidence base about what works to reduce parental conflict. The aim was to use this evidence to support local authorities and their partners to embed successful elements of parental conflict focused practice and organisation into their services for families.

<sup>&</sup>lt;sup>9</sup> Findings from the digital discovery report. <u>https://www.gov.uk/government/publications/reducing-parental-conflict-a-digital-discovery</u>

Mirroring the programme design, the evaluation covered the delivery of interventions, training, and local integration. The main objectives for each element of the evaluation were:

- Intervention delivery: To assess how the provision of evidence-based interventions in 31 local authorities, clustered in 4 geographical areas, was implemented and delivered, and the perceptions of impact of the interventions on parental conflict and child outcomes.<sup>10</sup>
- **Training**: To study whether and how the training of practitioners and relationship support professionals had influenced practice on the ground focusing on the identification of parents in conflict, building the skills and confidence to work with, or refer, parents in conflict and the overall support available.
- Local integration: To examine to what extent local authorities across England had integrated elements of parental conflict support into mainstream services for families, how and with what success.

The table below shows all the different components that have been completed as part of this evaluation. Those in bold have been completed since the previous interim report and so are the focus of this final report. In each section, we provide high level summaries of the findings previously published.

	Integration	Training	Delivery of interventions	
Covered in	Depth interviews with Regional Integration Leads (wave 1)	Depth interviews with local authority managers and commissioners (includes coverage of SLS)		
'Report on early implementation'	Online survey of local authorities (follow-up 1)	Online survey of	N/A	
	Case studies of local authorities (wave 1)	practitioners trained (wave 1)		
Covered in 'Second report on implementation'	Depth interviews with Regional Integration Leads (wave 2)	Depth interviews with practitioners trained	Depth interviews with referral staff (referring parents to interventions) (wave 1 and 2)	

#### Table 1.1 The RPC programme evaluation elements

<sup>&</sup>lt;sup>10</sup> This element was previously referred to as "face-to-face". As a result of the coronavirus pandemic all delivery shifted to be remote, so it is now referred to as "intervention delivery".

	Online survey of local authorities (follow-up 2) and full findings from follow-up 1. Case studies of local authorities (wave 2), which also includes visits with providers (first 5 case studies)	Online survey of practitioners trained (wave 2)	Survey of intervention delivery providers (wave 1 and 2)
Covered in 'Third report on implementation'	Best Practice Event with local authorities	Online survey of practitioners trained digitally	Depth interviews with parents who took part in the interventions Depth interviews with parents who started but did not finish the interventions Depth interviews with parents who were referred but did not take part in the interventions Depth interviews with CMS users who took part in the intervention
Covered in detail in this final report	Case studies and inte authorities about the Workforce Developme	additional	Survey of parents (6 months and 12 months after taking part in the intervention) Survey of non- completing parents Survey of parents who were referred but did not start an intervention. Further depth interviews with parents completing an intervention in the final year of the programme

# Methodology

This section provides detail on the approach taken for each of the evaluation elements covered in this report. Further details on the components of the evaluation previously reported on can be found in Annexe 1.

#### **Intervention Delivery**

Several different telephone surveys were conducted with parents who had been referred to one of the interventions tested under the 2018–22 programme; including parents who completed one of the RPC interventions (completers), those who had started but not completed an intervention (non-completers) and those who were referred but did not start (did not starts). These surveys covered experiences and perceived impacts of the sessions they attended on their relationships and their children, and reasons why parents failed to start or complete the interventions. To help gauge parents' experiences of the programme in 'steady state' (i.e., when delivery should be at its best), a further 30 qualitative interviews were conducted with completers.

#### Completer survey (6-month)

A telephone survey of 878 parents who completed<sup>11</sup> an intervention 6 months after the intervention ended. Survey interviews were completed between 12<sup>th</sup> August 2020 and 31<sup>st</sup> August 2022, capturing all completers who had exited their intervention by March 2022. There were some cohorts of parents who took part in sessions up until July 2022, who were not included in the survey.

The response rate to this survey based on the total number of parents who completed an intervention (2,694) was 33%. However, based on the usable records contacted, the response rate was 46%.

A £10 Amazon voucher incentive was offered to completers as a thank you for taking part in the survey.

#### Completer survey (12-month)

A telephone survey of 374 parents who completed an intervention and responded to the 6-month survey, was conducted around a year after they completed the intervention. This shows a response rate of 14% based on the total population of completers. When based on the number of parents who took part in the 6-month survey and agreed to be recontacted, this represents a response rate of 59%. These surveys were completed between 27<sup>th</sup> May 2021 and 27<sup>th</sup> August 2022.

As with the 6-month survey, a £10 Amazon voucher incentive was offered to completers as a thank you for taking part in the survey.

Both completer surveys contained a section of relationship measures taken from several academically established tools used to study relationships.<sup>12</sup> That were also

<sup>&</sup>lt;sup>11</sup> A completer of a high intensity intervention had to attend 80% of the sessions. A completer of a moderate intensity intervention had to attend 50% of the sessions.

<sup>&</sup>lt;sup>12</sup> This included the conflict and co-parental support Quality of Coparenting support subscales from the Communication scale (Ahrons), Satisfaction with custody arrangements subscale (Kramer & Washo), the Frequency and Breadth of Conflict Scale (Morrison & Coiro), and various questions from the Iowa Family Interaction Rating Scale, the Dyadic Adjustment Scale and the O'Leary Porter Scale.

asked of parents in the questionnaire completed ahead of being referred to an intervention, as well as general questions surrounding their experience.<sup>13</sup>

#### Non-completer survey

A telephone survey of 192 parents who started the intervention sessions but did not complete the full course was conducted. This survey was completed between 22<sup>nd</sup> July 2020 and 1<sup>st</sup> August 2022. The response rate was lower than completers at 17%, likely due to lower engagement with the programme, but there was also no incentive offered for this survey.

#### Did not start survey

A telephone survey of 66 parents who were referred to an RPC intervention but did not start the course was conducted. This survey was completed between 1<sup>st</sup> December 2021 and 28<sup>th</sup> June 2022. This element aimed to understand the reasons for parents not starting the interventions, given that the MI data did not hold this information for the majority of parents. Although an incentive payment was offered, engagement with this survey was the lowest of the surveys, with a response rate of 13%. As with the non-completer survey, a lower level of engagement with the programme, given parents did not start the intervention, is likely to have contributed to this. In addition, it is worth flagging that this fieldwork commenced later than the other surveys reducing sample and time available to maximise completes.

According to the MI data collected, the total population of did not start parents could be up to 1,308 parents, leaving the 66 completes a very small proportion of this. In this context, it is unknown how representative this sample is and worth considering the potential non-response bias. Having said this, the survey data is the most reliable source of information available regarding these parents and their reasons for not starting the interventions meaning it gives some indication of the perspectives of this group.

#### Qualitative interviews with completers

Many qualitative interviews have been conducted with completers for previous reports. An additional 30 qualitative interviews with completers were conducted between 7<sup>th</sup> March and 8<sup>th</sup> April 2022. Interviews lasted around 45 minutes. These interviews aimed to gain feedback on the support received from the interventions under the extension to understand how it compared to earlier experience of the interventions. These interviews encompassed a wide range of completers, both intact and separated couples and some using CMS, and others not.

#### Local integration: Workforce Development Grant (WDG)

Qualitative case studies across ten local authorities who received the Workforce Development Grant (WDG) and one non-bidding local authority, speaking to a total of 22 interviewees between May and June 2022 were conducted. The case studies focused on local authorities' experience of the WDG. The discussion with the nonbidding local authority explored their decision not to apply for the WDG.

<sup>&</sup>lt;sup>13</sup> DWP conducted an evaluation of the effects of the interventions on the interparental relationship (using RSQ measures) and child outcomes. This report will focus on the other aspects of the survey.

# Chapter 2 Intervention delivery

This chapter explores the experiences of parents referred to the interventions tested under the 2018–22 RPC programme. The key findings section summarises findings across the duration of the evaluation. The remainder of the chapter includes more detail on the strands of the evaluation completed in 2022. It covers quantitative findings from those that completed an intervention, based on interviews conducted 6 and 12 months after completion, as well as survey interviews with parents who failed to start or complete an intervention. It focuses on parents' perceptions of how the sessions they attended went, any potential impacts and why some failed to start or complete the sessions. Findings from the final set of qualitative interviews with completers are also covered showing how these later experiences differ, if at all, from earlier in the programme.

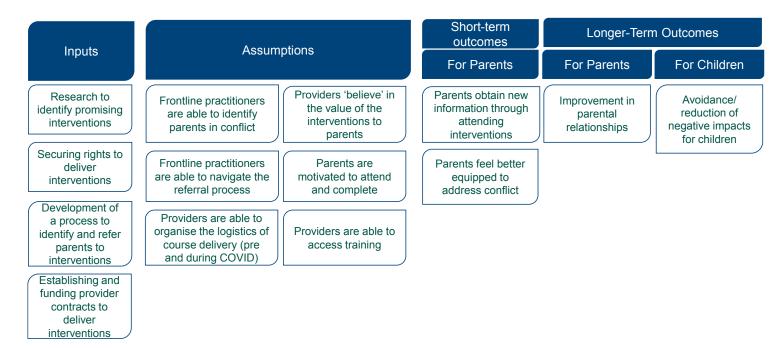
## Introduction to intervention delivery

Testing of interventions through the RPC programme aimed to deliver evidence about what works to reduce parental conflict and improve children's outcomes.

Eight different interventions were tested as part of the programme (further details on these is outlined in Table 2.1). Some of these have a relatively strong evidence base supporting their efficacy in the UK, but not necessarily for all family types or for different delivery methods. Others have been successful in non-UK settings but have not been tested in the UK. These were chosen as, in all cases, the interventions being implemented present significant opportunities for learning. These interventions were designed to be delivered face-to-face but were quickly adapted to be delivered virtually in response to the Coronavirus pandemic.

The interventions aimed to achieve a number of short-term and longer-term outcomes for both parents and children as set out in Figure 2.0, based on a number of inputs and assumptions around provider delivery. The research covered in this report explores some of the assumptions and short-term and long-term outcomes in this model.

#### Figure 2.0 Logic Model for Interventions delivery



Interventions were of either a moderate or high intensity, though this measure was not communicated to parents. Where possible, parents were allocated to an intervention based on the level of conflict in the relationship. However, in some circumstances, parents were referred onto different intensity provision based on other factors such as availability and timings of interventions. The level of conflict in the relationship was identified via an assessment tool developed for the programme by subject matter experts, known as the Referral Stage Questionnaire (RSQ). This was administered to parents by a frontline practitioner working with the family. It consisted of a range of established assessment scales to identify the types and levels of conflict parents were experiencing. It examined the mechanisms through which child outcomes were affected, and the features of an inter-parental relationship that had been shown to impact on children's outcomes. If either parent scored high for conflict, both parents were offered a high intensity intervention. Flexibility was granted with regards to the intensity of intervention in early 2020, enabling providers to offer parents either high or moderate interventions in certain circumstances. regardless of RSQ outcome.

Some interventions were delivered in a group setting, some as couple sessions and some on an individual basis. Different interventions had differing eligibility, but couples who remained in a relationship as well as those who had separated were eligible for some and existing and expectant parents were also eligible.

The full list of interventions is shown below. Delivery of these interventions continued throughout the Coronavirus pandemic and lockdown with the majority switching to digital delivery over Teams or Zoom.

Intervention Name	Brief Description	Method of delivery	Target group	Length of delivery	СРА	Intensity
4Rs and 2Ss Family Strengthening Programme	Curriculum-based practice designed to strengthen families, decrease child behavioural problems, and increase engagement in care. It focuses on evidence-informed parts of family life that have been empirically linked to youth conduct difficulties.	Groups of 12-20 parents	Both intact and separated couples with children aged 7-11	16 weeks	Hertfordshire	High
Family Check-up	This involves 3 stages: an initial interview, family and child assessment, and feedback. The second stage involves the delivery of Everyday Parenting (EDP), which is a behavioural parenting intervention tailored to meet specific needs.	Delivered to individual parents (either one or both parents)	Suitable for intact and separated couples, but during this test only 7 separated families completed this intervention	3-4 sessions of 50-60 minutes	Dorset Westminster Gateshead Hertfordshire	Moderate

#### Table 2.1 Interventions being delivered

Intervention Name	Brief Description	Method of delivery	Target group	Length of delivery	СРА	Intensity
Enhanced Triple P	This is a targeted selective intervention, which aims to address family factors that may impact upon and complicate the task of parenting, such as parental mood and partner conflict, and problem child behaviours.	Delivered to individual parents (either one or both parents)	For both intact and separated couples	4 modules delivered to families in 3 to 8 individualised consultations (8- 12 hours)	Westminster	High
Family Transitions Triple P	Designed as an intensive intervention for parents experiencing difficulties due to separation or divorce, it focuses on developing skills to resolve conflicts with former partners and how to cope positively with stress.	Groups of approximately 8 parents (separated parents are encouraged to attend different sessions)	Separated couples only	5 sessions lasting 2 hours each	Dorset Westminster	High
Mentalization Based Therapy – Parenting Under Pressure	Aims to help separated or intact couples experiencing high levels of interparental conflict to gain more perspective in order that they can start to put the needs of their children first. It is based on a model which comprises an initial phase of preparation and assessment, meeting with each parent separately.	One practitioner delivers sessions to intact couples. With separated couples each parent completes sessions with a separate practitioner. In rare cases the parents can complete the final session together with both practitioners.	For both intact and separated couples	10 sessions of therapeutic work	Gateshead Hertfordshire	High

Intervention Name	Brief Description	Method of delivery	Target group	Length of delivery	СРА	Intensity
The Incredible Years, including Advanced Programme	The focus is on parents' and children's communication and problem-solving skills, knowing how and when to get and give support to family members and recognising feelings and emotions. It's a group programme, basic is approximately 16 weeks with an additional 8 for advanced.	Group sessions of 12- 20 parents	Couples and separated co- parents with children aged 4-12 years	12-20 sessions as part of the 'Basic' course, with an additional 9-11 session for 'Advanced' (average of up to 20 weeks)	Dorset Gateshead	High
Parenting When Separated	Drawing on international long-term evidence, it highlights practical steps parents can take to help their children cope and thrive as well as coping successfully themselves, where the parents are preparing for, going through, or have gone through separation or divorce.	Group intervention delivered by 2 practitioners to groups of 12 participants	Separating or separated couples	6-week course of 2.5-hour sessions	Gateshead Hertfordshire	Moderate
Within My Reach	This is a targeted selective intervention, for low-income single parents, who may or may not be in a relationship. The intervention therefore targets relationship outcomes in general, rather than focusing on parenting or parental conflict. It covers 3 key themes: Building Relationships, Maintaining	Delivered in a group to individuals (not couples)	Separated couples only	15 sessions, each lasting 1 hour	Dorset Westminster	Moderate

Intervention Name	Brief Description	Method of delivery	Target group	Length of delivery	СРА	Intensity
	Relationships and Making Relationship Decisions					

## Key findings

#### **Referral stage**

- The evaluation explored the nature of the conflict in relationships ahead of being referred to an intervention. Research with parents who attended showed that these parents were experiencing varying levels of conflict. Separated parents, regardless of whether they completed an intervention or not, were most likely to present with high levels of conflict. Interviews conducted in May-June 2021 with Child Maintenance Service (CMS) users showed that this subgroup had experienced very high levels of interparental conflict.
- In addition, parents typically had more than one source of conflict within their relationship. Most commonly these included approaches to parenting, such as disagreements over discipline; financial issues; access and maintenance for separated parents. Intact couples tended to talk in terms of encountering conflict in all aspects of their day-to-day lives.
- Earlier stages of the evaluation captured the views of practitioners, referral staff and providers of the interventions, from late 2019, through 2020 into early 2021. Practitioners and referral staff felt confident identifying the signs of parental conflict in order to make a referral, although the lockdown restrictions, curtailing face-to-face interaction with families, made identification more challenging after March 2020.
- However, there was evidence, early on, of some confusion among referral staff about the eligibility of families experiencing domestic abuse, working families, those expecting a child and couples where only one of the parents wanted to take part. This evidence was shared in early implementation stages, and referrals increased, however, providers more often noted this was due to the shift to online delivery, rather than increased clarity amongst referral staff.
- Overall, practitioners felt the referral process was straightforward, quick and generally worked well.
- In the earlier stages of the RPC programme, in early 2020, providers experienced lower than expected rates of referral. For some interventions, providers felt this was partly due to a lack of frontline practitioner awareness or insufficient understanding of the intervention for them to adequately explain the intervention to parents or be confident that the referral was appropriate.
- Providers also felt the strict eligibility criteria for some interventions prevented referrals being secured in sufficient volumes. This was particularly the case for 4Rs and 2Ss and Incredible Years Advanced.
- In qualitative interviews across the life of the evaluation, the most common ways parents reported being referred onto the RPC interventions was via Family Support Workers, Health Visitors/Early Help teams and schools. This remained consistent from early qualitative interviews to the latest cohort in

2022. The most common referral channels also appeared consistent whether parents failed to start or complete as well, with family support workers or social workers the most frequently mentioned channels. This consistency suggests that there was little or no influence of referral channel on whether a parent started or completed an intervention.

#### Attending the interventions

- Participation in the intervention was voluntary for all parents. The vast majority of parents who completed an intervention understood that they had a choice about whether to take part. Where parents did not start or complete an intervention, the perception that they had a choice about attending was in line with completing parents, indicating that the perceptions around whether the intervention was mandatory was unlikely to contribute to whether parents attended or completed interventions.
- A small minority of parents who were interviewed (qualitatively) that felt they did not have a choice in taking part, reported feeling pressured by social services or schools to take part.
- Those who did not start or complete an intervention generally had a good understanding of the reason why they had been referred and did not feel there was anything else they wished they had known at that point. This was evident during previous qualitative research published in earlier reports, and is substantiated by findings from the quantitative surveys.
- Three-quarters (73%) of those who did not start an intervention were keen to take part, however, only a quarter (26%) felt that their (ex) partner was keen. Linked to this, the main reasons given for not starting were reasons relating to their (ex) partner (44%). This highlights the role of the attitude of the (ex) partner in attendance at an intervention.
- However, issues relating to the (ex) partner were not the only reasons for not starting, with around a fifth (21%) of those who did not start stating the (un)suitability of the support as a reason. Other reasons included not feeling like they needed the support, thinking a different kind of support was needed, and not feeling comfortable taking part.
- Delivery of most of the interventions was underway before the Coronavirus national lockdown began in March 2020, though most providers started delivery later than planned. This was primarily due to low levels of referrals, with access to intervention training for delivery staff and paperwork also contributing to delays.
- Almost all interventions moved to digital delivery through video-conferencing platforms such as Zoom or Teams at the start of the Coronavirus pandemic. This transition was generally considered to have worked well for all interventions and was seen to bring some benefits including more flexibility with timings and increased parent participation.
- In line with this, the survey findings demonstrated that it was most common to take part digitally from home (83% of parents who took part in the 6-month

survey) with small proportions taking part face-to-face at home or at a venue. Whether they took part online or face to face, parents were generally positive about the mode of delivery. Most completing parents agreed that the timing (94%) and location (87%) of the sessions were convenient and were able to find suitable childcare (83%). This was echoed in the qualitative interviews where parents tended to be happy with the session timings, duration, and frequency.

- For the majority of families who completed the sessions, both parents took part in an intervention (79%). However, often they attended separate sessions (61% of all completing parents). Separated parents were less likely to attend the sessions with their ex-partner (11%). Generally, parents felt attending the sessions with or without their (ex) partner worked well. However, of those attending alone, 31% would have preferred to take part with their (ex) partner.
- Similarly, whether they attended group or one to one sessions, parents were
  positive about the format, suggesting they were allocated appropriately at the
  referral stage and/or that the provision worked equally well in both formats.
  Those in group sessions found it reassuring to hear the perspective of other
  parents, while those in one-to-one sessions felt they would have been less able
  to open up in a group setting.

#### Perceptions of the interventions

- Throughout the lifetime of the interventions test (2019–22), parents tended to have positive overall impressions of the sessions they attended, describing them as helpful and feeling they took away valuable lessons for their relationship. Where parents were less positive, it was because they deemed sessions inappropriate to their situation.
- The main strengths of the interventions were session content and the course facilitator, consistent with earlier qualitative interviews conducted as part of the evaluation. This was echoed by findings from the survey with completing parents 6 months after completion, with the vast majority (95%) stating that the facilitator did a good job of explaining things. Qualitative interviews specifically highlighted that the course facilitators left parents feeling 'comfortable', 'valued' and able to provide an impartial ear for the issues in their relationship.
- The majority of parents agreed that the discussions were useful (86%) and that they learned something in the sessions (81%) 6 months after completion, though this was more likely for intact parents than separated parents. Qualitative participants further evidenced this, stating that they felt the course content was relevant and insightful, with many parents singling out video content as particularly useful. Parents felt the course content, and discussions within the sessions, gave them valuable insight into both their own and their partners behaviour.
- In line with previous qualitative findings, the survey of parents who did not complete the sessions showed that these parents still had some positive reflections on the sessions they attended. Logistically, three quarters of parents who did not complete the intervention (76%) felt that the sessions were at a convenient time, which was echoed in qualitative interviews with these parents,

who mostly felt sessions were convenient, offered at a time, place and in a mode that worked for them. Eight in ten (80%) parents who did not complete the intervention felt that the presenter(s) leading the sessions did a good job of explaining things. Building on previous qualitative findings where parents felt the sessions were delivered by high quality facilitators, who were seen as 'approachable' and 'understanding', and ultimately provided a 'safe space' to discuss difficult issues.

- Regarding what parents learnt, the research suggests that parents who failed to complete interventions generally learnt less than parents who completed, though a small minority of parents who did not complete the intervention explained in qualitative interviews that the course content helped them to rethink their role in their relationship.
- In earlier components of the evaluation, providers also praised the content of the interventions and felt their staff were comfortable in delivering them. In particular, they commended the materials and resources they were provided.
- By specific intervention, providers of Parenting When Separated experienced higher rates of parents who did not start or did not complete all sessions. Providers speculated that this was potentially due to the intervention being delivered in a group with other parents, which may have been off-putting for some parents. Providers also felt that Incredible Years Advanced was a particularly long intervention due to the necessity to complete the basic course ahead of this, increasing the number of sessions required. In addition, it did not explicitly address relationships early on, both factors which they felt had led to high drop out and low completion rates.
- Criticisms and concerns raised by parents in relation to the interventions they had attended were more evident in qualitative interviews conducted earlier on, rather than in the latter stages in 2022, suggesting that issues were addressed as the programme progressed. Concerns included issues with some of the content of the interventions: in some cases, course content was felt to be either not relatable to their current situation, too general to be helpful or lacking in structure. Parents who did not complete an intervention also highlighted issues with the interventions, such as the content not being suitable for their level of conflict.
- From the experience of parents, it appeared that there were four key elements to delivering the interventions well:
  - 1) The approach and demeanour of the practitioner running the sessions.
  - 2) Tailoring the content, so it was relevant to the specific background and situation of the parents. Some parents facing specific challenges, such as children with learning difficulties or an ex-partner with addiction issues, found interventions ill equipped to address their needs.
  - The use of practical tools and exercises to help parents think in different ways.

- 4) Providing workbooks so parents had a log of what had been covered and future content. This also allowed them to reflect on the course after the sessions.
- For parents who did not complete the sessions, reasons given in previous qualitative interviews were echoed in the quantitative survey. These centred around the sessions no longer helping (27%) and issues related to (ex) partner (21%) although there were a wide variety of other reasons cited including practical issues with attendance (15%).
- Timing of the sessions generally was not viewed as a contributing factor for failing to start the intervention. Six in ten (61%) stated it did not contribute and only one in six (17%) stated it did.
- Positively, there was appetite from around half of both non-completing and did not start parents to take part in similar support in the future. In order to understand the impact of the timing of support, parents were asked when it would be best to receive this, and generally non-completer and did not start parents stated this could be provided at any time.

#### Parents' perceived impacts of the interventions

- At both 6 months and 12 months after completion point, around half of parents surveyed felt that taking part in the sessions had improved their relationship (49% and 52% respectively). The figure was much higher for intact than separated parents at both stages, with around three quarters of intact parents (72% 6 months after completion and 75% 12 months after) stating that the sessions had improved their relationship. In qualitative interviews conducted prior to 2022, intact parents more commonly cited positive impacts than separated parents, as well as citing a wider range of impacts on their relationship, such as fewer arguments and better communication.
- Other groups of parents more likely to agree that their relationship was improved by the sessions included those who took part in the intervention with their (ex) partner, this is likely to be linked to the fact that intact parents were more likely to attend together.
- Six months after completion, CMS users, fathers and parents in one CPA were less likely to agree that the sessions improved their relationship, though this stabilised and was in line with other parent groups 12 months after completion.
- Further qualitative interviews with completing parents demonstrated a positive impact on them, though to varying degrees. In addition, providers felt they could see the positive impact on the parents they delivered to when they took part in the evaluation in 2021.
- The 2022 cohort of completing parents who took part in the qualitative interviews reported varying levels of impact on their relationship.
  - Those who reported a high level of impact found they were able to communicate better with the other parent and appreciate their perspective more, enabling more effective resolution of conflict when it

arose. This group included an even mix of separated and intact parents.

- Some parents felt a more modest impact, feeling that there had been some impact, but many old patterns of behaviour persisted. For example, separated parents often felt better able to manage contact with their ex-partner without reporting an improvement to the actual relationship.
- Many parents felt that while they had learned something it had resulted in a perceived limited impact to the relationship. Typically, this was because they felt there had been no subsequent behaviour change from their (ex) partner.
- A few parents reported no perceived impact to their relationship from the sessions. This smaller group, comprised of both separated and intact parents, tended to be united by a belief that the relationship was broken beyond repair, negating the possibility of any impact on their relationship from the sessions.
- Parents who felt the sessions had improved the relationship with their (ex) partner were more likely than others to report that their children were less anxious and happier following the sessions.
- Previous qualitative research with parents who did not complete an intervention suggested that most felt that the sessions they did attend had little to no impact on their relationship. These parents tended to be separated parents. The lack of perceived impact on the interparental relationship appeared to be due to the high level of conflict within the relationship. These parents tended to report constantly arguing with their ex-partner or not being in contact at all with their ex-partner before the sessions began.
- In terms of the perceived impacts on their children, regardless of impact on their own relationship, completing parents in qualitative interviews over the life of the evaluation felt they had seen some positive changes in their children or children's behaviour since attending the intervention.
- This was echoed in the quantitative surveys where there was evidence of a positive perceived impact on the children of the completing parents, which increased over time from 6 months after completion (67% had observed a positive impact) to 12 months after completion (73%). This upward shift over time was solely driven by separated parents, who were less likely to report an impact 6 months after completion than intact parents but showed an 8-percentage point increase between 6 and 12 months to bring them in line with intact parents. In the qualitative interviews separated parents reported improved compliance and agreement over access to children. It may be that improved access can make it more likely to see a positive impact on children, as they experience an improvement in their relationship with one or both parents.

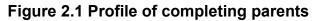
# Findings explained

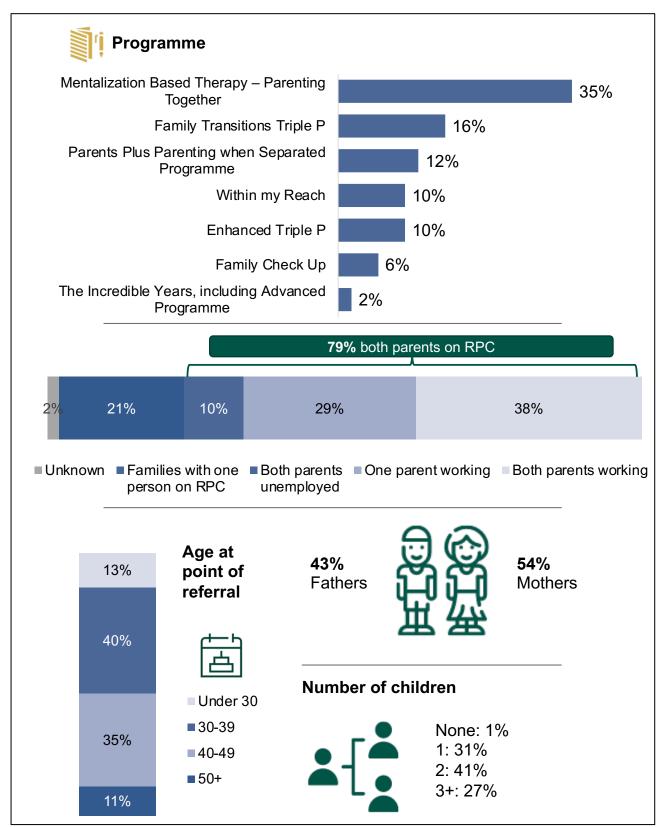
#### Profile of completing parents

Between 2019 and 2022, a total of 2,694 parents completed one of the interventions offered as part of this component of the 2018–22 RPC programme. Almost 1,000 of these took part in Mentalization Based Therapy, which was by far the most commonly attended intervention. A full breakdown of the population by intervention is shown in Figure 2.1. 4Rs and 2Ss Family Strengthening Programme received no referrals at all. For those that received referrals, Incredible Years Advanced supported the lowest number of parents, with 52 completing this intervention.

Parents who had completed an intervention were contacted both 6 months and 12 months completing an intervention. A total of 878 parents completed the survey conducted 6 months after completing an intervention, with 374 also going on to complete the survey conducted 12 months after completion. For the findings to be representative of the overall population of parents who completed an intervention, the data were weighted to match the population. The variables used in the weighting were: type of intervention, whether one or both parents took part in RPC, work status of the family, gender of parent, age of parent at point of referral and the number of children.

Figure 2.1 shows the profile of parents who completed the interventions. Over a third (35%) of all parents who completed an intervention participated in Mentalization Based Therapy, making it the most dominant intervention within the test. Looking at participating in all the interventions tested, the majority of parents (79%) had both parents in the family take part in an intervention, with 21% participating as the only parent from the family. There was a spread of age and gender among those attending and parents usually had 1 to 2 children.





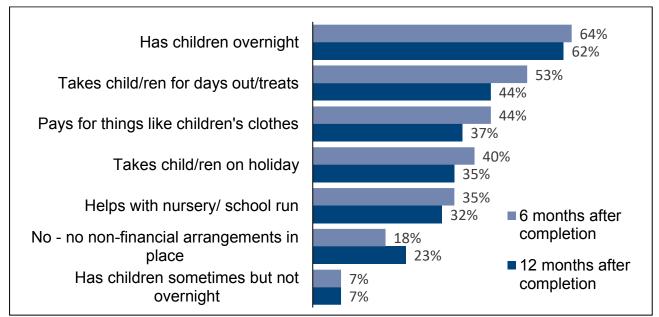
The interventions component of the 2018–22 RPC programme aimed to test support to help both intact and separated couples. Separated couples made up a higher proportion of completing parents (62% at the 6-month point and 69% at the 12-month point). Conversely, 29% of completing parents were in intact couples at the 6-month point and a similar proportion (28%) at the 12-month point.<sup>14</sup>

Between the 6-month and 12-month points, the relationship status of completing parents with the person they were experiencing conflict with generally remained the same. However, of the parents who took part in the 12-month survey, a small proportion (3%) had separated and 1% had got back together.

Six months after completion, around a third (32%) of separated parents were using the Child Maintenance Service (CMS) and a further 30% had agreed their own family-based arrangements. At the 12-month point, similar proportions were using the CMS (31%) and or had family-based arrangements in place (32%). For the majority, this was working well at both the 6-month (77%) and 12-month (76%) points.

At both the 6- and 12-month points, parents had a range of non-financial arrangements in place with their ex-partner, most commonly, having children overnight (64% at 6 months and 62% at 12 months). However, for around a fifth (18% at 6 months and 23% at 12 months) of separated parents, they had no non-financial arrangements in place. This is detailed in Figure 2.2.





Base: All separated completing parents (6 months after completion: 562, 12 months after completion: 261)

<sup>&</sup>lt;sup>14</sup> For the remaining proportion of completing parents, they described their relationship with the person they were experiencing conflict with as 'other'.

#### The journey to the RPC programme

#### **Referral pathways**

Parents first became aware of the programme in a range of ways. Most commonly this was through Family Support Workers, Health Visitors/Early Help teams and schools but also through word of mouth and social media. Sessions tended to be presented as support that would help parents to improve their communication with each other and their children. Research with different cohorts of parents during the life of the programme suggests that this remained consistent throughout delivery.

After becoming aware of the programme and completing the Referral Stage Questionnaire, parents tended to receive further communications about the specific sessions they had been referred to over the phone with the session organisers.

Once parents were told which sessions they would attend, most parents started their sessions within a month. For some it was much quicker, with some only waiting a week. However, some other parents reported waiting several months before they attended their first session.

In line with previously published qualitative findings with completers, parents generally felt that they were given all the information they needed. Other than clarifying whether their (ex) partner would be in attendance they did not tend to have any further questions about the sessions.

#### Motivations for taking part

Participation in the interventions was voluntary for all parents. Most parents who took part (89% 6 months after completion) felt that they had a choice about whether to take part at the point of referral. This left a small proportion of parents who felt it was mandatory, which varied by parent group and location. The belief that they had a choice about attending was higher for intact parents compared with separated parents (96% compared to 87%).

Agreement that they had a choice about whether to take part at the point of referral was higher among those who had agreed a child maintenance arrangement themselves rather than those who used the CMS or who had no arrangement in place at all (93% compared to 85% and 83% respectively, 6 months after completion).

The proportion of parents who felt they had a choice about taking part was consistent across the interventions, and the number of parents who felt that they did not have a choice was slightly higher amongst parents attending Parenting When Separated (13% compared to 8% overall 6 months after completion). Across contract package areas (CPAs), it was more common for parents in one of the four CPAs to feel they had a choice about taking part (93%) but less common for those in another CPA (81%). This may in part be due to one CPA having more intact parents, who were also more likely to feel that there was a choice in attending. The CPA where it was less common for parents to feel like they had a choice had a greater proportion of parents on Parenting When Separate.

Alongside this, a few separated parents in one CPA mentioned during the qualitative interviews that the involvement of social workers in their case made them feel pressure to take part (although this pressure was not directly applied by social workers themselves, more a perceived pressure), and they were fearful that their refusal to participate could adversely impact their access arrangements.

In the qualitative interviews, parents reported that they felt that attending the sessions was their choice and they reiterated that staff who referred them had made this very clear. In the few cases where parents did not feel they had a choice, they reported feeling pressured by social services or their children's school. In one instance, a parent reported that their child's school had (incorrectly) informed them that they could be fined or taken to court if they did not take part in the sessions.

For those who took part in the quantitative survey, those who felt they did not have a choice about taking part were repeatedly more negative about their experience.

The majority of parents expressed in the qualitative interviews that they were keen to try any support that was available and commonly felt optimistic or hopeful when the sessions were first mentioned. This was reflective of a sense of desperation for some kind of solution to the issues many parents faced and was largely true of parents throughout the evaluation period.

In the qualitative interviews, parents that felt less positive prior to the sessions were almost exclusively fathers. These parents either felt that they did not need the support or cited concerns around talking in a group setting or their attendance being recorded by the council.

#### **Experience of the interventions**

#### Overall impressions of the sessions

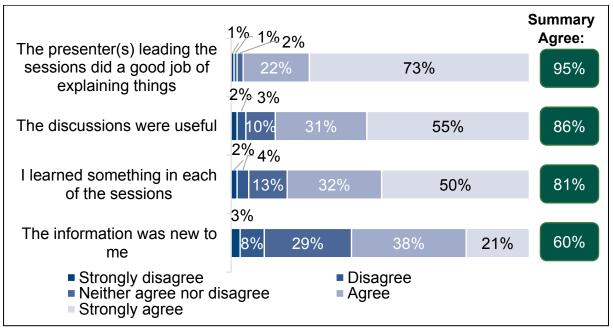
As in previous stages of the evaluation, parents tended to have a positive overall impression of the sessions. They were often described as 'helpful' and left parents feeling like they had learned valuable lessons for their relationship. A few also described really enjoying the sessions themselves, beyond just finding them useful, and came to look forward to attending.

"I really enjoyed them and looked forward to them each time they were due."

#### Mother, Separated, Completer

Parents indicated how they felt about certain aspects of the sessions 6 months after completion and generally these findings were positive. Almost all parents (95%) agreed that the presenter(s) leading the sessions did a good job of explaining things, the majority of parents (86%) agreed that the discussions were useful, and approximately four in five (81%) parents felt that they learnt something in each of the sessions. This is broken down further in Figure 2.3.





Base: All completing parents (6 months after completion: 878)

Other than their views on the presenters leading the sessions, intact parents were more positive than separated parents across all statements relating to their experience of the sessions. This difference was most prominent in the proportion who agreed that the information was new to them (71% of intact parents compared to 56% separated parents).

In the qualitative interviews, a few parents had less positive and occasionally negative overall impressions of the sessions. These parents felt the sessions were not appropriate for them, either in terms of

- content; feeling that it was aimed at parents earlier on in their relationship;
- format; feeling attending with their ex-partner was not beneficial;
- or because they felt the other parents were from backgrounds different to their own and they could not relate to each other's situation.

This chimes with the minority view from previous stages of the evaluation, where a few parents outlined less positive overall impressions for similar reasons.

*"I think it was very useful and good, but I think that it was more for people that are just beginning to want to get married, before getting married."* 

Mother, Separated, Completer

#### What worked well?

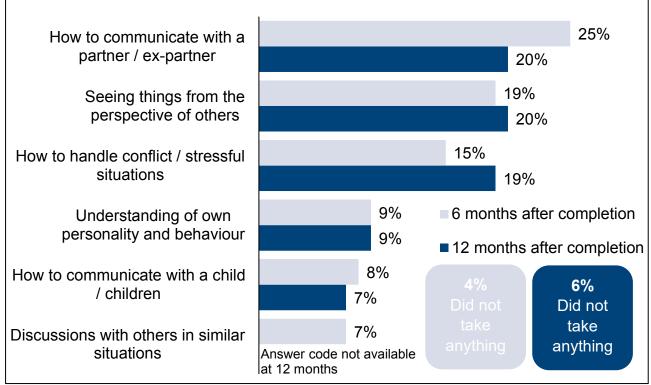
#### Session content and structure

Six months after completing the intervention, it was rare (4%) for parents to feel that they took nothing useful from the sessions. Most commonly, both separated and intact parents felt that learning how to communicate with their (ex) partner was the

most useful thing they took from the sessions (25%). Other common 'most useful elements' were seeing things from the perspective of others (19%) and how to handle conflict / stressful situations (15%).

Figure 2.4 shows this in more detail with findings from both 6-month and 12-month surveys.





Base: All completing parents (6 months after completion: 878; 12 months after completion: 374)

Between the 6-month and 12-month points, parents' perception of the most useful elements of the sessions remained similar.

Intact parents were more likely than separated parents to feel that aspects of the session around improving their relationships were the most useful. For example, they were more likely than separated parents to say how to communicate with their (ex) partner (31% compared to 22%) or seeing things from the perspective of others (27% compared to 17%) were the most useful things they took from the programme.

Conversely, separated parents more often valued elements of the sessions that supported them personally; they were more likely than intact parents to think the most useful aspects were discussions with others in similar situations (10% compared to 2%) or the reassurance that they were doing the right thing (5% compared to 1%).

Use of the CMS appeared to correlate with what parents found most useful about the sessions. CMS users were less likely than others (19%) to think how to communicate with their (ex) partners was the most useful thing to take from the sessions at 6

months after completion (although this was still the most commonly mentioned 'most useful' element).

One year on from the sessions, just under a third of CMS users felt the most useful thing they took from the sessions was how to handle conflict / stressful situations (29%) making this the most mentioned element for CMS users at this point.

These findings regarding the usefulness of the content were evidenced and expanded on in the qualitative interviews. Parents mostly felt that all the content was useful and relevant to them. Parents found it useful to see videos or hear from other participants about conflict situations that they regularly found themselves in. In some cases, this was useful in that it allowed them to reflect on the ways they communicate in these situations and learn new ways for the future. However, in some instances they just found the discussion reassuring, as it made them feel less alone, knowing that other parents shared their experience.

Parents often found the course content gave them greater insight into their relationships. In some instances, this was helping them to develop a deeper understanding of their (ex) partner's perspective, while for others this was an understanding of how they approached relationships and some of the challenges this might create. Often this insight arose from discussions with the course facilitator about the session's content or clips they had seen in videos designed to encourage them to reflect on their own situation.

"We would go through the session together so sometimes we would talk about a chapter in the book, pause and discuss a few points that I would raise, or she would raise. And most sessions we watched a video and then would reflect back on what we had watched."

Mother, Separated, Completer

Where parents took part with their partners, they often noted that it was useful to be given a set time and space to talk to their partner without distractions.

Separated parents who took part alone tended to value the session content around mindfulness and making time for themselves. Many came to realise that this was something that they were not doing previously but would benefit from.

Both separated and intact parents taking part in one-to-one sessions felt the content was appropriately tailored to their own circumstances and therefore felt in general that all of the sessions were very useful.

#### Session facilitators

Most of the parents in qualitative interviews were overwhelmingly positive about the facilitators running the sessions. They commonly felt session leaders did a good job of explaining things, however, most parents put more emphasis on the way session leaders made them feel in the sessions. Parents described how the session leaders made them feel 'comfortable', 'valued' and that they were doing a 'good job' as

parents. Overall, they were felt to provide an impartial ear, allowing parents to open up about the issues they faced.

Parents felt able to ask questions and that their session leaders were able and willing to answer them fully.

Relevant session content and facilitator quality were identified as key strengths of the interventions in the earlier qualitative research as well as in the interviews in the final year of the evaluation. However, parents taking part in the final wave of completer interviews placed less emphasis on the workbooks when outlining strengths of the course than was the case in earlier research.

#### What worked less well?

#### Session content and structure

In qualitative interviews there was some variation in how parents felt about the balance of information relating to relationships and information relating directly to parenting. Some intact parents in group sessions noted that they would have liked more focus on parenting, which they felt to be the key sources of conflict and the areas where most impact could be felt. Some separated parents felt that more focus on the relationship between themselves and their ex-partner would have been beneficial, feeling that navigating this relationship was the bigger source of conflict and therefore what they wanted the sessions to address.

One parent had used the sessions as a way to get mediation on areas of conflict with their partner and felt that they were left without adequate tools to work through arguments after the sessions ended.

"We could have done with a few techniques. It ended and now we don't have anyone to referee our arguments. It would have been good to have some sessions with practical advice as well."

Father, Separated, Completer

#### Session facilitators

Some parents did suggest improvements to the approaches of the session leaders, as they felt they could do more to direct the conversation and contain disagreements to allow the sessions to run more efficiently.

#### Views on mode of delivery

Parents took part in intervention sessions either from a venue provided by the intervention or from their homes. Where parents were taking part from home, the sessions were held either face-to-face or digitally via a video call. Completing parents most commonly reported that sessions took place at home digitally (83% reported 6 months after completion). Roughly one in ten participants took part at home face-to-face (10%) and a similar proportion (12%) took part at a venue provided by the programme.<sup>15</sup> The restrictions put in place during the Coronavirus pandemic were

<sup>&</sup>lt;sup>15</sup> Figures sum to over 100% because for a handful of parents, there was a mix of delivery methods used.

responsible for the large proportion taking part digitally. After restrictions were lifted, some groups of parents were more likely to take part at home face-to-face than others; intact parents (16%), mothers (13% vs 7% fathers) and disabled participants (16%).

The majority of parents who attended sessions at a venue agreed that the location was convenient (87%) and that they were able to find transport to attend (89%).

Parents who attended the sessions at home digitally were almost all (94%) in agreement that their technology worked well. Disabled participants and those aged over 50 were less likely to agree (88% and 89%), but still the majority had working technology.

Almost all parents (94%) felt that the sessions were at a convenient time and the vast majority (83%), of those who needed to, were able to find suitable childcare to allow them to take part.

This was echoed in the final set of qualitative interviews as well. Parents who took part in sessions online found this very easy as they did not have to travel or arrange childcare. Generally, parents felt that the timing of the sessions was flexible, and they could fit this around their work and childcare needs. Several parents mentioned the willingness of session leaders to 'catch them up' or rearrange sessions if they missed any.

Parents who were in employment found evening sessions fitted well around their work schedules. Where sessions were during the day, they found it easy to attend remotely from their workplace if necessary.

Parents were positive about the duration and number of sessions. It was felt that, though sometimes they would have liked slightly longer or shorter sessions on specific topics that were more or less relevant to them, in general they were happy with the length of the sessions.

#### Group sessions vs one-to-one

In qualitative interviews, parents who attended group sessions stated that they appreciated the 'sense of community' and the chance to hear from other people in similar situations. They reported feeling supported and able to share their feelings in this environment. They also felt that a one-to-one session could have been too intense and appreciated that other people in the group could step in and talk if they became overwhelmed and unable to continue speaking.

One father attending in a group setting appreciated the opportunity to hear from other fathers who were having similar issues. He felt that he usually only heard about parental conflict from mothers' perspectives so found hearing about the male experience was reassuring.

Mothers often felt that it was comforting to be in a group of similar aged parents and people with similar life experiences to them. However, one participant felt that her group was not well matched in terms of employment and social circles and found this

negatively impacted her experience, as she did not feel discussions within the group were relevant to her situation.

Parents who attended one-to-one sessions were almost all glad not to be in a group setting. They felt that they would not be able to open up or speak so freely around other people.

Overall, it seemed that parents were being allocated to the group or individual sessions appropriately at the referral stage and that facilitators were able to make use of the benefits of both types of session effectively.

#### Attending with or without (ex) partners

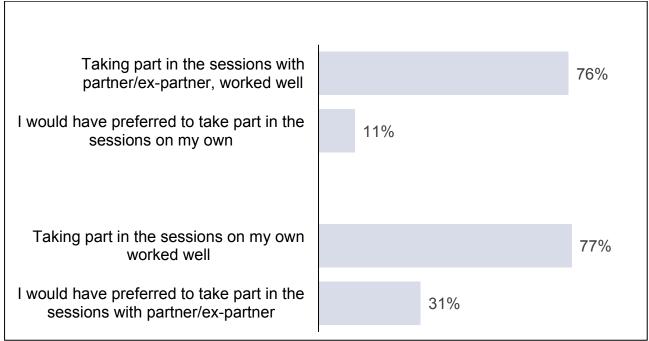
Six months after completion a third (33%) of parents indicated that they took part in the sessions with the (ex) partner that they were experiencing conflict with. It was most common to participate alone (61%), though a small proportion (5%) stated that it was a mix of both.

Intact parents were more likely to attend the sessions with their partner than separated parents were to attend with their ex-partner. The majority of intact parents attended together (84%) while only one in ten (11%) separated parents attended with their ex-partner. Of these separated parents, attendance with their ex-partner was more common among those that did not use the CMS than those who did (18% vs 4%).

There were a handful of demographic differences. Mothers were more likely than parents overall to attend alone (66%) as were white parents (64%) but participants with a disability were more likely to attend with their (ex) partner than those without (52% vs 31%).

Both those who attended the sessions with and those who attended without their (ex) partner generally agreed that their option worked well (76% of those who attended with their (ex) partner and 77% of those who attended without).

One in ten parents (11%) who attended with their (ex) partner would have preferred to attend alone while just under a third (31%) of those who attended alone would have preferred to take part with their partner or former partner. This is shown in Figure 2.5.



#### Figure 2.5 Parents preference for taking part with or without (ex-)partners

Base: All completing parents (6 months after completion: 878)

It was more common for intact than separated parents to agree taking part together worked well (86% vs 45%) or that they would prefer to have taken part with their partner (50% vs 29%). Conversely, it was more common for separated than intact parents to agree taking part on their own worked well (80% vs 63%).

Despite both groups being equally satisfied with how the way they attended worked, generally those who attended sessions with their partner or former partner rather than alone were considerably more likely to feel the sessions improved their relationship (71% vs 39%).

Intact parents who took part in the qualitative interviews were generally very positive about attending with their partners, in line with the findings from earlier qualitative interviews. They enjoyed the chance to spend time together and working together to put the things they learnt into practice.

In line with the survey findings, where parents who took part in the qualitative interviews attended without their (ex-)partner, there were mixed feelings on whether attendance together would have been better. In more volatile relationships, usually between separated parents, they generally felt that their partner's presence in their sessions would have been overbearing and prevented them talking openly, with some concern that sessions would have descended into arguments.

"If he was in the session, I wouldn't have been able to say what I wanted. It would have just created arguments. It would have been a constant clash of opinions rather than a supportive environment ... Instead of coming away positive and looking forward to the next week I would have been coming away depressed and knackered." Where this was not a concern, parents often would have preferred their partner or expartner to be there as they felt this would be more effective in helping them work through the conflict. This was broadly in line with the findings from earlier qualitative interviews.

#### Course materials and additional support

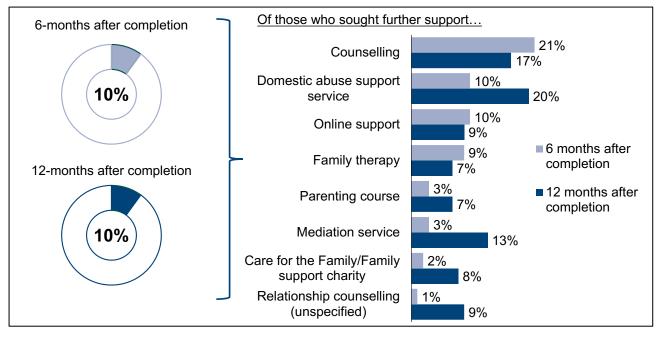
Some parents were given a booklet to go along with their sessions. Though few parents said that they had read it cover to cover, many parents in qualitative interviews talked about referring back to it at a later date when faced with specific situations.

Few of the parents who took part in the qualitative interviews accessed any further support off the back of the sessions. Parents who did, contacted an external councillor or support for a child with SEND.

At the 6-month point, one in ten (10%) parents had accessed further online relationship support. This proportion was smaller among intact parents (6%) but higher among separated parents, particularly those who did not use the CMS but who had an agreed child maintenance arrangement between themselves (15%).

At the 12-month point, the proportion of parents who had accessed further relationship support was unchanged from the initial survey (10%). As shown in Figure 2.6, the type of support accessed was also broadly the same, with the exception of a higher proportion of parents who had accessed mediation services (11% up from 3%).





Base: All completing parents (6 months after completion: 878; 12 months after completion :374) All completing parents who accessed further relationship support during or after intervention (6 months after completion: 86; 12 months after completion: 37).

For the one in ten completing parents who had accessed further relationship support during or after the sessions, this was most often in the form of counselling (21%). Other support types accessed included domestic abuse support (10%), online support (10%), and family therapy (9%). For the former, it is unknown whether the domestic abuse support was sought in relation to the same case they received support for as part of the RPC programme or not. As shown in Figure 2.6 above, the type of support accessed changed notably between 6 month and 12 months after completion with domestic abuse support becoming the most common support accessed (20% up from 10%). A higher proportion of parents had accessed mediation services (13% up from 3%) and unspecified relationship counselling (9% up from 1%). There was also an increase in use of care for the family / family support (8% up from 2%), although this shift was not statistically significant.

The types of support accessed also varied considerably by gender. For example, at the 6-month point, domestic abuse services were accessed exclusively by separated mothers and were the most commonly accessed service for that subgroup (20%). Mothers were also more likely than fathers to access family therapy (17% compared to 1%) while fathers were more likely to access support online (17% compared to 3%). At the 12-month point, the base sizes were too small for this question to allow subgroup analysis in this way.

<sup>&</sup>lt;sup>16</sup> As only one in ten parents sought relationship support, the bar chart is based on a small number of parents. For example, 10% of 86 parents sought support on domestic abuse 6 months after completion, and 20% of 37 parents sought this support 12 months after completion.

#### Failure to start or complete interventions

#### Profile of parents who did not complete or start interventions

Some parents either failed to start or failed to complete the interventions to which they had been referred:

- Non-completers those who began attending sessions but did not complete the intervention (for the provider to be paid for a 'completer', the parent had to attend 80% of the planned sessions)
- Did not starts those who were referred to an intervention but did not attend any sessions.

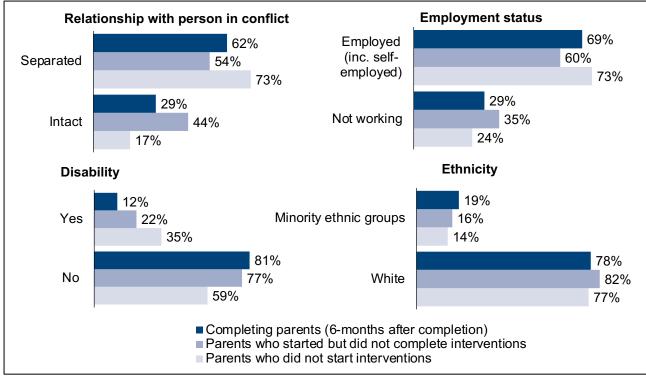
From a total of 2,108 parents who started an intervention but failed to complete it, just 192 took part in the non-completers survey, which aimed to understand the reasons for not completing and their experience of the sessions they did participate in.

Almost half (47%) of non-completing parents started Mentalization Based Therapy (MBT), 16% started Parents Plus – Parenting When Separated, with less than 10% taking part in other interventions available.

In the final year of the evaluation, it was deemed appropriate to begin conducting a survey of parents who were referred to an intervention but did not start it, to find out why some parents were dropping out at this early stage. This survey focused on understanding parents' experiences of the referral process and drop-out, as well as assessing the level of conflict still present between parents who had not received support. Out of a total of 1,308 parents who failed to start over the lifetime of the test, just 66 parents responded to the survey, despite the offer of a research incentive.

In line with the design of the test, less than half (29) of the respondents to the did not start survey, did not know which intervention they were due to start. This was usually agreed after an initial assessment, once an intervention plan was agreed. Where it was known, again, Mentalization Based Therapy (MBT) was most common (24%), followed by Parents Plus – Parenting When Separated (17%).

It was more often the case that the parents who were referred but did not start were separated (73% vs 17% intact), this was also true for non-completing parents (54% vs 44% intact). As shown in the further breakdown in Figure 2.7, most parents were employed, did not have a disability and were from a white background.



## Figure 2.7 Demographic make-up on did not start and non-completing parents (shown against profile of completing parents)

Base: All completing parents (6 months after completion: 878); Non-completing parents (192); **Parents who did not start interventions (66)** 

#### Prevalence of use of the Child Maintenance Service

All separated parents who took part in the surveys indicated whether they used the CMS. As with all completing parents, around a third of respondents who failed to start were using the CMS (32%) and 36% had their own family-based arrangements, and a quarter of non-completing parents were using CMS (25%) with an additional 26% having agreed their own family-based arrangements. For the majority of both groups, the CMS arrangements were working well at the point of the survey (68% of did not start parents and 85% of non-completing parents).

#### **Point of Referral**

Most commonly (54% of non-completers and 50% of non-starters) parents who did not start or did not complete their interventions were referred by social workers (including family workers, support workers and family services). Other referral routes included schools and healthcare professionals.

These referral routes are similar to those for completing parents indicating that there is no obvious relationship between the referrer and whether or not a parent went on to start or complete.

At the time of referral, non-completing parents' understanding of the sessions was generally good. The majority (84%) felt that they had had a choice on whether to take part and the same proportion (84%) understood the reason they had been referred.

Intact parents were more likely than separated parents to understand why they had been referred (92% vs 78%).

Very few non-completers indicated that there was something they wished they had known at the point they were referred; over half (57%) said there was nothing they wished they had known and one in five (20%) could not think of anything. Intact parents were more likely to feel they had all the information they needed, 71% said there was nothing further they wished they had been told (compared to 47% of separated parents), and a further 18% said there didn't know of anything else they would have liked to have been told.

A minority made some suggestions, these included clearer information about what the sessions involved (7%), who would be present for the session, more transparency about the session and that they were not compulsory (all 3%).

For parents that did not start, there was a similar picture, with 38% stating there was nothing they wished they had known at that point, and 24% did not know. Small numbers of parents stated they would have liked more accurate/clearer information, to know what the session would involve and wished they had known that court proceedings could have been a barrier to participation in the intervention.

At the point of referral, for just under half of the parents who failed to start their intervention (48%), at least one parent had been actively seeking relationship support.

#### Time between referral and the start of the sessions

Just over half (55%) of parents who did not start an intervention received communication between the time of the referral and the first session, almost a third did not (29%). This communication was primarily via email (61%), telephone call (33%) or letter/information pack (19%).

Despite just half of them receiving communication, a lack of understanding of potential benefits did not seem to have prevented parents from participating. Parents who did not start an intervention were generally positive about the sessions, two-thirds (68%) thought the sessions would have helped their children and a similar portion (67%) understood how the sessions could have helped them and their family.

Three-quarters (73%) of parents who did not start the sessions were still keen to take part at the point when they were interviewed. However, only a quarter (26%) agreed that their partner/ex-partner was also keen to take part.

A small number of parents felt that considering taking part in the intervention created more tension (12%) or reduced tension (5%) in their relationship but for most, considering the intervention did not impact the perceived tension in their relationship (70%).

Only one in five (21%) parents who failed to start their sessions received a start date for their intervention. This was a small number of parents (14), most commonly, this was within 1 month of the referral.

#### Reasons for failure to start

Reasons for not starting the intervention were most often related to their situation with their (ex) partner (44%). Examples of this include that the person they were in conflict with did not want them to go (15%), they did not think the service would help to improve the relationship between them and their (ex) partner (11%) and because of ongoing legal proceedings between them and their (ex) partner (11%). A smaller proportion gave reasons relating to the suitability of the support (21%), examples include that they did not feel like they needed the support that the sessions offered (14%) and that they thought a different kind of support was needed (6%).<sup>17</sup>

When specifically asked about the timing of the referral, this generally did not contribute to not taking part in the session (61%). Around one in six (17%) felt that the timing did contribute to not taking part (and the remainder did not know whether it did or not).

Parents' feelings on when would have been a better time for them to take part in the intervention varied. Some parents felt the sessions would have been better had they been referred earlier, for example before the situation had escalated to a court case or before their relationship deteriorated beyond the point where it could have been saved. Alternatively, some parents felt the sessions would have been more useful later on, for example after their court case had ended, or when they were in better place personally.

#### Attendance at the sessions

In a practical sense, for non-completing parents, the sessions generally worked well. More than three quarters of non-completing parents felt sessions were at a convenient time and they were able to find transport to attend (76% and 82%). Most (59%) also agreed that sessions were in a convenient location (only 9% disagreed). The majority of parents (80%) also felt that the presenters did a good job of leading the sessions.

Almost a third (28%) of these non-completing parents felt that the sessions improved the relationship between them and their (ex) partner. By far the most common improvement these parents reported was improved communication (70%).

On the other hand, approximately half (48%) of non-completing parents did not feel that the sessions improved their relationship. This was most often due to factors relating to their (ex) partner; for instance, because their (ex) partner was not willing to engage in the sessions (33%) or because they were unable to compromise with their (ex) partner (9%). Around one in ten (11%) felt that the sessions did not provide help or information that they needed, and a smaller proportion (7%) felt that the sessions' scope was limited.

Across all measures relating to non-completers' experience of the sessions, intact parents were consistently more positive than separated parents. The comparisons are illustrated below in Figure 2.8. Most notably, intact parents were more likely to

<sup>&</sup>lt;sup>17</sup> The sample of parents who took part in the did not start survey was skewed towards separated and employed parents, therefore, these reasons may not be representative of the population of all referred parents who did not start an intervention, meaning these should be treated with caution.

feel that sessions helped them manage the conflict in their relationship, to have learnt something from each of the sessions and to have found the discussions useful. Intact parents were also more likely to feel that sessions they did have had improved the relationship between them and their (ex) partner.

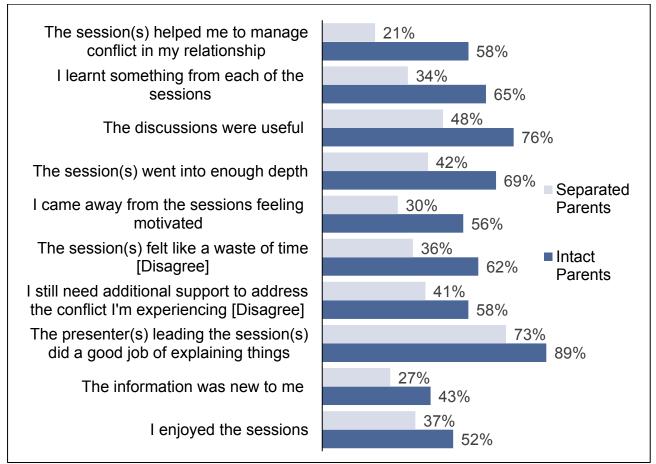


Figure 2.8 Separated and Intact parents' experience of sessions

Base: Parents who did not complete interventions: Intact parents (85); Separated parents (103)

#### Point of dropout

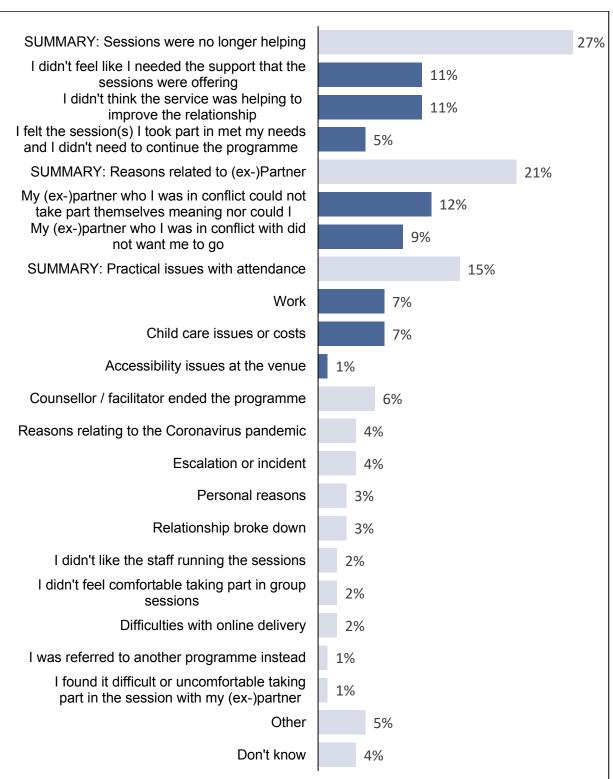
Where parents did not complete the sessions, around one in six (15%) dropped out after just one session but most commonly (37%) parents left after 3-4 sessions.

Intact parents were more likely than separated parents to complete three or more sessions before dropping out (66% intact vs 52% separated). This difference stemmed from a higher proportion of separated parents dropping out after 2 sessions than intact parents (26% vs 14%), but the survey found no difference in the proportion of intact versus separated parents dropping out after the first session.

Parents who completed five sessions or more were more likely to agree that the sessions had helped their relationship, indeed all the parents who completed eight or more sessions before dropping out agreed that they helped the relationship.

#### Reasons for failing to complete the sessions

The main reasons parents failed to complete the sessions were broadly grouped into four categories as shown in Figure 2.9. Most commonly (27%) the main reason for not completing was that they felt the sessions were no longer helping. This included 11% of parents who did not feel that they needed the support, 11% who did not think the service was helping their relationship with their (ex) partner and 5% who felt the sessions had met their need already. Given that reasons are more commonly related to their own situation rather than the content of the session, this perhaps suggests that the feeling of no longer needing the support was not always a reflection on the intervention content.



#### Figure 2.9 Main reasons for not completing the intervention

Base: All parents who did not complete intervention (192)

Just under a quarter (21%) of parents reported that the main reason they stopped was linked to their (ex) partner; either their (ex) partner could not take part themselves (12%) or their (ex) partner did not want them to take part (9%).

A smaller portion of non-completing parents (15%) could not complete due to practical issues with attendance (7%) or childcare (7%). Specifically, difficulties with childcare was more often the main reason for drop-out amongst intact parents than separated parents (12% vs 3% respectively).

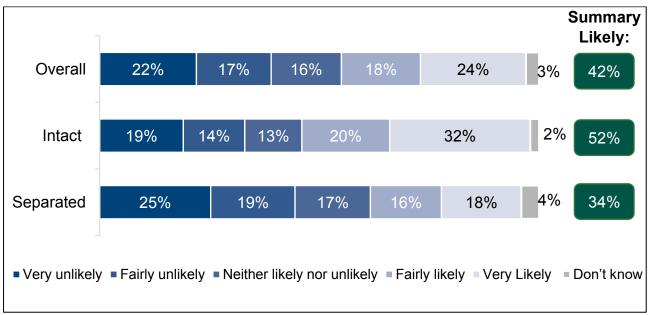
Very few parents (2%) said that not feeling comfortable in the sessions was the main reason for not continuing.

Unsurprisingly, parents who failed to complete the full set of sessions were less likely to have perceived the sessions were helping their relationship, than those who attended all the sessions (28% non-completers compared to 49% of completers).

Reasons for not completing were often linked to views on whether parents felt attending sessions improved their relationship. Non-completing parents who felt that the sessions they did attend improved their relationship were more likely to give practical issues as the reason for not attending (32% vs 7%). Encompassed in practical reasons were work commitments, childcare issues and reasons related to the Coronavirus pandemic. Non-completing parents who felt their relationship did not improve tended to give reasons relating to their (ex) partner.

#### Likelihood to take up the opportunity for sessions in the future

Around four in ten (42%) parents who failed to complete the intervention sessions stated that they would be likely to take part if they had the opportunity again. Intact parents were more likely than separated parents to be likely to return to the sessions in future (52% vs 34%). This is shown in Figure 2.10.



## Figure 2.10 Likelihood of non-completers to take part again if they had the opportunity

Base: Parents who did not complete intervention: Intact parents (85); Separated parents (103)

Where parents said they were likely to take part in the future, if offered the chance, this was because the advice they received so far was helpful (25%), because they

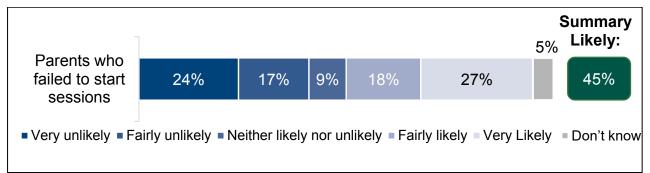
thought they would learn more skills/techniques (20%) or if their (ex) partner would be involved (17%).

Where non-completing parents stated they would be unlikely to take part in future, this was most often because they felt the sessions did not help (21%) or were not relevant to their circumstances (21%). A smaller proportion (13%) felt that they were now ready to handle situations themselves so did not require further sessions. A further 13% of those that were unlikely to return, said their return would be dependent on their (ex) partners involvement.

For just over half of those unlikely to take part in the future (53%), they felt that nothing could be done to encourage them to take up support. The main factors that would encourage future participation were co-operation from their (ex) partner (11%) and more counselling/therapy (9%).

In terms of future participation, a similar proportion of parents who responded to the 'did not start' survey stated that they would be likely to take part if they had the opportunity again (45%). This is further broken down in Figure 2.11.

## Figure 2.11 Likelihood of parents who failed to start the sessions to take part again if they had the opportunity



Base: Parents who failed to start intervention (66)

Parents that failed to start an intervention reported that they would be likely to take part in future if it would improve things for their children (23%), in order to stabilise their relationship (20%) or if they needed additional help (20%).

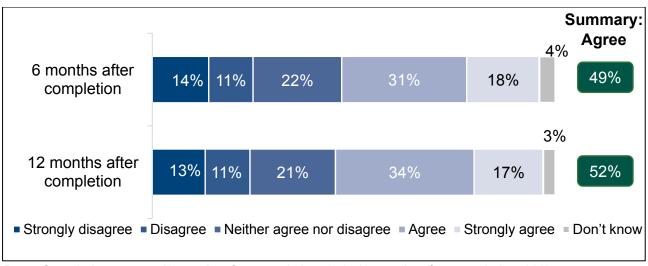
For those that were unlikely to participate in future<sup>18</sup>, this was because the relationship had irretrievably broken down (37%) or they felt the programme was not suitable (15%). For the most part, parents who were unlikely to take part felt that nothing could be done to encourage them to take part in future (78%).

Separately to the relationship support offered as part of the RPC programme, a third (29%) of parents who failed to start an intervention felt they would like access to other support. This was most frequently legal support (21%), financial advice (16%) or general support (16%). The majority (79%) felt this support could come at any time, further indicating that the issue of the timing is only relevant to a proportion of individuals.

<sup>&</sup>lt;sup>18</sup> Low base size (27), treat with caution.

### Impact of taking part

This section explores parents' own perceptions of the impact of the intervention sessions they took part in. Around half of the parents interviewed at the 6-month point felt that the sessions had positively impacted their relationships with their partner or ex-partner to some extent (49%). Figures from the survey at the 12-month point were largely similar with a very similar proportion (52%) agreeing that sessions had improved their relationship. This is illustrated in Figure 2.12 below.

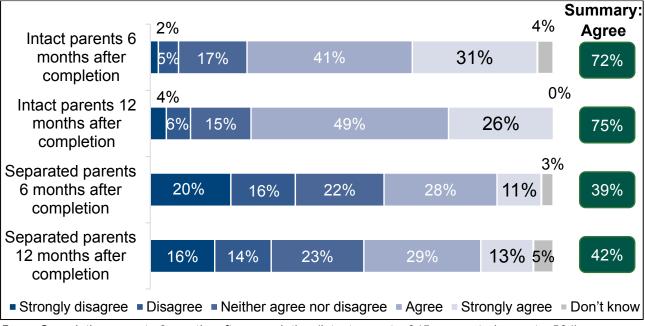


## Figure 2.12 Extent to which parents felt the sessions had improved their relationship 6 months and 12 months after taking part in the sessions

Base: Completing parents (6 months after completion: 878; 12 months after completion: 383)

However, at both 6 and 12-month surveys, this figure was much higher for intact parents with around three quarters (72% and 75%) agreeing that sessions have improved their relationship compared to a little over a third (39% and 42%) of separated parents, as shown in Figure 2.13.

### Figure 2.13 Extent that parents agreed sessions improved their relationship for intact and separated parents



Base: Completing parents 6 months after completion (intact parents: 245; separated parents: 564), Completing parents 12 months after completion (intact parents: 104; separated parents: 261)

It was more likely for parents to feel sessions had improved their relationship 6 months after completion in cases where both parents had taken part in the sessions (52% compared to 40% where just one parent took part). At the 12-month point, this difference was even more pronounced (55% compared to 37%). At the 6-month point, where both parents had taken part, the improvement felt was greatest where both parents were unemployed (62%); by the 12-month point, this difference was no longer apparent.

At the 6-month point only, fathers were more likely than mothers to agree that the sessions had improved their relationship (54% compared to 45%) as were those taking part in one CPA (63%). However, again by the 12-month point fathers' and mothers' responses were similar (53% compared to 51%) as were responses across all CPAs.

Separated parents with some form of maintenance arrangement (privately or through the CMS) were less likely to agree that the sessions had improved their relationship with their ex-partner. At the 6-month point, CMS users were less likely than others to agree their relationships were improved by the sessions (29% vs 49% of parents overall), though this difference was no longer clear at the 12-month point. Those who had a privately agreed arrangement (outside of the CMS) were less likely than others to agree that the sessions had improved their relationships at the 12-month point (39% vs 52% parents overall).

At both the 6- and 12-month points, those who took part at a venue rather than at home were also less likely to agree that the sessions had improved their relationship

(39% and 38% of home-based participants, compared to 49% and 52% of venue-based participants).

At the 12-month point, four in five (83%) parents agreed that taking part in the sessions had been worthwhile. This was consistent across all subgroups with the exception of parents who took part in the sessions at a venue, who were less likely than others to agree that the sessions were worthwhile (74%).

In qualitative interviews conducted in 2022, most parents felt that the sessions had positively impacted their relationship with their (ex) partner to some extent, although a notable minority felt it had had no perceived impact. This was broadly in line with the findings from earlier qualitative interviews. However, the final wave of completer interviews showed a mix of intact and separated parents within each level of perceived impact, while intact parents tended to show higher levels of positive impact and separated parents tended to experience more modest perceived impacts in earlier research.

It is important to note that this assessment is purely based on parents' perceptions. Further analysis of the effects of the interventions on the interparental relationship and child outcomes is available separately.<sup>19</sup>

#### High levels of perceived impact on relationship

In the qualitative interviews, many parents outlined a high level of perceived impact. For these parents, the sessions had resulted in a noticeable change in the relationship with the other parent that they felt confident could be attributed to the sessions. There was a broadly even split between separated and intact parents within this group.

Where parents reported a high level of perceived impact this manifested in a few different ways. Some parents reported that the sessions helped them to better understand where their (ex) partner was coming from during disagreements.

'I am able to see his point of view and also to trust his point of view because he is seeing the broader picture and wants to put his family first."

#### Mother, Intact, Completer

Intact parents who felt the sessions had positively impacted their relationship noted that participation had helped them to improve their communication and management of tense situations; for example, pausing a conversation if it became too heated and coming back later to continue it calmly. Parents indicated that this led to reduced frequency and scale of arguments.

#### Some perceived impact on relationship

Some parents reported a more limited impact on their relationship. Although this group reported some impact, this was more modest, with many old issues and unhelpful patterns of behaviour remaining. A few suggested that this was the result of

<sup>&</sup>lt;sup>19</sup> DWP (2023) Reducing Parental Conflict programme 2018-2022: An evaluation of the effects of interventions on parental relationships and children, London: Department for Work and Pensions

their (ex) partner acting in the same way as they did before the sessions. This group included a broadly even mix of separated and intact parents.

"Obviously I feel a lot better but there is still a lot to be resolved. I mean it sounds like I am hammering [the other parent] with full blame, but like I say, 99% of the arguments are because of the way [the other parent] feels."

#### Father, Intact, Completer

Separated parents often reported that the sessions had not improved the quality of their relationship, but they had helped them to better manage contact with their expartner. Though they felt that this did not improve the quality of the relationship, it improved their experience of the relationship as they were less affected by the actions of their ex-partner. This corresponds with findings from diary research conducted with parents accessing these interventions.<sup>20</sup>

In a few cases, parents had separated either during or after taking part in the course. In these instances, parents felt that conversations during the session had helped them to understand themselves and their partner better, but they had decided that the relationship was not working. In one instance, parents noted that the communication skills and techniques they learnt during the sessions allowed them to navigate their separation more cordially than they might otherwise have been able to. While the sessions might not have had a positive impact on the relationship between parents it did reportedly lead to less conflict during the separation. These parents attended either the Enhanced Triple P or the Incredible Years, including Advanced Programme interventions.

#### Limited or no perceived impact on relationship

#### Limited perceived impact

Many parents reported limited impacts on their relationship. For this group, they felt that while they had learned something from the sessions, ultimately this learning translated into little meaningful change in their relationship.

Where parents felt that sessions had not improved the relationship, this was commonly due to parents feeling that their (ex) partner had not changed their behaviour. In some cases, this was felt to be down to a lack of engagement in the sessions from their (ex) partner.

"I can just envisage him listening to this call and doing the sessions and solely thinking that it's all my behaviour{s}, because he couldn't ever possibly think that anything could possibly be his fault."

Mother, Separated, Completer

#### No perceived impact

<sup>&</sup>lt;sup>20</sup> <u>DWP (2023) Reducing Parental Conflict programme 2018-2022: Diary research with parents</u> accessing interventions, London: Department for Work and Pensions

Some parents felt there was no impact on their relationship. This group included a mix of separated and intact parents.

Amongst the separated parents within this group, there was a belief that the relationship was 'too far gone'. This was particularly common amongst separated parents using CMS, who often reported some of the highest levels of conflict.

Amongst the intact parents in this group, there was also a common belief that the relationship was broken beyond repair. For these parents, the sessions had no impact, and they did not believe that there was much that could save the relationship.

#### Perceived impact on parents personally

Aside from the impact (or lack of impact) on their relationship, some parents perceived positive impacts on them personally. Improved confidence was a common theme among parents. This encompassed confidence in their own skills as a parent, and confidence in themselves, in terms of appropriate challenging of their (ex) partner if they felt they were being overly critical of their parenting approach.

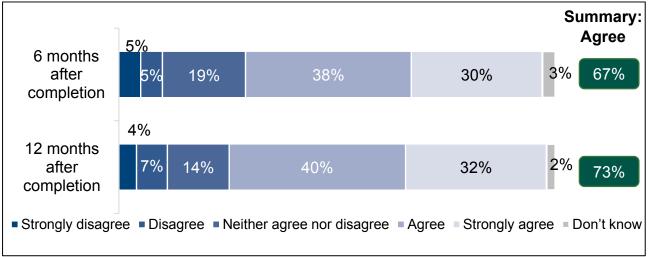
Many parents also mentioned that the mindfulness and self-care elements of the course had benefitted their own mental health.

A few parents who felt there had been limited impact on their relationship did feel that they had taken some of these personal benefits from the sessions.

#### Perceived impact on children

Six months after completion, two thirds of parents (67%) felt that sessions had had a positive impact on their child/children and this figure increased by the 12-month point to almost three quarters (73%).

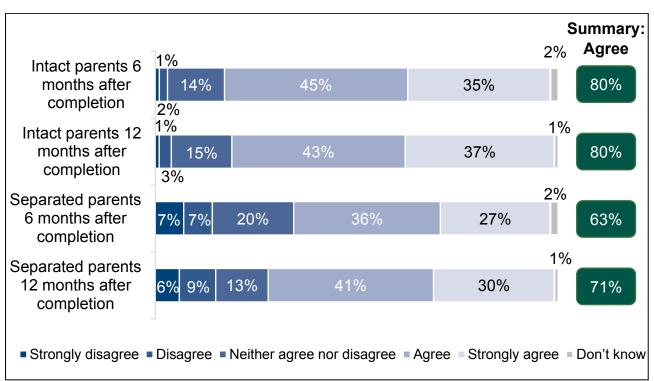
### Figure 2.14 Extent that parents at the 6-month and 12-month surveys agreed that the sessions had a positive impact on their child/children



Base: Completing parents who have children (6 months after completion: 875; 12 months after completion: 372)

As shown in Figure 2.15, this change over time was concentrated amongst separated parents where agreement rose by 7 percentage points between the 6- and 12-month points. At the 6-month point, agreement was higher for intact parents compared to

separated parents (80% compared to 63%) but by the 12-month point, agreement across intact and separated parents was comparable. This suggests that it can take a little longer for positive impacts to be felt by separated parents.



## Figure 2.15 Extent that intact and separated parents at 6-month and 12-month surveys agreed that sessions had a positive impact on their child/children

Base: Completing parents who have children 6 months after completion (intact parents: 244; separated parents: 562), Completing parents who have children 12 months after completion (intact parents: 104; separated parents: 259)

Parents who felt their relationship was improved by the sessions were more likely to feel that sessions had impacted their child/ren positively (89% compared to 34% who did not at 6 months and 92% compared to 44% who did not at 12 months). However, it is important to note that in some cases positive impacts on their child/ren were observed even when parents felt there had been no impact on their own relationship.

Agreement that attending the sessions had a perceived positive impact on children was also higher, in the 6-month survey, among parents who attended with their (ex) partner (76% compared to 63% who attended alone) but this difference was not evident at the 12-month point.

Agreement that their child/ren had been impacted positively by the sessions was also higher for non-working parents (73%) but lower for CMS users (59%) at the 6-month point but these differences were not evident at the 12-month point.

Qualitatively, parents commonly reported feeling that they were now calmer in their interactions with their children. This had reportedly led to calmer behaviour from their children including less shouting, anxiety and aggression.

Specifically, parents who felt that the sessions had improved their relationships with their (ex) partner noted that their children were generally less anxious and happier as a result.

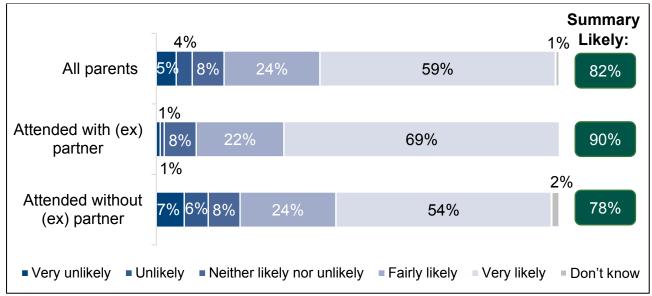
"I can't see how it would not [be better for their son]. Better atmosphere, dad has got more energy...it must be better."

Mother, Intact, Completer

#### Likelihood to recommend the sessions

The majority (82%) of parents in the 12-month survey stated that they were likely to recommend sessions to other parents like them. This was most common among parents who felt the sessions had helped their relationship (95%). However, two thirds (62%) of parents who felt the sessions had not helped their relationship also agreed that they would be likely to recommend the sessions.





Base: Completing parents 12 months after completion (374; parents who attended with their (ex) partner: 116; parents who attended without their (ex) partner: 239)

As shown in Figure 2.16, parents who attended the sessions with their (ex) partner rather than alone, were more likely to recommend the sessions (90% compared to 78%) whilst separated parents who had their own child maintenance agreement in place (independent of CMS) were less likely than average to recommend the sessions (69%).

Where parents were likely to recommend the sessions, this was most often because they found them helpful (27%), they felt it was useful to talk to a third party (13%), it helped them see things from another perspective (12%) or it provided them with useful strategies/tools (12%). Around one in ten (12%) parents who would recommend the sessions said that, though they would recommend them, it would depend on the personal circumstances.

Fewer than one in ten participants (7%) were unlikely to recommend the sessions. These parents gave this response because they didn't learn anything useful (33%), they felt that the sessions were not suitable for their personal circumstances (25%), or because they felt that the facilitators were poor (12%).

# Chapter 3 Training

This chapter summarises findings from the previous evaluation reports and examines the use of the Practitioner Training (PT) grant and the experience of frontline practitioners who took part in the training delivered through the RPC programme. It also explores the impact of the training on practitioners and how they have applied it in their day-to-day roles. Training moved to digital delivery in the context of the Coronavirus pandemic so the experiences of those who completed Virtual Learning Classroom (VLC) training, and the impact of this mode of delivery compared to those who received face-to-face training prior to Spring 2020 is also covered.

### Introduction to the training

Aimed primarily at frontline practitioners, the training provided through the programme was available throughout England and consisted of a range of options.

A training provider, KnowledgePool, was appointed to produce 4 bespoke training modules and a Train the Trainer workshop. The first 3 modules were designed to build upon each other, with module 1 offering an introduction to the concept of parental conflict, module 2 progressing to cover the identification of conflict, and module 3 building confidence in addressing it, offering tools and support for frontline practitioners working with families. Practitioners could choose which modules they completed and the order they took them in.

The fourth module was designed for supervisors to enable them to support their colleagues working with parents in conflict.

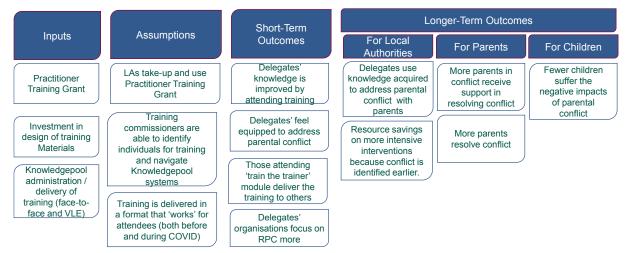
The Train the Trainer workshop was intended to build the capacity of those already skilled in training to deliver training about parental conflict and the impacts of it. It was designed to be a two-day workshop.

Local authorities were provided with a Practitioner Training (PT) grant that they could use to buy the training most suited to their local needs from KnowledgePool. Local authorities decided which practitioners accessed the training.

Training was first available in April 2019. In Spring 2020, delivery switched from a blend of online and face-to-face delivery to digital delivery only in response to the social distancing requirements implemented in response to the Coronavirus pandemic.

The diagram below shows how the provision of training for frontline practitioners was ultimately intended to achieve positive outcomes for families.

Figure 3.1 Logic Model for Training



The research covered by this report summarises some of the assumptions and shortterm outcomes in this model that were highlighted in previous reports.

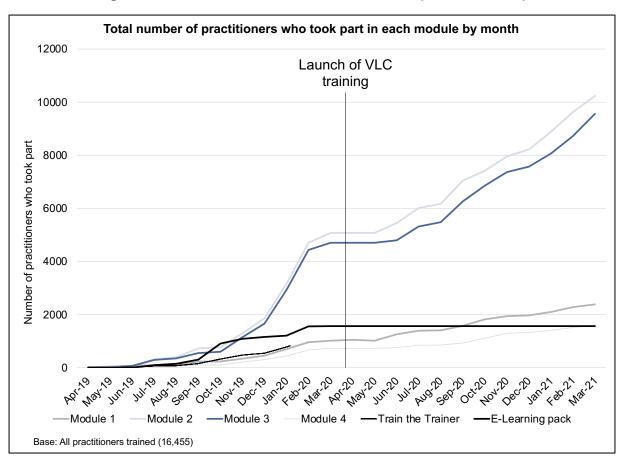
### Findings from the training evaluation

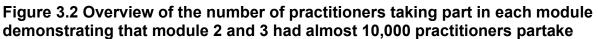
All evaluation components related to the training were completed ahead of the third evaluation report looking at the 2018–22 programme. This chapter summarises all findings reported on prior to this final report.

#### Take up of the training

Nearly all local authorities made use of the PT grant which ensured a wide reach for the RPC training. At the time of the early implementation research in mid-2020, only a small proportion of practitioners had been trained. Case study visits with local authorities found that they had some frustrations with the delays in being able to access training.

However, delivery of training ramped up and over the course of the RPC programme almost 16,500 practitioners took part in Reducing Parental Conflict training, covering over 25,000 modules. Around half of attendance was via VLC, with 7,800 practitioners taking part this way. For both training delivered face-to-face and in the Virtual Learning Classroom (VLC), the modules with highest attendance were modules 2 (recognising parental conflict) and 3 (working with parents in conflict).





#### Content of the training

Overall, practitioners were positive about the RPC programme training package, both initially, when delivered face-to-face and when delivered in the VLC setting. In qualitative interviews conducted as part of the evaluation, practitioners praised it as being relevant to their work and adequate in level of detail. This was reflected in the quantitative survey for both face-to-face and VLC training; 95% of practitioners felt that the material covered was relevant to their work and for all modules, at least 75% felt the amount of detail was about right. However, those who attended Train the Trainer were less likely to feel the level of detail was about right. Further exploration in the qualitative interviews demonstrated that the content of Train the Trainer could be improved by ensuring a greater focus on the practical delivery of the training session.

#### Usefulness of the training

Most practitioners who attended the RPC training found that the modules were useful, this varied by module and was generally rated more highly for those who took part using the VLC delivery method. For Train the Trainer, however, usefulness was higher for those attending face-to-face (75% felt it was useful), whereas two-thirds (66%) who attended via VLC found it useful. For modules 1-4, over seven in ten found the training useful, and this rose to closer to or higher than eight in ten when delivered via VLC.

The most helpful elements of the training mentioned in quantitative and qualitative elements of the evaluation included the tools to use with families, how to engage or communicate with families regarding parental conflict and the resources available to use following the training.

#### Impact of the training

Positively, most practitioners who attended the training felt that their knowledge, understanding and skills regarding parental conflict had improved as a result of the training. During the practitioner surveys with participants, they indicated their level of knowledge or understanding around a range of elements before attending the training and six-months after. Most practitioners (over 80%) who attended both face-to-face and via VLC felt that their understanding, knowledge, confidence and ability had increased since attending the training. This is further detailed in Figure 3.3.

## Figure 3.3 The proportion of practitioners who felt their understanding, knowledge and skills had increased as a result of the training

	VLC practitioners			Face-to-Face ncreased practitioners				Increased
lead to negative outcomes for children	14%	45%	40%	85%	18%	42%	40%	82%
Ability to identify children/families who may be affected by parental conflict	13%	44%	43%	87%	15%	42%	42%	85%
Confidence to start conversations about parental conflict	10%	39%	50%	89%	12%	36%	51%	87%
Ability to work with parents to try to resolve conflict	11%	39%	49%	88%	13%	38%	48%	86%
Ability to persuade parents in conflict to engage with strategies/services	10%	42%	47%	88%	12%	41%	46%	87%
Knowledge of services that you can refer parents in conflict to	17%	40%	41%	82%	17%	41%	41%	82%
Ability to support/ guide team members in addressing parental conflict*	10%	43%	47%	90%	12%	40%	48%	88%
Ability to deliver training about reducing parental conflict**	17%	30%	52%	82%	8%	32%	59%	91%
	No c	change 🔳	Increased little	Increased	lot			

Base: VLC practitioners Sept 2020-May 2021 (1,010), Face-to-face practitioners prior to May 2020 (1,416) \* completed module 4 (VLC:176, F2F:272) \*\*completed TtT (VLC:172, F2F:268)

#### Application to job role

Three quarters of practitioners felt that the training had equipped them to apply what they learnt to their day-to-day job role. Around half of practitioners who attended face-to-face felt they would be able to apply their learning at least weekly (49%), though at the 6-month point, just 35% had done so. The Coronavirus restrictions likely contributed to this. Positively, the application to job role was high for practitioners, which was also evidenced in the qualitative research. Most commonly, practitioners had applied guidance on identifying children/families who may be

affected by parental conflict and started conversations about parental conflict in their day-to-day role.

Practitioners who attended the Train the Trainer module had rarely progressed to deliver training themselves 6 months after attending the Train the Trainer session (5% of VLC practitioners and 4% of those who attended face-to-face). However, the majority did plan to do so, but this was higher for those who attended face-to-face training (77% vs 67% who attended VLC).

#### Method of delivery

Overall, training was well-received, relevant to practitioner job roles and equipped practitioners to use what they had learned whether attended face-to-face or via VLC. There were a handful of differences in experience between the delivery methods, primarily regarding the Train the Trainer module, where there was increased intended delivery of the sessions and higher perceived usefulness when attended face-to-face.

Regarding the format, some practitioners felt the VLC worked really well for them, but evidence shows that across all participants and all modules, the VLC mode did not work as well for practitioners as the face-to-face format. Those not fully satisfied with the mode of training delivery wanted a better online platform, and for the training sessions to be more interactive. But many would simply have preferred a face-to-face format. That said, many practitioners recognised that VLC was convenient – they did not have to travel, it was easy to fit around other commitments and made it possible to fit in with Coronavirus restrictions.

# **Chapter 4 Local integration**

The key findings section in this chapter pulls together findings on this theme from across the whole evaluation. The remainder of the chapter focuses on the experience of local authorities who used the Workforce Development Grant (WDG) to understand their motivations, use of the grant and experience of the application process. It also looks at reactions to the move to the local grant funding and explores the experience of a non-bidding local authority.

### Introduction to the local integration element

The local integration element of the programme covered all areas of England. It aimed to encourage local areas to consider the evidence base around parental conflict and integrate support for parents in conflict into existing provision.

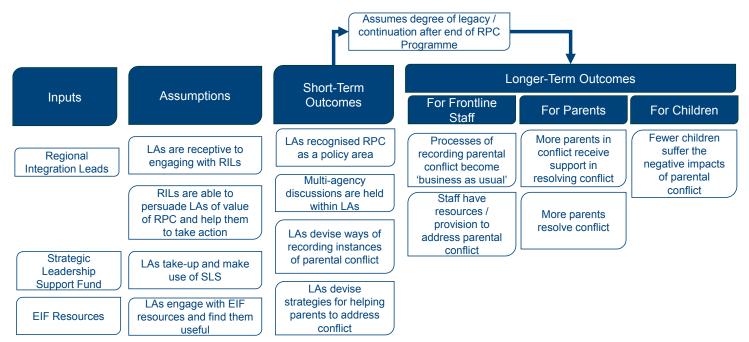
To support local areas with integration, DWP recruited a team of Regional Integration Leads (RILs). The RILs were seconded from local authorities to DWP and provided expert advice and support to local authorities and their partners to maximise the opportunities that the programme presented.

Early on in the programme, a Strategic Leadership Support (SLS) grant was made available for local authorities and their partners to use in ways that best suited them and their aspirations in respect of reducing parental conflict. This was available from January 2019 and was intended for use by March 2020. Local authorities were encouraged to use a Planning Tool developed by the Early Intervention Foundation (EIF) to help them decide on priorities and track progress. This was intended to be reviewed, locally, on a regular basis. Local authorities were also encouraged to access information made available on the RPC online hub hosted by the EIF.<sup>21</sup>

The next diagram shows how the provision of these tools and support was intended to achieve positive outcomes for families.

<sup>&</sup>lt;sup>21</sup> <u>https://reducingparentalconflict.eif.org.uk/about/hub</u>





The Workforce Development Grant (WDG) was offered as part of the extension of the programme in 2021-2022, to enable local authorities to build Reducing Parental Conflict capability amongst practitioners who came into contact with children and families, so that by April 2022 local authorities across England would have a greater number of staff in their area who were trained to deliver parental conflict interventions. In turn, local authorities would be able to deliver:

- a broader range of interventions available nationally and at local level;
- a greater number of places available for parents on interventions which meet local needs;
- an increase in the number of practitioners trained to deliver RPC interventions;
- a larger number of parents/families benefiting from RPC support; and
- an overall improvement in the support package available in England.

By building capability within existing workforces at local level, the WDG also aimed to reinforce the sustainability of RPC in all local authorities, especially in those who tested interventions under the 2019–22 RPC programme who were unable to refer parents to them from April 2022, due to the closure of provision in July 2022.

The research covered in this report explores local authority staff experiences of the WDG, in relation to both the short and long term outcomes outlined in Figure 4.1.

Following the end of the WDG period, Local Grant funding was made available for local authorities to bid for. This funding gave more flexibility to local authorities to lay out their own plans for taking the reducing parental conflict agenda forward in their areas.

### Key findings

#### Early-stage integration

- Prior to being approached by the RPC programme, it was common for local authorities not to have thought about tackling parental conflict that did not amount to domestic abuse.
- When surveyed at the beginning of the programme, only one local authority felt they were progressing the reducing parental conflict agenda well.
- A key early challenge local authorities reported was working out at what point conflict in a relationship becomes abusive. They appreciated that conflict in relationships was very common and were struggling to find mechanisms to help distinguish between acceptable and unacceptable conflict. Knowledge and understanding of the three key elements of domestic abuse (power imbalance, fear and control) was not widespread.
- The Strategic Leadership Support (SLS) grant was made available for local authorities and their partners to use in ways that best suited them and their aspirations in respect of reducing parental conflict. As such it was very well received and seen as extremely flexible.
- The SLS funding was most commonly used, at least in part, to pay for multiagency working groups focused on reducing parental conflict (63%), to fund events and conferences (58%), for needs assessments or data analysis (44%) and staffing, both internal (44%) and external (22%).
- The Practitioner Training (PT) grant was provided to local authorities to purchase training developed specifically for the programme for frontline practitioners and their supervisors. Nearly nine in ten (86%) local authorities reported that practitioner training was important in helping them to embed the RPC programme into their service.
- Although widely welcomed some managers and commissioners found the PT grant too rigid and wished that they had been able to choose their own (local) training provider, trainers and/or use the grant to purchase venue space.

#### Early progress

In the period between summer 2019 and autumn 2020, local authorities had made the following progress around integration:

- In terms of development of strategies:
  - More local authorities had a specific multi-agency strategy.
  - More local authorities reported that local commissioning decisions were aligned to reducing parental conflict strategies.
  - There was an increase in the proportion of local authorities that had embedded reducing parental conflict into mainstream services.
- In terms of recording parental conflict systematically:

- More local authorities reported that frontline practitioners were routinely asking parents about the quality of their relationship.
- More local authorities had an explicit question about parental relationships in Early Help assessments.
- In terms of support available for parents:
  - More local authorities reported providing support for parents experiencing conflict.

#### **Regional Integration Leads (RILs)**

- Six Regional Integration Leads (RIL) were seconded from local authorities to DWP to assist with embedding the programme. They were valuable in persuading local authorities to engage with the programme. Their backgrounds, working in local authority settings, enabled them to talk credibly about how the programme could fit in to other local authority activities and contribute towards tackling local priorities.
- Contact with RILs and local authorities remained frequent throughout the programme, typically at least monthly.
- Local authorities were very positive about the support provided by the RILs; RILs enhanced local authorities' understanding of the programme and provided helpful suggestions on how to spend grant funding.

#### Workforce Development Grant

- Local authorities that had made less progress on RPC to date applied for the WDG out of a desire to drive RPC forward in their area, with some expression of frustration at the limited progress made during the preceding years. These local authorities wanted to increase their workforce's understanding and awareness of parental conflict.
- Local authorities that had already made significant progress on RPC wanted the grant to support further progress. These local authorities tended to display confidence in the awareness levels of RPC within their workforce and looked to build on this by progressing into new areas, either widening their offering or tackling local specific issues.
- Many local authorities found the application process to be quite involved and time consuming. The level of detail asked of local authorities was felt to be a significant burden and the timeframe of the application was felt to be quite tight.
- The non-bidding local authority (a total of four local authorities did not bid for WDG funding) felt the time it would take to apply when weighed up against their uncertainty about the suitability of the grant for them, was too much to make it worth applying.
- There were some positive views around the Theory of Change element included in the application process which some local authorities found allowed them to focus on what they were hoping to achieve with the grant. This enabled them to structure their application accordingly.

- The WDG was viewed positively in comparison to previous grants. Local authorities typically found it more flexible than both the PT and SLS grants, allowing them to effectively focus on the specific needs of their local area.
- Local authorities spent the WDG in two ways:
  - Delivering training. This was the most common reported spend and was typically provided or created by external agencies. Training covered a range of areas including awareness, understanding and identification of RPC; delivering training or interventions; and helping parents or practitioners to use self-help toolkits.
  - Support for parents. These local authorities spent some of the funding on support for parents such as digital self-help tools or resources and physical resources for parents.
- Local authorities generally felt it was too early to offer much of an assessment of the impact of the WDG on RPC in their area. Some reported anecdotal evidence of practitioners being more aware of RPC and feeling more confident to support parents facing parental conflict.
- Commonly local authorities felt that the work undertaken through the WDG would either not have happened or would have happened on a smaller scale without the funding.
- Most local authorities were aware of the Local Grant and had applied or were in the process of applying for it. The Local Grant was viewed positively due to having a simpler application process (than the WDG) and coverage across multiple years, allowing more long-term planning.

### **Findings** explained

### Applying for the WDG

#### Motivations for applying

From case study interviews with local authorities about the WDG, it appeared that local authorities had come to the decision to apply for the WDG for one of two reasons. The first was because of a lack of progress made on the RPC agenda to date coupled with a desire to drive the agenda forward in the area. The second was among local authorities that had already made significant progress on RPC and wanted the grant to support further progress.

Local authorities that had made less progress on the RPC agenda wanted to increase their workforce's understanding and awareness of parental conflict. At the point the WDG application process began they typically felt awareness among their workforce was still low and significant progress was required to embed it into thinking around relationships in the area. For a few this lack of understanding was still due to some confusion between domestic abuse and parental conflict.

Within this group there was some frustration at limited progress made on RPC during the preceding years. A few local authorities singled out the KnowledgePool training as a particular disappointment, with criticisms including poor content and an unsuitability to their local context. The WDG offered this group an opportunity to deliver a more effective training offering to their workforce.

"Modules 1-4 were hit and miss in terms of attendance. We didn't have the time or opportunity to orientate that. It didn't give skills, just content. When the opportunity for investment without the mandated KnowlegePool training came up, we saw the opportunity to do things differently".

A few in this group felt that momentum had been lost during the pandemic, with attention and resources diverted elsewhere. The WDG offered these local authorities an opportunity to re-gain the initiative and drive RPC forward again.

Local authorities that had already made progress during the years preceding the WDG, wanted to use the grant to further support and develop the work they had already put in place. These local authorities tended to display confidence in the awareness levels of RPC within their workforce and looked to build on this by progressing into new areas, widening their offering or tackling local specific issues.

A few local authorities acknowledged that the flexibility of the grant was important in their decision making as they wanted to tailor the training or their RPC offering to local needs. For these local authorities, the grant was an opportunity to develop provision or training specific to local need. For example, one local authority had found an increase in reporting of conflict from fathers during the pandemic, and wanted to develop an approach to address this.

#### Motivations for not applying

The non-bidding local authority that took part in the case studies decided not to apply for the grant because they felt they already had a good training package in place and that most staff had already undertaken the training. They were not very impressed with the original training from KnowledgePool but their Regional Integration Lead (RIL) at the time developed and ran some bespoke training for each of their key partners. Once some initial individuals were trained within each partner agency, they then rolled this out within each of the organisations/ services themselves. They did not feel they had enough new staff to apply for the WDG and the previous training was still working well, so they did not think this specific grant would work for them.

#### **Application process**

Overall, many local authorities found the application process for the WDG to be quite involved and time consuming. It was felt that the level of detail and information asked of local authorities were burdensome to those completing applications.

Some local authorities had applied to the Local Grant at the time of the interview and contrasted applying for the WDG to this process. They felt that the Local Grant has been improved significantly, reducing the burden on applicants, which they appreciated.

#### **Cluster applications**

The WDG grant process allowed group applications from local authorities, also called 'cluster applications', meaning joint with one or more other local authorities. Many local authorities that applied in a cluster already has close links with those that they applied with. In a few cases the closeness of this relationship extended to delivering joint services. It therefore seemed logical for these local authorities to apply for the funding together and take a joint approach.

One of the case study local authorities with a very established RPC offer approached other local authorities in their region to undertake a joint application and pool funding. The lead local authority had a very strong idea of how they wanted to use the grant but felt the individual local authority funding on offer was quite limited. They offered their bespoke training and facilitators for free to the other local authorities in exchange for undertaking the joint application. The other local authorities had less established RPC offers and were keen to access this bespoke training.

#### Challenges in the application process

Local authorities generally felt that the timeframe for the WDG application was very tight, and they would have appreciated more time to think about the bid before having to complete the application forms. Some noted that they would have liked more time to consult with other local authority staff and partner agencies.

Local authorities also experienced several difficulties with the application form/ documentation. They reported that the boxes for information to be typed into in the application form kept moving or were not the right size for the detail required. They also recalled that the drop-down boxes did not include all of the options that they felt were appropriate or accurate to their situation.

It was difficult for local authorities to produce the level of financial detail requested if they were planning to use external intervention or training providers.

#### Support in the application process

Local authorities were positive about the Theory of Change element of the application process. Some local authorities felt it was helpful as it allowed them to think through and focus on what they were hoping to achieve with the grant. This enabled them to structure their application accordingly.

Local authorities had received differing levels of support with the WDG application process from their RILs. This tended to depend on their own support needs, with those in need of greater support leaning on the help of their RILs more than those with fewer support needs.

#### **Case study: Application Process**

#### A challenging process made easier by the support of their RIL

This local authority had previously received the PT. They hoped the WDG would allow them to deliver training to staff to upskill them around recognising parental conflict in a way that the knowledgepool training had failed to achieve.

*"It didn't give skills, just content. When the opportunity for investment without the mandated KnowlegePool training came up, we saw the opportunity to do things differently."* 

After securing senior buy-in at the local authority, they proceeded with the application process which appeared complex and, in some places, confusing. However, they were able to turn to their RIL for support navigating this process.

"It was a workforce development grant and it was very much cited on what you're going to give as a skill or a capability to your workforce that's going to make a difference to this. That was clear to us. It wasn't always clear to others. Sometimes they want the intervention to be paid for, not the skills to do the intervention to be paid for."

Alongside support understanding some elements of the application process, their RIL arranged for them to speak with other LAs applying for the WDG. This afforded them the opportunity to understand how others were approaching the funding and what they were including in their applications.

"By having a good coordination in the region that helps us speak to other local authorities about what they were considering, what they were doing."

This local authority felt they would have struggled with the application process had it not been for the support of their RIL. Despite this they found some elements helpful, such as the Theory of Change, which allowed them to map out what they expected to achieve with the funding, and the flexibility of putting costs as estimates in their application.

"You committed the business to doing what it said in the bid, but it allowed us the flexibility to do more or less of one of those things."

## WDG compared to previous grants

Where case study local authorities were able to give comparisons, the WDG was typically felt to be a lot more flexible than the Practitioner Training (PT) grant and the Strategic Leadership Support (SLS) grant. Local authorities commonly felt the WDG enabled them to focus on the specific needs of their local area and what their local authority needed, rather than having to fit into a 'rigid' approach set for all local authorities, in contrast to the PT and SLS. Local authorities were particularly critical of the PT grant as they felt they lacked control over the funding and often complained

about having to use it for the KnowledgePool training, which was often the subject of criticism.

However, one local authority was a little frustrated that the WDG funding could not be used to deliver interventions. They were disappointed at having to spend it on capacity building and training staff on delivering interventions. They would have liked to be able to use some of the funding for service delivery.

Local authorities were not universal in their preference for WDG (although this was the majority view). One local authority felt that the SLS grant application process was easier and simpler than the WDG application. They felt that the WDG required more detailed information from applicants, which was difficult to provide.

The non-bidding local authority felt that the WDG was still 'quite strict' on how the funding could be spent. They felt that the grant wasn't flexible enough for them to have used it in a way which would have been the most meaningful for their local authority.

# Spending the WDG

#### **Delivering training**

The WDG funding was predominantly being spent on further training. The training focused on a variety of areas such as: improving awareness of and understanding of parental conflict; the difference between parental conflict and domestic abuse; identification of parental conflict; teaching staff to train other practitioners; self-help tools for parents such as digital resources or toolkits; training to deliver interventions; and toolkits for practitioners to use with parents. The training was predominantly provided or created by external agencies, however, in a few instances local authorities had used previous KnowledgePool materials to develop their own training.

For the broader training around awareness, understanding, identification and use of self-help tools this had generally been rolled out quite widely to staff from a range of agencies (including, but not limited to, healthcare workers, social workers, teachers, nursery staff, early help workers and Jobcentre Plus staff).

Within each local authority, training tended to have been delivered to hundreds of professionals. In contrast, the Train the Trainer and intervention focused training tended to have only been delivered to a select few.

#### Support for parents

Some local authorities had also spent some of the funding on support for parents such as digital self-help tools or resources and physical resources for parents. The digital self-help resources were a mix of courses, videos and practical advice. There seemed to be a mixed approach to sourcing the materials, some local authorities had developed them from previous training materials whereas others had bought materials from external providers.

All of the local authorities confirmed that they had spent their WDG allocation. Nearly all had spent this before the 31 March 2022 deadline.

#### Case study: Spending the WDG

#### Designing their own training to embed understanding of RPC

This local authority saw the WDG as an opportunity to develop their own course of training to address the varying levels of understanding of parental conflict, and the distinction with domestic abuse.

*"It gave us a vessel to tackle some issues we knew we had in the local authority around the understanding of parental conflict, versus the nuances and understanding of domestic abuse."* 

Their intention was to set up a half day training course which could then be replicated beyond the lifespan of the WDG, to further embed learning across the local authority.

"We deliberately set it up as a legacy piece of work, so the half day workshop will continue to be delivered forever as and when needed."

The training was developed using previous toolkits and training, in collaboration with practitioners and using existing research about what else had been delivered nationally. A large portion of their funding was spent on bringing in a facilitator to develop and deliver this training.

"We had a bundle of work already, but what we paid [the facilitator] to do was go away and do the evidence-based research for us, find out what's been given nationally, link it to legislation and research to put together something that's useful,. practical and research based and evidence led."

The training was delivered face-to-face, with an emphasis on some interactive elements, such as discussions of whether specific situations fall into the category of domestic abuse or parental conflict. The interactive, face-to-face delivery was seen as key to the perceived success of the training.

"The feedback was that people had got so much from it from being in a room and talking to people."

## Impact on RPC

Local authorities generally felt it was quite early to be discussing impact of the WDG on their local area's reducing parental conflict work. They felt it would take time for the training to feed into practitioners' approaches to identifying and/or supporting parents and the impact of this to be seen on outcomes for families.

Many local authorities felt that frontline practitioners were using the skills they had learnt on a daily basis to identify and appropriately refer and/or support families. However, most struggled to identify or discuss specific measures in place to monitor impact. Anecdotally, they recalled practitioners talking about parental conflict more and feeling more confident to have conversations with parents and support parents once parental conflict has been identified. Commonly local authorities felt that the work undertaken through the WDG would either have not happened or would have happened on a smaller scale without the funding. For some this was because they simply would not have had the resources to deliver the work undertaken. Others suggested the WDG gave them direction and drive to plan and deliver work they had hoped to deliver anyway.

#### Case study: Impact of the WDG on RPC

#### Early indication of impact among practitioners

This local authority had used the WDG to develop training to deliver to practitioners to raise awareness and understanding of parental conflict, alongside developing a toolkit to which practitioners could refer.

The feedback from those who had been through the training was positive and several practitioners were requesting the toolkit. This suggested that interest in developing understanding of parental conflict was growing.

Referrals data also gave some indication of a shift in attitudes towards parental conflict and domestic abuse. The overall quality of referrals had improved since the training launched, with fewer domestic abuse referrals being made and fewer being rejected, suggesting that inappropriate referrals to domestic abuse support had been reduced.

"We saw the right referrals coming in, which says to me that practitioners were feeling much more confident in dealing with what they now perceive as parental conflict rather than going got the default of DA."

All of this gave some early indication that the training might be pushing forward a more nuanced understanding of parental conflict and domestic abuse, translating into more appropriate referrals being made.

## **Overall experience of the WDG**

Local authorities were generally positive about their overall experience of the grant. They appreciated its flexibility and that this allowed them to focus on the needs of their workforce and local area. Although some did reiterate the complexity of the application process and their disappointment with the short amount of time allocated for using the funding.

Local authorities raised some important ways that grants could be approached differently in the future, to better support local authorities accessing the grants:

- A less complex application process and ensuring that ongoing monitoring is proportional to the level of funding. There was a general feeling that for a relatively small pot of funding there was a lot of reporting required.
- Longer timescales to plan bids, complete applications and spend the funding.

- More continuity between the grants and ensuring there are no gaps between funding.
- More guidance around how the grant could be spent.
- More funding made available.
- Better interconnectivity and integration across related national government initiatives.

# The Local Grant

Most of the local authorities taking part in the WDG case studies were aware of the Local Grant, there were only a few who were completely unaware of it or knew very little about it. Most of those that were aware had either already applied for the grant or were in the process of applying.

Some noted that the application process and guidance was better than for the WDG. local authorities felt it was a more straightforward and less complex application process.

A few also felt it was positive that the grant was over multiple years rather than just one year, as with all previous grants, which would allow greater continuity and more long-term planning in the work undertaken. However, it was mentioned that more flexibility over how the funding allocations could be spent over that period would have been appreciated.

# Conclusions

This chapter summarises key findings from the external evaluation of the 2018–22 Reducing Parental Conflict programme.

# Intervention delivery

# **Engaging parents**

Initial recruitment of parents for the interventions was slow and levels of referrals were lower than anticipated. Initially, providers were concerned that this was down to lack of confidence and knowledge amongst frontline practitioners and referral staff. Lower levels of referrals to Enhanced Triple P and Family Check-up were specifically attributed to insufficient awareness among practitioners of these interventions. This highlights the importance of raising/maintaining awareness of frontline staff, particularly as the main route into the interventions was through family workers and Early Help teams.

Practitioners making referrals generally felt confident in identifying parental conflict but did mention some confusion around eligibility for different interventions. In particular, they were sometimes unsure about the provision available for parents experiencing domestic abuse, working parents, those expecting a child and where only one parent wanted to take part. Providers also mentioned eligibility as a barrier to increasing referrals. The less successful interventions in terms of take-up included 4Rs and 2Ss, which had no referrals, and which providers themselves felt had eligibility criteria that were too strict. However, Mentalization Based Therapy had the highest take-up with no barriers to referrals shared by providers. **To achieve successful referral rates for support offered, eligibility for available interventions must be clear and well-communicated to relevant staff. It is also important to ensure that the eligibility criteria reflect the population of parents and will not restrict referrals too much.** 

Parents who were referred onto an intervention often experienced more than one source of conflict, demonstrating successful identification of appropriate provision.

The majority of parents understood that attendance was optional but a few thought they had to attend. It should be noted that the involvement of a social worker in the referral process can lead to parents assuming that there is an obligation to attend. Those making referrals as social workers or in Family Hubs to this type of support need to therefore bear in mind the possibility of assumed links with social services and, for example, family courts so that parents are clear that this is voluntary support. There was a lack of clarity over whether parents could attend if their (ex) partner did not want to. Similarly, having a disengaged (ex) partner had a significant influence over starting or completing the interventions. For support offered in the future, it should be clearly communicated to practitioners and parents from the start, that parents can attend alone, which should reduce dropouts and increase referrals.

Over the lifetime of the programme, just under half of the parents who started an intervention failed to complete it. The reasons why some parents left early included issues relating to the participation of a (ex) partner, as described above. However, for a small proportion of parents, practical reasons also contributed to a failure to complete, such as childcare and work commitments. **Potential practical barriers should be considered at the point of referral so that solutions can be put in place to help ensure completion. Virtual/digital delivery can remove a lot of these.** 

# Success of interventions and potential improvements

#### Content

Interventions were generally very well received; the content and course facilitators were consistently highlighted as the key strengths of each of the interventions. Even when reflecting on the content of the sessions 6 and 12 months later, ratings of the usefulness of the sessions remained high.

Key areas that were seen as underpinning a well-received intervention included:

- **High quality course facilitators**; specifically, their demeanour, openness and approachability;
- Content being **relevant to the specific background and situation** of the parents; and
- Use of **practical tools and resources**, as well as materials they can take away to reflect on their learning.

#### **Delivery method**

Due to the timing of the Coronavirus pandemic, the majority of parents experienced interventions virtually/online. This was perceived to work well, with parents still reporting that they found their experience positive and impactful.

One of the main successes of the interventions reported by parents and delivery staff was the emphasis on interaction and discussion. This was effectively maintained with the move to digital delivery methods.

Therefore, the content of the sessions and quality of the facilitator appeared to be more important in ensuring usefulness and perceived positive impacts on parents than the delivery method itself.

#### **Future delivery**

Parents who did not start or dropped out still had an appetite for support like this in the future. This means there could be value in follow-up contact for those who fail to start interventions.

### Perceived impacts of interventions on parents and families

A significant proportion of parents felt that attending the sessions had positively affected themselves and their families.

Around half of the parents surveyed felt that the intervention had improved their relationship with their (ex) partner. This was reported both 6 months and 12 months after completion, indicating that relationship improvements were sustained over time. The proportion of parents reporting improvements was higher for of the following parent groups:

- intact parents;
- where both parents had taken part in an intervention; and
- where both parents were unemployed.

These differences were present at both the 6-month and 12-month points.

Regarding perceived positive impacts on the children in participating families, the proportion of parents reporting positive effects was higher than the proportion reporting improvements in the interparental relationship. At the 6-month point, two thirds of parents agreed that the intervention had had a positive effect on their children. This increased to three quarters at the 12-month point, with the increase driven by separated parents. This suggests that the effects on the children are more immediate in intact families than in separated families. Over time, separated families see similar positive changes, but the suggestion is that it takes time for improvements in the interparental relationship to filter through to the children and affect their behaviour and wellbeing. The types of changes in their children reported by parents included calmer behaviour based of calmer interactions from them and their children feeling happier and less anxious.

Where both parents attended RPC interventions, they were also more likely to see a positive impact on their children. Considering this and the role of disengaged partners in non-attendance, a key consideration in future delivery of support should try to ensure buy-in and attendance from both parents wherever possible (while still allowing and encouraging parents to attend on their own if this is the only option).

It is worth noting that these were self-reported findings, of parents' perceived impacts. Furthermore detailed analyses into the effects of these interventions on different aspects of interparental relationships and the wellbeing of the children in participating families is ongoing.

# Key learning by parent group

At the outset of the RPC evaluation, there was an appetite to understand how the support engaged and affected different types of parents.

Clear differences were observed between intact and separated parents. Intact parents tended to be more positive and receptive to the interventions, however, there were still significant improvements on relationships and children's behaviour for separated parents. Therefore, engagement of both types of parents remains important for future parental conflict support. Qualitative research with parents suggested a slightly lower perceived impact for separated parents, often due to lack of engagement from the ex-partner. Where parents are separated, it may be more difficult to engage both parents, but there is clear benefit to doing so.

The evaluation explored the use of the Child Maintenance Service and its potential influence on parental conflict and reception to the interventions. There were several ways in which this group (CMS users) differed from other parents:

- They generally had higher levels of conflict ahead of attending;
- They were more likely to attend the intervention without their ex-partner;
- They took away different learning points from the interventions compared with other parents, they were more likely to find how to handle conflict as the most useful learning (rather than how to communicate with their ex-partner);

CMS users were initially less likely to perceive a positive impact on their relationship and their children 6 months after completing an intervention, however, at the 12month stage, the proportion who had seen these positive impacts was in line with other parents. This is perhaps linked to the findings regarding separated parents, where it took longer for many parents to report benefits.

Of all parent groups, CMS users had higher levels of conflict so were arguably one of the groups in greatest need of support. They also found the support useful and reported positive impacts. Therefore, it is important that these parents continue to be offered support like this, with specific help required to handle higher levels of conflict.

Local authorities highlighted early in the programme that they were keen to engage fathers in RPC provision. Throughout the evaluation, only a small number of differences were observed between fathers and mothers in the qualitative interviews. There were minimal differences seen in the quantitative surveys. Qualitative interviews indicated that fathers were initially more hesitant about the potential benefits of participating in interventions but then often found it useful to hear from other parents in comparable situations, and fathers specifically. In fact, 6 months after completing an intervention, they were more likely to feel the interventions had a positive impact on their relationship than mothers, though after 12 months, findings were more similar. Consistent with other key learning, engaging fathers is important because they also benefit from interventions. The most positive results are delivered when both parents are engaged.

There were no other key groups of parents that stood out as having particularly different experiences or needs than others throughout the evaluation. The evidence suggests that the interventions tested under the 2018–22 programme have the potential to benefit various types of intact and separated parents. Future support to reduce parental conflict should seek to engage and include a wide range of families to maximise benefits.

# Training

#### Views on the specific RPC training

There were frustrations with training delivery at the start of the RPC programme, specifically attributed to the delay in the launch of KnowledgePool training, with paperwork for signing up causing issues. These were ironed out over the first few months of the RPC programme, and over the lifecycle of the programme, all local authorities who took up the PT grant received training.

Despite almost all local authorities applying for the Practitioner Training grant, there was a feeling amongst local authority staff that it was too regimented, and there was no flexibility to use this for the training they felt was best for their practitioners. Some local authorities felt they would rather use another provider who they trusted and already had a relationship with.

Linked to this, local authorities were more positive about the flexibility that they had under the subsequent Workforce Development Grant (WDG) in 2021/22 and, more recently, the RPC Local Grant.

In relation to future provision and funding for training, there was generally an appetite for this to be flexible as the constraints of the PT grant was a key area of criticism. That said, it did lead to quite large volumes of participants on training.

#### Training delivery

Prior to the first Coronavirus lockdown in spring 2020, training was delivered face-toface. In this format, practitioners were very positive about it, stating that the group setting worked well and allowed for collaboration with others.

However, after the first lockdown, the training shifted to digital delivery through a Virtual Learning Classroom (VLC). The proportion of practitioners taking up the training was not impacted by this shift in delivery, with uptake remaining high after this point.

Although there was a general perception that the VLC method worked well, there were benefits and drawbacks to each delivery mode. In particular, the convenience of attending training via VLC was praised, though in the surveys, practitioners were less likely to say it worked "really well" than the face-to-face format. The face-to-face format was particularly preferred by those attending the Train the Trainer module. This suggests that Train the Trainer training requires a higher level of inperson engagement. Those commissioning this type of training in the future

#### should therefore consider ensuring that this type of training is delivered faceto-face.

#### Perceived impact of the training

Despite initial criticism, the KnowledgePool training, delivered both face-to-face and via VLC, was shown to have positive impacts on practitioners in a number of ways.

The knowledge, understanding and confidence that practitioners had regarding parental conflict increased significantly following attending the training, **indicating that core intent of the training was achieved.** 

Positively, practitioners found the training to be relevant to their job and most had applied their training to the day-to-day role, though often less than they initially anticipated. It is worth noting that the Coronavirus restrictions were likely to have reduced the opportunity to utilise the training in day-to-day work. The content of the modules clearly holds relevance to practitioners working with parents so could be used as a basis for content in future training delivery and knowledge sharing with local authorities.

Practitioners who attended Train the Trainer felt equipped to go on to deliver the training, but this module often scored lower than modules 1-4 in terms of having the right level of detail and very few had delivered to other staff at the point that this was evaluated. There seemed to be scope to improve the Train the Trainer elements of the RPC training, with one of the key improvements mentioned being that there needed to be a greater emphasis on how they can deliver the content of the training to others.

#### Potential future delivery of training

Training and upskilling of practitioners was key to the success of the RPC programme. As shown in the intervention delivery findings; knowledge amongst practitioner and referral staff was critical to ensuring parents received the help they needed. Therefore, it is important for the continued success of the reducing parental conflict agenda that staff are adequately trained to identify parental conflict and to distinguish it from domestic abuse.

# Local Integration

Prior to 2018, nearly all local authorities **had not considered tackling parental conflict** where it did not involve domestic abuse. Early challenges reflected this, as local authorities struggled to define the point at which a relationship becomes abusive and to establish mechanisms for distinguishing the two behaviours.

Local authorities welcomed the grant-funding model where it afforded them some flexibility in its use. They welcomed being able to spend the SLS grant in ways that best suited their aspirations for reducing parent conflict, but criticised the rigidity of the PT grant and wished that they had been able to choose their own (local) training provider, trainers and/or use the grant to purchase venue space.

**RILs were a valuable resource** in embedding RPC. They were in frequent contact, assisting local authorities to enhance their understanding of parental conflict and help advise on grant spending. **This outlines the strength of having a critical friend local authorities could lean on** during their early RPC journey. The fact that RILs had a background in working in local authorities meant they could make a convincing case for investment in RPC and point out links between this agenda and other priorities for local authorities. This was very valuable in encouraging local authorities to invest time in an agenda that was new to them.

Motivations for applying for the Workforce Development Grant (WDG) were varied, some local authorities applied due to a lack of progress with RPC, and others as they wanted to continue the progress they had made. This indicates a wide reach of the grant, rather than solely engaging those who had progressed more.

The application process for the WDG was criticised for being too involved and time consuming. This was felt to have discouraged some local authorities from applying. By comparison, local authorities looked forward to the implementation of the Local Grant because the application process for this seemed to be much more straightforward.

The flexibility of the WDG was praised as it allowed tailoring of RPC activities to meet the needs of each local authority. This allowed for practitioner training in the type of training local authorities felt would be most beneficial, which helped to overcome previous frustrations with the KnowledgePool training.

Local authorities who had spent the WDG were yet to have evidence of impact. They felt it was too early to establish impact, but they were positive about the opportunities offered.

# **Concluding remarks**

The 2018–22 Reducing Parental Conflict Programme started tackling the challenge of introducing and embedding a new policy area into local area services. Provision of grants to encourage the development of strategic plans and RILs to provide strategic advice greatly helped local authorities to actively consider how to address parental conflict. Provision of funded training for frontline staff helped to educate staff on the case for intervention and made them feel more confident in raising parental conflict with parents. The programme was less successful in ensuring a legacy of cascaded training as few of those attending Train the Trainer sessions delivered any training sessions.

Sustaining multi-agency input into reducing parental conflict proved difficult, although some local authorities made good progress. Many local authorities took steps to ensure that they could record and measure levels of parental conflict identified through their standard processes.

Where interventions for parents in conflict were funded, these reached those needing support and parents themselves reported positive impacts on their relationship and their children. Parents found the interventions useful, learned something at the sessions and praised the facilitators. However, staff changes and the Covid-19 pandemic made it difficult for some to maintain momentum. In this context, local authorities welcomed continued funding to help continue progress.

# Annexe 1: Previous component methodologies

This annexe outlines the methodology for each of the components of the evaluation that were undertaken and reported on in the previous evaluation reports.

# Early implementation report (interim report 1)

#### In-depth interviews with Regional Integration Leads (RILs) (wave 1)

Six RIL posts were created for the RPC programme to provide support across all 151 upper tier local authorities. RILs were seconded from local authorities to DWP to provide this support for the duration of the programme. The first RIL in post began in their role in April 2018. Each RIL was assigned one of the following regions to support - London, South East, Midlands, South West, North East and North West.

A 2-hour face-to-face interview was conducted with each of the RILs, between the 5 and 22 March 2019. The interviews with RILs explored the context of the local authorities they were working with and the progress that local authorities had made in addressing parental conflict. The interviews also explored experiences and key challenges of the RIL role. A semi-structured topic guide was used for the interviews.

#### Online survey of local authorities (follow-up 1)

The survey of local authorities was conducted online between 11 June and 6 August 2019.

The survey invites were sent to the Single Point of Contacts (SPOC) that local authorities had nominated for communication relating to the RPC programme. Contacts from all 151 local authorities were invited to take part. A week after the initial email invitation was sent a reminder email was sent to all the SPOCs that had not completed the survey. A fortnight after the initial invitation was sent a final reminder was sent. The survey achieved a 53% response rate (81 local authorities completed the survey).

#### Case study visits to local areas (wave 1)

Ten case study visits with local authorities and their partners took place between 17 July and 16 August 2019. The case studies consisted of in-depth interviews and/or mini groups with the RPC lead and other staff that had been involved in the development of strategies to reduce parental conflict.

The local authority areas were selected to ensure a spread across regions, a mix of those who were located in Contract Package Areas (CPAs) and those who were not, as well as a range in terms of the number of RPC activities undertaken.

The case studies covered what each local area was doing before the programme, what they had been planning and/or had implemented to date, and what their local

area's aspirations were in relation to reducing parental conflict. A semi-structured topic guide was used to aid the discussions.

#### In-depth interviews with managers and commissioners

Thirty telephone interviews were conducted with managers and commissioners of services related to reducing parental conflict.

The interview invitation went out to the SPOCs, who either took part in the interview themselves or nominated another member of staff who they felt would be better placed to provide information on use of the SLS and PT grants.

The majority of respondents were working within local authorities, with only a couple working in a commissioned service or third sector organisation. Most were working within Early Help, though some were working within statutory services. Most respondents had overall responsibility for RPC activities in their area and held fairly senior roles reporting direct to the head or director of service.

The interviews lasted around 45 minutes and took place between 27 September and 19 November 2019. These interviews covered how decisions were made about how to spend the SLS and PT grants, how it was spent and the impact of the grants.

# Interim report 2

#### In-depth interviews with Regional Integration Leads (wave 2)

Six RIL posts were created for the RPC programme to provide support across all 150 upper tier local authorities. RILs were seconded from local authorities to DWP to provide this support for the duration of the programme. The first RIL began in their role in April 2018. Each RIL was assigned one of the following regions to support – London, South East, Midlands, South West, North East and North West.

A 2-hour face-to-face interview was conducted with each of the RILs in February-March 2020, a year after initial interviews with them took place. The interviews with RILs explored the ongoing contact they had had with local authorities, activities that their local authorities were engaged with and their views on the sustainability of the programme. The interviews also explored their experiences of the RIL role. A semistructured topic guide was used for the interviews.

#### Online survey of local authorities (follow-up 2)

The survey of local authorities was conducted between July and December 2020.

The online survey invites were sent to the Single Point of Contact (SPOC) that each local authority had nominated for communication relating to the RPC programme. Contacts from all 150 local authorities were invited to take part. Several e-mails were sent, and telephone calls were made to try to boost the response. The survey achieved a 48% response rate (72 local authorities completed the survey).

#### Case studies of local areas (wave 2)

Five case studies of local authorities and their partners took place between November 2020 and January 2021. The case studies consisted of in-depth interviews and/or mini groups with the reducing parental conflict lead and other staff that had been involved in the development of strategies to reduce parental conflict. The local authority areas were selected to ensure a spread across regions, a mix of those located in Contract Package Areas (CPAs) trialling RPC interventions and those outside CPAs, as well as including some who participated in wave 1 to give a longitudinal picture. For local authorities in CPAs, interviews were also conducted with a provider delivering one of the interventions funded by the RPC programme.

The case studies covered what each local area had implemented to date, their key barriers and successes and how reducing parental conflict will be taken account of in the future. A semi-structured topic guide was used to aid the discussions.

#### Frontline practitioner training survey (wave 2)

This survey was conducted with frontline practitioners 6 months after completing the initial survey. The survey explored the extent to which they had been able to put into practice the knowledge and skills that they had acquired through the training.

The survey was conducted online, and invites were issued monthly, 6 months after completion of the initial survey. All 598 practitioners who completed the initial survey and agreed to be re-contacted were invited to take part and responses were secured from 147 (a 25% response rate).

#### Depth interviews with practitioners post training

Forty-five depth interviews were conducted by telephone with individuals who had attended face-to-face practitioner training. Individuals were recruited through the wave 1 survey and took place between October and November 2019. The interviews were structured to ensure a mix of different roles and coverage of those attending each of the training modules.

The interviews covered expectations of the training, what participants felt about the content and delivery of the training and how they expected to be able to apply their learning in their day-to-day roles. Interviews were underpinned by a semi-structured topic guide.

#### Depth interviews with referral staff (wave 1 and wave 2)

Sixty telephone depth interviews were conducted with frontline practitioners who had made at least one referral to the Gateway Team that allocate individuals to the interventions. Interviews took place between October and November 2019.

These interviews covered practitioner awareness and understanding of the different interventions, understanding of eligibility requirements, the process of identifying parental conflict and the referral process.

A further 45 depth interviews were conducted between November 2020 and January 2021. These covered similar ground but at a point when the referral process was more established.

At each stage interviews lasted 45 minutes to an hour.

#### Survey of intervention delivery providers (wave 1 and wave 2)

A mixture of qualitative and quantitative information was collected through a semistructured telephone survey of providers delivering the interventions. The initial survey took place in March and July/August 2020 (the period immediately pre and post the first Coronavirus national lockdown). This first survey explored experiences of delivery prior to lockdown which was predominantly face-to-face.

The survey largely covered prime providers who were asked separate questions about each of the individual interventions that they delivered (hence each respondent was asked to provide information about up to 4 different interventions). In total, the survey collected 35 responses from 12 different providers.

A similar approach was taken for wave 2 which collected 27 responses from 10 different providers. These interviews took place in November – December 2020.

Wave 2 was designed to capture delivery adaptations made to enable remote delivery and provider reflections on the opportunities and challenges this presented.

## Interim report 3

#### Virtual Learning Survey

Following the start of the Coronavirus pandemic, practitioner training using the modules developed for the RPC programme moved online (previously it was available in both face-to-face and online formats). Around 8,000 frontline practitioners were contacted between November 2020 and May 2021 as they had registered to complete one of the online modules. A total of 1,087 frontline practitioners completed the survey having attended training delivered via the Virtual Learning Classroom (VLC) or via e-learning.

#### **Intervention Delivery**

Several sets of qualitative interviews were conducted among parents who had attended one of the RPC interventions. Interviews lasted around 45 minutes to an hour each and covered experiences and impacts of the intervention sessions and reasons behind parents starting or not starting the sessions.

Qualitative interviews with Child Maintenance Service (CMS) users

Thirty in-depth telephone interviews were conducted in May and June of 2021 with parents who had completed an intervention and were users of the Child Maintenance Service.

#### Qualitative interviews with completers

Forty-eight in-depth telephone interviews with parents who had completed an intervention were conducted, including a mix of intact couples, and separated parents (some CMS users and some not using CMS). Beginning in February 2020, these interviews continued up until May 2021.

#### Qualitative interviews with those that did not complete the sessions

Twenty in depth telephone interviews were conducted with parents who started the intervention sessions but did not complete the full course. These interviews took place in October and November 2021.

#### Qualitative interviews with those that did not start

Forty in-depth telephone interviews with parents who were referred to an intervention but did not start taking part were conducted in June and July 2021.

#### **Best Practice Event**

An online best practice event was held in December 2021 which aimed to showcase reducing parental conflict good practice. The event included four 15 minutes presentations from local authorities with each focussing on a specific stage of the RPC implementation journey aligning with the Early Intervention Foundation (EIF) planning tool which supports the programme. Presentations were followed by a short question and answer session. Participants were then broken out into breakout groups to discuss key themes and topics covered on the day, how these might apply to the work of other local authorities and any other learning that can be taken away. All local authorities involved in the programme were invited to attend the event. Fortyfour attendees joined the online event on the day.