

A Qualitative Evaluation of the Mechanisms of Action in an Early Childhood Parenting Programme to Prevent Violence Against Children in Jamaica

Francis, Taja; Packer, Dania; Baker-Henningham, Helen

Child: Care Health and Development

DOI:

<https://doi.org/10.1111/cch.13074>

E-pub ahead of print: 29/10/2022

Publisher's PDF, also known as Version of record

[Cyswllt i'r cyhoeddiad / Link to publication](#)

Dyfyniad o'r fersiwn a gyhoeddwyd / Citation for published version (APA):

Francis, T., Packer, D., & Baker-Henningham, H. (2022). A Qualitative Evaluation of the Mechanisms of Action in an Early Childhood Parenting Programme to Prevent Violence Against Children in Jamaica. *Child: Care Health and Development*. <https://doi.org/10.1111/cch.13074>

Hawliau Cyffredinol / General rights

Copyright and moral rights for the publications made accessible in the public portal are retained by the authors and/or other copyright owners and it is a condition of accessing publications that users recognise and abide by the legal requirements associated with these rights.

- Users may download and print one copy of any publication from the public portal for the purpose of private study or research.
- You may not further distribute the material or use it for any profit-making activity or commercial gain
- You may freely distribute the URL identifying the publication in the public portal ?

Take down policy

If you believe that this document breaches copyright please contact us providing details, and we will remove access to the work immediately and investigate your claim.

RESEARCH ARTICLE

WILEY

A qualitative evaluation of the mechanisms of action in an early childhood parenting programme to prevent violence against children in Jamaica

Taja Francis¹ | Dania Packer¹ | Helen Baker-Henningham^{1,2} 

¹Caribbean Institute For Health Research, University of the West Indies, Kingston, Jamaica

²School of Human and Behavioural Sciences, Bangor University, Bangor, UK

Correspondence

Helen Baker-Henningham, School of Human and Behavioural Sciences, School of Psychology, Bangor University, Bangor LL57 2AS, UK.
Email: h.henningham@bangor.ac.uk

Funding information

This research was funded by Grand Challenges Canada (Saving Brains seed grant), grant number SB-1707-08326.

Abstract

Background: Violence against children (VAC) is a global public health problem, and parenting programmes are a key strategy to reduce VAC at home. We developed and evaluated a preschool-based, early childhood, violence prevention, parenting programme (the Irie Homes Toolbox) in Jamaica and reported significant reductions in parents' use of VAC [Effect size (ES) = -0.29] and increases in parents' positive practices (ES = 0.30). This study presents qualitative findings on the mechanisms of action of the programme.

Methods: As part of a cluster randomized trial, 115 parents from nine preschools participated in the Irie Homes Toolbox parenting programme. The programme consisted of eight 90-min sessions with groups of six parents and focussed on strengthening parent-child relationships, understanding children's behaviour, using appropriate discipline strategies and understanding and managing emotions. We conducted in-depth, semi-structured interviews with a stratified random sample of 28 parents (two to four parents per school) and with nine preschool teachers (one teacher per preschool). Topic guides were developed to explore participants' perspectives of the mechanisms of action of the programme. All interviews were audio-recorded and transcribed, and data were analysed using the framework approach.

Results: The most salient direct pathways to reduced VAC by both parent and teacher reports were through parents' use of alternative strategies to manage child misbehaviour and through improved parent well-being, especially parents' self-management skills. Other factors leading to reduced VAC by parents, reported by both parents and teachers, included self-identification as an 'Irie parent', use of proactive parenting strategies and improved child behaviour. Parents reported that the main factors leading to continued use of VAC were their inconsistency in using positive discipline strategies and poor emotional self-regulation.

Conclusion: Reports from participating parents and preschool teachers indicate that contents related to parental self-management and how to use positive discipline strategies to manage child misbehaviour were important factors on the pathway to reduced VAC.

This is an open access article under the terms of the [Creative Commons Attribution-NonCommercial](https://creativecommons.org/licenses/by-nc/4.0/) License, which permits use, distribution and reproduction in any medium, provided the original work is properly cited and is not used for commercial purposes.

© 2022 The Authors. *Child: Care, Health and Development* published by John Wiley & Sons Ltd.

KEYWORDS

corporal punishment, early childhood, low- and middle-income countries, mechanism of change, parenting, prevention, violence against children

1 | INTRODUCTION

Worldwide, approximately 300 million children aged 2–4 years regularly experience physical punishment and/or psychological aggression by parents and caregivers with the highest prevalence in low- and middle-income countries (LMICs) (Hillis et al., 2016; World Health Organization [WHO], 2020). The consequences of violence against children (VAC) are well documented and include both immediate and long-lasting effects including externalizing behaviours, poor educational outcomes and delinquency in childhood and adolescence and spousal and/or child abuse, criminality and adverse mental health in adulthood (Fry et al., 2018; Gershoff & Grogan-Kaylor, 2016; Hillis et al., 2016).

The elimination of VAC is included in Target 16.2 of the United Nations Sustainable Development Goals: 'end abuse, exploitation, trafficking and all forms of violence against and torture of children'. Parenting programmes are listed as one of the seven evidence-based INSPIRE strategies that have been advocated by 10 international agencies to prevent and reduce VAC (WHO, 2016). There is considerable evidence from high-income countries that parenting programmes based on social learning theory can reduce VAC, improve parenting skills and reduce child behaviour problems (Chen & Chan, 2015; Vlahovicova et al., 2017). There is also a growing body of evidence in LMICs showing promising results from parenting programmes aimed at reducing VAC (Puffer et al., 2015; Rincón et al., 2018; Ward et al., 2019). In addition to conducting an impact evaluation, it is also important to ascertain participants' views of these programmes. Qualitative evaluations are helpful to identify what aspects of the programme are of value to parents and can provide detailed descriptions of parents' accounts of how they changed while participating in the programme (Holtrop et al., 2013; Kane et al., 2007). Identifying potential mechanisms of change is useful to inform revisions to improve the programme (Errázuriz et al., 2016; Holtrop et al., 2013; Mejia et al., 2016).

In Jamaica, there is a high prevalence of VAC by parents (Lansford & Deater-Deckard, 2012) and no legal ban against corporal punishment at home. However, although VAC is often considered to be culturally normative, previous qualitative research has shown that parents who report frequent use of corporal punishment also reported that it is undesirable and ineffective and expressed a need for support in using alternative discipline strategies (Baker-Henningham, 2011). In addition, Jamaica is a pathfinder country in the Global Partnership to End Violence Against Children (<https://www.end-violence.org/impact/countries/jamaica>), and preventing VAC is a national strategic priority. The Irie Homes Toolbox was developed to address the need for an effective violence prevention parenting programme that can be integrated into existing government services. It was specifically

Key Messages

- Parenting interventions are a key strategy to reduce violence against children (VAC), and there is growing evidence that these programmes can be effective in reducing child maltreatment in low- and middle-income countries (LMICs).
- There are fewer qualitative evaluations of parenting programmes to reduce VAC in LMICs, and it is important to explore participants' perspectives of these programmes, including the perceived mechanisms underlying their effects.
- In this qualitative evaluation of an early childhood, violence prevention parenting programme, the most salient pathways to parents' reduced use of VAC by both parent and teacher reports were through parents' use of alternative strategies to manage child misbehaviour and through improvements to parents' emotional self-regulation.
- Parents reported that they continued to use VAC at times when they were unable to regulate their emotions and when they were inconsistent in their use of the strategies.
- Identifying participants' perspectives on the mechanism of change helps inform revisions to improve the programme.

designed to complement an existing teacher training violence prevention programme, the Irie Classroom Toolbox, to form an integrated approach to violence prevention across home and school settings (Baker-Henningham, 2018; Francis & Baker-Henningham, 2020). The Irie Homes Toolbox aims to prevent VAC by promoting parents' use of positive parenting strategies, increasing parents' emotional self-regulation and increasing parents' understanding of their child's development and behaviour. In a small cluster randomized trial of the programme, we found significant reductions in parents' use of VAC (effect size [ES] = -0.29), increases in parent involvement with their child (ES = 0.30) and reductions in behaviour difficulties for children with heightened levels of behaviour difficulties at baseline (ES = -0.36) (Francis & Baker-Henningham, 2021). In this paper, we report a complementary qualitative evaluation of the programme. The main aim of the qualitative evaluation was to explore parents' and

teachers' perceptions of how the programme affected parents' use of VAC.

2 | METHOD

2.1 | Study design and sample

We conducted a cluster randomized trial of the Irie Homes Toolbox parenting programme in 18 preschools in inner-city areas of Kingston and St. Andrew, Jamaica. All preschools had participated in a previous effectiveness trial of the Irie Classroom Toolbox, an early childhood, violence prevention, teacher training programme (Baker-Henningham et al., 2021). All participating schools thus had at least two teachers who were trained in the Irie Classroom Toolbox and had experience using the strategies with children in their classrooms. One to two teachers per school were invited to co-facilitate the parenting programme with the research team. Nine preschools (115 parent/child dyads) were included in the intervention arm of the trial. Parents were

recruited over two rounds: A minimum of six parents per school were recruited in the Autumn term, and an additional six parents per school were recruited in the Spring term. The programme was implemented between September and December 2018 for parents recruited in Round 1 and between January and April 2019 for parents recruited in Round 2.

Sub-sample of parents from each round was randomly selected for participation in the qualitative evaluation. Parents who attended four or more sessions (50% or more of the programme) were eligible to be interviewed. The eligibility criteria were chosen as we were interested in the mechanisms of action, and hence, we selected parents who had been exposed to at least half of the programme. Eighty-three parents (79%) across the two rounds of programme implementation attended four or more sessions. Fourteen parents were randomly selected in Round 1, and a further 14 parents were randomly selected in Round 2, giving a total of 28 parents. No parents refused to be interviewed. Twenty-five of the participants interviewed were mothers with one father and two other relatives. The parents had a mean age of 31.1 years ($SD = 9.2$), 73% had completed

TABLE 1 Description of the Irie Homes Toolbox

<p>Content: The Irie Homes Toolbox consists of five modules: (1) promoting positive behaviour (e.g. praising the child, involving the child in everyday activities, modelling appropriate behaviour, labelling children's emotions, child-led play and picture book reading), (2) preventing misbehaviour (e.g. giving clear instructions, understanding why children misbehave, giving children independence and choice and teaching children skills), (3) understanding emotions (e.g. regulating own emotions and labelling child's emotions), (4) managing misbehaviour (e.g. redirecting children's attention and behaviour, withdrawing attention, using chillax [time-out] and giving appropriate consequences) and (5) supporting homework.</p> <p>Materials: Intervention materials for facilitators include (1) a scripted training manual, (2) visual aids (e.g. pictures of parents and children engaged in everyday activities, pictures of parents using the strategies taught and pictures of child misbehaviours), (3) hand-held charts with key points of the concepts introduced and (4) the Irie Tower: a tower made of cardboard blocks labelled with the strategies introduced to act as a concrete representation of the program. Intervention materials for parents include (1) a take-home card after each session with a summary of the main points covered in the session, how to use the strategies and why it is important; (2) an Irie Activity Planner, a homework assignment record sheet, given at the end of each session; (3) selected toys (e.g. wooden blocks, toy animal, toy car and pretend play kit) and picture books: One toy or book is given to the parent after each session to use during child-led play at home (Irie time) and (4) an Irie Parent Oath that parents sign on completion of the programme. Each of the nine preschools implementing the intervention received a facilitator kit of reusable resources (i.e. manuals, visual aids, charts and storage containers) that cost US\$180 per kit. The cost of all parent materials (e.g. toys, books, homework record sheets and take-home cards) was US\$20 per parent.</p> <p>Procedures: Parents are introduced to the content via demonstrations, role-plays and group discussions. Facilitators use visual aids to prompt discussions and charts with main points for reinforcement. In addition, parents practise the strategies in pairs within the group and practise the child-led play activity for 10–15 min with their child, guided and supported by the facilitator. Home assignments are given to encourage the use of the strategies at home, and parents record their progress with the homework assignment on a record sheet. There is a strong focus on providing positive, supportive feedback to parents; making the sessions fun; and collaboratively problem-solving. Each session includes the following activities: (1) a game or song; (2) feedback from the previous session and discussion of homework assignment; (3) new topic: demonstration, discussion and practice; (4) introduction of a child-led play or book activity; (5) practising the child-led play or book activity with their child and (6) reviewing and allocating homework assignment.</p> <p>Who provided: Two female research staff delivered the intervention, and the sessions were co-facilitated by a teacher from each intervention preschool. Both facilitators have experience in training teachers in the Irie Classroom Toolbox. TF (first author) delivered the intervention in five schools, and a female research assistant delivered the intervention in four schools. TF trained and supervised the other facilitator and held weekly meetings to review the new session to be delivered in the upcoming week and to discuss the progress of the parents and resolve any problems. TF also provided field supervision by attending one parenting session conducted by the second facilitator every week. Both facilitators were trained and supported by HBH.</p> <p>Where: The parent training sessions were held on the preschool compound, usually in the schoolyard.</p> <p>When and how much: The parenting sessions were held either in the mornings when parents came to drop off their children or in the afternoons when they came to pick up their children depending on parent and teacher availability. The sessions were held once a week, for 8 weeks, and each session lasted approximately 90 min.</p> <p>Fidelity: The facilitators delivered the intervention as intended, and all of the prescribed content was covered. Prior to the start of the intervention, teachers were trained to co-facilitate sessions in two full-day workshops. Teacher attendance was 87.5% over the 2 days. The mean number of sessions attended by parents was 5.5 ($SD = 2.6$) out of eight sessions, and the median number of sessions was six. Nine parents (7.8%) did not attend any sessions, 91 (79.0%) attended four or more sessions, 71 (61.7%) attended six or more sessions and 33 (28.7%) attended all the sessions. Teachers co-facilitated a mean of 10.6 ($SD = 2.9$) out of a possible 16 sessions over the two rounds of implementation.</p>
--

high school and 43% were employed. Children had a mean age of 4.2 years ($SD = 0.9$), 46% were boys and no children had an obvious disability or developmental delay. One teacher from each school who co-facilitated the parenting programme also participated in the qualitative evaluation. In two schools, two teachers had co-facilitated the sessions, and we selected the teacher who had conducted the most sessions to be interviewed. All teachers interviewed were female, 3/9 (33%) were qualified teachers, and teachers had been teaching for a median (range) of 12 (3.5–33) years. The study was granted ethical approval by the University of the West Indies ethics committee, 1 June 2018, ref: ECP 144, 17/18, and the School of Psychology, Bangor University ethics committee, 21 August 2018, ref: 2018-16 364. Written and informed consent was obtained from all participating parents and teachers prior to the start of the in-depth interview.

2.2 | Intervention

The Irie Homes Toolbox parenting programme was developed by integrating theory, formative research and practice (Francis & Baker-Henningham, 2020). The programme was delivered by a member of the research team (facilitator) and a preschool teacher (co-facilitator) to groups of six to eight parents weekly for 8 weeks with an average session duration of 90 min. The content covered included strategies to promote positive child behaviours, prevent and

manage child misbehaviours, promote emotional regulation and support children's schoolwork. Further details of the intervention are given in Table 1.

2.3 | Measurements

The perspectives of parents and preschool teachers were collected through individual in-depth, semi-structured interviews (see Table 2 for the topic guide). The main focus of the interviews was on how the intervention affected parents' use of VAC. We also asked questions about the benefits of the programme, and these results were reported previously (Francis & Baker-Henningham, 2020). Interviews were conducted by a female research assistant with a master's degree in Applied Psychology who had no previous contact with participating teachers and parents. The interviewer had prior experience conducting qualitative interviews in early childhood settings in Jamaica. The topic guide was developed by TF and HBH, discussed with the interviewer and then piloted by TF, HBH and the interviewer with two parents who were eligible for participation but were not selected in the random sample and two preschool teachers who had participated in the programme but were not included in the evaluation sample. Parent interviews were conducted over the two rounds of programme implementation, within 1 month after programme completion. Teacher interviews were conducted at the end of

TABLE 2 Topic guide for interviews with parents and teachers

Parents	
Introductory questions	<p>Parents sort strategies (written on cards) into piles of use a lot and do not use so much. As they sort the cards, encourage them to talk about the strategies and why they did or did not use them.</p> <p>For strategies used a lot ask:</p> <ul style="list-style-type: none"> • Why did you use that strategy a lot? What made you use it? How did you use that at home? What happened when you used it? <p>For strategies they did not use so much ask:</p> <ul style="list-style-type: none"> • What stopped you from using it? What problems did you have with it? Did you try to use it? What happened when you used it?
Main questions: use of violence	<p>Some parents tell us that they sometimes need to give their child a little slap, threaten to slap them or shout at them to get them to behave. How much do you punish your child by shouting at them or hitting them? Suggested probes:</p> <ul style="list-style-type: none"> • How is this different to before the program? • If different, what led to the difference? What was it about the program that led to the difference? • If not different, what would you need to help you to manage your child's behaviour without needing to slap or shout at them? • How do you manage your child's behaviour? • What do you do if the child does something you do not like or that makes you angry? • Under what circumstances/for what behaviours do you find you need to 'give a little slap' or shout at child?
Teachers	
Introductory questions	<ul style="list-style-type: none"> • To what extent did the programme cover the skills that parents need to help them and their child? What strategies were most important for parents? • What factors led to parents using the skills introduced with their children? What stopped parents from using the strategies?
Main questions: use of violence	<p>One of the aims of the programme is to help parents use appropriate ways of disciplining children so that they do not need to shout at them, slap them and/or beat them. To what extent do you think this aim was met? Suggested probes:</p> <ul style="list-style-type: none"> • Do you see any evidence that the parents use more positive ways of managing their children's behaviours and/or less negative ways with their children? • If yes, what do you think led to the changes in parents' behaviour?

Round 2. Interviews were conducted in a quiet location at school and lasted approximately 1 h. The timing of each interview was set based on the availability of the participants.

2.4 | Analysis

All interviews were audio-recorded and transcribed verbatim. The transcriptions were checked for accuracy against the audio-recording. Data were analysed manually using the framework approach, which is appropriate for applied policy research with specific questions focussed on a priori issues (Ritchie & Spencer, 2002). This involved five inter-connected stages: (1) familiarization by reading and rereading the transcripts, (2) constructing a thematic framework, (3) indexing and sorting, (4) summarizing and displaying the data and (5) mapping and interpretation. In the first stage, all authors read through five parent and five teacher transcripts together and made notes to guide the development of the thematic framework. In the second stage, the thematic framework was developed by integrating deductive with inductive methods; that is, the initial coding framework was generated from the topic guide, and additional inductive codes were added as new themes emerged from the data. The thematic framework included codes organized by themes and sub-themes, and additional codes were added to reflect the mechanisms of action as reported by respondents. In the third stage, this index of codes was used to code all the transcripts. If a section of text had more than one code, all the relevant codes were applied, and all text in each transcript was coded. In the fourth stage, the data were organized into tables of each theme and sub-theme. In the fifth stage, the tables were analysed to identify recurring patterns and associations within the data, and the results were combined with the mechanism codes to construct diagrams of the pathways described by participants. In the diagrams, each box represents a separate theme, and the arrows represent the pathways identified from the data. Analyses were conducted separately for parents and preschool teachers, and then the results were compared to identify commonalities and differences across types of respondents. DP coded all the transcripts initially with ongoing input and discussion with HBH. All codes were checked by TF, and any discrepancies were discussed and resolved with HBH. The final stage of mapping and interpretation of the data was conducted by TF and HBH.

3 | RESULTS

The results are presented under three categories: (1) parents' reports of the pathways to reduced VAC, (2) teachers' reports of the pathways to reduced VAC and (3) parents' reasons for continued use of VAC. In addition, themes and sub-themes related to parents' and teachers' perspectives of pathways to reduced VAC were divided into those related to the content of the programme, the factors on the pathways of change and the outcome of reduced VAC (Table 3 and Figures 1–3).

3.1 | Parent-reported reasons for their reductions in their use of VAC

In the analyses of the parent data, we identified five direct pathways to reduced VAC by parents: (1) improved parent well-being, (2) the use of an alternative strategy to manage child misbehaviour, (3) self-identification as an Irie (good) parent, (4) the use of proactive parenting strategies and (5) improved child behaviour (Figure 1). Stronger parent-child relationships were also reported to play an important role in the pathway in that they led to improved child behaviour and improved parent well-being. The most salient mechanisms to reduced VAC, which were mentioned by the majority of parents, were via improved parent well-being and the use of alternative strategies to manage child misbehaviour (see Table S1 for additional quotes).

3.1.1 | Parent well-being

Most parents ($n = 21$) reported that the programme led to increased emotional self-regulation, reduced stress and/or increased parenting self-efficacy, and these factors led to reductions in their use of VAC. Learning to regulate their emotions was a key factor in this pathway:

You don't really want to move towards the aggressive part of you to thump them down so ... you take deep breaths in and out before you really try to approach the situation. P25

Like before I say, "Lawd Jesus, look how much time I tell you not to do that and then I say alright take a deep breath in and out. Let me try stay calm because if I'm not calm I'm going to lick (hit) him." P17

Other important factors on this pathway were understanding child development and improved attitude to violence, self-identifying as an Irie parent, using proactive parenting strategies and the formation of a stronger parent-child relationship. These factors interacted with each other and led to increased parent well-being, which in turn led to reduced use of VAC.

... when she's playing alone she tends to seek attention, so when I'm there with her spending the time, less trouble, and more of each other. P7

Whenever time she give trouble me just sit down and look at her and I say, "Boy, she young. Pretty soon she will understand" so, me have to change my bad face. P9

3.1.2 | Use of alternative strategies to manage child misbehaviour

The majority of parents ($n = 20$) also reported that they used strategies such as redirect, withdraw attention, consequences and chillax as an alternative to violence.

TABLE 3 Categories, themes and sub-themes emerging from the data

Parents: pathways to reduced use of violent discipline	Teachers: pathways to reduced use of violent discipline
<p>Themes and sub-themes related to content</p> <p>Proactive parenting strategies</p> <ul style="list-style-type: none"> • Praise • Irie time (child-led play) • Giving choices/independence • Modelling • Teaching skills • Clear instructions • Supporting homework • Describe, listen and respond <p>Knowledge of child development/attitudes to violence</p> <ul style="list-style-type: none"> • Appropriate expectations of child • Improved attitudes to violence <p>Strategies to regulate emotions</p> <ul style="list-style-type: none"> • Calm down strategies (e.g. deep breaths) • Changing thought patterns <p>Strategies to manage child misbehaviour</p> <ul style="list-style-type: none"> • Redirect child's attention • Withdraw attention • Chillax (time out) • Consequences 	<p>Theme and sub-themes related to content</p> <p>Strategies from the Irie Homes Toolbox</p> <ul style="list-style-type: none"> • Praise • Irie time (child-led play) • Giving choices/independence • Modelling • Teaching skills • Clear instructions • Supporting homework • Labelling children's emotions • Redirect child's attention • Withdraw attention • Chillax (time out) • Consequences • Calm down strategies (e.g. deep breaths)
<p>Themes and sub-themes on the pathway of change</p> <p>Improved child behaviour and well being</p> <ul style="list-style-type: none"> • Increased compliance • Increased autonomy • Fewer child misbehaviours • Child likes strategies • Increased self-confidence <p>Stronger parent-child relationships</p> <ul style="list-style-type: none"> • Parent knows child better • Parent and child spend more time together • Child no longer fears parent • Parent and child talk more <p>Parent well-being</p> <ul style="list-style-type: none"> • Better emotional self-regulation • Increased parenting self-efficacy • Less parental stress <p>Self-identification as an Irie (good) parent</p> <ul style="list-style-type: none"> • Parent identifies as an Irie parent • Child reminds parent that they are an Irie parent • Parents remind each other that they are an Irie parent 	<p>Themes and sub-themes on the pathway of change</p> <p>Improved child behaviour and well being</p> <ul style="list-style-type: none"> • Less aggression • Fewer tantrums • Child likes strategies/child has fun • Increased self-confidence <p>Stronger parent-child relationships/increased understanding of child</p> <ul style="list-style-type: none"> • Parent and child bond more • Child trusts parent more • Parent learns child's likes, dislikes and fears • Parent learns child's emotions and triggers <p>Better emotional self-regulation by parents</p> <p>Self-identification as an Irie (good) parent</p> <ul style="list-style-type: none"> • Parent identifies as an Irie parent • Parents remind each other that they are an Irie parent
<p>Theme and sub-themes related to outcomes</p> <p>Less violence against children by parents</p> <ul style="list-style-type: none"> • Less corporal punishment (e.g. slapping, pinching) • Less psychological aggression (e.g. threatening to slap, shouting and yelling) 	<p>Theme and sub-themes related to outcomes</p> <p>Less violence against children by parents</p> <ul style="list-style-type: none"> • Less corporal punishment (e.g. slapping, pinching) • Less psychological aggression (e.g. threatening to slap, shouting and yelling)
Parents: reasons for continued use of violent discipline	
<p>Themes and sub-themes related to parents' continued use of violence</p> <p>Perceived severe child misbehaviour</p> <ul style="list-style-type: none"> • Hitting/fighting • Giving attitude/talking back • Lying • Touching dangerous objects • Going outside without permission • Playing in water <p>Inconsistent use of the strategies</p> <ul style="list-style-type: none"> • Parent does not follow through • Parent uses strategies inconsistently 	<p>Attitudes and beliefs</p> <ul style="list-style-type: none"> • Only thing that makes child listen • Strategies do not work quickly enough • Punishment should hurt and/or make children cry • Scare children into not repeating the behaviour <p>Poor emotional regulation</p> <ul style="list-style-type: none"> • Parent acts in anger <p>Continued use of violence against children</p> <ul style="list-style-type: none"> • Corporal punishment (e.g. slapping, pinching) • Psychological aggression (e.g. threatening to slap, shouting and yelling)

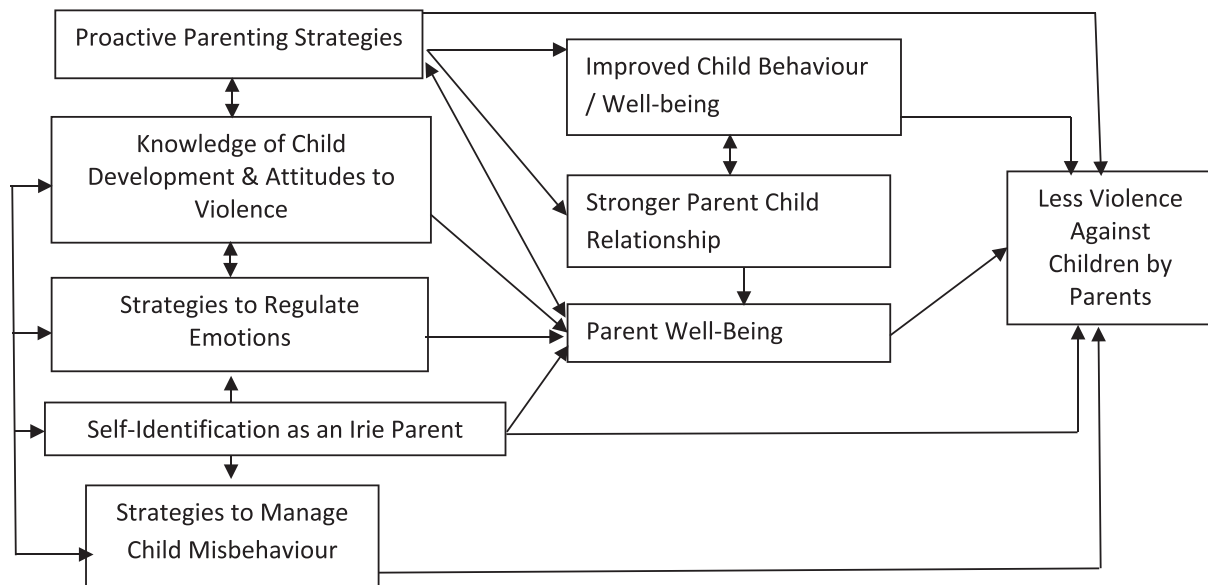


FIGURE 1 Parents' reports of the pathways to their reduced use of violent discipline

Well because instead of you slapping him, you can just give him the chillax area to sit down in and give him about 5 minutes or so in there. P22

I say take away the tablet, use things that they like, stuff like that, to get the message across. And I use the withdrawing attention to avoid shouting. P28

Parents reported using these strategies in conjunction with the emotional regulation strategies; that is, when parents were angry or upset, they calmed down before using one of the strategies to manage child misbehaviour, instead of using violence:

The deep breaths thing, I just take some deep breaths and I just don't bother to pay him any mind to what he is doing, just zone him out ... withdraw attention. P15

3.1.3 | Self-identification as an Irie parent

Twelve parents reported that self-identifying as an Irie parent acted as a reminder not to use violence. In addition, parents would remind each other, and even their children would remind them what being an Irie parent entails:

The next five persons we still keep contact with everything and they always say, "Remember Irie Parents don't beat." P18

Me usually slap him before, but me stop. Because if me say to him, "You want me beat you," him say, "If you beat me, you not going to be Irie Mom again." P21

Identification as an Irie parent also motivated parents to use alternative strategies to manage child misbehaviour and to practise regulating their emotions, which in turn led to reduced violence:

Cause ... you want to punish her and to give her two slap and you have to remember that Irie, Irie, Irie then you just stay calm and you just say, "Mme just a take a little five minutes to breathe." P18

3.1.4 | Use of proactive parenting strategies

Although all 28 parents interviewed reported an increase in their use of proactive parenting strategies following participation in the programme, only eight parents reported a direct link between using proactive strategies and reduced violence towards their child.

The process of giving clear instructions that part of it ... to know that instead of you slap them, you tell them exactly what you want them to do. P15

Because the Irie time she gets to do what she wants to do, so the more she gets to do what she wants to do, it's the more I get her to do what me want her to do, so it's like something for something. The Irie time and the timeout make you not want to beat. P18

Despite few parents mentioning a direct mechanism from use of proactive parenting strategies to reduced VAC, use of positive discipline strategies was an important element in the pathway of change as it led to improved child behaviour, stronger parent-child relationships and improved parent well-being.

3.1.5 | Improved child behaviour

Six parents reported an explicit link between observed improvements in child behaviour and reduced use of VAC. These parents shared how their children are more compliant and do not display as much negative behaviours.

I don't have to really shout. You talk and they hear you and they understand. P15

The improved child behaviours were due to parents using proactive parenting strategies and due to the formation of a stronger parent-child relationship.

She say to praise him and spend time with him. Him start listen to me. P3

Although only a minority of parents reported an explicit link between improved child behaviour and reduced VAC, all parents reported improvements to their child's behaviour following their use of the proactive parenting strategies, particularly using praise, using Irie time, teaching children the required skills and giving clear instructions.

3.2 | Teachers' perceptions of the reasons parents reduced their use of violence

Teachers' reports of the pathways to reduced VAC by parents were similar to those reported by parents (Figure 2). Four direct pathways were identified: (1) improved emotional self-regulation by parents, (2) the use of strategies from the Irie Homes Toolbox, (3) self-identification as an Irie parent and (4) improved child behaviour.

Similar to the parent analyses, the two most salient mechanisms were via improvements in emotional self-regulation and the use of strategies from the Irie Homes Toolbox, especially the strategies to manage child misbehaviour.

It helps the parents at home in that it eases frustration because you frustrate yourself and you frustrate the poor child. T5

Because chillax helps not to slap. It gives you a certain amount of power now to still know that there was something over the top too rude and you need to be facing a little bit of consequence for that action. So you can just go chillax for a while. T7

Teachers also reported that parents' use of proactive strategies led directly to reduced VAC by parents.

A child wouldn't carry her bag and stuff like that and I see that the parent is encouraging the child by praising her and say, "Wow, I like the way you carrying your bag in class today." It really helps them to learn the different alternatives (to using VAC). T5

And shout and call them names and all of that, but I notice where they are not doing that anymore ... they would just talk to them and tell them what they want them to do. T4

Only one teacher mentioned that improved child behaviour led to reduced use of violence, and one teacher reported that self-identification as an Irie parent was an important mechanism:

They are not aggressive anymore because even the other day ... she was saying, "you better thank God I am Irie mother." So she still have the Irie mother stuck in her head. She would have slapped her long time (before the programme). T9

Similar to the parents' accounts, improved parent-child relationships were perceived to be an important factor in the pathway and led to improved child behaviour and improved emotional self-regulation by parents.

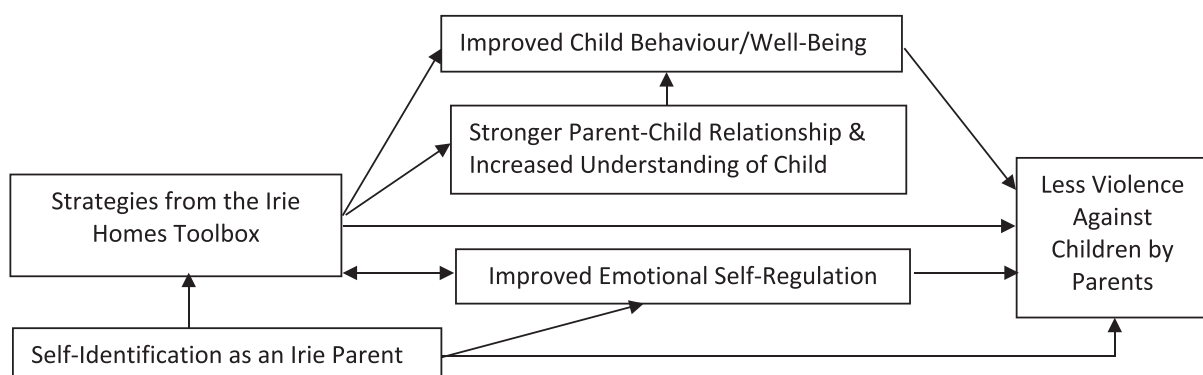


FIGURE 2 Teachers' reports of the pathways to parents reduced use of violent discipline

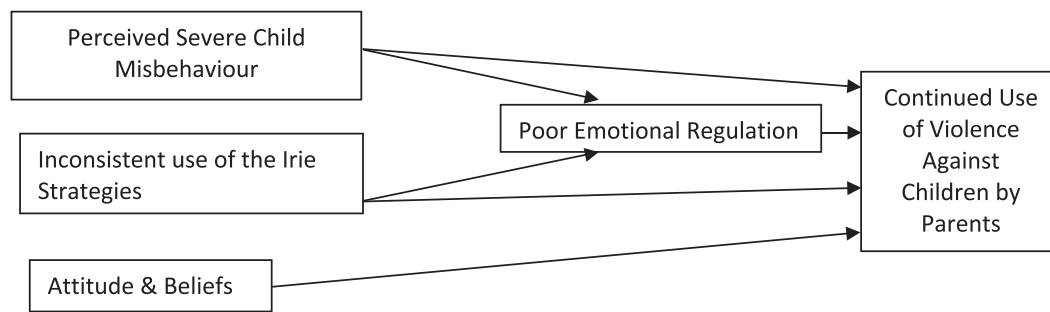


FIGURE 3 Parents' reports of the pathways for their continued use of violent discipline

3.3 | Parent-reported reasons for continued use of VAC

Though all parents reported reduced use of violence, the majority of parents reported that they still used violence at times. The reasons given for the continued use of violence included (1) inconsistent use of the strategies (e.g. failing to follow through in their use of a positive discipline strategy if it was not effective), (2) poor emotional self-regulation, (3) parent-perceived severity of the misbehaviour and (4) parents' beliefs and attitude towards violence (Figure 3). (See Table S1 for additional quotes.)

The two most commonly mentioned reasons for continued use of violence were the inconsistent use of the strategies (20 parents) and poor emotional self-regulation (16 parents).

If I redirect her and she's being stubborn, I have to threaten her and say I'm going to slap you. P27

Cause she just reach a button where me just you know like a volcano erupt. Sometime me try not to beat her ... but at time me can't do it. P4

These two factors often worked in tandem as parents reported that they would use the strategies to manage their child's misbehaviour, but if it did not work or took too long to work, they became angry and would resort to using violence. Ten parents reported that they felt they had to use violence to manage certain behaviours that they deemed severe. These behaviours were mostly related to child aggression, non-compliance and behaviours that put the child in danger of being harmed or becoming sick.

Like I tell him don't go outside because the car is traffic time and him still run go outside. I will slap him for that. P26

When discussing these behaviours, parents' reports suggested that beliefs and attitude towards VAC were a reason for its continued use.

Sometime they have to get a little slap ... slap have to happen sometime ... P2

4 | DISCUSSION

In this paper, we report a qualitative evaluation of a parenting programme to prevent VAC by parents of children aged 2 to 6 years, implemented in Jamaican preschools. Through this evaluation, we explored the mechanisms of action of the programme from the perspectives of the beneficiary parents and of preschool teachers who co-facilitated the parenting sessions. Parents and preschool teachers reported similar pathways to reduced VAC by parents with the most salient mechanisms being the use of alternative strategies to manage child misbehaviour and parents using emotional self-regulation skills to calm down before disciplining their child. Other factors directly leading to reduced VAC by parents, reported by both parents and teachers, included self-identification as an Irie parent, use of proactive parenting strategies and improved child behaviour. Although all parents reported reduced use of VAC after participating in the programme, the majority of parents continued to use violence at times. The main factors leading to continued VAC were parents' inconsistent use of the strategies and poor emotional self-regulation. Less commonly mentioned factors were related to positive attitudes to VAC and use of VAC for misbehaviours considered to be severe.

In a qualitative comparative analysis of parenting programmes to prevent the recurrence of child maltreatment, training in alternative punishment strategies and in parent self-management strategies were identified as essential components of effective interventions (Melendez-Torres et al., 2019). Results from this study indicate that these factors were also recognized as being essential components on the pathway to reduced VAC from the perspective of programme participants. Participants' reports indicated that these two components worked together and parents used emotional self-regulation strategies to calm down prior to disciplining their child. When calm, parents chose appropriate non-violent discipline strategies, rather than resort to violence. This interaction is also supported by theoretical advances from neuroscience research that suggest that building caregivers' self-regulatory capacities will promote their ability to plan, problem-solve and exert self-control and will maximize the likelihood that parents can benefit from the knowledge and skills introduced through parenting programmes (Magnuson & Schindler, 2019). Other qualitative evaluations of behavioural parenting programmes in LMICs have also reported that improved self-control and using appropriate non-violent

discipline strategies led to reductions in VAC by parents (McCoy et al., 2021; Mejia et al., 2016).

In this study, participants' reports of the primary pathways to reduced VAC were through behavioural changes, that is, gaining skills in appropriate discipline practices and self-management. This differs from the results of a qualitative evaluation of a parenting programme in Liberia in which cognitive (e.g. attitudes to violence) and emotional (e.g. empathy) changes were reported to be the primary drivers of change, with skills acquisition being an important secondary driver (Giusto et al., 2017). Participants' reports of the relative importance of behavioural, cognitive and emotional factors are likely to vary according to the primary focus of the intervention. For example, although both the 'Parents Make the Difference' (PMD) programme used in Liberia and the 'Irie Homes Toolbox' programme used in this study included content related to psychological and behavioural processes, the relative emphasis on these components differed, with PMD placing more emphasis on psychological processes and the Irie Homes Toolbox placing more emphasis on skills training (Francis & Baker-Henningham, 2020; Puffer et al., 2015). In the PMD programme in Liberia, one of the key factors leading to reduced VAC was through an 'identity shift' in which caregivers self-identified as nurturers and protectors of their children. This new identity was then considered incompatible with the use of harsh punishment (Giusto et al., 2017). In our study, parents also reported a change in self-identity: increased understanding of their child's behaviour combined with the learning of new skills led to a change in parents' expectations of their own behaviour in their parenting role. Parents labelled this new self-identity as being an 'Irie parent', and in aspiring to be an Irie parent, parents were motivated to use strategies learnt through the programme. These commonalities between programmes with differing emphases on psychological versus behavioural components may suggest that both sets of components are important for reducing parents' use of VAC across different contexts in LMICs.

The direct pathways to reduced VAC reported by participants were largely related to changes in parents' behaviour. Although improvements to the child's behaviour were mentioned by all parents as a benefit of the programme, these benefits were rarely mentioned as a direct pathway to reduced VAC. This may suggest that parents were taking responsibility for their own behaviour. Previous studies have demonstrated how parenting programmes can help to move parents from an external to an internal locus of control (Errázuriz et al., 2016). In addition, although improvements to parent-child relationships were not perceived to lead directly to reduced VAC by parents, this was an important factor mentioned by both parents and teachers. Stronger parent-child relationships were reported to increase parent well-being and promote children's well-being and positive behaviour, and this has been reported in other studies (Errázuriz et al., 2016; Giusto et al., 2017).

All parents reported reduced use of VAC, and no parents reported on any harm from participating in the intervention. However, most parents reported that they continued to use violence at times, and the two most salient factors leading to their continued use of VAC were similar to the primary drivers leading to reduced

VAC, that is, skills in using the strategies introduced through the programme and emotional self-regulation. Parents reported that they sometimes used the strategies inconsistently, especially when they were angry and frustrated, again suggesting an interaction between parent self-management and parents' use of appropriate discipline practices. This further reinforces the perceived importance of these components of the programme. It is possible that parents needed more practice and support in using the strategies appropriately and that increased emphasis needs to be given to habit formation. Other reasons reported for using harsh punishment related to parents' beliefs that corporal punishment was necessary at times, especially when the child's behaviour was aggressive, non-compliant or dangerous. Positive attitudes to corporal punishment have been shown to predict its use across countries, and addressing cultural norms relating to VAC may be necessary (Lansford et al., 2017). Parents' reports of the reasons for continued use of harsh punishment at home are similar to those reported by Jamaican primary school teachers who were trained in a complementary teacher training, violence prevention programme, which may reflect the Jamaican context (Baker-Henningham et al., 2019). Enacting a legal ban against corporal punishment at home and at school is also important to eliminate VAC in Jamaica.

The study had several strengths. Interviews were conducted by an independent interviewer in a quiet place. We included the perspectives of parents and preschool teachers, thus ensuring that we received input not only from the beneficiaries of the programme but also from the frontline workers who will have primary responsibility for programme implementation. We also interviewed selected parents and teachers from all participating schools, and to reduce selection bias, we randomly selected parents for participation from all eligible parents. The study also had several limitations. We enrolled parents who were interested and available to participate in the parenting sessions, and hence, these findings are based on the perspectives of more motivated parents. All data were via self-report, and social desirability could have influenced the findings. A relatively small sample of parents and teachers were interviewed, and hence, the reported mechanisms of action need to be interpreted cautiously and corroborated through future empirical research. To ensure parents could report on the mechanisms of action of the Irie Homes Toolbox, only parents who had attended a minimum of half the sessions ($n = 4$) were eligible to participate in the interviews. Hence, we do not know if parents who attended fewer sessions experienced the intervention differently from those who were more engaged. Furthermore, incomplete high school, lack of a father figure in the home and poor sanitation predicted poor parent attendance at sessions, indicating that more disadvantaged parents were less likely to attend sessions (Francis & Baker-Henningham, 2021). However, only 21% of parents were ineligible for participation because of low attendance. All interviews were conducted at the end of the intervention period, and we had insufficient resources to allow us to conduct repeat interviews to investigate change over time or to conduct follow-up interviews to obtain feedback on the findings.

5 | CONCLUSION AND RECOMMENDATIONS

We report on parent and teacher perspectives of the mechanism of actions of an early childhood, violence prevention, parenting programme implemented in Jamaican preschools. The two most important pathways to parents' reduced use of VAC, by both parent and teacher reports, were through the use of alternative discipline strategies and improved emotional self-regulation. Although parents reported reductions to their use of VAC, they continued to use harsh punishment at times. The most salient reasons for this were poor emotional self-regulation and inconsistent use of the strategies introduced.

These results suggest that learning positive discipline and having self-management skills are essential components of the intervention, and strengthening these components may lead to further reductions to VAC by parents. The intervention may also be strengthened by providing additional support to parents after completing the programme to promote their consistent use of the strategies. For example, sending e-resources via SMS has been shown to be effective in other studies (Bloomfield et al., 2022), and/or small-group booster sessions could be implemented. Complementing the programme with other initiatives from the INSPIRE framework would also strengthen the intervention (WHO, 2016). These include introducing legal bans on corporal punishment, changing social norms related to VAC, promoting safe environments, conducting economic strengthening programmes for parents, providing adequate response and support services and creating safe, secure school environments.

ACKNOWLEDGEMENTS

We thank the teachers, parents and children who participated in this study and Tiffany Case for conducting the interviews.

CONFLICT OF INTEREST

The Irie Homes Toolbox was developed by Taja Francis and Helen Baker-Henningham. The funders had no role in the design of the study; in the collection, analyses or interpretation of data; in the writing of the manuscript; or in the decision to publish the results.

DATA AVAILABILITY STATEMENT

The data that support the findings of this study are available from the corresponding author upon reasonable request.

ORCID

Helen Baker-Henningham  <https://orcid.org/0000-0001-5697-155X>

REFERENCES

- Baker-Henningham, H. (2011). Transporting evidence-based interventions across cultures: Using focus groups with teachers and parents of preschool children to inform the implementation of the incredible years teacher training programme in Jamaica. *Child: Care, Health and Development*, 37, 649–661. <https://doi.org/10.1111/j.1365-2214.2011.01208.x>
- Baker-Henningham, H. (2018). The Irie Classroom Toolbox: Developing a violence prevention, preschool teacher training program using evidence, theory and practice. *Annals of the New York Academy of Sciences*, 1419, 179–200. <https://doi.org/10.1111/nyas.13713>
- Baker-Henningham, H., Bowers, M., Francis, T., Vera-Hernandez, M., Walker, S. (2021). The Irie Classroom Toolbox, a universal violence-prevention teacher-training programme, in Jamaican preschools: A single-blind, cluster randomised trial. *Lancet Global Health*, 9, e456–468. [https://doi.org/10.1016/S2214-109X\(21\)00002-4](https://doi.org/10.1016/S2214-109X(21)00002-4)
- Baker-Henningham, H., Scott, Y., Bowers, M., Francis, T. (2019). Evaluation of a violence-prevention program with Jamaican primary school teachers: A cluster randomized trial. *International Journal of Environmental Research and Public Health*, 16, 2797. <https://doi.org/10.3390/ijerph16152797>
- Bloomfield, J., Balsa, A., & Cid, A. (2022). Using behavioral insights in early childhood interventions: The effects of Crianza Positiva e-messaging program on parental investment. *Review of Economics of the Household Advance online publication*. <https://doi.org/10.1007/s11150-021-09593-4>
- Chen, M., & Chan, K. (2015). Effects of parenting programs on child maltreatment prevention. *Trauma, Violence & Abuse*, 17(1), 88–104. <https://doi.org/10.1177/1524838014566718>
- Errázuriz, P., Cerfogli, C., Moreno, G., & Soto, G. (2016). Perception of Chilean parents on the triple P program for improving parenting practices. *Journal of Child and Family Studies*, 25(11), 3440–3449. <https://doi.org/10.1007/s10826-016-0492-8>
- Francis, T., Baker-Henningham, H. (2020). Design and implementation of the Irie Homes Toolbox. *Frontiers in Public Health*, 8, 282961. <https://doi.org/10.3389/fpubh.2020.282961>
- Francis, T., Baker-Henningham, H. (2021). The Irie Homes Toolbox: A cluster-randomized controlled trial of an early childhood parenting program to prevent violence against children in Jamaica. *Children and Youth Services Review*, 126, 106060. <https://doi.org/10.1016/j.childyouth.2021.106060>
- Fry, D., Fang, X., Elliott, S., Casey, T., Zheng, X., Li, J., Florian, L., & McCluskey, G. (2018). The relationships between violence in childhood and educational outcomes: A global systematic review and meta-analysis. *Child Abuse & Neglect*, 75, 6–28. <https://doi.org/10.1016/j.chiabu.2017.06.021>
- Gershoff, E., & Grogan-Kaylor, A. (2016). Spanking and child outcomes: Old controversies and new meta-analyses. *Journal of Family Psychology*, 30(4), 453–469. <https://doi.org/10.1037/fam0000191>
- Giusto, A., Friis, E., Sim, A., Chase, R., Zayzay, J., Green, E., & Puffer, E. (2017). A qualitative study of mechanisms underlying effects of a parenting intervention in rural Liberia. *The European Journal of Development Research*, 29(5), 964–982. <https://doi.org/10.1057/s41287-017-0101-8>
- Hillis, S., Mercy, J., & Saul, J. (2016). The enduring impact of violence against children. *Psychology, Health & Medicine*, 22(4), 393–405. <https://doi.org/10.1080/13548506.2016.1153679>
- Holtrop, K., Parra-Cardona, J., & Forgatch, M. (2013). Examining the process of change in an evidence-based parent training intervention: A qualitative study grounded in the experiences of participants. *Prevention Science*, 15(5), 745–756. <https://doi.org/10.1007/s11121-013-0401-y>
- Kane, G., Wood, V., & Barlow, J. (2007). Parenting programmes: A systematic review and synthesis of qualitative research. *Child: Care, Health and Development*, 33(6), 784–793. <https://doi.org/10.1111/j.1365-2214.2007.00750.x>
- Lansford, J., & Deater-Deckard, K. (2012). Childrearing discipline and violence in developing countries. *Child Development*, 83(1), 62–75. <https://doi.org/10.1111/j.1467-8624.2011.01676.x>
- Lansford, J., Cappa, C., Putnick, D., Bornstein, M., Deater-Deckard, K., & Bradley, R. (2017). Change over time in parents' beliefs about and

- reported use of corporal punishment in eight countries with and without legal bans. *Child Abuse & Neglect*, 71, 44–55. <https://doi.org/10.1016/j.chiabu.2016.10.016>
- Magnuson, K., & Schindler, H. (2019). Supporting children's early development by building caregivers' capacities and skills: A theoretical approach informed by new neuroscience research. *Journal of Family Theory & Review*, 11(1), 59–78. <https://doi.org/10.1111/jftr.12319>
- McCoy, A., Lachman, J., Ward, C., Tapanya, S., Poomchaichote, T., Kelly, J., Mukaka, M., Cheah, P. Y., & Gardner, F. (2021). Feasibility pilot of an adapted parenting program embedded within the Thai public health system. *BMC Public Health*, 21(1), 1009. <https://doi.org/10.1186/s12889-021-11081-4>
- Mejia, A., Ulph, F., & Calam, R. (2016). Exploration of mechanisms behind changes after participation in a parenting intervention: A qualitative study in a low-resource setting. *American Journal of Community Psychology*, 57(1–2), 181–189. <https://doi.org/10.1002/ajcp.12020>
- Melendez-Torres, G., Leijten, P., & Gardner, F. (2019). What are the optimal combinations of parenting intervention components to reduce physical child abuse recurrence? Reanalysis of a systematic review using qualitative comparative analysis. *Child Abuse Review*, 28(3), 181–197. <https://doi.org/10.1002/car.2561>
- Puffer, E., Green, E., Chase, R., Sim, A., Zayzay, J., Friis, E., Garcia-Rolland, E., & Boone, L. (2015). Parents make the difference: A randomized-controlled trial of a parenting intervention in Liberia. *Global Mental Health*, 2, e15. <https://doi.org/10.1017/gmh.2015.12>
- Rincón, P., Cova, F., Saldívia, S., Bustos, C., Grandón, P., Inostroza, C., Streiner, D., Bühring, V., & King, M. (2018). Effectiveness of a positive parental practices training program for Chilean preschoolers' families: A randomized controlled trial. *Frontiers in Psychology*, 9, 1751. <https://doi.org/10.3389/fpsyg.2018.01751>
- Ritchie, J., & Spencer, L. (2002). Qualitative data analysis for applied policy research. In M. Huberman & H. Miles (Eds.). *The qualitative researcher's companion* (pp. 305–329). Sage Publications.
- Vlahovicova, K., Melendez-Torres, G., Leijten, P., Knerr, W., & Gardner, F. (2017). Parenting programs for the prevention of child physical abuse recurrence: A systematic review and meta-analysis. *Clinical Child and Family Psychology Review*, 20(3), 351–365. <https://doi.org/10.1007/s10567-017-0232-7>
- Ward, C., Wessels, I., Lachman, J., Hutchings, J., Cluver, L., Kassarjee, R., Nhapi, R., Little, F., & Gardner, F. (2019). Parenting for lifelong health for young children: A randomized controlled trial of a parenting program in South Africa to prevent harsh parenting and child conduct problems. *Journal of Child Psychology and Psychiatry*, 61(4), 503–512. <https://doi.org/10.1111/jcpp.13129>
- World Health Organization. *INSPIRE: Seven strategies for ending violence against children*. 2016.
- World Health Organization. *Global status report on preventing violence against children 2020*.

SUPPORTING INFORMATION

Additional supporting information can be found online in the Supporting Information section at the end of this article.

How to cite this article: Francis, T., Packer, D., & Baker-Henningham, H. (2022). A qualitative evaluation of the mechanisms of action in an early childhood parenting programme to prevent violence against children in Jamaica. *Child: Care, Health and Development*, 1–12. <https://doi.org/10.1111/cch.13074>