Pasin bilong lukautim pikinini gut
Parenting for Child Development

A parenting program to support the wellbeing of children in PNG

Final evaluation report 2016-2018

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Acknowledgements

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Introduction

This report provides an overview of the outcomes of program development, training and evaluation undertaken by the Menzies School of Health Research as part of its consultancy to develop the program *Pasin Bilong Lukautim Pikinini Gut,* Parenting for Child Development (P4CD).

The development process for P4CD occurred in three main stages occurring before and after a pilot of the program in 2017:

- o Stage 1: Qualitative research in four provinces, followed by a process of program development and initial training of community personnel
- o Stage 2: Pilot of P4CD in 10 communities in Madang and Western Highlands/Jiwaka
- o Stage 3: Building a training approach for sustainable implementation and training for coordinators, supervisors and facilitators
- o Stage 4: Implementation at scale

This report briefly reviews the main findings of the four Stages, concluding with a preliminary assessment of program scale-up in 2018.

Evaluation of outcomes of the pilot program has been reported in technical detail elsewhere (Robinson, et al, 2018) and is summarised here. The evaluation report included recommendations for implementation and scale-up of the program. Based on the findings of the evaluation, a framework for continuing monitoring and evaluation was provided. To support implementation, there needs to be capacity to effectively plan, lead and manage program implementation in multiple sites based in part on data gathered for quality assurance, monitoring, evaluation and reporting.

Resources and guidelines developed for the project to date include:

- o *Parenting in PNG:* Qualitative research report, November 2016
- o Pasin Bilong Lukautim Pikinini Gut: facilitators' Guide
- o Pasin Bilong Lukautim Pikinini Gut: Flipcharts A & B; Resource Cards A & B; Resource materials, homework sheets.
- o Pasin Bilong Lukautim Pikinini Gut: Evaluation of the Pilot Program 2017
- o Pasin Bilong Lukautim Pikinini Gut: Monitoring and Evaluation Framework, 2018
- o Pasin Bilong Lukautim Pikinini Gut: *Trainers' Guide* for facilitator Training, 2018

Background

A significant burden of physical and mental health and social problems is attributable to early child maltreatment, including abuse, neglect and exposure to domestic violence in countries of East Asia and the Pacific, including PNG (Fang et al, 2015; Fry et al, 2012).

Parenting programs are now increasingly advocated to reduce violence in both high income and low-middle income countries (WHO 2009, 2010, 2016). International studies demonstrate the effectiveness of parenting programs in reducing child maltreatment and its causes. However, they are yet to be widely implemented in developing countries (Knerr, et al, 2013; Mikton & Butchart 2009; Meija et al, 2012).

Against the background of widespread reports of family violence and violence against children in PNG, UNICEF commissioned the Menzies School of Health Research to develop a parenting program that was suitable for implementation in remote regions of the country. This initiative is part of the development of child protection services under the newly enacted *Lukautim Pikinini Act* (2015).

UNICEF entered into a partnership with the Catholic Church in the Archdioceses of Mt Hagen and Madang and the Diocese of Kundiawa in order to develop, pilot and implement the program. The program was to be delivered by volunteers that could be supported by the Church's structures and networks in alignment with its existing family programs. The program's primary aim would be the reduction of child maltreatment and violence against children. The project was to include an initial phase of qualitative research to inform program development, followed by a pre- post- evaluation of a pilot program as a precursor to further implementation.

Initial research and consultations

In 2016, a research team from Menzies assisted by UNICEF and local leaders associated with the Catholic Church interviewed around 400 people in 15 communities across four provinces, holding 26 focus group meetings. The aim was to assess parents' understandings of child development and parenting, likely support for a parenting program and needs and capacity in the communities to implement a parenting program. Many of these meetings were community gatherings of from 20 to 30 men and women convened by local leaders, while other groups included health staff, teachers and other community workers. Meetings were held with teenagers in two provinces.

Both key informants and community members showed a hunger for new knowledge about child development and were positive about the aims of the program to build knowledge and provide training. Key informants felt that there was a need to frame the program in terms of outcomes for children, rather than in terms of confronting parents about their behaviour.

Understandings of parenting and child development.

Many informants did not see that it is possible to build children's strengths and contribute to later success by improving the quality of early care and parenting. This is illustrated by the statement of one informant, a teacher:

"When a child succeeds in life, when they become a policeman or pilot - it is random. It is not because the child has been nurtured by the parent, it is not by design, it is random."

This kind of view was expressed in different ways and seems to reflect a wide view that what parents do does not matter for the child's development and success in life, in part because so many influences appear outside of adults' including parents' control, but also in part because parenting was not seen as leading to or influencing future social outcomes.

According to some men:

"Fathers are not there to make a child a better person. Because it is our culture. Fathers don't get involved until the children are teenagers especially the sons. It is the mother's role to bring them up before then."

This emphasis of the mother's responsibility reflected the sense that men were preoccupied with obligations to provide for families (for some of them, to provide for multiple wives and their

children) and securing the resources to do so. Among themes emphasised by men in the Highlands and Chimbu were the disadvantage experienced by children in polygamous households, the consequences of family breakdown and the lack of access to absent fathers. Some of these emphases were not evident in Madang. As one informant said: "We are a matrilineal society. I saw my father every day."

Parenting and coercive discipline

According to almost all informants the use of physical or corporal punishment is widespread. It ranges from smacking children with the hand, hitting children with a stick, a broom or a hose to punching with a clenched fist, and tying children up outside as punishment. Some parents said that hitting a child should be accompanied by an explanation of what the child had done to deserve the punishment. There was frequent discussion of acceptable and unacceptable use of corporal punishment and its consequences, and criticism of extreme cases of damage to a child. The exercise of harsh punishment is not limited to individual parents using inappropriate means, but is also an effect of family and community relationships. Many people in a child's kin network may assert the right to use violence either as a means of discipline or as retribution for a wrong. This means that children and youth may be exposed to multiple sources of physical punishment. As one informant said, "There is no limit for punishment… This is the norm". Some parents reported feeling pressure to punish their children when they misbehaved in public, and commented on a growing tendency for demonstrative beatings to be given in public rather than in private at home.

Coercive discipline using corporal punishment appears to escalate as children grow older. Caregivers described the use of more extreme physical punishments with older children, especially boys, leading to use of clubs and knives to intimidate them. There were reports of parents being harassed and intimidated by their older children, most often over money, with demands for money almost universally perceived as a growing problem. Some parents spoke of violence from adolescents in the home, leading parents to go to the police or the village courts for help. For girls, entry into premature sexual relationships and potentially becoming pregnant in their teens - along with risk of rape and abuse - were among the risks encountered.

Youth were consulted in focus groups: they spoke eloquently of these problems:

"There is pregnancy and we don't get good education. We end up in sad places and add burden to our parents. This causes fighting and there is no peace in the community."

"Teenage kids are confused but need time with their parents (as well)" - "We still need our parents!"

Young people said they wanted their parents to listen, but reported that parents were often physically and/or emotionally unavailable, too ready to resort to punishment leaving the young people with little or no access appropriate adult support and guidance when they needed it most. The sense of injustice regarding coercion and corporal punishment was a common thread:

"Every parent should have understanding. Instead of beating, they should ask us what is happening instead of just telling us. We sometimes fight them."

"They always beat us and yell, scream and yell. If they yell, we yell back. They don't listen. I am still under their roof, but I am waiting until I am self-independent".

"I want counselling and mediation for families – to talk about family and bring things into the open. This doesn't happen."

"Why are they yelling at us?! Parents always think they are right. Children feel scared but this is not good".

For many children, harsh parenting continues from the early years through middle childhood and is followed by intensification of punitive responses in adolescence. This almost certainly leads to an increasing likelihood of antisocial behaviour, social and emotional problems and diminished wellbeing among youth and young adults.

Caregiving, family wellbeing and neglect

Discussions of care-giving were not limited to coercive discipline. Many informants were concerned about neglect in the context of stressed family life. They were critical (and self-critical) of parenting that was indifferent, disengaged and lacking close positive involvement with children from very early in life. Parents spoke of the lack of concern to properly feed children, leaving children to roam around and fend for themselves. Some men said that most fathers were neglectful. There were frequent references to children of different ages being left in substandard care. It was said that babies born to teenage parents were often given up to other kin without regard for the quality of care they would receive. In other circumstances, children were sent to inadequate kinship care after the death of a wife, or sometimes sent by an overburdened parent as a disciplinary measure. In one group discussion it was noted that children as young as five were sometimes left to care for smaller children and infants, while parents went to market or were drinking or otherwise preoccupied. Some informants said that it was not appropriate for any child under the age of 10 years to be left in charge of little children and infants, while appearing to acknowledge that this was not uncommon. In more than one group, it was suggested that neglectful parenting was associated with gambling and misuse of drugs and alcohol. They not only contributed to parental disengagement and neglect of children by parents, but they also exposed children to aggressive or dismissive behaviour by them. Adults modelled behaviours that children would later follow.

Children at risk: an intergenerational gap in parenting

Social change in PNG has created pressures on family structure and community relationships leading in turn to new uncertainties for parents. The simultaneous persistence and breakdown of traditional extended families and polygamous marriage, and the pressures of subsistence combined with the growing role of money in families were important themes. The use and misuse of family resources, the need for money for children's education and children's increasing demands for money and associated struggles over compliance were all identified as ongoing challenges. Men's and women's perspectives on these challenges overlapped, but also showed some differences, particularly in terms of men's sense of difficulty in providing equally for wives and children in polygamous families, or even providing for children of just one wife, and women's concerns about equal treatment and fears regarding domestic violence. There were some who argued that traditional polygamous family forms are no longer appropriate, while others spoke for their continuing relevance in the experience of many people. It was certainly suggested that in all family types children are at risk of disadvantage, injustice and abuse, including the risk of being orphaned. It was clear from comments of many participants that a parenting program focusing on reducing risks and improving outcomes

for children must acknowledge increasingly diverse contemporary forms of family relationship in PNG and the role of parents within them.

International research is clear that parenting programs are at risk of failure or at least of being limited in effect, if they do not address both men's and women's interests in parenting (Panter-Brick et al, 2014). Key informants in PNG also suggested that a strategy to engage women would not be likely to succeed without a strategy to engage, inform and where appropriate to include men.

The initial research confirmed both the need for and potential community support for a parenting program focusing on the quality of parent-child relationships and aiming to strengthen positive support for children's social and emotional development. It suggested that the program needed to be grounded in real experience of people in PNG and "not brought from the outside". It should be able to equip facilitators to manage conversations about many of the challenges faced by parents and their families, while retaining a universal focus on what is best for children's development and prevention. The parenting program would need to provide sound basic information about child development for parents and help them to identify and to practice new parenting skills.

Corporal punishment by individual parents and punishment by other kin and community members were accepted as necessary by many informants. The qualitative research had emphasised that authority structures in family and community are marked by hierarchy, respect and social distance between generations that is often strictly maintained. This may be associated with parental emotional reactions marked by a sense of affront at child misbehaviour, leading to demonstrative violence when children defied parents or were publicly disobedient. Such reactions are more likely among parents under stress. Some parents may justify corporal punishment with the idea of toughening up their child to become a fighter or a warrior. There are in short many parental theories that justify violent reactions to child behaviour, but very few if any that involve an understanding that the child's needs may communicated through the behaviour.

It is unlikely that a program aiming to influence parenting practices will succeed if it simply opposes all corporal punishment outright. It is important to accept parents' need for respectful relationships, and to encourage exploration of reasons for lapses in self-control rather than morally judging or condemning them for lapses in self-control. Parents need to explore children's needs and behaviours at different ages – and to link new developmental knowledge to their own experiences. This is an important educational focus. The focus on the child's developmental needs can help parents to identify the negative consequences of corporal punishment and the direct and indirect impacts of family violence on children while promoting positive forms of parent-child interaction. By building empathy and by seeking to improve parental self-monitoring and self-regulation the program can help to reduce the need for extreme punitive reactions to disapproved behaviour.

P4CD: Theory of change and program logic

Longitudinal studies have demonstrated that harsh parenting and maltreatment in childhood increases the risks of antisocial behaviour, drug and alcohol misuse and mental health problems in adolescence. The risk is also associated with the social context of family and community relationships in which the early exposure occurs (Fergusson and Lynskey, 1997).

Family violence is often implicated in child maltreatment and is endemic in many societies, including low income developing societies such as PNG. It inevitably has significant consequences for child development. Research shows that exposure to family violence in childhood is strongly linked to adverse consequences for children's mental health and physical, social and emotional wellbeing and that it may lead to the intergenerational transition of antisocial behaviour and violence. Studies of the impact of witnessed inter-parental violence on children's long-term development have found that parenting practices mediated children's adjustment to experiences of inter-parental violence and its later outcomes. Among children who had witnessed violence between parents, harsh discipline was significantly associated with antisocial behaviour in boys and with depressive symptoms for girls (Ehrensaft & Cohen, 2012; Gamez-Guadix et al, 2012). The authors conclude that reduction of aggressive, hostile and verbally abusive interactions between parents and children, in conjunction with intervention to correct cognitive misattribution and poor problem-solving should be priorities for prevention.

Exposure to family violence in middle childhood was strongly predictive of problems in emotional and behavioural self-regulation, aggression and reactivity in adolescence, and was related to risk of relationship problems and substance use disorders as adolescents themselves became parents (Ehrensaft et al, 2015). The authors concluded that prevention should target improvements in parenting and the parent-child relationship in early to middle childhood (Ehrensaft & Cohen, 2012).

The logic of intervention targeting parents of children aged from 3-9 years of age is to reduce harsh parenting and neglect and in turn to influence both short- and long-term impacts of harsh parenting and family violence on children's social-emotional and behavioural development.

Figure 1: Theory of change
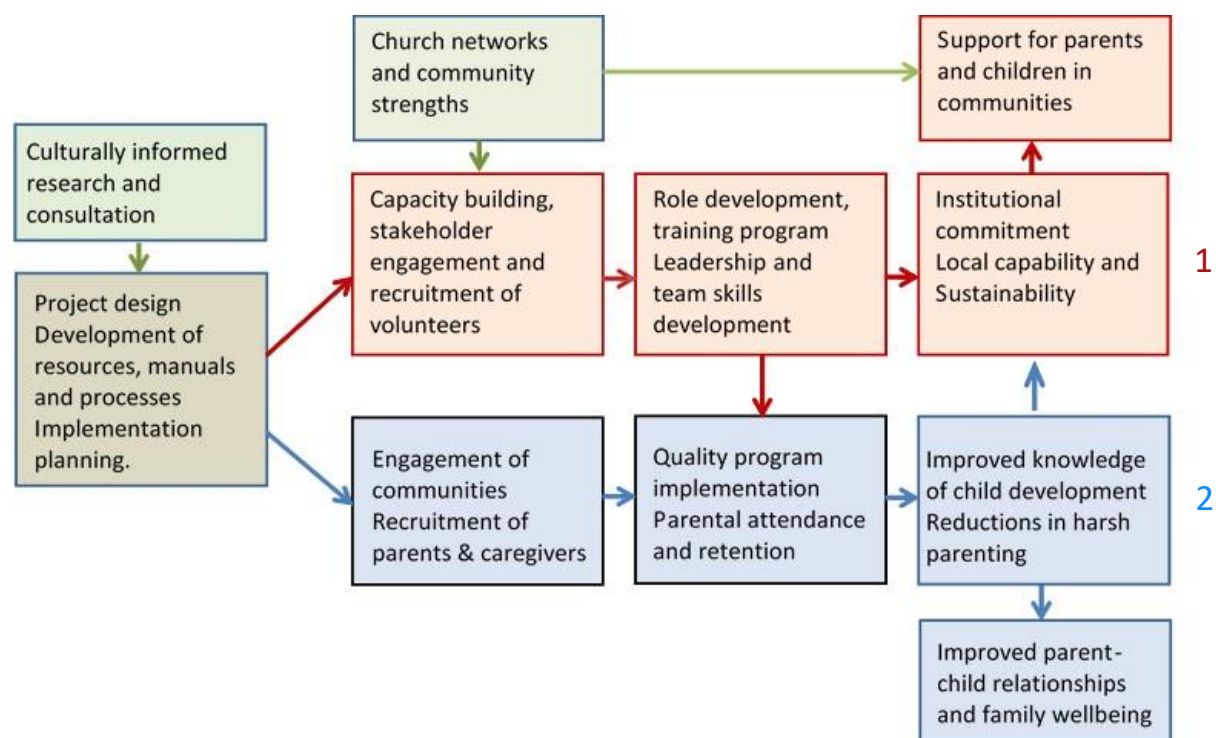
Wider effects of the program include outcomes of training and capacity building in the community through church networks. If there is training of volunteers to implement P4CD on a sustainable basis, what are the potential effects in terms of support for parents and children in communities?

Figure 1 sets out the effects of program development and implementation in the context of community and institutional relationships (Row 1) together with the direct effects of P4CD on parenting practices and family relationships (Row 2). This report examines both dimensions with reference to the evaluation of the pilot program and efforts to build and consolidate capacity through training, continuing until the start of scale-up in 2018. Further comment on requirements for research in these outcome areas is provided in the conclusions of the report.

From program development to pilot program

This section reviews achievements in capacity-building, training and implementation for the pilot program in 2017, with a view to identifying the key questions for ongoing and sustainable implementation of the P4CD program that further development work has sought to address in 2017-2018. These include adherence to criteria for implementation as established during the pilot program; planning and management of implementation, including monitoring and reporting; and training of trainers and team leaders drawn from networks of community volunteers. All are important for the sustainability of the program and require clear organisational commitments on behalf of the program partners.

The lack of a trained workforce is a major obstacle to extension of human services in low and middle-income countries (Singla et al., 2014). According to Patel and colleagues, in developing countries, "Two major barriers impede the path between evidence-based treatments and improved access: the lack of skilled human resources and the acceptability of treatments across cultures" (Patel et al, 2011). A further constraint on development of psychosocial or educational services is the lack of capacity to develop and test programs suitable for low resource settings and for specific cultural contexts.

There has been increasing recognition of the need to meet these challenges, not only through development of approaches to training and capacity building for lay practitioners working in low resource settings, but also in adaptation and design of interventions for diverse, often rapidly changing social and cultural contexts found in developing countries (Bernal, et al, 2006).

In PNG, it was decided by UNICEF in consultation with its partners, that the best available capacity to implement a parenting program was among volunteers drawn from community networks, primarily of the Catholic Church, but also including members of other churches and some government services.

Stage 1: Program development and training

To support the scale-up and further expansion of P4CD a system of training needs to be established for a largely volunteer workforce with low formal education, sufficient to ensure that the program can be delivered by them with quality, consistency and integrity. In the participating provinces, a small number of staff with qualifications in social work, health care or education are available to play supervisory or coordinating roles. A minority of personnel have post-secondary qualifications. Most facilitators and team leaders have secondary education only.

After initial qualitative research in four provinces, an iterative process of consultation, training, resource development, planning and preparation for the pilot program was undertaken with key partners and nominated personnel from the participating provinces, Madang, Western Highlands, Jiwaka and Chimbu.

During the first stages, roles of personnel were clarified and personnel recruited. This was an important consideration in the design of the P4CD program. The content was intended for adult learners with limited literacy and to be taught by facilitators without professional education and training. For many of the facilitators English was a second or third language. A minimum standard of Year 10 education with good ability to read and write in English, were set as requirements for facilitators. People with prior employment as teachers or in other human services were also sought. Some facilitators had previous experience in implementation of the Catholic Church's Family Life program, which involved delivery of parent education in groups.

Consultation workshops focused on exploring processes of community engagement through church networks and on developing key messages for promoting the aims of the program and taking first steps to recruit parents for the pilot. Then major training workshops were planned to prepare personnel to use resources to implement the pilot program.

Specific objectives of the training were: to provide training in engagement, setup and delivery of the pilot program; to provide a basic introduction to child development and parenting; to identify specific facilitation skills and practices needed to run parenting groups; to assess the capacity of volunteer personnel to facilitate the program, and to develop skills in record-keeping and debriefing for the purposes of the pilot program.

Further, a review the processes for the pilot program with Coordinators and team leaders was conducted both midway, during delivery of the pilot program and again at program end. This was followed by further review workshops with Coordinators to refine program resources and approach to implementation.

Resource development

The process of consultation leading up to the pilot program had enabled the Menzies team to explore and test the appropriateness of themes and activities that would suit the context of PNG and the capacities of the volunteers who were to deliver the program to parents. The program has taken into account PNG's extreme language diversity and the lack of fluency and literacy in English among many parents and some facilitators. After the pilot program, partial translation of resource materials into *tok pisin* was undertaken to enhance accessibility of the resources. *Tok Pisin* is one of PNG's national languages and is widely spoken and written. However, it is not universally spoken and allowance has been made for translation of key ideas into local languages, referred to as *tok ples.*

Learning activities were trialled to assess their suitability for engagement of parents, many of whom would be unable to read written materials or engage in writing as part of the learning activities. For example, trainee facilitators were asked to develop role plays about children's behaviour. They constructed their own scenarios and acted them out. Ideas from these scenarios were then incorporated in program materials and illustrations used in the program. Some ideas developed through discussion or role plays with the trainee facilitators were rendered as cartoon stories that would be used as visual prompts for discussion between parents.

The creation of visual resources to be used as prompts followed to some extent a process of trial and error: at first, it was necessary to see how facilitators were likely to use the images, and then to adjust training in how to use them and in some instances to modify the visual images. Later training focused on learning how to use the visual prompts to elicit thoughts and impressions from parents, and to explore alternative meanings with them, using them to create stories allowing for more than one outcome and admitting different parental understandings of the content or scenarios described in the images. This style of engagement is unfamiliar to many, but is essential to facilitating inclusive group discussions with adult learners.

Development of resources thus occurred in parallel with identification of appropriate strategies for group facilitation and interactive learning which in turn were made explicit in the training program.

Training and resource development responded to the low levels of literacy of many caregivers attending the program by making use of visual materials and only limited use of activities requiring writing and reading. For visual prompts in resource cards and flipcharts, phrases have been rendered in *tok pisin* as a guide to the facilitators in their work. English is retained as the reference for the facilitator Guide which sets out the rationale and procedure for all sessions in detail. Most activity in the program is to be delivered in *tok pisin*. However, in many communities, it is also necessary to for facilitators to speak *tok ples*, the local language in which parents are likely to discuss topics and conduct their role plays. Training therefore focuses on explaining key concepts and processes (mostly in English) while discussing and practicing the delivery of the activities in a combination of English and local languages. Following the main training workshops, Coordinators and trainers have led local workshops to prepare for program delivery. At these workshops, the teams prepare their own materials on butchers' paper, using their own words and diagrams to illustrate key ideas or activities.

Specific techniques for group facilitation to assist low literacy participants included:

a) Using pictures laid out on a mat to facilitate discussions.
b) Writing key words in English or *tok pisin* on butchers' paper to highlight parents' ideas.
c) Resource sheets with phrases in *tok pisin* or space for writing down parents' own words.
d) Use of scenarios about parenting or child behaviour rendered as cartoon stories to convey concepts and stimulate discussion
e) Use of picture resource cards and cartoons for parents to develop their own stories and act them out as role plays.
f) Break up into small facilitator-selected or self-selecting groups to enable parents to link topics to their own experiences and report back to the whole group as stories or as role plays.

Program format and design

After extensive consultations it was concluded that the program could not be delivered in short weekly sessions, typical of programs in high income countries. Villagers participating in the program included many subsistence farmers who walked long distances and for whom weekly attendance at short sessions over 12 weeks was not feasible. Full day attendance at Church retreats and pastoral activities was familiar to most people.

After extensive consultation, a format of six full day workshops, each with a morning and afternoon session, to be delivered once a week over six weeks, was adopted. Each workshop consists of a morning and an afternoon session of two to three hours. The program would therefore cover a series

of 12 more or less discrete session topics. The size of each group was to be a maximum 20 parents to allow for attendance of both men and women and to enable sole parents to attend with a support person if required (for example a young sole parent with grandparent in support).

Parenting for Child Development: Key themes

Reviews of literature, findings of the qualitative research and consultations with stakeholders all informed the development of the thematic content and approach of the program.

The six-workshop P4CD program contains three major thematic areas:

1. Education about child development from birth through to middle childhood focusing on:
   a. Early brain development and the importance of security, stimulation and responsiveness from birth to five years within the context of family relationships
   b. Stages of development and milestones
   c. Impacts of stress, neglect and abuse on child development
   d. Play and children's cognitive, social and emotional development
2. A focus on child behaviour
   a. Parents use child-led play to understand their children
   b. Needs and reasons behind problem behaviours
   c. Positive parenting strategies that respect the child
   d. ACT don't react: a model for positive discipline
3. Parenting styles, emotional awareness and communication
   a. Parent's and children's emotions
   b. Distinguishing personal parenting styles
   c. Dealing with strong emotions
   d. Strategies for positive communication and problem-solving in families.

These Thematic areas are presented under an overarching metaphor of *the three signposts*. These are:

1. Seeing children's needs: *Luksave long belkrai bilong pikinini*
2. Building stronger relationships between parents and children: *Strongim wok bung wantaim papa mama na pikinini*
3. Developing parenting skills and knowledge: *Gutpela save na rot bilong lukautim ol pikinini*
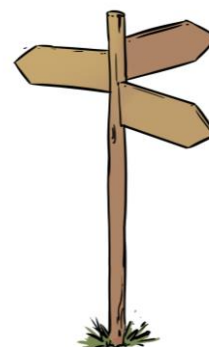
Area 1 provides information about the importance of early childhood development, including brain development from birth, and the importance of caregivers in providing security, responsiveness and psychological stimulation. The focus is on the whole family and the importance of all caregivers in supporting the child's growth and development. The activities are designed to be both high impact and engaging. They are accompanied by an exploration of neglect in terms of the absence of care, stimulation and positive response by caregivers, and the impacts of violence on the growing child. This leads to discussion of barriers to positive interaction with children. A focus on chidlren's needs at different ages is followed by an exploration of the importance of play for physical, cognitive and social-emotional development. Parent are given guidance in child-led play as a means of

strengthening relationships between parent and child.

Area 2 focuses on understanding that children's behaviour expresses needs and feelings and asks parents to see behaviour through the child's own eyes. Parental mindfulness requires an awareness of the child's needs and their characteristic expressions at different ages (Duncan, et al, 2009). This theme then draws on behavioural approaches based on social learning theory. These emphasise positive parenting strategies and alternatives to harsh physical and verbal discipline to reduce coercive interactions (Patterson, G., 1982; Portwood, et al, 2011). The focus is on identification of positive strategies that respect the child through stories and scenarios in which parents identify outcomes of different choices when responding to children's behaviour.

Area 3 then introduces a model for positive discipline: ACT, don't REACT. This requires that the parent can reflect on his or her own emotions and how they potentially shape the parent's response to the child's behaviour. The theme of parental self-observation and awareness of emotions leads to exploration of family relationships and communication. These activities and discussions are used as an opportunity for parents to review what they6 have learned and what they wish to continue to put into practice at home.

Stage 2: Evaluation of pilot program and scale-up

The qualitative research informed a process of selection of communities in Archdioceses where there was readiness to undertake the pilot program. Based on existing capacity and experience in delivery of other relevant programs, progress in recruiting personnel and in defining processes of leadership and engagement, 10 communities were chosen, five each in Madang and Mt Hagen Archdioceses. These were in part chosen for their accessibility to the two provincial centres, Madang and Mt Hagen to reduce logistical challenges.

After the consultation workshops that took place in 2017, teams commenced community engagement through church and community networks. They provided information about the aims of the program and took first steps to recruit parents for the pilot.

Training for the pilot program.

Two major training workshops were planned to prepare personnel to implement the pilot program. The program was held in three-week blocks with a three-week gap between workshops 3 and 4 with a review after each block.

Training for Workshops 1-3 was held in Alexishafen in early March 2017. Training for Workshops 4-6 took place in Goroka in April 2017. Each was attended by approximately 35 people in roles of Coordinator, team leader and facilitator. Each block of program delivery was followed by a review of implementation with Coordinators and team leaders.

Workshops were facilitated by Menzies personnel. The first round of training included training of research assistants who were volunteer staff and students from the Department of Social Sciences and Religious Studies at Divine Word University in Madang. The implementation of P4CD took place immediately after the training workshops.

The evaluation of the pilot program used both quantitative and qualitative methods to assess whether Parenting for Child Development was acceptable to parents, whether it was successfully implemented and whether there was change in parenting and family relationships after participation in the program. The pre-post design was stipulated by UNICEF before commencement of the project.

The quantitative measures adopted were:

1. Parent Discipline Scale. This 16-item scale is an adaptation and translation of The Parent Child Conflict Tactics Scale, short version (Straus & Mattingly, 2007). This instrument measures frequency of child maltreatment, including corporal punishment, verbal abuse and neglect.
2. A Family Wellbeing Scale. A 15-item scale designed to capture elements of individual and family wellbeing.
3. Parent Attitudes Items. A 7-item scale consisting of items identified during qualitative field research relating to parent attitudes and parenting practices.

These questionnaires were administered before the program began and again after the last workshop. In addition, parents were requested to provide demographic information about themselves, their children and families. Parental attendance in the program was recorded in diaries maintained by facilitators, which also provided a record of activities completed at each workshop. After completion of the program, a sample of parents was interviewed in focus groups to identify what they had learned from the program.

Findings

In February and March 2017, baseline data-gathering was conducted in a total of 10 communities, 5 in Madang and 5 in the Western Highlands and Jiwaka. In November 2016, training in selection criteria and community engagement was provided to facilitators and team leaders. Early in 2017, participants were recruited by facilitators to attend the pilot program, with the aim that between 15 and 20 persons who were caregivers of children from 3- 10 years in age would attend the six parenting workshops in each community over three months from March - May.

The total number of participants whose attendance was recorded was 223. Of these, 207 had provided evaluation data at the baseline meetings. At the end of the program, 159 persons with baseline data could be contacted to provide post-program evaluation data.

Table 1: Baseline, evaluation and participant samples

1. **Baseline sample**. Parents completing questionnaires at baseline: n =207
2. **Total workshop participants**: n= 223. (Persons attending 1 or more workshop sessions - includes 74 people who did not complete baseline questionnaires but attended sessions).
3. **Main evaluation sample.** Parents with baseline and post-program questionnaires: n=159 (n.b. includes 10 people who attended no workshop sessions)

The main reason for the discrepancy between the three samples was due to community expectations about the program which saw a surge of additional persons seeking to attend after the baseline data gathering was completed. They continued to attend and replaced some persons who had been initially recruited and provided baseline data. Coordinators in two highland provinces were

not able to resist pressure to attend the program. This highlighted the need for more comprehensive training in engagement and recruitment strategies.

Workshop Attendance

The program was delivered in the form of 6 full day workshops each with a morning session and afternoon session. Attendance was recorded for each half day sessions so that a total of 12 sessions was the maximum possible attended. As indicated, the total number of persons attending workshops was 223.

Over 67% of participants (157) attended 10-12 sessions, with a group of 27 who attended 6 sessions only, possibly influenced by the 3-week break in the middle of the program.

Attendance was affected by community violence, including some politically related violence during the latter workshops, and deaths that required absence of individuals for *haus crai,* traditional mourning observances. In one community, the homicide of a young person and ongoing tension between families necessitated steps to relocate the program. The two communities with lowest average individual attendance are in urban locations with heterogeneous populations including some immigrants from different regions. Less social cohesion may suggest less responsiveness to mobilisation through church networks. Variations in attendance thus point both to the impact of specific incidents and events and to community level factors in different contexts.

Attendance and retention in the P4CD program over 6 workshops are impressive achievements despite external influences that disrupted attendance from time to time. The two disadvantaged communities in the provincial capital, Madang, showed average attendance of between 8 and 16 participants over all sessions with participants attending on average a total of 7 and just under 9 sessions. This suggests that in some town settings, specific strategies of engagement and promotion need to be developed. Nevertheless overall, facilitators and team leaders have shown themselves able to achieve high levels of commitment to participation in the six-workshop program.

Socio-Demographic Characteristics

Of parents initially recruited to attend the program, 207 were contacted at initial meetings and consented to provision of baseline data. Due to the recruitment challenges outlined, the evaluation sample is reduced to 159 persons with both pre- and post-program data. The demographic characteristics of the baseline sample (207) were almost identical to those in the main evaluation sample (159) presented in table 2 below.

Of the 207 persons who provided data at baseline, just over 60% were female and just under 40% were male. The mean age of participants at baseline was 38 years: the youngest was 21 and oldest 56 years of age. There was variation in the age of participants across communities. One community program included a large group of grandparents, while in others most caregivers were in their twenties or early thirties.

Over 57% of participants had no schooling or primary school only and there was significant variation in education levels by community. In a majority of communities over 60% of participants had primary school or no schooling; only one community had a majority of parents with some high school education.

Similarities and differences between participants in the pilot study and the scale-up in 2018 will be further discussed in Stage 4 below.

Table 2 Program participants in 2017 pilot program

	Pilot evaluation sample 2017	
	N=159	
Age group		
<18	0	0%
18-25	16	10%
26-35	61	39%
36-50	54	34%
>50	28	18%
Sex		
Female	98	62%
Male	61	38%
	in	
Marital status		
Not married	11	7%
Married	140	88%
Polygamous	8	5%
Education		
No school	22	14%
Primary school	68	43%
High school	43	27%
Post-secondary	26	16%

Parents' report of factors associated with family wellbeing and harsh parenting at baseline

Selected responses to Family Wellbeing items at baseline suggest that there were concerns about the wellbeing of children and families, along with uncertainty about the adequacy of parenting.

- 30% of parents reported that their children were not looked after well, some or all the time.

- 60% of parents reported that children were not treated fairly, equally or with respect

- 80% of respondents reported having insufficient food or money sometimes or all the time.

- 30% reported feeling that they were unable to cope with work and family duties.

Parents reported numerous influences that potentially affected individual and family wellbeing:

- 80% of participants (both male and female) reported physical violence towards them by a spouse some of the time (70.4%) or often/all (9.4%) of the time.

- 80% reported violence between other adult family members some of the time (67%) or all of the time (13%)

- 71% reported behavioural problems, fighting, disobedience among older children sometimes (56%) or yes (15%)
- Just over 66% of respondents reported concerns about alcohol and drugs at home

Regarding use of corporal punishment, hitting the child on the bottom with a stick or belt in the last month - was reported by over 60% of parents some of the time (46%) or once (16%). Similar frequencies were reported for other kinds of corporal punishment with the number of parents reporting this "all of the time" ranging from 1.3-4.5%.

Corporal punishment was less common among older caregivers, but for this sample was positively associated with higher education levels and practiced by both male and female caregivers. Verbal abuse and psychological control were significantly associated with female caregivers, perhaps suggesting different parenting styles associated with a greater role for women in day-to-day discipline of children compared with male caregivers.

Changes in parenting practices

Analysis of parents' responses before and after the workshops found that there were statistically significant changes in parent discipline practices after participation in P4CD. There were reductions in all elements of harsh parenting, as set out in Table 3.

Table 3. Parent discipline practices: mean decrease in frequency of behaviours

Parent discipline practices	Mean decrease after workshops	t value	Cohen's d
Sent child to room or outside	.33	3.10*	.25
Hit child on bottom with hard object	.68	6.33*	.51
Shouted, yelled, or screamed at child	.73	7.61*	.61
Hit child on other part of body with hard object	.67	6.26*	.50
Spanked child on bottom with bare hand	.67	6.05*	.49
Swore or cursed child	.72	7.19*	.58
Explained why something child did was wrong	.17	1.79	.14
Threw or knocked child down	.33	3.68*	.30
Left child home alone	.50	4.04*	.32
Did not ensure child receive enough food	.45	3.06*	.25
Refused to speak to child	.43	3.95*	.32
Threatened to send child away	.51	4.65*	.37
Tied child up outside the house	.27	2.91*	.23

* $p < 0.004$

The analysis of these changes was applied to the groups of items or subscales referred to as corporal punishment, verbal abuse, psychological control and neglect (Table 7 below). Cronbach's alpha coefficients were acceptable for all but one of these subscales. There were improvements in each of these groups of parenting behaviours. The changes were most marked for verbal abuse, followed by corporal punishment, with smaller effects for psychological control and neglect.

Table 4: Changes in harsh parenting with effect size (n=159)

Scale	Behaviours	Cronbach's alpha	Mean decrease	t value	d value
Harsh parenting overall	All except 3	.91	.55	7.85	**.63**
Verbal abuse	Shouted, yelled, or screamed Swore at or cursed child	.83	.74	8.87	**.71**
Corporal punishment	Hit on bottom with belt or object Hit child on body with object Spanked on bottom with hand Threw or knocked child down Tied child up	.89	.52	6.48	**.52**
Psychological control	Refused to speak to child Threatened to send child away	.89	.47	5.01	**.40**
Neglect	Left child home alone Did not ensure child received enough food	.51	.48	4.54	**.37**

As shown in Figure 2, significant positive changes in all items for verbal abuse and corporal punishment occurred for both men and women. Change also occurred across age groups and different education levels.

Figure 2 Changes in parent discipline for female and male caregivers (pilot)
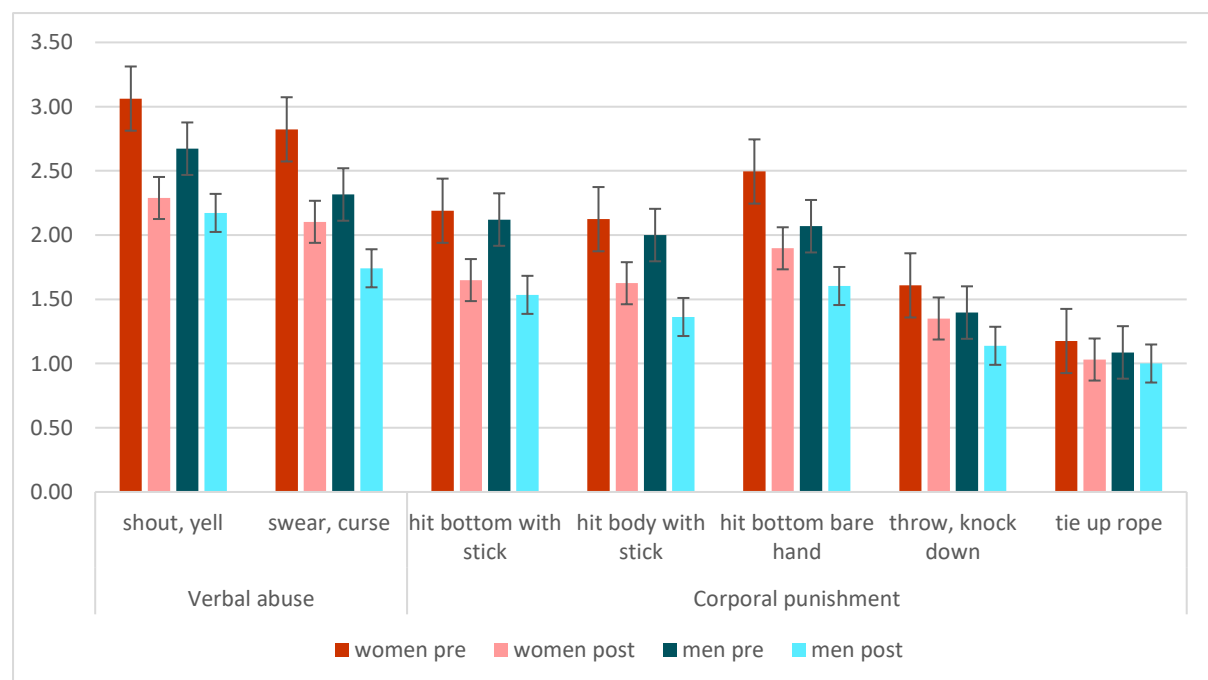
The vertical axis indicates the average of responses from 1-4 (never, one time, sometimes, always) for all items.

Closer examination of the differences in men's and women's responses to parent discipline questions shows that while different practices are reported by men and women at similar frequencies, there are indications of some differences in roles (See Appendix 2). Women appear to use verbal abuse and to smack children on the bottom with the hand somewhat more frequently than men, possibly pointing to women's daily responsibility for childrearing in the home.

Changes in family wellbeing

The evaluation also found that important elements of family wellbeing are associated with harsh parenting: family difficulties, such as fighting and conflict between older children, family violence between adults in the family, and between parents, as well as parents' individual stress and worry were likely to occur together with harsh parenting.

Table 5: Mean decrease in selected family wellbeing behaviours, on a 3-point scale

	Behaviour	Mean decrease in behaviour	t value	Cohen's d
1.	My spouse is physically violent towards me	.21	4.22*	.34
2.	There is not enough money in my family	.14	3.27*	.26
3.	My children are well looked after	-.20	-4.61*	.37
4.	I can cope with work and family duties well	-.12	-3.04*	.24

 * p < .003. Note that a negative sign for items 3 & 4 signifies positive improvement.

After participation in the workshops, there were statistically significant improvements in areas of family wellbeing including reductions in reports of partner violence, and improvements in items relating to looking after children well and coping with work and family duties (Figures 3 & 4). Changes in partner violence may reflect responses to explicit elements of program content focusing on conflict and violence and emotional control, as well as on positive communication. Less frequent reports of lack of money may point to a general sense of capability as parents, thus reducing the concern about financial hardship. Assuming that experiences of financial hardship did not change, this may also reflect a general tendency to favour positive responses after participation in the group.

There were significant improvements in positive aspects of parenting and family wellbeing. More parents reported that they provided good care for their children and that they were coping well, suggesting that the program may lead to improved parental confidence and sense of efficacy in caring for their children (Figure 4).

Figure 3: Changes in reported partner violence in reported lack of money, women and men
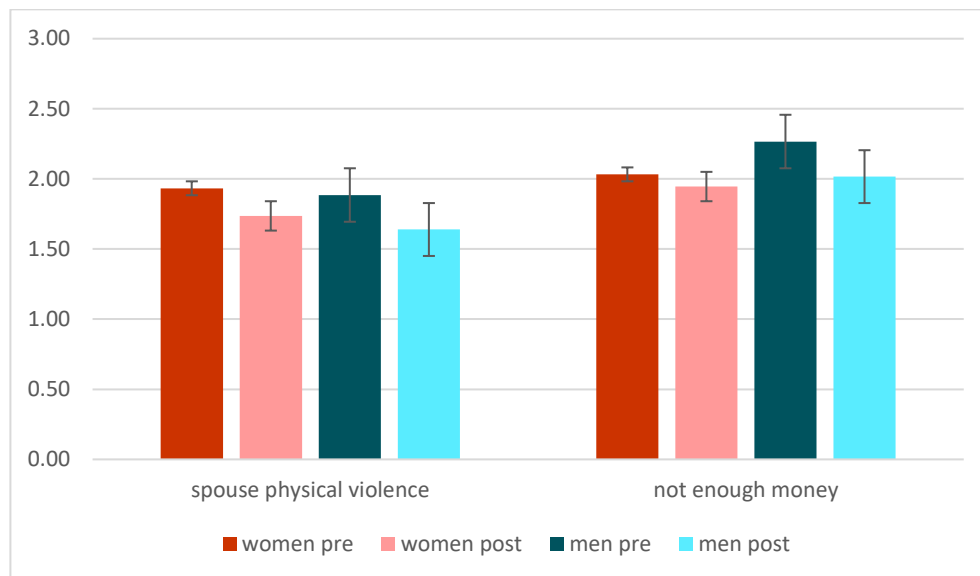
The vertical axis indicates the average of responses from 1-3 (no, sometimes, always).

Figure 4: Changes in perceived caregiver efficacy and coping
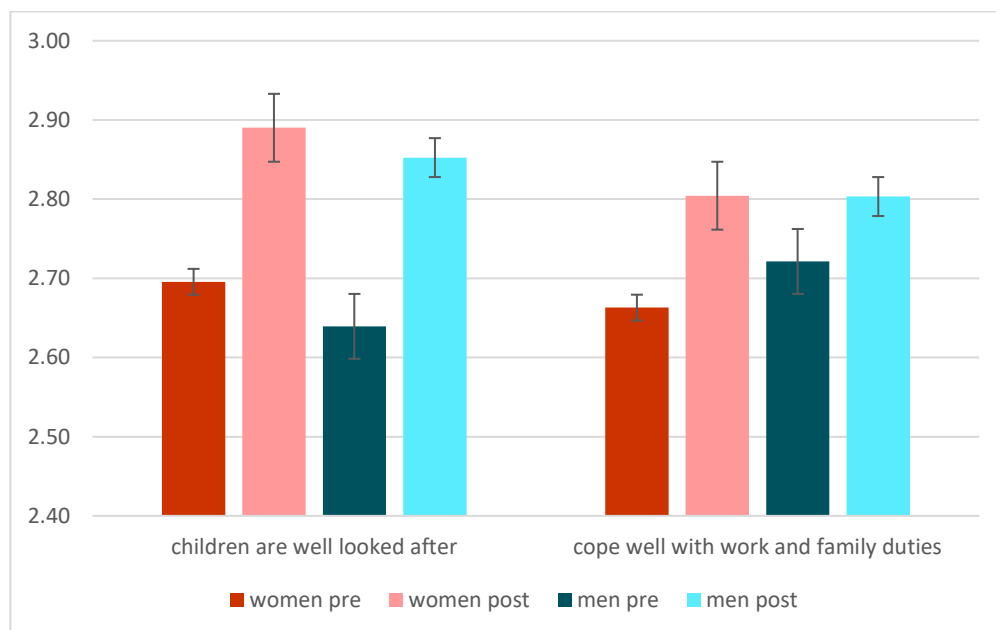
The vertical axis indicates the average of responses from 1-3 (no, sometimes, always).

Feedback from parents

Qualitative feedback from parents indicated a high level of satisfaction with the program and identified that some of the key themes of the program had been retained by parents, suggesting that it is potentially successful in facilitating parents' learning about parenting strategies.

This is evident in the correlation of harsh parenting with questionnaire items that reflect key themes of strategies within the program.

Table 6: Correlation of selected parenting practices and attitudes with harsh parenting after the workshops.

Parental attitudes & behaviours (n=159)	Correlation with harsh parenting after workshop
Children should be physically punished when they do something wrong	.35***
I play (games, have fun) with my children	-.21**
I always explain to my children when they have done something wrong	-.23**
I always take time to be with my children	-.06
Children should do what they are told, with no explanation	.07
I enjoy talking and telling stories to my children	-.06
When I am angry or upset with my children, I can calm down and think about what to do	-.30***
I help my children to understand the right way to behave without hitting or threatening them	-.27***
I praise, smile, tell children that I am pleased when they do well	-.04
I am proud of my children	-.19*
Having a good relationship with my children is important to me	-.25**

* p < .05, ** p < .01, *** p <.001

As identified in qualitative interviews after the program, parents responded positively to the learning about the importance of play, of taking time to be with children to understand their needs and feelings, and of the need to control their emotions when responding to their children.

Table 6 above shows that some parenting practices and attitudes were positively and negatively correlated with harsh parenting after participation in the workshops. It is logical that those parents who believe that children should be physically punished for wrongdoing would report higher frequencies of harsh parenting behaviour. The analysis also shows that those parents who said that they play with their children, explain reasons for discipline to children, and who were able to calm down and control emotions when angry with their children were significantly less likely to show high levels of harsh parenting. These associations suggest that the corresponding parts of the workshop program focusing on parental emotional self-awareness and explanation of reasons are likely to contribute to reported changes in parenting practices.

Summary of findings of evaluation of the pilot program

The P4CD program was first piloted in 10 communities from March – May 2017 with positive results. The program is for caregivers with children aged from 3-10 years. It is delivered by trained teams of volunteers and consists of 6 workshops, each a full day in length, one a week for 6 weeks. Groups of up to 20 parents attend the program.

Qualitative feedback during focus groups conducted in a sample of communities after the pilot program showed that P4CD was highly acceptable to parents and communities both in content and in format. Parents gave clear positive feedback about what they had learned and what for them were areas of new knowledge.

The feasibility of delivery of the program by trained volunteers who engage parents through church and community networks was clearly demonstrated. High levels of attendance and retention of parents confirmed their capacity to recruit and retain parents and to deliver the program while adhering to the format chosen. Information in diaries kept by facilitators and team leaders confirmed that over 90% of activities were completed as per the guide. However, reviews conducted with team leaders and coordinators did suggest that there was variability in quality of delivery that would need to be addressed in further training and ongoing mentorship.

Demographic, attendance and process data were well-recorded, indicating that it is possible to establish a reliable framework for monitoring and evaluation. Demographic data provided useful information to guide recruitment of parents within the target group. The analysis suggested that closer attention to recruitment of parents who were current primary caregivers of children in the target age range was needed. Some older caregivers who attended the program were almost certainly not the current primary caregivers of children aged from 3-9 years. About 60% of participants were women and 40% men. The high rates of attendance for both men and women clearly suggest that the inclusion of both male and female caregivers, alone and as couples was successful. Qualitative feedback suggested that both men and women were highly engaged with the program and were clearly able to identify areas of new learning.

Comparison of questionnaire data gathered before and after participation in the program demonstrated that the parenting program can lead to reductions in harsh parenting and violence towards children, and to improvements in family wellbeing and parent-child relationships. After the program family violence by both men and women partners was reduced.

Psychometric analysis shows that the questionnaires used performed adequately and suggests that, with further adjustment, reliable and valid measures of key outcome domains relating to parenting, family wellbeing, and children's behaviour and social-emotional wellbeing will be available for further research.

The findings of the evaluation of the pilot program are promising. They give confidence that it is possible to measure program effectiveness and suggest that investment in a rigorous research trial of P4CD would be amply justified if there is capacity to replicate implementation at scale. The expansion of delivery of the program to 27 communities in 2018 is discussed in following sections.

Implementation at scale

Stage 3: Training for sustainable implementation

This section outlines the training program, describes the current cohort of volunteer participants and assesses their readiness to continue delivery of the program. It then examines the effectiveness of training using quantitative and qualitative information derived from questionnaires administered

at pre- and post-program and from diaries completed by all teams for programs commencing after June 2018.

The P4CD approach to training

The key challenge for P4CD was to develop a program not only for parents with low literacy and education levels, but that could be delivered by volunteers with at least year 10 secondary education or better. The process of delivery of the program was designed to accommodate adult learners with low formal education and low literacy through an experiential learning approach (Cafarella et al, 1994; Kolb, D., 2015).

International research has established that it is possible for a lay, non-specialist workforce to be trained to deliver psycho-social interventions, such as mental health treatments and therapeutic or educational programs. There is promising evidence that interventions delivered by lay or non-specialist community-based workers in low resource settings can be effective in achieving a range of psychological, social and learning outcomes, although there are only a few examples of rigorous research into the effectiveness of such programs (Chowdhary et al, 2014; Mutamba et al, 2013). Moreover, it has been established that peer-led supervision is acceptable for lay practitioners and that it can contribute to maintenance of quality and consistency of program delivery to acceptable standards. This is a critical factor in ensuring the scalability of interventions in low resource settings (Singla et al, 2014). However, any system relying substantially on a lay community-based workforce must also contend with limitations in expert capacity to provide leadership on multiple levels. This includes not only expert supervision at the level of practice, but also active monitoring of quality of implementation and outcomes, and leadership in policy direction and coordination of institutional inputs (Kakuma et al, 2011).

Training in practice

After the successful pilot of P4CD, the challenge for Stage 3 of the P4CD project was to develop a training program that would see responsibility for training and supervision taken on by community-based personnel in PNG, with trainers drawn from among team leaders and facilitators who had been trained during the processes of development and piloting of the program. The training framework would consolidate their expertise in program delivery and enable a group of trainers to master multiple facets of the approach: specifically, to lead training workshops, to assess trainees and to supervise quality of implementation. This would also allow for delegation of supervisory functions previously only exercised by Coordinators, freeing them to provide higher level leadership and coordination as scale-up took place.

P4CD facilitators are trained to engage parents and to deliver the program using group facilitation skills based on principles of experiential learning (Kolb, 2015). This approach to training emphasizes learning through experience, learning by doing, and learning from the experience of participants. Trainers need to acknowledge the special characteristics of participants as adult learners, whether P4CD facilitators or parents attending the program. Specifically, they need to acknowledge participants' prior knowledge and experience, particularly as this relates to their families and children, and to engage with them accordingly. They need to be aware of differences in participants' individual styles of learning and to understand their need to be active participants in the learning rather than passive recipients of knowledge (Caffarella & Barnett, 1994).

The educator or facilitator needs to acknowledge the adult learner as a peer, as someone with standing and accomplishment based on relevant experience. This is important for successful engagement in the learning process. The connection is also formed by common experience and compassion. Thus, from a therapeutic point of view, the facilitator shows empathy with emotions, difficulties and even simple misunderstandings of parent learners, with the regrets parents may have about their own behaviour. At the same time, the educator or facilitator needs to be aware of the source of authority of the knowledge to be learned and to reflect on how this knowledge is to be communicated to adult participants and confirmed by them as part of their learning. This is especially true for new ideas based on research that may at first appear to challenge traditional knowledge or everyday practice.

The ability to draw on the pool of common knowledge of learner and educator is important for confirmation of the validity and relevance of the new knowledge to be learned; in this sense the educator or facilitator acts as a link, a connector between the experience of the learners and the knowledge and ideas that are brought from the outside and based on the authority of research. The group experiences of collaborative learning activity and joint reflection on the meaning of the activity or experience of learning are critical to this confirmation. In facilitation based on experiential learning, the educator/facilitator needs to be just as confident in management of the *process* of learning as in his or her understanding of the theoretical principles and evidence base of the knowledge to be learned.

Learning styles for adults: facilitators and parent participants

Experiential training assumes that adults come into a learning environment with life experiences, which they can build on through demonstration and sharing of information and ideas in peer-to-peer interaction, using discussions and role-plays in an environment which encourages active involvement, reflection, questioning and problem solving. This approach necessarily also needs to have regard for the different learning styles of participants. These are preferred ways of receiving and responding to information and assimilating ideas to existing knowledge and experience. In PNG these learning styles are shaped by experiences within the church, by experiences of formal education as well as by local social relationships and traditional structures of authority in communities and families.

These learning styles encompass styles of delivery of information and interaction between educator/facilitator and learner, and the engagement of each in the learning process. They also reflect deeper frames of meaning and belief that affect how participants respond to specific content and ideas. To develop the training program for P4CD, the developer has sought to identify and respond to these dimensions of learning in the specific socio-cultural context of PNG, and to adjust content and approach as themes emerged.

Initially, during first training, the facilitators tended to use visual prompts literally and didactically, to tell a story with a predetermined meaning and to end with recital of a strong and unambiguous moral message. In response, later phases of training have focused on using the prompts to elicit thoughts and impressions from parents, and to explore alternative meanings with them, using them to create stories allowing for more than one outcome and admitting different parental understandings of the content or scenarios described in the images. This is a style of engagement that is unfamiliar to many, but essential to facilitating inclusive group discussions with adult learners. However, feedback from the first round of delivery of workshops 1-3 within the pilot program was clear: parents were not

happy with facilitators who simply read to them from the text resources or lectured and preached, and who did not encourage parents to join in discussion.

The backgrounds and personal styles of participants influence their approaches to facilitation. Some have backgrounds as priests or catechists in the Church and may tend to "preach" when leading discussions; others with teaching experience or experience in advocacy around child rights may approach the task didactically using repetition and a lecturing style. Many trainee facilitators initially expect that the learner passively receives the message, and, correspondingly, seek to demonstrate mastery over content through strong didactic lecturing or speech with the aim of demonstrating what is "right" or "wrong". Including parents in conversation by using resources to prompt and elicit discussion takes familiarity with the material and ideas combined with training in specific skills of facilitation rather than teaching or preaching.

As the training program was developed, it was possible to focus much more directly and explicitly on specific skills required for group facilitation. However, it has also been possible to identify strengths that are helpful in delivering the program. For example, facilitators who have been teachers are usually very good at lesson planning and following a sequence. Their ability to prepare and manage activities is helpful for other team members. However, it can also be accompanied by a didactic emphasis on rote learning and repetition of messages, rather than active engagement of the participants in discussion. Storytelling and acting out scenarios in role plays were activities that many people enjoyed and in which they showed considerable skills, and so were incorporated in program activities along with guidance in eliciting messages for reflection as they were carried out. However, it has been important to provide specific guidance in using these techniques.

The tendency to lecture and read out messages to parents can be overcome by strengthening: 1) awareness of how to prepare for each workshop session building on basic knowledge of key concepts and ideas 2) understanding of specific group facilitation skills and techniques required for activities 3) knowledge of the rationale and messages for all activities to inform introductions, discussions and summarising of messages.

A training framework for implementation of P4CD at scale

The pilot evaluation report recommended that major training workshops for facilitators and team leaders should be provided twice annually: once following planning for the year's program delivery, with a second training provided mid-year, to enable additional facilitators and team leaders to be prepared for program delivery in new locations and to ensure that all facilitators could meet the target of two rounds of workshop training combined with practical experiences of program delivery.

As numbers in training increased, training of facilitators and team leaders to deliver P4CD was to be provided at a central location in each Archdiocese. Trainers would be responsible for in-service "refresher" training to prepare for start-up of the program and to provide support as required. Advanced training of trainers (TOT) for Coordinators, trainers and some team leaders would be provided at a central location; these workshops would aim to extend theoretical depth and knowledge of child development and parenting and advanced facilitation skills.

The core elements of the training approach are set out in the *Trainers' Guide for Facilitator Training* (2018). The *Trainers' Guide* sets out training and assessment requirements, training resources and training plan in two parts: Part One, a 2-day trainers workshop (training of trainers and preparation

for facilitator training) and Part Two, an 8-day workshop for facilitators and team leaders led by the Coordinators and trainers. All activities in the Guide are referenced to the other P4CD parenting resources covering 6 workshops: Facilitator's Guide, Flipcharts, Resource Cards and resource materials.

Training of facilitators to deliver P4CD involves interactive experiential training. Facilitators practice the delivery of the program, acting in the roles of facilitators as well as parents to ensure that they have practical experience of the different facets of providing information, leading activities, providing summaries of key messages and assisting parents to reflect on their own experiences through role plays, storytelling and discussion in groups.

During the training, trainees practice the skills of group facilitation by working in groups of 10-15 so that there is opportunity to practice all activities: some participants play the part of parents, others lead activities, while some take on the task of observation and giving feedback. Trainers allocate roles to participants to ensure that each person can practice all elements of facilitation. Observation and feedback is an element of the team leader role that is practiced during training workshops.

The minimum size of a training workshop should be 10 to 15 trainee facilitators and team leaders – equivalent to from 3 to 5 community teams, to ensure that there is an opportunity to practice activities as a group. A training group of this size may be relevant for starting up in new parishes. Smaller in-service or refresher workshops can be held at any time to help community teams with their preparation or to update and improve specific areas of skill.

Training options:

1. Large comprehensive facilitator training workshops for 30 – 50 facilitators and team leaders held 1-2 times per year at a central location
2. Small facilitator training workshops for 10-15 trainee facilitators and team leaders in a regional location (for example to start off a new group of parishes).
3. In-service training or refresher training for community teams (3-15 participants) to support their preparation or improve skills, held at any time.

The most efficient way to provide training to sustain existing programs and to support expansion of the program to new areas is through two major facilitator training workshops a year (Option 1). This enables team members to complete their second round of facilitator training, and new facilitators to start with their first, with trainers and team leaders also being assessed in their respective roles.

Overview of the system for training, implementation and capacity development

The *Trainers' Guide* and the *M&E Framework* set out the process for training, implementation and planning as follows.

1. The Coordination Group meets to plan for the program each year: it reviews and plans the work of teams, identifies communities where the program will be delivered, recruits new team members, plans training activities and provides reports to the Church and to UNICEF.
2. A first Facilitator Training Workshop is held each year
3. Team leaders and facilitators begin community engagement, recruitment of parents and preparation to start the program.
4. M&E pre-program data are gathered.

5. As the program is delivered – in one or more rounds each year - the Coordination group receives information recorded by the teams in Diaries and questionnaires for reporting.

Planning and training are held each year in a cycle that can be described as *Plan, Train, Do & Review*.

Figure 5 Plan, Train, Do, Review

| Planning & engagement | → | Team Training Workshops | → | Deliver Six P4CD Workshops | → | Review, Plan, Next Training. |

Training is led by experienced trainers and the Coordinators. Facilitator training is held twice a year in workshops in each of the provinces supporting the program. Workshops include specific components of training for team leaders. A record of attendance and completion of training is kept by the Coordinators, so that they can award team leaders and facilitators their certificates.

Training requirements

All candidates for the role of facilitator should meet general requirements of grade 10 education with good reading and writing skills and relevant experience. Prior experience in teaching, early childhood education, health or social services and in delivery of social programs is an advantage that coordinators should bear in mind when recruiting new personnel. Role descriptions are included in the *Trainers' Guide* (see Appendix 3).

Participation in training is a requirement for all facilitators and team leaders and other personnel involved in program delivery. It is expected that team leaders and facilitators will participate in a minimum of two training workshops, as well as practice their skills by delivering the program. This will enable them to acquire sufficient skills to independently lead the program.

For certification for each role there are both training and practice requirements: All roles require *both* attendance at training *and* on-the-job experience of delivery of the P4CD program as a facilitator. It is appropriate for a facilitator who has not yet met the training requirements to deliver a program provided the team leader has an appropriate level of experience and capacity to support the trainee(s).

Trainer:
- o Training: 1 X TOT training
- o Practice: 2 X facilitator training workshops as trainer
- o Practice: 1 X Deliver program as facilitator/team leader

Team leader:
- o Training: 2 X facilitator training workshops (minimum one as team leader)
- o Practice: 1 X Deliver program as team leader

Facilitator:
- o Training: 2 X facilitator training workshops
- o Practice: 1 X Deliver program as facilitator

The Facilitator Training Workshops

The Facilitator Training Workshops are described in the *Trainers' Guide for Facilitator Training* which sets out the agenda and activities for training of trainers, facilitators and team leaders. The Guide is intended to be comprehensive and to cover training in community engagement, planning, promoting the program and recruitment of parents for workshops; training in delivery of 6 workshops and training in gathering data for Monitoring and Evaluation (see also the *Monitoring and Evaluation Framework*).

The workshop agenda in the *Trainers' Guide* consists of a two-day Training of Trainers (TOT) workshop followed by an eight-day Facilitator Training Workshop (FTW), attended by trainee facilitators and team leaders and covering all phases of program delivery and monitoring and evaluation. Resource materials in the *Guide* include learning objectives, team roles and assessment and observation sheets for trainers and team leaders with detailed descriptors for each item (see Appendices 2 & 3); knowledge tests and learning activities; additional training resources on child development for each of the 6 workshops and information on monitoring and evaluation.

Training of Trainers

Trainers participate in an initial Training of Trainer (TOT) workshop over two days before the Facilitator Training Workshop. As part of their training they learn:

- To understand training and assessment requirements for facilitators and team leaders
- To understand team roles and tasks for implementing P4CD
- To prepare to run P4CD in communities:
    - community engagement and planning
    - key messages about P4CD and parenting programs
    - explaining the program to parents and selecting groups to attend
- To lead training of facilitators in the aims, key ideas and knowledge underpinning P4CD and facilitation skills for the six P4CD workshops
- To provide training to facilitators and team leaders in key elements of reflective practice: observation and feedback and in monitoring and evaluation of P4CD
- To assess workshop participants.

Trainers are expected to lead Facilitator Training Workshops and other training activities including in-service and refresher training delivered at the parish level. In consultation with the Coordinators, trainers share responsibilities for running the larger Facilitator Training Workshop.

As leaders of the workshop they:

- prepare for the workshop and ensure that all training resources are available
- introduce each session and explore major concepts and ideas
- lead training in smaller groups of 10-15 focusing on preparation, aims and learning objectives and practicing facilitation skills for all workshop activities
- delegate roles and tasks for participants during the workshop sessions
- observe activities and give feedback
- keep records of assessments completed during workshop sessions.

In addition to providing training at the major Facilitator Training Workshops trainers will provide local refresher training to assist groups with preparation for delivery of their workshops. Trainers

should also aim to observe at least one workshop for each team each year as a way of monitoring program quality and to provide mentoring and support to teams.

The role of team leaders in the facilitator training workshop.

Team leaders participate in all learning activities along with facilitators. They are required to practice skills of group facilitation. In addition, team leaders are assessed against criteria relating to their responsibility for observation and giving feedback to facilitators. They are asked to complete observations for at least one training session for each P4CD workshop on days 3-8 of the training workshop, using an observation sheet from their diaries, and to provide feedback to facilitators at the end of the session.

Other supervisory or supportive roles for team leaders include support and planning for community engagement, including leadership of meetings with community leaders, ward counsellors, service providers and village chiefs, and assistance with engagement and recruitment of parents to the program. These activities were the subject of role plays during the first two days of the training workshops. The meetings were usually presented as formal public meetings with team leaders taking on the role of explaining the Church's role in delivery of the program, the role of UNICEF, introducing the other members of the team and the aims of the program. Facilitators then would join in with further information about the program, providing key messages about the aims and benefits of P4CD, explaining requirements for attendance and answering parents' questions.

Assessment tasks for the Facilitator Training Workshop

Assessment is built into the training activities of the FTW.

At the workshop, assessment will be carried out by the Consultant (if present), Coordinators, and the trainers:

- o *Assessment of trainers (by Coordinators).* For the Trainers' (TOT) Workshop, Coordinators (assisted by Menzies or consultant) observe preparation and planning by the trainers, collecting their assessment sheets and providing feedback. Feedback is provided to trainers by the Coordinators throughout the 8-day Facilitator Training Workshop. This includes collation and review of assessments carried out by trainers during the workshop (days 3-8).

- o *Assessment of facilitators and team leaders (by Coordinators and trainers).*
  The trainers keep records of:
    - o Attendance at the training workshops
    - o Completion of specific training tasks for each workshop by facilitators and team leaders (Using Planning Sheets that specify which activities trainees are to lead and in what roles).
    - o Observation and rating of practices for each participant trainee using the trainers' Observation and Assessment Sheet copied from the *Trainers' Guide*.
    - o Written notes of group assessment activities using assessment materials. These are group tasks to identify gaps in knowledge.

For each participant, trainers should compile a record of attendance; successful participation in roles for all elements of group facilitation, and satisfactory levels of skills shown (using the observation/assessment sheet to record level of attainment for each workshop day of the FTW). At

the end of the FTW, the trainer should be able to give an assessment of +/- satisfactory attainment, with notes on any areas identified for improvement.

A participants' self-assessment sheet is provided for all workshop trainees to identify areas in which they feel capable and those in which they need more training to feel confident in their role.

Attainment and Certification

When team members have met the training and practice requirements set out above, they will receive a certificate of attainment of the role of facilitator, team leader or trainer.

- o *Assessment outcome:* Trainers and Coordinators complete assessments for each workshop day and produce a general result for all participants at the end of the workshop.
- o *Documentation of attainment (Coordinators).* Coordinators maintain a spreadsheet to enable them to determine when requirements for each role (satisfactory completion of 2 training workshop, and delivery of P4CD in the role) are met by individuals.
- o *Certificates* are awarded at the next available workshop.

On commencement of training workshops in 2018, no participants had fully met the criteria for their role and a majority of trainee facilitators were taking on training in their role for the first time. This includes the team leaders and trainers who were undertaking the demands of their role for the first time including their responsibility for observation and assessment of practices during the training workshops.

Training provided in 2017-2018

The training model outlined has been developed and trialled in 2017 and 2018 with participants from the three Dioceses, commencing with a Training of Trainers (TOT) workshop in Port Moresby in September/October 2017. This was attended by in total 45 participants from all Dioceses, including Coordinators, trainers and team leaders with some additional participants from the Departments of Community Development and Health. The focus was on providing information about the evidence-base for the 6 workshops and trialling methods for facilitation of training:

- o Training objectives; role descriptions, team roles; community engagement and recruitment
- o Core concepts and learning objectives underlying each workshop
- o Trial of workshop facilitation: preparation, skills development with team leaders

The TOT workshop was followed by two facilitator training workshops, one for Madang and Kundiawa and a second for Mt Hagen planned for February and March 2018.

Unfortunately, copies of guides, flipcharts and resources were not printed in time for these workshops in February and March. As a result, the first facilitator training workshop for teams from Kundiawa and Madang was held in Alexishafen in February with a reduced set of resources.

The Mt Hagen workshop was postponed until resources were available. It was held in May 2018 in Mingende, Chimbu province to allow participants from Kundiawa Diocese to repeat the earlier training alongside teams from Mt Hagen Archdiocese. A follow-up workshop for Madang was held in July 2018. Due to these delays in completing the training, program implementation did not commence until late in July 2018.

Personnel Participating in Training

Table 7 sets out the numbers of participants in each of the phases including the pilot program, TOT in Port Moresby in 2017 and the TOT and Facilitator Training Workshops in 2018. In total 104 persons participated in all available training workshops in 2018, in the roles of trainers, facilitators and team leaders. This includes Coordinators and Assistant Coordinators, acting as trainers. Chimbu first joined the training program in 2017 in Port Moresby, with 30 persons attending, 12 women and 18 men. In Madang, 35 persons attended, 19 women and 16 men. In Mt Hagen, 38 persons attended, 17 women and 21 men.

Table 7 Participation in pilot and training activity by Diocese (September 2018)

Role	Pilot Program	TOT Port Moresby 2017	2018 FT Workshops	Deliver P4CD in 2018
Facilitators	**20**	**40**	**64**	**50**
Madang	10	20	20	20
Chimbu	0	0	19	10
WH/J	10	20	25	20
Team leaders	**10**	**26**	**24**	**23**
Madang	5	11	10	9
Chimbu	0	7	5	5
WH/J	5	8	9	9
Trainers*	**2**	**17**	**16**	**15**
Madang	1	5	6	6
Chimbu	0	8	6	5
WH/J	1	4	4	4

*Includes Coordinators. Note that the total number of persons who have received training

Table 8 shows numbers of those participating in training and program delivery in 2018 who had participated in the Pilot program.

Table 8. Prior experience of 2018 training group

Role	Pilot Program	2018 FT Workshops
Facilitators	**19**	**64**
Madang	10	20
Chimbu	0	19
WH/J	9	25
Team leaders*	**14**	**24**
Madang	10	10
Chimbu	0	5
WH/J	4	9
Trainers**	**2**	**16**
Madang	1	6
Chimbu	0	6
WH/J	1	4

The table shows that for Madang and Mt Hagen Archdioceses, a core group consisting of Coordinators, trainers and team leaders had participated in training and the implementation of the workshops from the pilot program to the present. In Madang, Coordinator, Assistant Coordinator, trainers and team leaders participated in all training in 2018 and in delivery of the pilot program in 2017. Mt Hagen has experienced some turnover of personnel, and in 2018 had a new coordinator with limited exposure to training and no experience of the pilot program. However, 13 of the 2018 participants were in either team leader or facilitator roles in the pilot program and formed a core group able to provide the training and support implementation of the program in 2018.

The Coordinator group in Chimbu contributed to the development of the program in its early stages and, with some team leaders has now attended the TOT in 2017 and the repeated Facilitator Training Workshops in February and May 2018.

By July 2018, a total of 91 facilitators completed one of 2 required Facilitator Training Workshops. Most have subsequently completed delivery of one series of P4CD workshops by that time. In Madang, Western Highlands/Jiwaka and Chimbu almost all trainers and team leaders had completed at least two rounds of training including the Training of Trainers Workshop in Port Moresby in 2017 and the Facilitator Training Workshops held in 2018 in Alexishafen, Madang and Mingende.

In summary, from 2017-2018 a growing core group has been established which, with further training should achieve the capacity to sustain the program on an ongoing basis and to expand delivery of the program in 2019. However, new team leaders will need to be identified from the current group of facilitators and the group of facilitators in training needs to be continuously supplemented to overcome loss of personnel. Reasons for staff turnover are many, including changed employment or shifts in residence or other changes in family circumstances. Planning for training each year should anticipate the requirement to bring new facilitators into the workshops and to assess the readiness of facilitators in training to take on the role of team leader.

As indicated above, the large group of new facilitators recruited in 2018 requires a second round of training in 2018. In November, the Chimbu group have provided training for an additional 45 facilitators using new members of the training team with the aim of implementing the program in 15 communities in 2019. This is an inexperienced group of trainers, so that these facilitators and the work of the trainers should be assessed at the next available Facilitator Training Workshops in 2019.

Training assessment outcomes

The training for workshops 1-6 consisted of one day per workshop (*Trainers' Guide*, 2018, pp 39-69). Trainers introduced the aims, key concepts and objectives of the workshop to the whole group, and then broke up into smaller groups of 2-3 teams, that is, 6-8 facilitators and 3-4 team leaders, each group led by a trainer who facilitated intensive preparation for each session, and allocated tasks to the group whose members would practice all activities. Each activity is led by 2 facilitators, the remainder playing the role of "parents", with one team leader taking observations and keeping notes for feedback. The trainers aimed to ensure that all participants had the opportunity to practice facilitation skills for at least one activity in each session.

Trainers' assessments. Trainers were required to observe all training sessions for workshops 1-6 and to complete an assessment sheet for each participant in their group at the end of each day, with comments about specific issues and about levels of improvement over the 6 workshops. Descriptors

for each assessment item (expected facilitator behaviours for poor, satisfactory and excellent ratings) are provided in the *Trainers' Guide* (See Appendix 2, this report).

At the end of each training day, the consultant held feedback sessions with trainers to review their ratings of participants and to discuss examples they saw. By the end of the workshops, trainers had managed to complete at least partial assessment observations for all participants.

Review of the assessments showed that there was reasonable consistency between trainers in their understanding of the skills they were to observe and in their ability to identify most areas of improvement. However, this was their first experience with this task, and there remains a need for further training in the assessment procedure.

- o Key learning points provided in the *Trainers' Guide*, Part One: TOT (2018, pp 27-38) should be used by trainers to prepare for assessment and feedback during refresher training and for observations during quality assurance activity.
- o Trainers need further training and mentorship in their understanding of advanced group facilitation skills, in their ability to provide feedback to facilitation teams and in assessment of individual performance. A further TOT training workshop is required.

Team leader observations and feedback. *A*s part of their role, Team leaders are required to observe sessions, take notes and provide feedback during debriefing after each workshop. Those with prior experience during the pilot program and/or who had attended two or more training workshops were confident in completing diary notes and providing verbal feedback to facilitators during training.

Those with no previous experience (a majority) were not able to complete written notes and left their observation sheets blank, or included uninformative comment. It is evident that the role of team leader requires experience over a series of training and practice opportunities with explicit attention to their role, to build their understanding of good practice and their capacity to observe and provide constructive feedback.

Observation of team leader feedback provided to their groups during workshop sessions suggests that while many of them improved in their identification of points for improvement and provided positive feedback for tasks done well, the ability to differentiate areas for improvement and provide appropriate suggestions to inform practice needs further guidance and encouragement. Further training strategies may include demonstration of how to lead a reflective session with teams, providing opportunities for facilitators to give their own feedback to the team leader, rather than to just passively accept the comments of the latter.

- o Continuing attention is needed to develop reflective practices within teams by assisting team leaders to facilitate the feedback process and to keep records in diaries.
- o Team leaders can be included in some TOT workshops to improve the depth of their understanding of key concepts and the rationale for specific elements of practice.

After the conclusion of the Facilitator Training Workshops in May-June 2018, the UNICEF implementation coordinator attended refresher training in all provinces. She provided additional training targeting completion of the diaries. The effects of this training are evident in the information provided in diaries for the implementation of programs after July 2018, and will be discussed below.

Participant self-reflection. Themes emerging from facilitators' self-assessment sheets included:

- o Concern that they would not be able to answer parents' questions or challenges
- o Some expected that further training would help them become confident with some topics
- o Need to read the *Guide* more to better understand some key ideas
- o Further translation of material from the *Facilitators' Guide* would help teams to understand how to lead the workshops.

Facilitator diaries after the recent phase of implementation contain many comments that cover these and other points. Summaries are provided below.

Areas for development of skills and knowledge

Learning challenges. Trainers and Coordinators commented that between workshops, many facilitators appeared to have forgotten important ideas and the process and rationale for delivery of some activities. This suggests that, while personnel may be able to practice activities using resources and to successfully lead activities, they still lack understanding of key concepts and the rationale for the activities. There is thus a need to strengthen training in key concepts to ensure that the rationale for activities is better understood.

- o An additional training day focusing on introduction to key concepts of child development can be added to the 10-day facilitator training workshop program.

It has been observed that when there is a gap between training and implementation, preparation and delivery of the program suffers. This again suggests that the independent capacity of many facilitators to understand the guidelines and activities without guidance from trainers, remains limited. For this reason, practice workshops (refresher training) with small teams to prepare for delivery of the program are a continuing requirement, particularly for less experienced personnel.

These challenges are most pronounced for facilitators with lower levels of formal education and literacy. At review with Coordinators, it was suggested that continuing reinforcement of literacy standards and expectations is needed. Recruitment of new personnel should aim at those with appropriate levels of literacy minimum year 10 and preferably better. During preparation for delivery of the program use of the English language resources is to be maintained as the basis for translation. Translations are helpful with parents, but should not be at the expense of encouraging facilitators to develop their understanding of key concepts and ideas.

Key learning points: concepts and styles of parenting

It was noted above that learning styles of facilitators s are shaped both by their background experiences as teachers or as members of the church, or other frames of understanding grounded in community life and family upbringing. As was evident in the qualitative research and parental feedback from the pilot program, for many people, a strong notion of hierarchy and respect defines the place of children. One mother said that it was new for her to consider her children's feelings, and remarked: "I used to think, I am the parent and they are the children."

For many facilitators too, similar understandings influence their readiness to grasp some of the key ideas underpinning workshops, and limit their ability to transmit them to parents.

Child-led play. For example, Workshop 3 draws on therapeutic uses of child-led play, aiming to encourage parents to watch and listen as children play in order to understand their thoughts and

feelings. Improvement in listening, watching and understanding can help to bring parents and children closer together. Many parents have given very strong positive feedback about this topic. However, it can be difficult for some trainee facilitators to accept.

> For example, a cartoon in Workshop 3 shows two scenarios: one in which a father is harshly dismissive of a child's play (drawing on paper with pencils) with the result that the child walks off upset while the father looks annoyed; another in which a father watches admiringly, does not interrupt and allows the child to explain what he is making with his hands. Parents are asked to explore the outcomes for the feelings of parent and child and for their relationship for the two scenarios.

> When asked to role-play a scenario involving parent and child playing together, one group depicted a child drawing as in the first cartoon. The father intervenes to stop him, because the child is drawing on the bible; then the father gives the child some other paper to use, and walks off leaving the child to draw by himself.

> This group has interpreted the rationale for a father to show interest in his child's play in a specific way: the father intervenes because the child is doing something wrong. He tolerates the child's play, once the child has been corrected and prevented from damaging the bible.

> The leader of this group (and father in the role play) is a former school principal. For him, when adult and child interact the adult is right and the child needs to be corrected; there is no lessening of social distance through play, because there is no play together. He feels that he has done something positive, because he has not hit or shouted at the child for marking the bible, but has given him an alternative to his incorrect play and has allowed him to go on playing. The construction of the scenario – child is making a mistake and needs to be corrected – leaves little room for insight into what could be learned together if the adult takes time to watch and observe in a positive way.

In this example, the group leader showed little interest in making time for positive, non-judgemental interaction with a child, without the need to assert authority. This is an example of a deeply held predisposition towards a style of authoritative interaction with a child which led to difficulty in grasping the rationale for a specific topic. Such a rigid style may point to difficulties for some individuals who do not adapt well to the style of learning promoted in the program.

Key learning points in the *Trainers' Guide* aim to help trainers to work with facilitators on this kind of misunderstanding of content: for example, how to understand the concept central to the topic; how then to select examples or scenarios that are appropriate for that topic and, finally to use the scenarios to explore the different facets of a challenge with parents: in this case, how to make time to be with children and to observe and support children's play.

Observation and review: preparation for program delivery

A focus for the refresher training or "practice workshops" is to ensure that teams understand and can deliver the key messages and ideas in local languages. This has involved further translation and innovation in creating resources that can be used for discussion in the first workshops.

Case example from Coordinator's report: In July 2018, the Coordinator in Kundiawa Diocese attended refresher training/preparation. He noted the tendency for parents (and facilitators) to understand

child development in terms of physical development only. Facilitators needed to spend time explaining social-emotional, cognitive and moral development. "Gro gut" is not just about physical health and development, but must be understood in terms of all four domains.

The team used butchers' paper to translate and explain these messages (Figure 2).

Figure 6. Translating domains of development for a workshop
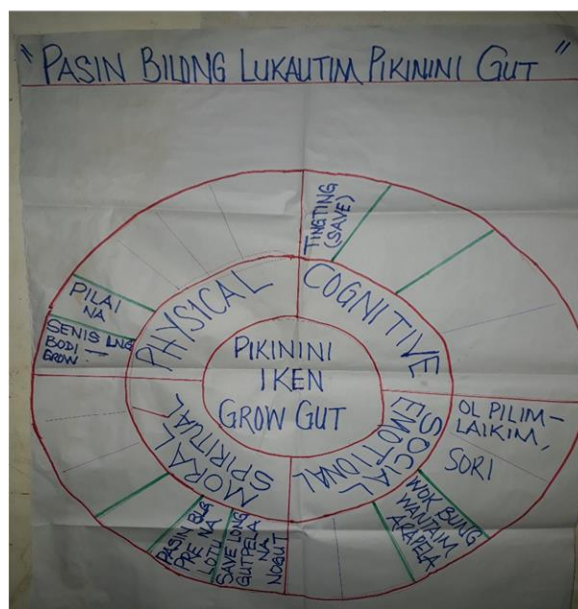
The Coordinator noted numerous examples of improvisation in using and developing resources to translate key ideas to parents in the first workshops.

However, the Coordinator also noted examples of areas needing improvement:

- o 'Home activity (set at the end of each workshop and discussed at the beginning of the next workshop) is often not discussed fully and needs to be fully utilised

- o 'Connectivity: linking one session to the next including linking the activities is often missing.

- o 'It is very evident that facilitators can be misled in the English language where key messages are sometimes misinterpreted. Consensus and agreement on key messages, explaining its meaning is needed during the practice P4CD workshops. The pidgin interpretation of the key messages is a key tool for the facilitators to use during the workshops.

- o 'Check in': facilitators worried about delivering the sessions may overlook participants' understanding of the workshop. The facilitators must check in with participants to see if they had understood the sessions.

- o 'Home Activity can be a measuring tool to understand the level of parents' perception of the workshops being delivered. Home activity measures the outcome of the workshop. Home task/activity is an opportunity for peer learning. Participants can learn from each other as they get ready for home activity and discuss when they come back next session.

For the Coordinator, the emphasis on home activity is important in two senses: firstly, giving parents home activity and explaining the task to parents fully at the end of the workshop is an indicator of successful facilitation and transmission of key messages to parents; secondly, checking in with

parents at the beginning of the next workshop to discuss how their home activity went is an important activity for parents to motivate each other and learn from each other. It gives facilitators the chance to see how parents have understood the lessons, and to reinforce parents' efforts to put ideas into practice with their families.

This example highlights the need for ongoing attention to training and preparation as the foundation for quality implementation. However, the responsibility for this input cannot rest with Coordinators alone, but needs to include trainers and team leaders.

Quality Assurance

The Quality Assurance strategy for P4CD was established with the following elements/activities, with different personnel responsible for specific tasks of observation and review:

- o Assessment of practice at Facilitator Training Workshop by trainers & Coordinators (See *Trainers' Guide for Facilitator Training June 2018*, Part Three: Assessment)

- o Refresher training facilitated by trainers and Coordinators: ensuring that facilitators can effectively translate their training into practice.

- o Periodic observations of session delivery by Coordinators and trainers (at least one session/workshop per program) using trainers' Assessment Sheets (*Trainers' Guide*, Part Three: Assessment)

- o Observation, debrief and feedback by team leaders (See *Trainers' Guide,* Team leader assessment sheets and *team leader diary*)

- o *Facilitator diary* and *team leader diary*: notes on completion of activities; debrief notes by team leaders and facilitators.

- o *M&E Framework*: data on attendance, demographic information and parent feedback.

Capacity to review the information compiled by team leaders and by trainers during periodic visits to observe workshops needs to be established. It is proposed that the process of review and quality assurance be led by the trainers' group and overseen by a master trainer in each diocese.

Table 3 summarises Quality Assurance activities, tasks and roles. The information gathered should be compiled and reviewed for reporting to the Coordinators' group. At present the processes of gathering and compiling data are assisted by UNICEF with analysis and reporting for review and planning processes carried out by Menzies.

Table 9. Quality Assurance Framework

Task	Key Questions	Timing	Who gathers the data?	Indicators
Process and QA			**team leaders and facilitators**	
Readiness & engagement	Community engagement; parent recruitment	Before start: parent contact sheets, promotional material	team leaders and facilitators record contacts in diaries	Appropriate information provided Parents informed & recruited
Monitor workshop delivery	Is the program delivered as intended?	**Diaries:** Weekly records of planning and debriefing.	team leaders & facilitators record information in Diaries	Time, parent attendance; activities completed; positive engagement.
Parents pre- program questionnaire	Demographics; child and family relationships	Before first Workshop	Assistant Coordinators; team leaders	Parent age, gender, education, children age, etc.
Parent feedback	What did parents learn? What did they like/not like?	After final workshop	team leaders & facilitators	Positive/negative feedback
Effectiveness of training			**Trainers/Coordinators**	
Facilitator Training Workshops	Is there learning of key competencies by facilitators/team leaders?	At training workshops	Coordinators/Trainers	Knowledge & competency test. Assessment of practices.
Refresher training workshops	Are teams prepared for program delivery?	After training before commencement	Coordinators/Trainers	Preparedness; key messages; linking/flow; translation, etc.
Periodic observations of program delivery	Is the program delivered with quality practices?	Direct observations and photos; 1 workshop per site	Trainers	Quality practices, management of activities; parental engagement, inclusion, etc.
Review	Is the program delivered with consistency and quality?	All data	Coordinator group	Report against key indicators

Stage 4: Monitoring and evaluation of program scale-up

A system for monitoring and evaluation (M&E) of the implementation of P4CD was established to ensure that the program is delivered with consistency and quality and therefore to give confidence that the program continues to achieve desired outcomes. A detailed protocol for M&E is set out in the P4CD Monitoring and Evaluation Framework (2018).

Logistical challenges and delays in resources impacted program implementation and training numbers for 2018. However, as indicated above, from February to July 2018, training was attended by a total of 129 participants from 4 provinces in two major workshops with additional follow-up sessions due to incomplete training in February. Of these participants, 104 persons completed the required TOT and Facilitator training, with some unable to complete the follow-up workshops. The training was substantially led by Coordinators, Assistant Coordinators and trainers over 8 of each of the ten-day workshops, mentored by the Menzies consultants.

From July-November 2018, P4CD was delivered in 28 sites in Chimbu (Diocese of Kundiawa 5 sites), Madang (Archdiocese of Madang, 10 sites) and Western Highlands/Jiwaka (Archdiocese of Mt Hagen, 13 sites). All sites successfully completed the delivery of the six P4CD Workshops. Pre-Program demographic data on all attending parents were recorded by team members in a meeting before the commencement of workshops. Facilitators and team leaders recorded attendance for all sessions in their diaries, recorded completion of all activities and kept notes of team debrief sessions.

Short versions of the outcome measures (e.g. harsh parenting and family difficulties) as used in the pilot program were adopted to monitor key outcomes. Parental attendance and completion of delivery of session activities were recorded in by facilitators and team leaders in their diaries which were later collected by UNICEF and Menzies.

Attendance and participation

Team diaries recorded numbers of participants for all sites over 12 workshop sessions (see Appendix A, Table 12 and Figure 11). Participation in Mt Hagen (for 12 sites) averaged over 17 participants per workshop overall and ranged from an average of 19 participants in workshop 1 to 16 participants in workshop 6. In Madang, an average of 16 participants in 10 sites attended workshops overall, ranging from 18 to 16 in workshops 1 and 6. In Kundiawa (5 sites) an average of 15 participants attended workshops overall, ranging from 17 to 12 participants from workshops 1-6. Two programs in Kundiawa experienced a larger drop in numbers, from 18 to 13 and from 17 to 8 participants.

While overall, the level of attendance and retention of parents in P4CD is very high, variations from site to site give rise to questions regarding recruitment strategies, experience of teams, and the specific social characteristics of different communities and locations. Detailed discussion of variations in attendance and the characteristics of participation in different sites is provided below.

Participants

Socio-demographic data on participants were gathered as per pilot program, with an additional item on caregiver's main occupation. A total of 509 participants were contacted pre-program and

provided demographic data. Characteristics of this group are compared with those of the pilot program in Table 10 below.

Attendance records for each workshop session were kept by team leaders and facilitators in their diaries for all 28 sites (only one set of diaries was not available for inclusion in the analysis). In addition, a short questionnaire consisting of 2 items each from the parent attitudes, family wellbeing and parent discipline questionnaires from the pilot program was administered by the UNICEF Coordinator and assistant coordinators and other team members in each diocese. Data from all sources were transferred to the Menzies research team for entry and analysis.

Table 10: Comparison of pilot participants in 2017 and participants in 2018

	Pilot evaluation sample 2017 N=159		Scale-up sample 2018 N=509	
Age group				
<18	0	0%	1	0%
18-25	16	10%	60	12%
26-35	61	39%	257	50%
36-50	54	34%	165	32%
>50	28	18%	26	5%
Sex				
Female	98	62%	312	61%
Male	61	38%	197	39%
	in			
Marital status				
Not married	11	7%	54	11%
Married	140	88%	431	85%
Polygamous	8	5%	24	5%
Education				
No school	22	14%	58	11%
Primary school	68	43%	259	51%
High school	43	27%	149	29%
Post-secondary	26	16%	43	8%
Occupation	NA			
Government			31	6%
Other organisation			21	4%
Farming/market			337	66%
Unpaid work			79	16%
Volunteer			40	8%
Student			1	0%

Table 10 above shows that the demographic characteristics of participants at scale up were close to those of the pilot program. Numbers of males and females are almost identical. There is an increase

in participants with primary education only, no doubt reflecting the increased number of remote communities from Mt Hagen and Kundiawa joining the program. There is a reduction in the age of participants, which shows a significant increase of younger caregivers and a decrease in the number of caregivers aged 50 and above. This almost certainly reflects the impact of further training in recruitment and better targeting of the program to primary caregivers of children aged 3-10 years since the time of the pilot program.

The additional item on participants' main occupation showed that only 10% of participants were in paid employment with government or another organisation. Two thirds worked as farmers or in markets, while 24% stated that they were in unpaid work and church or community voluntary work.

Monitoring outcomes

To provide an indicator of outcomes, a short 10 item questionnaire was constructed based on instruments used for the pilot program. Due to resource constraints, the questionnaire was only administered in only 13 communities across the 3 Dioceses. There was in addition substantial loss to follow-up (from 240 at pre- to 101 cases at program end). Analysis of data from this reduced sample of communities is provided below.

The trends in responses to all items and changes after participation in the workshops are comparable to those recorded in the pilot program. Significant change was recorded in 5 of the 10 items. These included items on family wellbeing (violence by spouse) and harsh parenting (Spanking children on the bottom and swearing at or cursing children) which all showed reductions between pre- and post-program.

Figure 7 Mean changes in violence by spouse and harsh parenting pre- and post-program for men and women
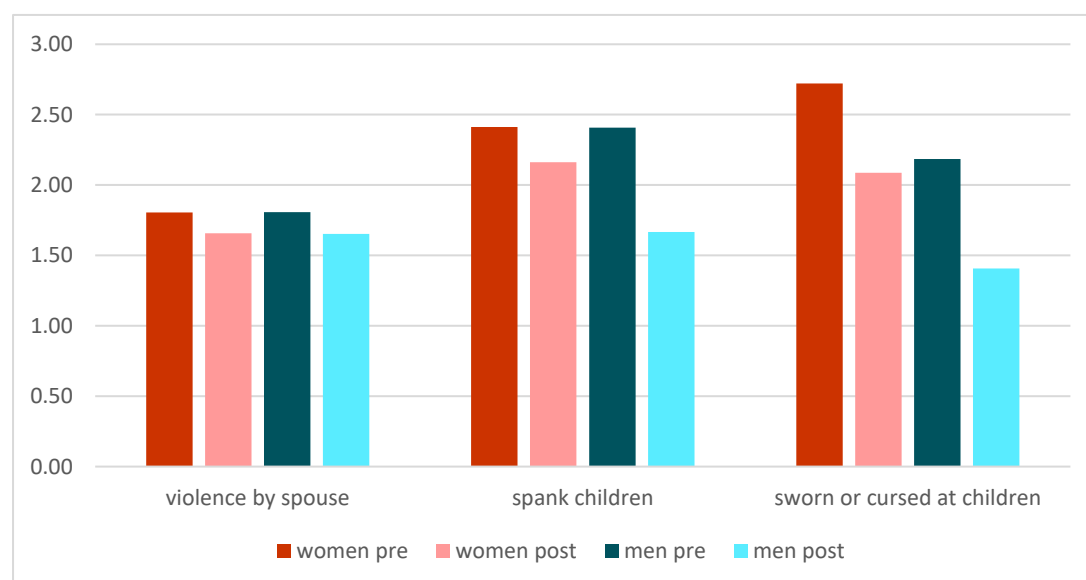
The vertical axis indicates the average of responses from 1-3 (no, sometimes, always) for violence and from 1-4 (never, one time, sometimes, always) for spanking and swearing.

Examination of these responses by gender shows that both men and women reported violence by a spouse, with more women overall reporting violence by spouse *sampela taim* and slightly more men reporting violence by spouse *olgeta taim*.

Figure 8 shows that both women and men less frequently reported violence by their spouse after the program with a substantial increase in numbers reporting no violence at all.

Figure 8 Frequencies (%) of reported violence by men and women pre- and post-program
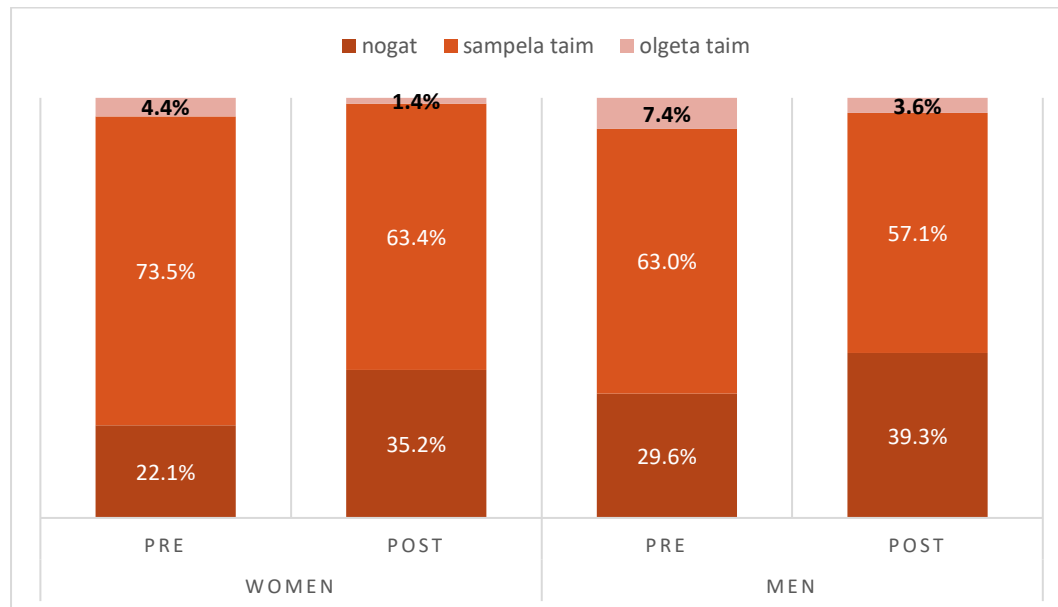
Statistical analysis

In addition to changes in reported violence by spouse and changes in corporal punishment and in verbal abuse there were changes in two key parental attitudes, 'Children do things to annoy me' and 'It is necessary to physically punish children when they have done something wrong.' Changes were recorded for both women and men.

Factor analysis of responses to all items identified one factor consisting of four items with an acceptable Cronbach's alpha of 0.68, referred to here as *Negative to child* (items pa21 children do things to annoy me, pa31 it is necessary to physically punish a child, pd11 spanking the child with the hand and pd21, swear at or curse the child).

Paired t-tests indicated significant change in these four items ($p<0.05$) and in violence by spouse. Cohen's d was calculated to represent the effect size. The magnitude of the effect ranged from medium to large effects. The composite scale, *Negative to child*, (items 1-4) has a large effect size (*d*=1.166). These are stronger effects than for the pilot program.

Table 11 Change in 'negative to child' items and violence by spouse with effect size (n=101)

Item	Mean change	Std Deviation	Sig. (2-tailed)	Cohen's d
1. Children do things to annoy	0.158	0.561	0.005	0.564822963
2. Necessary to physically punish	0.327	0.763	0.000	0.856435352
3. Spank	0.389	1.240	0.003	0.628063714
4. Swear at or curse child	0.674	1.284	0.000	1.049655336
5. Violence by spouse	0.151	0.607	0.019	0.496040762
Items 1-4 "negative to child"	0.38366	0.65818	0.000	1.16582503

Summary of quantitative findings: Outcomes of initial scale up

Data gathered as part of monitoring and evaluation shows that at scale-up, recruitment of parents of children aged from 3-9 years resulted in a younger cohort of caregivers than had participated in the pilot program. This reflected better understanding of recruitment criteria and strategies for engagement after training in 2017-2018.

Overall, very high levels of attendance were achieved, with some variations across sites. Overall, in the newly participating province of Kundiawa, there was more variability in attendance and somewhat lower retention, reflecting in part inexperience of teams and in part specific challenges in engagement of parents in two programs.

Outcomes were monitored using short versions of questionnaires in a sample of sites. These showed strongly positive outcomes in reductions in indicators of harsh parenting and improvements in indicators of family wellbeing. These included reductions of family violence as reported by both men and women. Effects were at least equal to or exceeded those of the pilot program.

Results suggest that the program continues to be effective in engaging parents and in transmitting key messages relating to parenting and family relationships.

Interpreting process outcomes of scale-up in 2018

This section provides a qualitative exploration of diary material with some comments from a review of implementation by Coordinators convened by UNICEF in Port Moresby in November. The aim is to assess outcomes of the training program as reflected in the diaries and to identify priorities for strengthening future training. This information will also be used to clarify needs for support of teams. The section begins with a summary of themes emerging from an inspection of records relating to patterns of attendance in 28 programs delivered in the three Dioceses.

Overview of attendance as recorded in diaries

As outlined, attendance at P4CD across the 28 sites was high overall, with variations in workshop attendance in some sites which experienced somewhat lower retention of parents. The following discussion of these patterns of attendance is based on notes on attendance in team leader and facilitator diaries and subsequent discussions with coordinators.

Pilot program in Chimbu

From July – November 2018, the Chimbu teams implemented P4CD for the first time in five communities. There were some differences in attendance across communities with two programs recording 100% attendance, and others recording somewhat lower attendance. In Mingende, 8 parents dropped out of the program after attending the first 3 workshops. Of the parents who remained, full attendance was achieved. In Dirima, a program based at the local school early childhood centre, three of twenty parents dropped out after the second workshop, with some others recording absences for one or more workshops. Team leaders did not record follow-up with parents afterwards.

Reasons for absence noted by team leaders ranged from economic pressures to attend sales of produce to companies, inability to leave stock or children unattended and similar concerns. The Mingende team leader reported in his diary during the last Workshop: "Participants were a little bit restless, hoping to go out for the sale of crops to a local company, and for collection of seedlings". There was disruption of another workshop due to a clash with an intensive child health clinic that many parents wished to attend. At Goglme, due to postponement of one workshop and concerns about parental attendance, Workshop 5 was planned to be held at night: in fact, the first session was held from 8.30 in the evening and parents returned for the second session at 10.30 next morning. According to records, attendance did not suffer as a result. In Dirima, Mingende and Goglme, parents expressed the expectation that they would be fed lunch rather than provide it themselves, while some others asked about or expected a cash payment for attending the program. At Goglme, the parish priest allowed some food to be provided from the parish kitchen.

Parents at Dirima compared recent experiences with other NGOs who provide cash or food to encourage attendance at short term programs, criticised UNICEF and Menzies for failing to provide food and payments. Nevertheless, in Dirima, some parents returned to the program after missing one or two workshops, so that despite the criticisms and withdrawal of a small number of parents, half of the group of 20 participants had near 100% attendance with another 4 parents attending 4 of the 6 workshops or better. At Goglme, from a total of 20 originally agreeing to attend, 18 continued: all sessions were attended by 13, and only one workshop was missed by the other 5. Despite the pressures and criticisms encountered by the teams, this remains a creditable achievement on the part of novice facilitators.

Factors affecting recruitment and attendance. Mingende is a community on the highway to Kundiawa in Chimbu. Residents living on the highway are people from diverse backgrounds, many of them migrants from other areas of PNG. They tend to be mobile and assertive and not necessarily as accepting of the influence of community networks of the church as residents in other remote parish communities. As noted in the pilot program in 2017, other communities like Gum and Wagol Ficus in Madang share similar characteristics in that they are mixed communities with migrants from various regions, with higher local mobility and somewhat less social cohesion. These communities too had

lower levels of attendance than in most others, but were still able to achieve high levels of participation for a majority of parents.

Summary. The five pilot programs in Chimbu achieved high levels of attendance overall with some variations in specific contexts. These variations point to a need to develop strategies for specific communities which may be less cohesive and less responsive to mobilisation through church networks. There are also different cultural influences between regions that may affect expectations of parents. For example, demands for cash or in-kind compensation for economic loss may be more prominent in the highlands provinces like Chimbu than in coastal regions like Madang. Facilitators in these regions might find it difficult to respond when challenged by parents about compensation for the giving up of time, work or economic loss associated with attending the program.

On review, coordinators were confident that with further training and experience the drop-out or uneven participation of some parents could be reduced. Strategies of engagement and recruitment of parents to the program should anticipate demands for money or food and clarify these matters during recruitment meetings so that parents are informed in advance of the requirements and support by the parish. As suggested by some team members and trainers, it is explained that P4CD is an opportunity to learn knew knowledge that is provided free of charge. Coordinators felt that the adverse comparison with NGOs that provide cash or food would cease to be an issue as the ownership of the program by the Church and community became clear, and was reinforced by clear explanation during the recruitment phase. With experience, team leaders and facilitators should become capable of dealing with these challenges. After consultation with their Coordinators and with agreement of their parish the teams will consider how best to provide morning tea and lunch for parents.

Attendance in Western Highlands/Jiwaka & Madang

High levels of attendance and retention were achieved overall. In many cases, attendance of close to 100% - that is attendance of all 12 sessions by a large majority of participants - was recorded. In other cases, there was from 70% to 100% attendance with reasons for absence such as sickness or other circumstances stated.

As in Chimbu, there were variations across individual sites that reflected a range of social differences. These may reflect differences in the composition of the communities concerned, as well as differences in the strategies used to target and engage families in those communities through church networks. These remain to be further explored.

Western Highlands/Jiwaka. P4CD was implemented from August – November in 12 sites in 11 parishes. Attendance varied across sites. In one community, (Togoba Parish), of 17 participants who commenced, 8 ceased attending after the second workshop. The facilitators recorded that no reasons were given. Parents attended with children, who were noisy. The team leader generally provided positive assessments of the facilitators' completion of activities. However, he said that these facilitators would be more capable after attending their second training. His comments suggest that the difficulties of this group were in part due to the inexperience of the team. Nevertheless, the team leader left all activities to the facilitators and did not appear to assist by co-facilitation with them. It is likely that with this group, there was not clear messaging and explanation of the aims and requirements of the program during recruitment of parents.

In a second site, (Koibuga Parish), attendance was mixed, with two participants not returning after the first workshop, four absent for one workshop because of illness and two participants for 3 workshops. Of 18 commencing the first workshop, 14 attended the final workshop. This was an inexperienced team of first time facilitators and the team leader's comments suggest that he felt the need for support.

All remaining sites recorded high levels of attendance and retention, with two thirds or more of participants attending all possible sessions and a small number of sites 100% attendance of all participants commencing.

Madang. In Madang, the program was implemented in 10 sites. As in the other provinces, there was a mix of attendance outcomes. One site (Yomba parish) struggled, with a number of parents dropping out after the first to third workshops and not returning. This was an inexperienced team whose members (including the team leader) had attended only one training workshop. Review of support for the program in this parish is warranted. In Wasabamal (Megiar) there was inconsistency of attendance but with a higher number of parents (15 of 20 commencing) continuing through to the end of the program. this program was led by a very experienced team leader who was also a trainer.

In Malala, Bogia district, the majority of parents in the group (12 of 17) was male. There was a high degree of absenteeism, with attendance falling to around half of 17 starting participants for most workshops. This group challenged the facilitators about providing them with food, as they were accustomed to receiving from NGOs. This was a group of persons recruited from the Asuramba Care Centre, comprising people who had been relocated to the mainland from Manam Island after a volcanic eruption in 2004. There have been many concerns about social problems concerning youth and the dissolution of authority structures among these displaced communities. This is a distinctive group of displaced persons with experiences of emergency relocation and dependence on the support and intervention of NGOs. They have struggled to maintain traditional allegiances and as immigrants they have experienced sometimes tense relationships with the mainland host communities.

The experienced team leader in Malala noted in his diary that attention needs to be paid to the recruitment strategies used, including the messages and reasons given for attending the workshops and exploration of any barriers to attendance with parents. He linked the drop off in attendance to the recruitment process, and wrote: "Next time we have to be … selective on parents who are concern about their children's wellbeing and want to attend the workshops".

The group included some Kukurai and their wives. The Kukurai are hereditary chiefs of Manam Island. On review, the Madang Coordinator suggested that the influence of the Kukurai was such that their support would be positive for further participation of this community in the program. Although there may be clearly identifiable needs for a program like P4CD at the care centre, such a distinctive group undoubtedly needs well thought out strategies of engagement and recruitment, including clear explanation of the focus on parenting. Potential for recruitment of facilitators from the community could be explored.

All remaining sites in Madang achieved very high attendance and retention.

Overview of factors affecting attendance.

Overall, very high levels of attendance were achieved in Madang, with variations in different locations. The majority of caregiver participants was female, although in a small number of

communities a larger number of men than women attended. It has been highlighted that in some cases, the inexperience of teams in recruitment of participants and in conduct of workshops contributed to poorer retention of parents. However, other factors include differences in social characteristics of the communities, whether they are urban, immigrant, or communities traditionally associated with the locale. As identified, past experiences of NGO assistance may shape parental expectations. Some of these various influences and characteristics may be anticipated during engagement and recruitment of parents to join the program. Other important influences include the influence of the church and strength of local church networks which can vary from site to site. This also includes the role of parish priests in the degree to which they proactively support the program in general, and, in some cases actively influence the selection of participants. It was noteworthy that 100% attendance was achieved in some sites in which the parish priest had been very active in promoting the program.

Across many sites, irrespective of attendance and retention, a small number of parents withdrew after one, two or three workshops and do not return. Better understanding of reasons for this may assist with recruitment. Other parents appear to withdraw later in the program for reasons that may relate to the strain of attending due to concerns about their families, supervision of children, work or other reasons. In all three Dioceses, there were complaints about the lack of food and the absence of payments for participants. In one program, parents voice dissatisfaction with the arrangements for food, saying that the parents were leaving their children at home without food, were not being fed and that when they returned home their children were unhappy with them. Facilitators, team leaders and trainers or coordinators, if present, responded in various ways. In one site, a trainer replied to parents' complaints that there would be no payment of an allowance, that the P4CD facilitators were volunteers giving up their time and leaving their children at home just like the parents. In one diary, it was noted by the team leader that PNGK50 set aside by the parish for lunch was not enough, and that they would need to allow PNGK100. As noted, in other locations, the local parish provided a meal from the parish kitchen. However, in one site, a team leader noted on more than one occasion that after eating lunch parents wanted to sleep and were hard to engage for session 2 activities.

Facilitators and team leaders will undoubtedly better deal with these issues after this first experience. However, it is important that there is some clear guidance from P4CD leaders about provision of resources in consultation with local church leadership. There should be discussion of how to mitigate these strains both through clear messages in responses to parental queries and complaints both curing recruitment and as concerns arise during workshops.

A pattern of withdrawal after two to three workshops may also give cause to consider how styles of facilitation combined with the introductory topics may impact some parents, who may feel too strongly challenged by discussions of abuse and neglect. This may be exacerbated by a lack of confidence or balance in leading these topics by inexperienced facilitators. The style of delivery and timing of these topics and ways to address parents without lecturing or blame should be explored closely in further rounds of training.

Many parents have valid reasons for absence from a workshop. These include deaths of family or prominent community members, sickness of parent or child, or other pressing reasons, including concern about crops or sales of produce. Other disruptions include clashes with other major events such as a church ceremonial occasion or independence celebrations, as well as bad weather, deaths

that affect participants and sometimes whole communities, as well as community or political violence. Team members noted these in their diaries. The teams, assisted by their Coordinators and local church figures have shown themselves to be capable of flexibly responding to many of these disruptions and adapting to contingencies by rescheduling workshops if required. Coordinators and trainers need to provide advice with decision-making in some circumstances.

Recording and observing practice: Team leader and facilitator diaries

Debriefing and note-taking are an important part of planning and learning from the experience of program delivery and help with monitoring the development of team skills. (See team leader debrief notes and observation sheet, Appendix 1). Diaries were completed by both facilitators and team leaders and included planning notes, many incidental observations and debrief notes (see Appendix 1). There was variation in the amount of written information on planning, activities completed, and debrief discussions that are held at the end of each workshop.

Some team leader diaries were almost blank, while others included extensive planning notes and comments in their observation sheets. The same variability was evident for facilitator diaries, although many of these provided valuable information that supplemented what the team leaders recorded. The variation is clearly linked to literacy and education levels, to inexperience in delivery of a group program and to lack of familiarity with the concepts and resources for P4CD.

Most notes in diaries were written in English, with a small number written mainly in *Tok Pisin.* Team leaders who wrote in *Tok Pisin* provided very little detail or elaboration*,* while some others write little in any language. They may not always record the full extent of their observations and feedback. Nevertheless, both team leader and facilitator diaries included valuable information that provides insight into some of the challenges and accomplishments experienced by the teams.

Team leaders for the most part filled out their observation sheets for each workshop. Some team leaders provided positive assessments of completed activities on a three point scale (1=poor; 2= ok; 3=excellent), with little elaboration and only limited differentiation of scores or explanatory comment. Many provided useful comments with their ratings and showed evidence of thoughtful observation. However, there is variability in quality of information. Some team leaders indicate that they gave active feedback to facilitators, while the comments of some indicated discomfort or uncertainty pursuing issues of facilitation style in any depth during debrief discussions. A number provided no comment that could help explain the scores given.

The most common theme recorded in general debrief notes was inadequate preparation for workshops. This included lack of availability of resource sheets and other materials for specific activities; lack of prior reading of the *Facilitator Guide* to ensure that all activities and ideas are well understood; failure to prepare translations of key concepts in *Tok Pisin* and to write these up on butchers' paper*,* and a lack of preparation for specific activities such as role plays or summaries of key messages.

Facilitators and some team leaders expressed the need for more support and guidance from trainers and/or coordinators in preparation, in supervision of process and in assisting with challenges from parents. Some teams showed expressed worry, even distress that this had not happened. Conversely there were expressions of gratitude when a trainer or assistant coordinator was present and helped the team with workshop activities and with responses to questions raised by parents. The comments

clearly showed that some inexperienced team leaders struggled to support their teams with many issues they confronted: poor preparation, how to deliver activities and how to respond to parental questions. There were also occasions when a team leader was absent for one or more workshops, and the activity was led by facilitators without additional support.

Chimbu. For the five sites in Chimbu, team leaders completed observation sheets for all workshops, some with extensive additional comments. They indicate a small number of instances of "poor" completion of an activity. A number of these were due to not "starting on time", mostly due to late arrival of participants, in one case due to heavy rain. Most activities were rated "ok" or "excellent". However, comments suggested that some team leaders could distinguish areas for improvement, and gave scores that generally improved over the course of the 6 workshops. In terms of debriefing, the information recorded is variable in detail and focus – and is usually lacking reference to discussion of preparation and facilitation practices.

One first time team leader – inexperienced in group facilitation - said that he did not discuss issues with facilitators too deeply in the debriefings, but went back over some things with them to hear their opinions. This possibly suggests a lack of confidence on his part concerning what strategies to use. This team leader indicated that one of the chief challenges for facilitators was the difficulty in explaining some key concepts, and that some of the English language in the *Facilitators' Guide* was difficult for facilitators to explain to parents. These are important focal points for training and are areas where some team leaders could arguably make a stronger contribution in assisting with preparation and translation of key ideas as part of the guidance they provide.

Western Highlands/Jiwaka. In the Archdiocese of Mt Hagen, the number of sites chosen for implementation of the program rose from the planned 10 programs to 13 after initial consultations and with the support of the parish priest at St Paul's Parish. Assistance was provided by the assistant coordinator and trainers and two team leaders delivered the program in that role for more than one site concurrently, in one case for three sites, assisted in some workshops by the trainer. In one program the workshops were divided between two team leaders, one taking the first three workshops, the other taking workshops 4-6, while each was also team leader in another site. At one site, there had been four team leaders variously present to assist over the course of the six workshops.

One team leader who lead three sites simultaneously, wrote sparse notes in *Tok Pisin* in two diaries and nothing at all in one of his diaries, but rated facilitators for all activities observed. He is an experienced team leader, having been involved in delivery of the pilot program and participating in all phases of training since. The facilitators similarly provided very little written information in their diaries. As a result, there was a lack of any information about the quality of delivery of the program or the challenges associated with taking on the additional three communities.

In some cases, team leaders provided little information, but gave an indication of engagement with the work of the facilitators and a readiness to record when and how activities were or were not optimally delivered, albeit without detail on specific practices and on feedback provided. In Togoba, the team leader clearly recorded when activities were not completed or when resources were poorly used. In his overall assessment, he noted some improvement: "It's the facilitators' first [time] to facilitate and they show improvement in a lot of areas. If they go to second training they would be better position to deliver the workshop."

The commitment and flexibility shown in conducting P4CD in 13 sites and achieving overall very high rates of attendance was remarkable. However, there were indications that this created some strain, both on inexperienced facilitators and on some team leaders, making it difficult to maintain high quality of program delivery across sites other than the 3 additional ones. For example, in one program, all activities in all workshops were led by one facilitator, variously assisted by five trainers and team leaders at different times over the course of the 6 workshops. Comment in the team leader diary is not helpful, and suggests that, although she was no doubt supported by others during delivery of the program, consistent feedback from and collaboration with a co-facilitator and team leader working as a team throughout the six workshops were lacking. This facilitator was inexperienced, having only attended one training workshop in May 2018. However, her own notes suggest that she was capable and confident in her grasp of the topics and in her engagement with the parents. Seven parents recruited missed the first workshop, and were told by the facilitator that they could not continue with the program as they were required to attend every session, and would now have to wait to join the next program. Attendance of the remaining 13 parents was close to 100%.

In summary, the above example illustrates the level of commitment and hard work of many of the volunteers delivering P4CD and their ability to respond to many contingencies. However, it also clearly suggests that over-rapid extension of the program with inexperienced personnel and inconsistent support is a potential threat to the quality of the program and therefore to its effectiveness in all communities.

Madang. In Madang, the team leaders' reports varied in completeness and detail as in the other Dioceses. They pointed to the same gaps in practice and areas of improvement of facilitators. In comments for Workshops 1 to 2, facilitators were nervous and did not fully understand how to prepare to lead a workshop.

Two examples of reflection on preparation in diaries:

Example 1: At one site in Madang, a facilitator's diary contained honest self-reflection: in her notes on one workshop she said that she did not finish a specific activity with a summary. This was because she had failed to prepare the summary in advance. She resolved to do this for all activities in the future. In a later workshop, she said she had not prepared for an activity well, and that as a result both she and the parents became a little confused. She needed support for this activity. In almost all workshops she noted some aspect or activity in which she felt unprepared. This team suffered the loss of the team leader after workshop 3 due to an incident in which criminals attacked a bus in which she had been travelling. She was injured and unable to attend the last three workshops. Assistant coordinators attended for the final workshop. Attendance levels for this site were very high.

Example 2: In another Madang team, the team leader provided little comment at all on practices in his diary debrief notes, and no comments in his observation sheets, and was mainly concerned to note difficulties with starting and finishing on time and related matters. However, one of the facilitators commented in her debrief notes for almost all workshops that although no activities were missed, she thought that the team should sit and discuss together as a team when preparing for workshops. She noted at the end of the program that the team needed guidance and supervision from a trainer and that this had been missing.

Example 3: This team leader paid specific attention to the lack of participation by parents in discussion. The team leader provided extensive feedback on this challenge, consistently noting activities that were too facilitator-centred and that parents did not actively join in discussion. They were not moving beyond the guide and as a result were turning the parents off. She actively counselled the facilitators to find simple words in *tok pisin* to explain difficult terms such as "strategy" and to prepare and practice these before the workshop. She also provided notes suggesting that they focus on encouraging the parents to talk about their own children, their ages, behaviours etc. as a starting point for bringing them into discussion. The team leader's observations and some of her suggestions were very sound. However, it appears that this group had become "stuck" in a style of presentation that was not overcoming the problem of engagement and motivation of parents. By workshop 5, some activities were still facilitator-centred; the facilitators were still reading from the *Guide*.

In debrief notes and comments in team diaries at other sites, there were clear examples in which the team leaders counselled the facilitators to overcome many difficulties, both practical matters and in terms of improvements to facilitation. In the following, three examples of well-recorded notes suggesting good practice on the part of team leaders are identified.

Examples of good practice:

Example 1: After Workshop 1, the team leader noted gaps in activities and advised facilitators how to read the *Guide* to prepare for the workshops. Over the first workshops he focused on preparing their sheets of butchers' paper in *Tok Pisin*. This preparation activity was necessary to help them to avoid the need to read out from the *Guide*. Throughout, he emphasised their need to prepare by reading the guide for each workshop, and to then practice activities and write up their sheets in *Tok Pisin* in advance for each workshop. The focus shifted to the facilitators' engagement of parents in conversation, commenting on discussion of child behaviours and other topics. He commented that facilitators did not at first handle parents' questions and emotions well. In Workshop 2 he rated them as "poor" in this category, suggesting: "throw questions back to the participants. You do not have all the answers." The diary provided evidence of engagement and support of the team and a focus on developing their skills throughout. He was prepared to assist the facilitators to handle parental challenges and difficulties – something many inexperienced team leaders found more difficult. This experienced team leader had participated in the pilot program and in all training since then.

Example 2: Another experienced team leader similarly focused on gaps in preparation, the nervousness of the facilitators and reading from the *Guide*. The team leader noted that one facilitator would become "carry away and try to lecture [the group]", but that she stepped in to guide her. However, she commented positively on "Very good interaction between facilitators and parents" and showed interest in encouraging the facilitators to maintain a positive climate of inclusive engagement and excitement within the group. She noted improving use of flipcharts and resources and confidence in working together to demonstrate activities for participants; there was better collaboration between facilitators. However, she also emphasised the need to develop the skill to "rephrase or reframe statements or questions when participants keep quiet" and repeated this when debriefing over two workshops. She thus encouraged improvement in advanced facilitation skills. This trainer was especially sensitive to the need to improve quality of engagement and interaction within the group.

Example 3: This team leader rated performance of activities of his inexperienced team as 1 or 2 ('poor' or 'ok') for the first workshops. He emphasised their inadequate preparation, decisions about roles, preparation of resources, etc. and provided feedback on details such as inadequate use of resources and time not given for parents to discuss resource cards or other tasks. He noted that the facilitators were not confident and that he needed to actively assist them with many activities in all sessions. During debrief in Workshop 5 he noted: "use of flipchart and resource cards was good [i.e. much improved from beginning]. Timing was good with some activities." Concerning what was needed next time, he wrote: "Activity aims were missed with few key messages. Start time needs improving. Prepare early. Focus on the guide. Sort out workshop materials in advance. Team leader ready to assist any time."

His later comments were that the inadequate preparation continued to affect the facilitators' engagement with parents: "interpretation, concentration and interaction with [positive] body language lacking". Although these facilitators did improve by workshop 6, they still needed assistance with most activities.

This team leader did not shy away from critical comment, while at the same time was able to give positive support and to actively assist during activities. The facilitators (a married couple) had family commitments that affected their preparation. He suggested that younger experienced facilitators with year 10/12 education would be better able to deliver the program. It is important that such comments on facilitators' skills and performance can reach the Coordinators.

Summary of team leader feedback and support

In some cases, team leader diaries did not show evidence of clear understanding of or confidence in the team leader role. The absence or sketchiness of comment in their diaries suggests that some of the less experienced team leaders lacked the confidence to assess facilitation practices and provide guidance in how practices could be improved. Team leaders almost certainly varied in the effectiveness of support provided to their teams to improve practices. This was more likely to be the case for team leaders who themselves were not experienced in group facilitation. In a small number of cases, team leader absences were noted, and concerns about this were expressed by facilitators.

In some cases, team leaders appeared to play no part in the workshop activity, other than observation and some formal duties. This occurred with some inexperienced teams who would have benefited from more active assistance. In many cases, the team leader was actively involved in co-facilitation of at least some activities or assisted when there was a need to deal with a topic, to clarify an activity or to respond to parental questions. This potentially alleviates strain on facilitators who are not left to move through activity after activity without support. It can benefit parents by reducing over-exposure to one person's style and increasing variety in engagement. Some team leaders need encouragement to actively help facilitators during workshop delivery.

The diaries show some important examples of good practice by team leaders that can inform further training in the roles. Some experienced trainers and/or team leaders provided comprehensive feedback and were able to constructively communicate ways to improve practice to their facilitators. Some of them actively assisted facilitators in delivery or summarising of some activities.

Characteristics of successful observation and feedback recorded by team leaders:

- o   Shows readiness to assess preparation, performance or confidence of individual facilitators

- o Is able to note specific examples of good or poor practices (not simply noting presence or absence of certain elements of activity)
- o Gives facilitators positive acknowledgement of good practice during debrief: for example, praises successful preparation and explanation of key messages in *Tok Ples*.
- o Is able to provide suggestions about alternatives, what could have been done, how to prepare, etc.
- o Can observe and provide comment on advanced group facilitation skills, "micro-skills"
- o Notes advice actually given to facilitators in feedback
- o Provides comment on parents' reactions, challenges and emotions and how facilitators responded
- o Encourages facilitators to show warmth and promote active engagement and fun to ensure inclusion of parents.

As indicated, team leaders most likely to record high quality observations and provide detailed, supportive feedback were those with most experience, including at a minimum participation in the 2017 TOT workshops and in some cases reaching back to the pilot program. In at least two cases these were trainers who were acting as team leaders. However, it must be noted that some experienced team leaders who were observed to be capable and to have a good understanding of P4CD in training workshops provided little or no information in their diaries, casting doubt on their understanding of how to ensure adequate support and quality improvement. Variability in performance of the team leader role in record-keeping and support provided to teams highlights the importance of strengthening specific training for team leaders. Examples of good practice observed and recorded show areas for improvement of team leader performance. Trainers can be equipped to provide guidance to team leaders and facilitators. This would almost certainly improve quality and consistency of program delivery.

Challenges by parents

There were many areas in which parents challenged facilitators. There are indications in both facilitator and team leader diaries that the teams were very happy to have a Coordinator present to deal with such challenges. Parents challenged facilitators about provision of food, and with their concerns about leaving stock or families unattended and about the impact on their work. In one case, the team leader mentioned that the parents had made them feel ashamed and inadequate and that they did not know how to respond.

Parents in more than one community expressed strong concerns about the need for a program to deal with difficult teenage children and that this was a greater priority for them than the younger children 3-9 years targeted by P4CD. This may suggest a lack of clarity at recruitment. However, it also indicates that facilitators need further practice or guidance in how to stay on track with a theme or topic when discussion is diverted by concerns raised by parents. Examples are provided in the *Trainers' Guide:* these need to be prepared by trainers as key learning points for the Facilitator Training Workshops.

There were reports of a father challenging the strategies for responding to children's behaviour, arguing that he wanted his son to be an aggressive defender of his clan and family, and therefore did not see his behaviour as a problem, but rather that it should be encouraged. The team leader of this group commented that the facilitators were unable to adequately respond to this parent.

Understanding how to explore positive parenting strategies for dealing with children's behaviour is a core skill area that requires continuing practice in dealing with different scenarios.

Experienced mentors can assist teams to learn how to respond to these challenges in firm but non-aggressive ways. Mentoring by trainers and team leaders during program delivery, and incorporation of role play scenarios in training workshops will help facilitators to respond more confidently and appropriately to parent challenges.

Parent feedback

Team leaders and facilitators alike recorded positive comments from parents in most workshops, including those in which attendance was lower than other programs. There is a high degree of acceptance of the focus and intent of P4CD and parents appear to value highly the conversations the program enables them to have. Strong community interest in extending access to the program was expressed in most parishes.

Numerous workshop themes and topics were cited by parents as important lessons for them to take home. Parents also responded to many topics with tears and declared their wish to change their own behaviour. Some commented that they now knew that they had failed as parents. Many parents have expressed strong feelings of regret about their behaviour as parents and have also pointed to difficult experiences in their own childhood. These feelings may well be unavoidable, and parents' honesty should be acknowledged. It is important to acknowledge that all parents face challenges and difficulties. While such responses are positive and can galvanise the wish to learn, they also give rise for caution. It is likely that reliance on reinforcing parental guilt will not be sufficient for parents to change their behaviour. The aim of the program is to create practical strategies for caring for their children that can be shared in discussion and then practiced at home.

Discussion: Training, quality assurance and implementation support

Facilitators and team leaders delivered P4CD in 28 communities between July and November 2018. Together with analysis of demographic data and attendance records, a review of qualitative information in team diaries was undertaken to monitor implementation and assess outcomes of training for volunteers.

The scan of diaries showed that the roll-out of the program in 2018 achieved high rates of attendance and retention of parents in the parenting program overall, albeit with lower rates of attendance in a few sites (See Appendix 1, Table 12). Six workshops were completed in all sites as planned.

Qualitative in formation in diaries maintained by team leaders and facilitators has enabled an assessment of the outcomes of important areas of training received, and an opportunity to assess the roles of personnel. Information on attendance from notes in diaries provided indicators of initial engagement, recruitment and messaging about the program that are valuable for future training. Debrief notes provided many examples of good practice of observation and support and successful group facilitation, as well as revealing important gaps in practice that require further training and targeting of support.

As outlined above, the majority of facilitators and team leaders who were responsible for scale-up of the program in 2018 are yet to meet training requirements for their role. This must be achieved in 2019, with completion of a further round or rounds of workshop training.

The analysis of diaries has provided clear indication of the need to reinforce strategies for engagement and recruitment of parents to optimise attendance; to improve preparation; to build understanding of the program's key concepts and to continue to develop group facilitation skills.

At a preliminary review of scale-up by Coordinators in November 2018, it was agreed that the roles of trainers and team leaders needed to be clarified. There was evidence that, with some exceptions, the most experienced personnel were capable in the widest number of skills and in the quality of critical observation, feedback, mentorship and support they provided to teams, and in their capacity to record activity, feedback and support. This confirmed that trainers and team leaders need to attend all training workshops as well as to participate in program delivery to strengthen the performance of their roles. TOT workshops and Facilitator Training Workshops should be specifically planned to achieve these outcomes.

- o *A further round of TOT and Facilitator Training Workshops should be held in 2019 before the next phase at or before the next phase of implementation to enable current facilitators and team leaders to meet requirements for practice.*

Personnel

Identifying people with appropriate skills. During the first phases of scale-up in 2018, the number of volunteer facilitators, team leaders and trainers in training and implementation grew rapidly and has continued to grow. The skills and capacities of personnel are assessed by Coordinators over time, with individuals encouraged to take on roles for which they have good skills. However, in some cases, people in trainer or team leader positions may not be the best "fit" for those roles in terms of background or aptitude.

Some persons have taken on roles such as that of team leader or trainer out of a sense of their own seniority and authority associated with past roles as community leader or school principal, but have not shown the specific kinds of skills or aptitudes required to train and support others in group facilitation. For some, the transition from a didactic, lecturing or moralistic stance to a non-didactic facilitative approach based on sound understanding of both content and process, can be difficult to achieve.

The comments of the team leader cited above suggested that a combination of age and education, as well as social position and past work experience may limit understanding of the required approach. It was argued by that team leader that younger people with at least years 10-12 education may be able to readily adjust to some of the requirements of the approach, while some older people with may find it harder to learn the new approach. In addition, for some facilitators family and social responsibilities may limit the time they can give to preparation for delivery of the program.

There is a need to actively oversee the assessment process associated with training and quality assurance and for Coordinators and lead trainers to use it to make decisions about how to promote those with the best skills and capacity to work as mentors and guides and as supervisors into the positions of trainer and team leader. The leaders need to ensure that individuals do not bypass the

need to gain experience in program delivery and group facilitation. The evidence is clear that those without this experience are less likely to be able to effectively mentor and support community teams to develop good practices.

Assessing the capability of facilitators and team leaders

The analysis of team leader and facilitator diaries identified some important achievements, as well as some limitations in the capability of volunteer team leaders and facilitators active within the P4CD program.

Clearly a major challenge for the program's volunteers is the ability to take materials and resources primarily developed in the English language and to use them effectively in engagement of parents, many of whom have very low levels of formal education and low levels of literacy in any language. Much of the presentation and discussion of ideas in groups occurs in *tok pisin* or in *tok ples*, rather than in English. However, personnel need to build fluency and understanding of the key concepts and ideas in English, and to practice explaining their meaning and translating them into examples and scenarios that can be understood in terms of the experience of parents. The skills and practices involved can be developed over time through a combination of intensive training and practical experience, over repeated cycles of training and program delivery supported by trainers and mentors.

This analysis of diary records has identified some clear priorities for further training:

- o Building understanding of key concepts in child development and parenting
- o Preparation and translation of key concepts into ordinary language and practice scenarios close to parents' experience
- o Focus on advanced group facilitation skills
- o Further training in record-keeping and debriefing for team leaders and for facilitators
- o Intensive preparation of team leaders for their role

At the review conducted in November, Coordinators suggested that there needed to be a renewed emphasis on the requirement of a minimum of grade 10 education and good reading and writing skills for all future recruitment of volunteers. They acknowledged that many facilitators did not meet this requirement.

As identified in the analysis of diaries, some trainees struggled with the level of literacy and fluency with English language resources and concepts and their translation into local vernacular. They showed difficulty adjusting to the specific skills and approach required for P4CD, and without the base in literacy and reading skills would struggle to learn many new ideas. These are not easily overcome by training alone, or by support of trainers and mentors during program delivery.

The Coordinators need to continue to navigate complex decisions about recruitment of personnel through church and community networks. They have been able to bring together highly motivated and committed people, including respected people with seniority and the ability to influence others. Not all have adequate skills to run the programs or support teams alone. In summary, the educational and literacy requirements for participation in training through formal workshops must remain the minimum for recruitment to team roles.

The Coordinators should aim to improve levels of formal education and literacy among volunteers, without losing the strengths that come with passion, commitment and respect at the community

level. They need to work to ensure that the roles of trainer and leader are occupied by those with the specific aptitudes required for group facilitation and experiential learning for adult learners. These are not simple challenges for the leaders of a workforce of community volunteers.

Strengthening the capacity and role of trainers

As P4CD continues to be developed and implemented at scale, delivery of training and support cannot rely solely on the oversight, guidance and intervention of the Coordinators (including Assistant Coordinators). Trainers are best placed to support teams by providing refresher and inservice training to local teams and assessing training needs based on observations of practice to inform planning at the diocese level. Trainers can also play an important role in improving the quality of active support provided by team leaders to facilitators. The trainers should therefore be central to the quality assurance process.

Trainers. The role of the trainers should not stop with leadership and delivery of training workshops. As was the case in some provinces in the recent round, trainers should actively participate in program delivery as opportunity arises. In addition, they need to take on further responsibility for observation and support of team leaders in their role and to assess the capability of individual teams and the quality of their work through direct observation of P4CD sessions.

- o *Trainers can take greater responsibility for quality assurance (QA), by visiting program sites for one workshop each, compiling observations and providing advice to teams. This activity is to assist planning for training workshops and identification of needs for inservice training.*
- o *TOT training in 2019 should aim to develop the cohort of trainers to take on the lead role in QA and to equip them to provide advanced skills training and mentorship to team leaders.*

The requirement for two rounds of training combined with on-the-job practice in program delivery has been shown to be necessary for certification of facilitators and team leaders. Repeated exposure to the methods of group facilitation in workshops followed by practical experience of program delivery is necessary for facilitators to gain confidence and capability to deliver the program. For team leaders, the requirement to observe and give supportive feedback to their teams was best met by those with experience in at least two training workshops including the 2017 TOT and the pilot program.

- o *A TOT workshop should precede the next round of workshop training for facilitators and team leaders and ensure that trainers are equipped to provide assessments of skills and attainment of all trainees at the next round of facilitator training.*
- o *Specific emphasis should be placed on developing the role of team leaders, in terms of their own understanding and experience of quality facilitation and their capacity to observe practice and provide supportive feedback to facilitators.*
- o *Team leaders should actively increase their own experience of group facilitation, rather than adopting a solely supervisory role.*

Diary records have proven to be an important source for assessment of team leaders' performance and for targeting further training to strengthen their role. However, the unevenness of completion of the diaries reveals gaps in team capability. Further TOT and facilitator training must aim to reinforce observation, record-keeping and reflection.

The process of M&E to date, including diary information, records of attendance and other data on characteristics of participants has proven to be successful in monitoring activity, general compliance with guidelines and progress in aspects of quality of program delivery. Strengthening of the formal role of trainers to provide local support to teams and to monitor the quality of program delivery will strengthen the integrity of the program.

Implementation Challenges

In the evaluation of the Pilot Program (Robinson, et al, 2018), it was recommended that the priority for scale-up should be consolidation of processes and resources, followed by continuation and expansion of implementation in existing provinces. It was aimed to achieve participation of over 100 facilitators in training by mid-2018, with 1300 parents in the program in 2018 (Robinson, et al, 2018, p 71). These targets could not be met in 2018, due to a breakdown in arrangements for provision of materials which meant that training could not be completed until June, with program delivery commencing in July. Current activity suggests that these targets can be readily met in early 2019.

Consolidating the trainers' group

Building the capacity of the current trainers' group to support scale-up in and beyond 2019 is a priority for P4CD to become self-sustaining in its capacity to ensure the program can grow. The current training program, while informed by best evidence, is focused on the learning of practice skills, rather than on theoretical foundations of the science of child development and educational practice. The skills base of the trainers' group needs to be firmly based on the sciences of child development and learning.

In the medium term it is desirable to strengthen the leadership of the training program through inclusion of "master trainers" or training leaders with tertiary level qualifications in relevant discipline areas such as child development and social work, with the capacity to oversee the development of knowledge of core concepts of child development, parenting and early intervention among trainees and to assist with translation of the core concepts into everyday language for engagement of parents. This will require recruitment of graduates from accredited tertiary level courses to supplement the knowledge base accumulated within the program.

While building tertiary trained leadership of the program, it is crucially important to maintain the strong connection to the communities and the community-based framework which underpins training and implementation of P4CD through church and community volunteers. Experienced senior trainers well connected both with the Church and with their regional communities have played and should continue to play an important role as mentors who guide less experienced volunteers. Lead trainers must therefore ensure that the training group continues to be connected to community in each diocese or region through a knowledge base grounded in P4CD practice and training experiential learning through the P4CD training program. The role for the consultant in 2019-2020 would be develop this capacity within the leadership of the trainers group while continuing to support the training program for ongoing scale-up of P4CD.

Risks to scale-up

The risks to sustainable expansion of the program at scale are in three main areas: training and capability of volunteers; support for quality of implementation; coordination of P4CD at scale.

1. Staff turnover: loss of volunteers requiring replacement of new trainees through training and program delivery
2. Inability to recruit volunteers with adequate literacy and education levels
3. Insufficient training to sustain program quality
4. Lack of implementation support and coordination by UNICEF in the transition to establishment of a Coordinating Office in the Church
5. Inadequate implementation support by the coordinating and training group for teams at the parish level
6. Over-rapid expansion, overburdening management and coordination at the Diocese level

Notwithstanding the important achievements of the recent round in completing the program and achieving high levels of attendance, there were clear indications of challenges in rapidly expanding the program while relying on inexperienced volunteers, with limited capacity to support them. This was evident in all regions, particularly so in the Diocese of Kundiawa and in the Archdiocese of Mt Hagen. In both, there were some indications that a push to extend the program with inadequate resources, too many inexperienced personnel and with inadequate support could affect program quality.

Unsupported and unmonitored extension of the program without monitoring of quality present a major risk to the integrity of the program, its ability to retain parents with high levels of attendance and to maintain high quality practices of program delivery. This could negatively impact on program outcomes such as positive changes in parenting that will benefit children and families. The pace of development needs to be consistent with resources and capacity to support community teams.

In highlighting these risks, it should nevertheless be acknowledged that the scale-up process was highly successful and demonstrated that the potential for continuing, sustained expansion and replication of P4CD at scale.

Mitigating risks

The consolidation of the capacity and role of the trainers as described, and strengthening of the core processes of coordination, training and Quality Assurance are essential to the sustainability of the system. The existing partnership between the Church, UNICEF and others needs to maintain support for training and implementation for a 2- to 3-year period while working towards a handover of responsibility for coordination of the program and its replication to the National Office of the Church and its partners. A program of separately funded research should be undertaken within the same timeframe to build the evidence base for the effectiveness of P4CD. This will help to build the policy support needed for ongoing funding and institutional commitment to the program.

Model for expansion

The organisation of implementation of *Pasin bilong lukautim pikinini gut* is outlined in Figure 4. This is a transition period in which the capacity for implementation and training support currently undertaken by UNICEF and Menzies is to be located in the Church with arrangements for

management and administration to be further developed between the Family Life Office and the Dioceses. Eventually, other partners (one or more Universities and research institutes in PNG) would also join in the provision of opportunities for study, contributions of monitoring and evaluation and other important roles, including contributions to resource development.

Figure 9. Implementation capacity
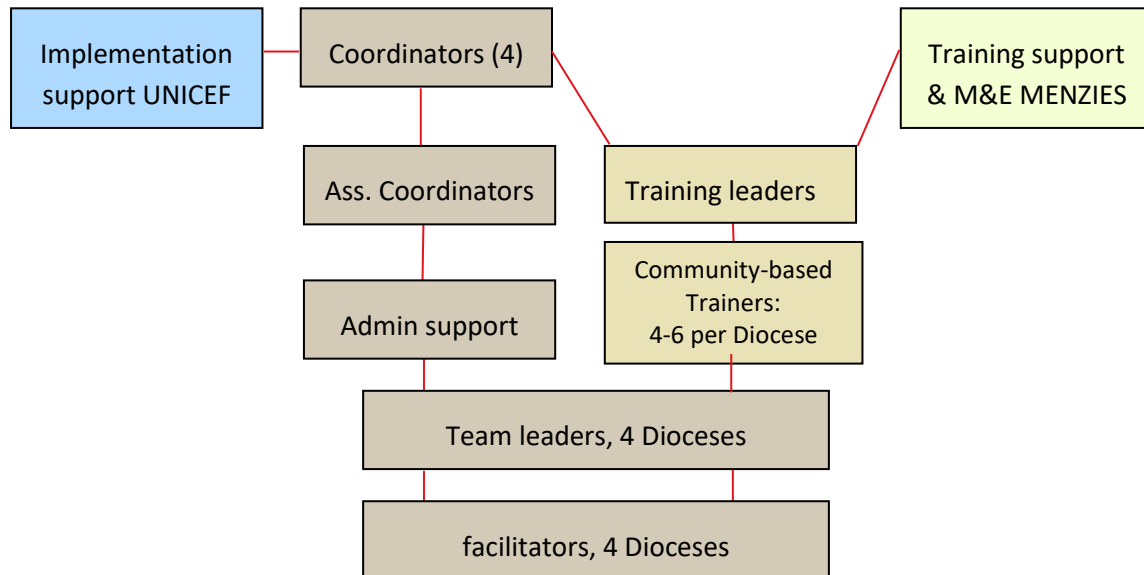
The organisation of activities should follow a yearly cycle in which planning and implementation are accompanied by the processes of M&E and quality assurance based on the information gathered by trainers, team leaders and assistant coordinators. Reports and data should be analysed to inform the coordination and management of the program.

Figure 10. Process and roles for yearly plan, train, do, review.
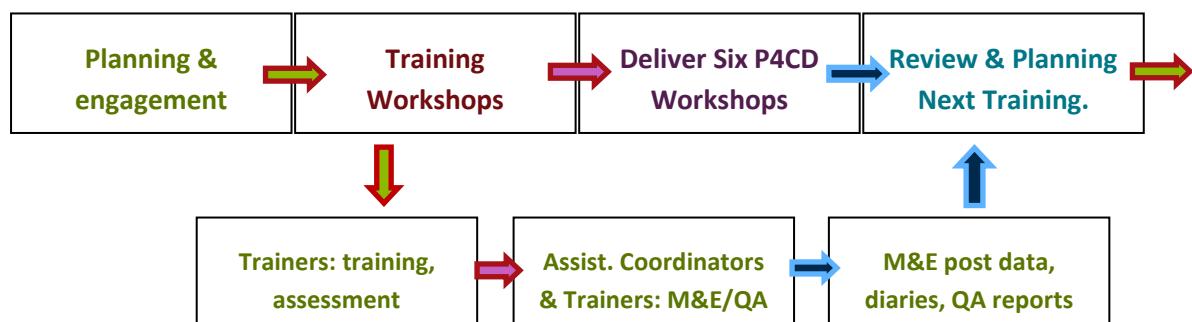
Securing the capacity to manage this cycle of activity within the processes outlined should be the focus of further development of the program in 2019-2020.

Implementation support

Implementation support includes both training and support to teams provided by trainers and assistant coordinators as well as the organisational support, resources and coordination provided to the program through the partnership.

Further expansion of P4CD requires improved implementation support by UNICEF, and in the future, establishment of capacity within the Church's Family Life Program, as it takes on responsibility for program coordination. The support applied by UNICEF in 2018 was barely sufficient to support the limited scale-up to 28 programs and associated M&E activity.

- o *To support further expansion and the entry of new church partners and provinces into the program, UNICEF's capacity needs to be significantly strengthened with at least one additional staff member recruited to support implementation and M&E activity.*

At the community or parish level, the critical elements of support are:

- o Timely provision of resources
- o Assistance with staffing – absences, etc.
- o Refresher training, support for preparation
- o Mentorship: assistance with problem-solving; support for engagement and recruitment; improve key messages and information; response to parents' criticisms and concerns
- o Ongoing support and mentorship to build quality practices of group facilitation.

Key requirements for supporting implementation at scale are:

- o Induct new communities and partners: assess leadership, capacity, and initial training needs
- o Recruit additional personnel to enable a) expansion b) deal with turnover of volunteers
- o Improve the educational standards and skills base of personnel in key roles at all levels
- o Convene and manage planning, training and implementation cycle: Plan, train, do, review
- o Develop capacity to support data-gathering and analysis for M&E, quality assurance and reporting that can be supported by local partners and feed into planning and coordination
- o Budget management and allocation of funding

Important elements of implementation support need to be coordinated at the national level through national partnership involving UNICEF, the Churches and PNG government with input from training and research organisations. The aims are as follows:

National institutional links and coordination:

- o Establish a national coordinating office and partnership framework
- o Build links with government to strengthen management, resources and funding
- o Align training program to an accreditation framework and to appropriate tertiary training courses (e.g. Bachelor's degrees in Social Work, Early Childhood, etc.)
- o Ensure that there is capacity to manage risks associated with expansion of the program and that standards of implementation are maintained across different regional programs.

Conclusions: Sustainable implementation of P4CD

The evaluation of the process of development and implementation of P4CD has shown that a program staffed by trained volunteers can successfully deliver an evidence-informed parenting program. The success of the program in recruiting volunteers, and in engaging and retaining parents in the program with very high levels of parental attendance and retention over 12 sessions is based heavily on the strength of community networks of the church. It seems clear that without this capacity to engage participants at all levels from trainers, team leaders and facilitators to parents through community networks, the program is unlikely to succeed.

Internationally, research evidence suggests that weak, still developing public institutions in low and middle-income countries may be less capable of implementing effective educational or psychosocial programs than Churches and some NGOs which are capable of mobilising high levels of moral commitment through social networks. Receiving accredited training with certificates and the opportunity to acquire the status of leadership in a church backed program are clearly significant rewards for many volunteers; their sacrifice as volunteers also confers on them the ability to lead by example and to counter demands for payment made by some parents for attending the program. By contrast, scepticism at the motives of the paid worker and political concerns about distributional politics of leadership in public institutions may undermine the motivations and effectiveness of workers recruited through the state (Bold et al, 2013).

Child protection services in PNG are at an early stage of development and it certainly appears likely that the government sector lacked the managerial capacity to successfully implement P4CD. Furthermore, in PNG, the churches have the capacity to engage whole populations in even very remote regions. This is simply not the case for the unevenly developed infrastructure and capacity of the paid workforce in human services. The initial decisions of UNICEF and partners to develop and implement the program through the Catholic Church (and later, other churches), rather than through government services, were clearly justified. However, at the local level, staff of the PNG Department of Community Development's child protection services made an important contribution to the implementation of the program, by gaining experience as facilitators and then taking on the roles of team leader and trainer. In two provinces, there was some success in collaboration with schools and early childhood centres in running the program on school or centre premises. With stronger funding and managerial commitment in government, there is clear potential to build collaborative links between P4CD and government services in both child welfare and early childhood education and to strengthen structural supports for the program over time, without undermining the motivational strengths of the volunteer program.

As identified, there are gaps in training and capacity within the P4CD program that may present limits to the quality and consistency of program delivery. Involvement of paid government staff with advanced skills and experience as team leaders and trainers can potentially help to fill some of these gaps. A dynamic relationship can then be developed between a Church- and government-supported P4CD training program in building the capacity of volunteers through the experience of delivering P4CD and in turn to enabling some to undertake further study or to move into paid employment with human services in Church or government.

Further monitoring of the optimum mix of incentives and supports for mainly unpaid volunteers of the P4CD program is warranted to ensure that motivation and focus of the program can be sustained and that volunteers can be recruited and retained. International comparative studies of the 'behavioural economics' of implementation of community health programs suggest that mixed workforce models consisting of both paid staff and unpaid volunteers can be successful, provided the factors and incentives relevant for motivation, focus and effectiveness of all roles are understood and the needs of workers addressed (Singh et al, 2015).

The volunteers recruited through P4CD gained training and education that has in turn motivated many of them to continue to learn and to seek other employment with government or NGOs. As outlined in this report, there will be continuing need to train new facilitators and team leaders and to promote some to leadership roles. However, there is every reason to believe that the continuing recruitment of volunteer facilitators through churches and community agencies as described in this report is sustainable – provided there is training and supervisory support of sufficiently high quality, certification of volunteer workers, and checks against exploitation and burnout through unrealistic demands.

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Appendix 1: Workshop attendance

Table 12 Weekly workshop attendance each site

MT HAGEN	1	2	3	4	5	6	7	8	9	10	11	12	Average
TOGOBA	17	17	14	13	10	9	9	7	8	8	9	9	10.83
KOIBUGA	18	18	15	15	10	10	14	14	9	9	15	15	13.50
KUMDI	20	20	19	19	15	15	18	17	20	20	18	18	18.25
KINDENG	0	0	0	0	0	0	0	0	0	0	0	0	0.00
BANZ	20	20	19	17	19	19	18	18	17	16	19	19	18.42
WURUP	16	16	16	16	16	16	16	16	16	16	13	13	15.50
MUN1 (Main Station)	24	24	22	22	21	20	20	20	20	21	22	22	21.50
MUN2 (Rauna Outstation)	21	21	21	21	21	21	21	21	21	21	21	21	21.00
KULIE	23	23	22	22	22	22	22	22	22	22	22	22	22.17
FATIMA	20	20	19	19	17	17	18	18	20	20	17	17	18.50
REBIAMUL	20	18	16	16	16	16	16	16	16	16	13	13	16.00
ULGA	18	18	15	15	17	16	17	17	16	16	18	18	16.75
ST PAULS	13	13	14	13	14	14	12	12	14	14	12	12	13.08

MADANG	1	2	3	4	5	6	7	8	9	10	11	12	Average
REMPI - BOMASE	19	18	19	19	18	18	17	17	17	17	19	19	18.08
HALOPA	18	18	20	20	19	19	17	17	20	20	18	18	18.67
UTU- SOM	19	19	19	20	19	19	18	18	20	20	20	20	19.25
YOMBA	16	16	12	12	9	8	7	7	8	9	9	8	10.08
HOLY CROSS - BALAM	20	20	17	17	18	18	16	17	18	18	18	17	17.83
WASABAMAL - MEGARIE	17	18	17	16	15	15	13	14	13	13	15	15	15.08
TOT - ULINGAN	20	20	20	20	20	20	20	19	20	20	20	20	19.92
KOLANG - MALALA	17	17	14	14	13	13	7	7	13	12	13	10	12.50
MIRAP - MANGEM	19	19	18	18	17	17	15	13	19	19	17	17	17.33
ALEMO	17	17	12	12	15	15	14	13	13	13	13	13	13.92

KUNDIAWA	1	2	3	4	5	6	7	8	9	10	11	12	Average
GOGLME	18	18	17	17	18	18	14	14	16	16	13	13	16.00
MINGENDE	17	17	18	18	9	9	9	9	8	8	8	8	11.50
MAI	13	13	14	14	8	8	4	4	12	12	12	12	10.50
NEREGAIMA	20	20	20	20	20	20	20	20	20	20	20	20	20.00
DIRIMA	18	18	20	19	12	11	15	15	14	13	13	13	15.08

Figure 11 Total numbers of workshop participants in three Dioceses
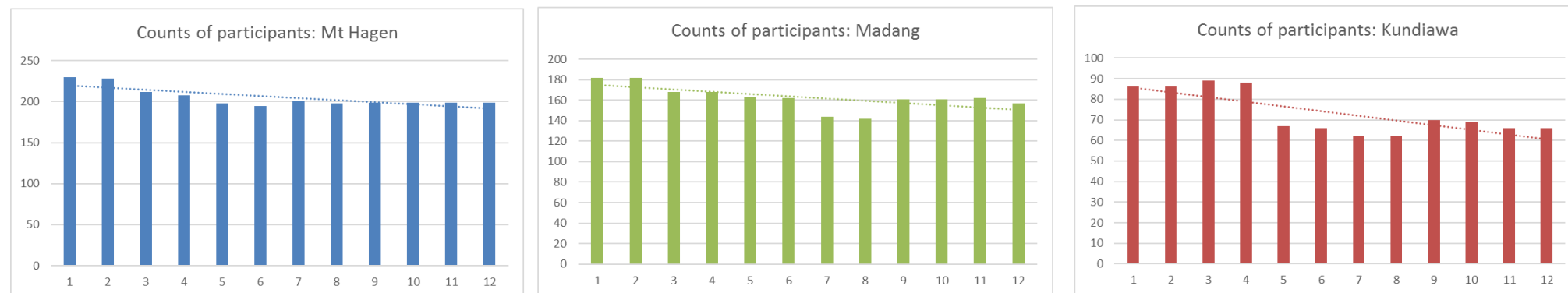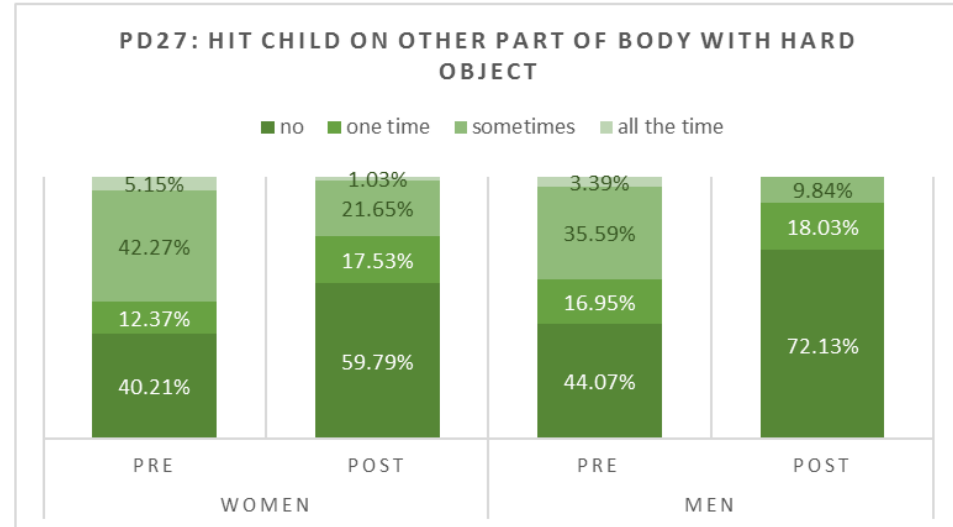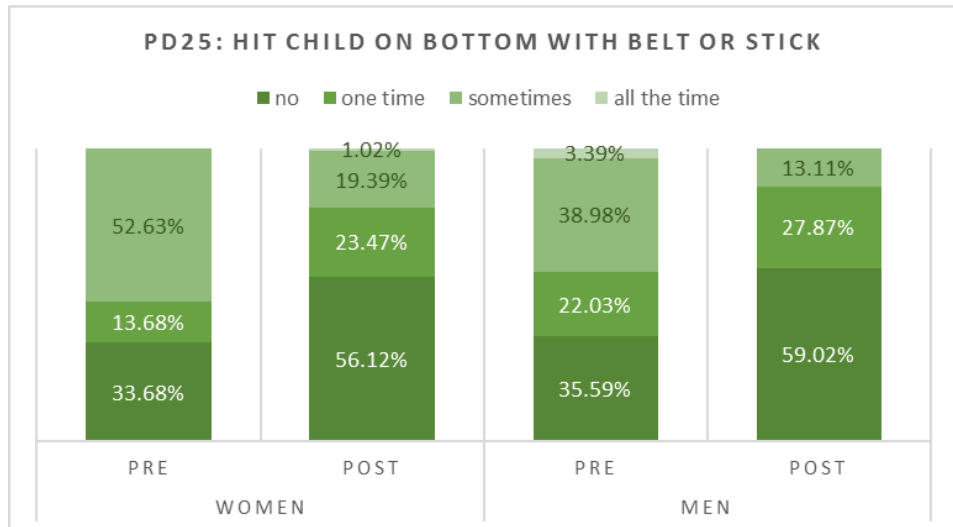

Note: Mt Hagen 12 sites; Madang 10 sites; Kundiawa 5 sites

As can be seen from Figure 6, participation in Mt Hagen averaged over 17 per workshop overall, ranging from an average of 19 participants in workshop 1 to 16 in workshop 6; in Madang, average of 16 overall, ranging from 18 to 16 from workshops 1- 6; and in Kundiawa an average of 15 overall, ranging from 17 to 12 from workshops 1-6.

Appendix 2: Changes in parent discipline

PD26: SHOUT/YELLED/SCREAMED AT CHILD

Legend: no, one time, sometimes, all the time

WOMEN
- PRE: 5.21%, 12.50%, 53.13%, 29.17%
- POST: 31.63%, 15.31%, 44.90%, 8.16%

MEN
- PRE: 11.67%, 16.67%, 65.00%, 6.67%
- POST: 26.23%, 37.70%, 29.51%, 6.56%

PD29: SWORE OR CURSED AT CHILD

Legend: no, one time, sometimes, all the time

WOMEN
- PRE: 11.46%, 14.58%, 54.17%, 19.79%
- POST: 36.73%, 17.35%, 43.88%, 2.04%

MEN
- PRE: 30.51%, 15.25%, 49.15%, 5.08%
- POST: 50.82%, 24.59%, 24.59%

PD25: HIT CHILD ON BOTTOM WITH BELT OR STICK

Legend: no, one time, sometimes, all the time

WOMEN
- PRE: 33.68%, 13.68%, 52.63%
- POST: 56.12%, 23.47%, 19.39%, 1.02%

MEN
- PRE: 35.59%, 22.03%, 38.98%, 3.39%
- POST: 59.02%, 27.87%, 13.11%

PD27: HIT CHILD ON OTHER PART OF BODY WITH HARD OBJECT

Legend: no, one time, sometimes, all the time

WOMEN
- PRE: 40.21%, 12.37%, 42.27%, 5.15%
- POST: 59.79%, 17.53%, 21.65%, 1.03%

MEN
- PRE: 44.07%, 16.95%, 35.59%, 3.39%
- POST: 72.13%, 18.03%, 9.84%

73

PD28: SPANKED CHILD ON BOTTOM WITH HAND

Legend: no | one time | sometimes | all the time

WOMEN
- PRE: 17.53% (no), 22.68% (one time), 52.58% (sometimes), 7.22% (all the time)
- POST: 43.88% (no), 24.49% (one time), 30.61% (sometimes), 1.02% (all the time)

MEN
- PRE: 37.29% (no), 25.42% (one time), 32.20% (sometimes), 5.08% (all the time)
- POST: 57.38% (no), 26.23% (one time), 14.75% (sometimes), 1.64% (all the time)

PD31: THREW/KNOCKED CHILD DOWN

Legend: no | one time | sometimes | all the time

WOMEN
- PRE: 62.89% (no), 14.43% (one time), 21.65% (sometimes), 1.03% (all the time)
- POST: 75.51% (no), 13.27% (one time), 10.20% (sometimes), 1.02% (all the time)

MEN
- PRE: 76.67% (no), 10.00% (one time), 11.67% (sometimes), 1.67% (all the time)
- POST: 86.89% (no), 9.84% (one time), 3.28% (all the time)

PD36: TIED CHILD UP

Legend: no | one time | sometimes | all the time

WOMEN
- PRE: 89.69% (no), 5.15% (one time), 3.09% (sometimes), 2.06% (all the time)
- POST: 96.94% (no), 3.06% (one time)

MEN
- PRE: 91.53% (no), 8.47% (one time)
- POST: 100.00% (no)
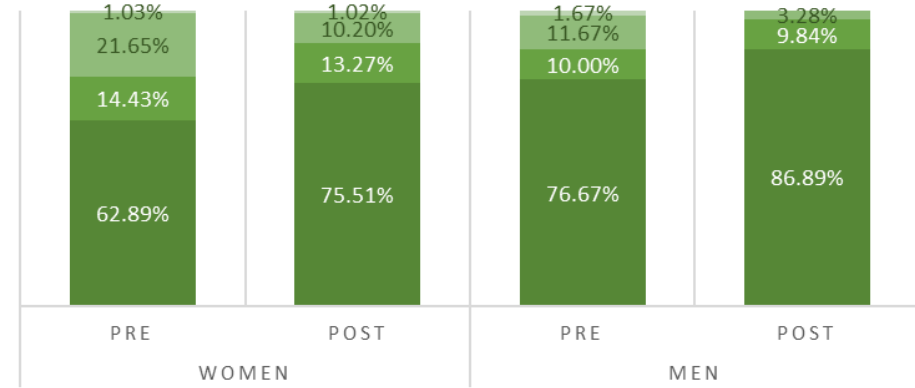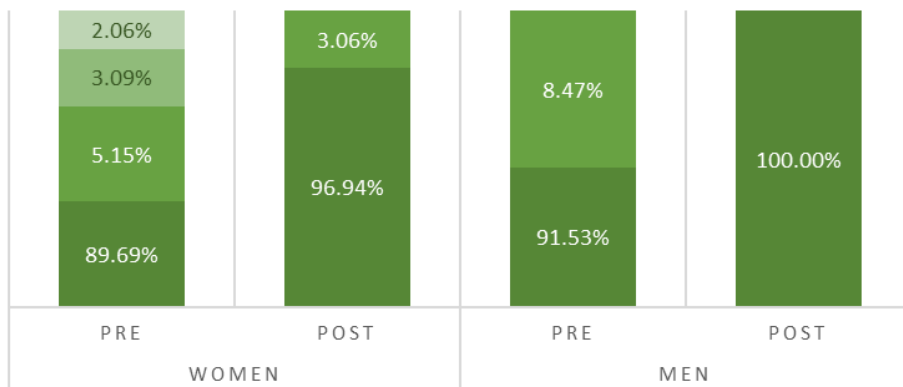
Appendix 3: Debrief and observation sheets from team leader diaries

Activities Report Workshop 6

My notes on session 1

_____
_____
_____
_____

My notes on Session 2

_____
_____
_____
_____

NOTES for Debrief

    1.   **What worked well?**

_____
_____
_____
_____

    2.   **What was missed? How can we prepare next time?**

_____
_____
_____
_____

    3.   **Were there challenges or difficulties?**
        1.   Disruptions; 2. parents talking about difficult topics; 3. referrals or support for parents; 4. team disagreements or discussion points

_____
_____
_____
_____
_____

Observation of Workshop Sessions – Team leader Diary

Name of facilitator/s	
Name of team leader or observer	
Location	
Session/s:	

facilitators:	1=poor; 2 ok; 3=excellent	Comments
Greeted parents warmly		
Followed activities in the Guide		
Started on time as far as possible		
Were organised and prepared for activities		
Introduced topics and activities		
Encouraged parents to talk and join discussion and role plays		
Were inclusive: Made sure that all parents had the chance to speak		
Acknowledged and reflected parents' contributions		
Used Flipcharts and Cards to prompt and illustrate activities		
Summarised key points after activities		
Gave take home tasks		
facilitators handled parents' questions and emotions well		
Were confident in facilitating		
More Comments:		

Appendix 3: Team Leader and trainer observation sheets and descriptors

Team Leader Observation Sheet Descriptors

Facilitators:	1=poor; 2 ok; 3=excellent	Score
Greeted parents warmly	1= did not greet all parents; started without greeting; 2. Gave greetings at start of activities only; 3. Greeted each parent on arrival and the whole group when starting.	
Followed activities in the Guide	1= Skipped over things, missed summaries, introductions, etc.; 2. Generally tried and completed almost all activities; 3. completed all tasks in sequence	
Started on time as far as possible	1= Inconsistent, sometimes early, sometimes late; not ready to start; 2. Ready to start and begin sessions most of the time; 3; always ready at start time, organised, able to encourage parents to be ready to start on time.	
Were organised and prepared for activities	1= Disorganised and rushed the activity; 2= Prepared for the activities, used some of the resources; 3= Was well prepared for each of the activities, had and used the resources needed	
Introduced topics and activities	1= Mumbled, parents were confused about the topic; 2= Spoke clearly, gave some introduction but was not completely accurate; 3= Spoke clearly, parents were introduced to the topic and activity before participating, clear and accurate information	
Encouraged parents to talk and join discussion and role plays	1= Only one or two voices where heard, too much talking from the Facilitator, 2= Sometimes used open ended questions; 3= Used open ended questions, all participated and there was an exchange of ideas and information	
Were inclusive: Made sure that all parents had the chance to speak	1= Many moments of silence, only the facilitators voice, the conversation did not develop 2= Moments where most parents were involved in the conversation, with some silence 3= Encouraged all parents to be involved, kept the conversation going, managed conflict	
Acknowledged and reflected parents' contributions	1= Was not respectful of others thoughts and ideas 2= Sometimes acknowledged, supported and confirmed what others when needed 3= Use reflective listening so that everyone was heard and understood	
Used Flipcharts and Cards to prompt and illustrate activities	1= Skipped over things, did not use the resources; 2. Generally tried but was confused; 3. Completed all tasks in sequence using the flipchart and cards	
Summarised key points after activities	1= Moved from one activity to another without summaries; 2= Completed part of the key message before moving onto new activity; 3= Clarified, repeated key message after the activity	
Gave take home tasks	1= Did not give a homework task 2= Homework task was discussed but not given 3=Parents left the session understanding how to carry out the homework task	

Trainers' Observation & Assessment Sheet

Trainers can use this sheet to assess improvements over the days of the workshop. 1= need to improve 2=ok   3= very good

Name: ………………………………….	W1 1/2/3	W2 1/2/3	W3 1/2/3	W4 1/2/3	W5 1/2/3	W6 1/2/3	Final	Feedback: strengths & areas to improve.
Understood AIMS & learning objectives								
Understood how to prepare for activities								
Introduced topic well								
Engaged parents in activity/discussion								
Explored/extended discussion points								
Included all parents in discussion								
Could guide discussion, keep on track								
Handled parents' emotional expressions								
Overall confident to conduct activities								
Contributed to feedback & debrief								

Name: ………………………………….	W1 1/2/3	W2 1/2/3	W3 1/2/3	W4 1/2/3	W5 1/2/3	W6 1/2/3	Final	Feedback: strengths & areas to improve.
Understood AIMS & learning objectives								
Understood how to prepare for activities								
Introduced topic well								
Engaged parents in activity/discussion								
Explored/extended discussion points								
Included all parents in discussion								
Could guide discussion, keep on track								
Handled parents' emotional expressions								
Overall confident to conduct activities								
Contributed to feedback & debrief								

Trainers' Assessment Sheet Descriptors

Observation Points	Descriptors – What did we see? 1= saw none of these; 2= one-two/sometimes, not always; 3= most of these always	Comments/feedback
Understood AIMS & learning objectives	Facilitator was able to discuss aims of sessions and activities, explain them to other participants and put into practice.	
Understood how to prepare for activities	Facilitator understood the resources to be used, the types of activities (role play, game, discussion, etc.) and his or her role in the team.	
Introduced topic well	Showed clear understanding of key ideas and put them into language parents would understand.	
Engaged parents in activity/discussion	Invited parents to comment, to join in activities; gave parents time to think before joining discussion; actively listened and acknowledged parents' ideas to encourage them to contribute.	
Explored/extended discussion points	Was able to acknowledge what parents had said and suggest further ideas or give relevant information; invited other parents to provide further comment on a discussion point.	
Included all parents in discussion	Used strategies like taking turns, asking individual parents who were quiet for their thoughts, to ensure that all parents have a chance to contribute.	
Could guide discussion, keep on track	Was able to acknowledge discussion but respectfully bring parents back to the topic; and/or used strategies to end a topic, and introduce a new topic.	
Handled parents' emotional expressions	Did not become defensive, argue or disagree with parents; did not allow the whole discussion to be side-tracked into a parents' personal concerns; was able to acknowledge parents' worry and show empathy; used strategies to bring discussion back to topic; suggested possible follow-up action, if needed.	
Overall confident to conduct activities	Was not too nervous, knew what to do, explained clearly and didn't get into difficulties explaining to parents.	
Contributed to feedback & debrief	Joined in discussion; accepted feedback; gave helpful feedback; used diary observation sheet and notes.	

Appendix 3: P4CD Roles

Positions	Role Description	Criteria: What you need to know
Coordinator	• Lead and oversee planning, training, coordination, implementation and reporting • Lead TOT training with Trainers • To monitor assessment and certification of Trainers, Facilitators and Team leaders • Engage UNICEF, Church leaders, partners and provincial leadership.	Knowledge of systems, programs, practices, and resources at Archdiocese level. Ability to plan and manage resources to meet implementation requirements, staff recruitment, training, quality assurance and reporting. Advanced understanding of child development, and parenting; child protection policies, programs and services at provincial and national levels.
Assistant Coordinator	• Assist Coordinator with planning, budgets, administration, reporting and project management • Supervise M&E activities, work with Team Leaders to gather and compile data for reports; contribute to training. • Coordinate engagement, recruitment and implementation by teams.	Sound awareness of implementation requirements, M&E and reporting requirements; process and content knowledge of P4CD. Able to contribute to training and planning workshops. Sound understanding of child development, parenting and child protection principles. Knowledge of programs, practices and resources at Archdiocese level. Ability to manage data, budgets and meet reporting requirements.
Trainer	• Facilitate training workshops for Team Leaders and Facilitators twice a year. • To conduct assessments of learning outcomes of Facilitators and Team Leaders and keep records • Provide refresher training as required • Provide local training for start-up and preparation; provide in-service training for skills development as required.	Sound awareness of program implementation, facilitation skills and program content and rationale. Ability to organise and lead training and implementation workshops and to provide small group in-service training. Advanced knowledge of child development, parenting and child protection principles.
Team Leader	• Consult and report to Coordinator. • Support program delivery activities, guide community engagement, group selection and delivery of workshops. • Provide mentorship and guidance to facilitators including preparation, facilitation and debriefing. • Take corrective action when there are difficulties in any site. • Monitor program quality using M&E tools • Coordinate gathering of data, attendance records etc. for reports	Minimum grade 10 education with good reading and writing skills. Sound awareness of P4CD implementation requirements, program content and group facilitation skills. A sound understanding of child development, parenting and child protection principles. Ability to support facilitators in preparation, delivery and debriefing, to monitor and support quality facilitation through observation and feedback. Keep records and gather some data. Knowledge of programs and resources at parish level. Ability to organise program resources and engage stakeholders in parish communities.
Facilitator	• Meet training requirements for P4CD. • Engage parents, promote program and discuss their attendance. • Facilitate groups of 15-20 parents over a six-workshop program. • Keep high standards of preparation and quality of facilitation. Meet with team leaders to plan, feedback and debrief • Keep all necessary records of program delivery and attendance using diaries.	Minimum Grade 10 education, with good reading and writing skills Ability to successfully engage parents and community stakeholders to promote the program and recruit parents to attend. Ability to use appropriate facilitation skills and to lead groups of parents through all areas of program content and to explain P4CD key concepts to parents in appropriate language.