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How far do parenting programmes help change norms underpinning violence against adolescents? Evidence from low and middle-income countries

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ABSTRACT
Recent years have seen an upsurge in parent education programmes in low and middle-income countries (LMICs) that aim to help reduce violence against children. This article draws on a narrative review that examined the impact of 42 programmes working with parents of adolescents in LMICs. Here we focus on 17 initiatives that aimed to reduce neglect of, or physical, emotional or sexual violence against adolescents, or to reduce child marriage. Programmes aiming to prevent sexual violence or child marriage generally focused more strongly on understanding and challenging prevailing norms, while those oriented to preventing physical and emotional violence emphasised sharing information and practising new communication skills. We argue that key elements of programme design (group-based participatory sessions, formative research that enabled sensitive framing and adaptation of content) have strong potential to help shift norms that underpin violence against adolescents. To fulfil their potential to change norms underpinning violence against adolescents, programmes should expand their reach, with a particular focus on embedding initiatives within institutions that can take them to scale, promoting male engagement, and support participants to maintain changes over the long-term.

ARTICLE HISTORY
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KEYWORDS
Parenting programmes; violence against adolescents; social norms; gender norms

Introduction
Recent estimates suggest that globally there is an ‘epidemic\textsuperscript{1} of violence against children and adolescents. For example, data collected for the 2017 global report Ending Violence in Childhood (Know Violence in Childhood, 2017) suggest that 1.3 billion children aged 2–14 had experienced corporal punishment the previous year, and that 18 billion adolescent girls aged 15–19 had experienced sexual violence. Child marriage is increasingly considered a form of violence and affects an estimated 12 million girls a year.\textsuperscript{2}

Social norms that ‘accept, support, or allow indifference to any forms of violence’ (Klika & Linkenbach, 2019, p. 2) are increasingly recognised as a structural factor underpinning violence against children and adolescents (Lilleston et al., 2017; Know Violence in Childhood, 2017; World Health Organisation [WHO], 2018). Reflecting this, the INSPIRE package of interventions lays out seven interconnected strategies for preventing and responding to violence against children, of which changing norms and values is the second (WHO, 2018). Another key strategy outlined in the INSPIRE package is parent and caregiver support. The extent to which parenting education programmes can be a vehicle for changing norms and values that underpin violence against children, thus contributing to two of these strategies, is the focus of this article.
In recent years there has been an upsurge in parenting programmes aimed at helping parents and caregivers in low and middle-income countries (LMICs) develop ‘positive parenting skills’. Parenting programmes can be defined as ‘activities oriented to improving how parents approach and carry out their role as parents and to increasing parents’ child-rearing resources, including, knowledge, skills and social support’ (this definition draws on Daly et al. (2015), p12). They are based on the assumption that improving parents’ understanding of adolescent development and strengthening their communication skills will lead to better family relationships, improved care, less violence, and better mental health (of both parents and adolescents). A growing number aims to help prevent sexual abuse and exploitation through raising parents’ and children’s awareness of risks and helping them develop skills to avoid risky situations.

Previous syntheses of the impacts of parenting programmes have focused exclusively on younger children or have not disaggregated impacts on adolescents (eg Knerr et al., 2013; Wessels et al., 2013). Motivated by this gap, the authors recently conducted a narrative review of parenting programmes in LMICs that target the parents of adolescents (Marcus et al., 2019). In this article, we focus on a subset of programmes that aimed to reduce neglect, physical, sexual or emotional violence against adolescents, or to contribute to reducing child marriage. We examine the impacts of these programmes, and how far they have been able to change norms that underpin violence against adolescents.

**Conceptualising norms underpinning violence against adolescents and norm change processes**

Social norms involve shared beliefs about appropriate behaviour (sometimes termed ‘injunctive norms’) and about typical behaviour (‘descriptive norms’). These norms are shared within a given ‘reference group’ (community of people whose opinions matter to an individual) (Learning Collaborative, 2017). The programmes we examined aimed – directly or indirectly – to address one or more of three types of norms: those governing relationships between parents and children; norms related specifically to permissible violence; and gender norms, which intersect with other norms, as well as having their own specific effects. In many contexts, norms concerning parent–child relationships emphasise parental authority and children’s obedience and involve limited discussion, and persist throughout adolescence (UNICEF, 2016). Norms related to permissible violence vary considerably, but include, in some contexts, the belief that physical punishment and/or harsh verbal criticism can be necessary for raising children, at least in specific circumstances, such as deliberate misbehaviour or certain kinds of mistakes (Doubt et al., 2018; Mejia et al., 2012; Sim et al., 2014) or to enforce norms of appropriate gendered behaviour (Basu et al., 2017). Within any given community, while individual attitudes vary, there is often a degree of consensus around the appropriateness of these norms. By contrast, the normative framework in most contexts overtly rejects child sexual abuse and forms of violence such as rape, but boundaries are often blurred around what constitutes consent and what constitutes abuse or exploitation, particularly where transactional sex is common (Buller & Pichon, 2020).

Finally, gender norms that govern expectations of how male and female adolescents and adults should behave in different contexts, both exert their own influence on adolescents’ experiences and on parenting, and intersect with the types of norms previously outlined. These are complex, context-specific and often nuanced. For example, norms around how parents discipline adolescents are gendered, with some evidence suggesting that there are stronger taboos on fathers hitting daughters than sons (Jejeebhoy et al., 2014). In many contexts, norms require female chastity but permit or encourage male (hetero-) sexual adventurousness, affecting both girls’ and women’s experience within sexual relationships, their risk of sexual violence, and familial and community reactions if they are assaulted.

Interventions aiming to change norms may attempt to change either descriptive or injunctive norms, or both, and may do so either explicitly and directly, or indirectly by addressing some of the factors that hold particular norms in place. To analyse the contribution and potential of
parenting programmes to norm change, we adapt a framework developed by the Learning Collaborative (2017). We distinguish three main sets of strategies: changing attitudes through providing participants with new information and the opportunity to critically reflect on prevailing norms; changing behaviour through practising new skills such as positive discipline or communication with adolescents on formerly taboo topics, with the support of a peer group of other participants; and reaching a tipping point for change through organised scale-up and institutionalisation of programmes. (See Table 1 which shows which programmes adopted elements of each strategy). In the following sections, we examine evidence of programme effectiveness, and discuss how far the interventions examined made use of each approach.

Methodology

This article is based on comprehensive searches of academic and grey literature, complemented with key informant input. Database searches were undertaken in Web of Science, PsycINFO, Ovid, and EbscoHost in September 2018. Studies in English and Spanish which reported on the outcomes of an intervention involving the parents of adolescents, took place in an LMIC since 2000, and include a counterfactual were retained. Studies were excluded if their outcome focus was solely biomedical. Additional web searches were also carried out in December 2018 for relevant organisations, programmes and authors, and studies meeting review criteria were snowballed from systematic reviews and from included literature. Finally, targeted requests were made to key authors. (See Figure 1 for an overview of the process). Fifty-eight studies of 42 programmes were ultimately included in the full review and provided insights on a range of adolescent wellbeing outcomes, including impacts on psychosocial wellbeing, substance abuse, and sexual and reproductive health knowledge. This article draws on 27 evaluation studies that examine the impact of 17 programmes on violence against adolescents.

Table 2 provides an overview of the programmes and studies discussed in this article. The majority used rigorous quantitative designs (three randomised controlled trials and nine quasi-experimental studies); studies of eight programmes additionally reported some qualitative insights. All studies examined parents’ self-reported outcomes (such as knowledge, attitudes, behaviour or intended behaviour) and studies of 14 programmes also drew on adolescent reports for at least one outcome.

Limitations

Only two studies disaggregated quantitative impacts by parent gender and only two studies did so by adolescents’ gender, limiting insights on gender differences in programmes’ impact. Most studies only reported on short-term effects: 10 endline evaluations took place within six months and another four within a year of participation.

None of the quantitative data directly measures norms in the sense of people’s beliefs about expected or typical behaviour in their communities. However, quantitative data on reported attitudes, behaviour and intended behaviour change give an indication of changes in the ‘bedrock’ underpinning norms, and of the scale and direction of possible normative shifts. Qualitative data indicated the processes by which changes had occurred, and limitations to these changes, and in three programmes (Sinovuyo, CHAMP and Happy Families), provided more direct insights into normative shifts.

Overview of programmes

Table 2 summarises key information about the programmes discussed in this review.

The programmes examined took place in 23 countries, with the majority in Sub-Saharan Africa (nine programmes) and Latin America (five programmes), and a roughly even spread between urban
<table>
<thead>
<tr>
<th>Norm change building blocks and strategies</th>
<th>Change attitudes</th>
<th>Practise new behaviours</th>
<th>Reach a ‘tipping point’ for norm change</th>
<th>Example programmes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provide access to new knowledge</td>
<td>Explicit discussion of social / gender norms</td>
<td>Practise new skills</td>
<td>Develop new descriptive norm through performing new behaviour</td>
<td>CHAMP; FMP; Familias Fuertes; Happy Families Programme; Go Girls!; Imbadu Ekhaya; Let’s Talk; Sinovuyo</td>
</tr>
<tr>
<td>CHAMP; FMP; Choices-Voices-Promises; FMP; Happy Families Programme; Imbadu Ekhaya; Sinovuyo</td>
<td>Sinovuyo; CHAMP Happy Families programme</td>
<td>No evidence</td>
<td>FMP; Sinovuyo</td>
<td>No evidence</td>
</tr>
<tr>
<td>CHAMP; FMP;</td>
<td>Sinovuyo</td>
<td>CHAMP; School for Parents; Sinovuyo</td>
<td>CHAMP; Sinovuyo</td>
<td>No evidence</td>
</tr>
<tr>
<td>Action with stakeholders at multiple levels</td>
<td>Increase reach through horizontal scale-up</td>
<td>Institutionalise programmes</td>
<td>Address broader factors that underpin violence against adolescents</td>
<td>No evidence</td>
</tr>
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</table>
and rural or peri-urban locations. Nine programmes worked only with parents and with eight with both parents and children, either separately, or together for joint learning and practising skills. Children of participating adults spanned the adolescent age range, with ages 11–14 most frequently represented. In the vast majority of programmes (16/18) adult participants were mostly or entirely female, and in only one (Let’s Talk in South Africa) were they mostly male. Most programmes targeted the parents of both boys and girls; two – Go Girls! and COMPASS – only included girls and their parents.

Almost all programmes (16/18) were delivered through group classes, held in settings such as community centres and schools, usually weekly. One initiative (Parceria Project) was delivered via home visits, and one (Ligue 132) via telephone-based sessions. Programmes varied in length, from two to 16 sessions, with the majority involving five to seven sessions. Three programmes were implemented over the course of a year; the others spanned several weeks to months.

The majority of programmes were small-scale, often pilot projects. Eight programmes reached under 100 parents, five programmes worked with 100–500 participants (parents and children combined) and four reached over 500 participants. Three of these (FMP, Strengthening Families Programme/ Familias Fuertes and Sinovuyo) were national iterations of large multi-country programmes, reaching considerably more families than indicated by national evaluations. For example, FMP has cumulatively reached over one million participants to date (K. Miller, personal communication, April 30, 2019).

**Programme impacts on norms about different forms of violence**

Table 3 summarises evidence of programmes’ impact on attitudes and behaviour, the main indicators of norm change in these studies.

**Physical and emotional violence against adolescents**

Most programmes took place in settings characterised by acute poverty, high levels of community violence, conflict, displacement, HIV-related illness and death, and domestic violence. In such contexts, some parents reported viewing violence as a protective strategy to ensure obedience and reduce exposure to risk. For example, participants in the Strengthening Families Programme in Panama, who lived with daily realities of severe poverty, and drug-related violence, indicated that harsh parenting styles were the norm:

> We will not have the softness to tell a boy ‘come here and do this’. We are going to be tough and yell (Mejia et al., 2012, p. 61)

In the Happy Families Programme working with Burmese migrant families in Thailand, many participants cited learning how to teach their children to be obedient as their motivation for
<table>
<thead>
<tr>
<th>Programme</th>
<th>Area of focus</th>
<th>Country and geographical location</th>
<th>Approach</th>
<th>Programme duration (parent component)</th>
<th>Who participated</th>
<th>Age of adolescents</th>
<th>Evaluation design/methods in studies reviewed</th>
<th>Programme Scale/ Sample size, as described in each study</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bihar parent–child pilot communication programme (BCCP) (Jejeebhoy et al., 2014)</td>
<td>Violence and abuse prevention, gender equity, family relationships and communication, SRH</td>
<td>India, Rural</td>
<td>Group classes in community setting</td>
<td>16 sessions, 5–9 months</td>
<td>Parents (more mothers than fathers) and adolescents together and separately</td>
<td>13–17</td>
<td>Pre-post (no control group)</td>
<td>478 mothers, 357 fathers, 362 daughters, 429 sons</td>
</tr>
<tr>
<td>Collaborative HIV Prevention and Adolescent Mental Health Family Programme (CHAMP) – Amaqhawe (Bhana et al., 2004) (pilot) (Paruk et al., 2009); (Bell et al., 2008)</td>
<td>Family relationships and communication, SRH</td>
<td>South Africa, Rural, peri-urban</td>
<td>Group classes in community settings</td>
<td>10 weeks/sessions</td>
<td>Parents (more mothers than fathers) only</td>
<td>9–13</td>
<td>Quasi-experimental (Bhana et al., 2004; Bell et al., 2008); qualitative (Paruk et al.)</td>
<td>Main programme: 478 caregivers, 557 children (Bell et al. 2008), Pilot: 124 families (72 intervention, 52 control) (Bhana et al.); Qualitative study: 9 women from pilot area (Paruk et al., 2009)</td>
</tr>
<tr>
<td>Choices-Voices-Promises (Lundgren et al., 2018)</td>
<td>Gender equity</td>
<td>Nepal, Rural</td>
<td>Group classes in community settings and schools</td>
<td>2 sessions, &amp; once weekly for 3 months</td>
<td>Parents (more mothers than fathers) and adolescents separately</td>
<td>10–15</td>
<td>Quasi-experimental; qualitative component</td>
<td>1200 adolescents (600 intervention, 600 control); 600 parents (300 intervention, 300 in control) 764 caregivers (389 intervention arm, 375 control); 869 adolescent girls (426 intervention, 423 control)</td>
</tr>
<tr>
<td>Creating Opportunities through Mentorship, Parental Involvement, and Safe Spaces (COMPASS) (Stark et al., 2018)</td>
<td>Violence and abuse prevention, gender equity, family relationships and communication</td>
<td>Democratic Republic of Congo, n/a</td>
<td>Group classes</td>
<td>13 sessions, 1yr</td>
<td>Parents (more mothers than fathers) and adolescents separately</td>
<td>10–14</td>
<td>RCT</td>
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<tr>
<td>Familias Fuertes (Corea et al., 2012); (Orpinas et al., 2014); (Vasquez et al., 2010); (PAHO, 2006)</td>
<td>Family relationships and communication, substance abuse; in El Salvador also: SRH, violence and abuse prevention</td>
<td>Bolivia, Chile, Colombia, Ecuador, El Salvador, Honduras, Urban, peri-urban</td>
<td>Group classes in schools</td>
<td>7 weeks/sessions</td>
<td>Parents (more mothers than fathers) and children together and separately</td>
<td>10–14</td>
<td>Quasi-experimental; qualitative data from El Salvador</td>
<td>119 families in Bolivia, 182 families in Colombia, 82 families in Ecuador (Orpinas et al., 2014); 41 parents and their adolescents in Honduras (21 parent-adolescent pairs intervention, 20</td>
</tr>
<tr>
<td><strong>Program</strong></td>
<td><strong>Focus</strong></td>
<td><strong>Countries</strong></td>
<td><strong>Context</strong></td>
<td><strong>Sessions</strong></td>
<td><strong>Participants</strong></td>
<td><strong>Design</strong></td>
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<tr>
<td><strong>Families Matter!</strong></td>
<td>SRH; violence and abuse prevention</td>
<td>Kenya, Tanzania, Zimbabwe, Urban</td>
<td>Group classes in community settings</td>
<td>5–7 sessions</td>
<td>Parents (more mothers than fathers) and children together and separately</td>
<td>9–12 sessions</td>
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<td>(Vandenhoudt et al., 2010); (Kamala et al., 2017)</td>
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<td>658 parents and children (parent-child pairs) participated in Tanzania (Kamala et al., 2017), 375 parent-child pairs in Kenya (Vandenhoudt et al., 2010) and 248 parent-child pairs in Zimbabwe (Shaw et al., 2019)</td>
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<tr>
<td><strong>Go Girls! Initiative</strong></td>
<td>Family relationships and communication; SRH; violence and abuse prevention</td>
<td>Botswana, Malawi, Mozambique</td>
<td>Group classes in community settings</td>
<td>11 sessions, 1yr</td>
<td>Parents (more mothers than fathers) only</td>
<td>11–18 sessions</td>
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<td>(Schwandt &amp; Underwood, 2013)</td>
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<td>Urban, Rural, Rural, Rural</td>
<td></td>
<td></td>
<td>Quasi-experimental; qualitative component</td>
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<tr>
<td><strong>Happy Families programme</strong></td>
<td>Family relationships and communication, mental health/ well-being promotion</td>
<td>Thailand, Urban, Rural, Urban, Peri-urban</td>
<td>Group classes in community settings</td>
<td>12 weeks /sessions</td>
<td>Parents (more mothers than fathers) and children together and separately</td>
<td>RCT; qualitative component</td>
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<td>(Annan et al., 2017); (Puffer et al., 2017); (Sim et al., 2014)</td>
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<td></td>
<td></td>
<td>479 children and 513 caregivers (256 caregivers intervention, 257 control)</td>
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<tr>
<td><strong>Imbadu Ekhaya (Parents Matter!)</strong></td>
<td>Violence and abuse prevention, gender equity, SRH</td>
<td>South Africa, Urban</td>
<td>Group classes, unclear setting</td>
<td>6 weeks /sessions</td>
<td>Parents (all mothers and children together and separately)</td>
<td>10–14 sessions</td>
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<tr>
<td>(Armistead et al., 2014)</td>
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<td></td>
<td>Quasi-experimental</td>
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<tr>
<th>Programme</th>
<th>Area of focus</th>
<th>Country and geographical location</th>
<th>Approach</th>
<th>Programme duration (parent component)</th>
<th>Who participated</th>
<th>Age of adolescents</th>
<th>Evaluation design/methods in studies reviewed</th>
<th>Programme Scale/ Sample size, as described in each study</th>
</tr>
</thead>
</table>
| **Let’s Talk**  
(Bogart et al., 2013) | SRH | South Africa  
Urban | Group classes in community settings | 5 weeks /sessions | Parents only (more fathers than mothers) | 11–15 | Quasi-experimental | 66 parents, 64 adolescents |
| **Ligue 132**  
(Valente et al., 2018) | Substance abuse | Brazil  
n/a | Telephone sessions | 4 sessions, 1 month | Parents (more mothers than fathers) only | 10–18 | Quasi-experimental | 26 parents initially – final data used for analysis based on 15 parents (9 intervention, 6 control) |
| **Parceria project**  
(Pereira et al., 2013) | Violence and abuse prevention  
Violence and abuse prevention, family relationships and communication | Brazil  
n/a | Home visits | 16 weeks /sessions | Parents (all mothers) only | 12–16 | Pre-post (no control group)  
RCT (main phase),  
Quasi-experimental (pilot);  
qualitative component | Pilot: 119 adolescents and 119 caregivers (Cluver et al., 2016); Main programme: 552 families (270 intervention; 282 control) (Cluver et al., 2018); 240 participants in focus group discussions and 42 participants in interviews, also 9 workshop observations and 280 facilitator notes from sessions (Doubt et al., 2017 & 2018) |
| **Parenting psychoeducation intervention**  
Jordans et al. (2013) | Violence and abuse prevention, family relationships and communication,  
mental health/well-being promotion | Burundi  
Rural | Group classes in schools | 2 sessions | Parents (more mothers than fathers) only | 10–14 | Quasi-experimental;  
qualitative component | 58 children and their parents in intervention, 62 children and their parents in control group |
| **School for Parents programme**  
Pereira Lima et al. (2007) | Family relationships and communication,  
empowerment | Brazil  
Urban | Group classes, individualised support for parents, setting unclear | 9 sessions, 1 year | Parents (more mothers than fathers) only | Children under 18 | Pre-post (no control group);  
qualitative component | 48 parents (all completed intervention) |
| **SRH education for parents of adolescents with intellectual** | SRH | Turkey  
n/a | Group classes in community settings | 16 sessions, 5–9 months | Parents only (equal gender split) | 10–19 (61.9% aged 10-14) | Pre-post (no control group) | 42 mothers and 42 fathers (no control) |
| **Disabilities** | *Kok and Akyüz (2015)*  
**Strengthening Families Programme: For Parents and Youth 10–14 (SFP 10–14)**  
Maalouf and Campello (2014) |
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</thead>
<tbody>
<tr>
<td>Focus</td>
<td>Family relationships and communication, substance abuse, violence and abuse prevention</td>
</tr>
<tr>
<td>Countries</td>
<td>Guatemala, Honduras, Panama, Serbia Urban</td>
</tr>
<tr>
<td>Setting</td>
<td>Group classes in schools</td>
</tr>
<tr>
<td>Sessions Duration</td>
<td>10 weeks /sessions</td>
</tr>
<tr>
<td>Participants</td>
<td>Parents (more mothers than fathers); Unclear if adolescents participated</td>
</tr>
<tr>
<td>Age</td>
<td>10–14</td>
</tr>
<tr>
<td>Design</td>
<td>Pre-post (no control group)</td>
</tr>
<tr>
<td>Sample Size</td>
<td>240 children and 218 parents in total (no control): 40 children and 40 parents in Serbia, 83 children and 78 parents in Panama, 44 children and 42 parents in Guatemala, 73 children and 58 parents in Honduras</td>
</tr>
</tbody>
</table>

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*Because all the initiatives examined were run on a pilot basis, the sample size for the evaluation was identical to the total number who participated (excluding loss to follow-up), or further information about programme scale was not given.*
<table>
<thead>
<tr>
<th>Programme</th>
<th>Physical and Emotional Violence</th>
<th>Sexual violence (SV) and child marriage (CM)</th>
<th>Neglect</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bihar PCCP</td>
<td>Parent-reported changes in perpetration of violence: Mothers vs sons: 29% decrease; fathers vs sons 17% decreases; Mothers vs daughters 12% decrease; fathers vs daughters: 5% Adolescent-reported changes in violence perpetration: Mothers vs sons 28% decrease; fathers vs sons 36% decrease; mothers vs daughters 3% decrease; fathers vs daughters 10% decrease</td>
<td>Increase in mothers’ acceptance of children’s choice in who they marry (15% for boys and 25% for girls). 7% decrease in fathers’ acceptance that boys should have a choice in who they marry; 13% increase in acceptance of girls’ right to choice. Increase in mothers’ acceptance of children’s choice of when they marry (7% for boys and 16% for girls). Respective increases among fathers: 7% and 6%.</td>
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<tr>
<td>CHAMP</td>
<td>Parent-reported reduction in use of harsh physical punishment (qualitative evidence).</td>
<td>Average increase of 7 months in age parents desire their daughters to marry (19.4 – 20); just 1% reduction (not statistically significant) in proportion of parents who reported considering that CM is ‘bad for the community’.</td>
<td>More collective monitoring and guidance of children</td>
</tr>
<tr>
<td>Choices-Voices-Promises</td>
<td>No reduction in parental use of physical punishment; no impact on girls’ likelihood of experiencing all forms of violence.</td>
<td>Greater decrease in control group reports of experiencing sexual violence than intervention group (C – 26%; I – 23%); coerced sex (C – 27%; I – 15%); and child marriage (C – 14%; I – 5%).</td>
<td>Both the control and intervention group reported a 10% decrease in feeling uncared for; reported increase in perceived parental warmth and affection towards their children.</td>
</tr>
<tr>
<td>COMPASS</td>
<td>Greater understanding of harm that physical punishment can cause; 88% increase in parent reports of ‘never’ shouting at adolescents when angry, 54% decrease in reports of ‘often’, and 31% decrease in reports of ‘always’ shouting at adolescents when angry (Chile). Statistically significant reduction in parent-reported ‘parental hostility’ including shouting and hitting (Bolivia, Colombia, Ecuador). Parent-reported reduction in physical punishment of adolescents (Qualitative evidence, El Salvador).</td>
<td></td>
<td>Non-significant increase in parental monitoring of adolescents (Honduras). Statistically significant increase in parent-reported parental monitoring (Ecuador).</td>
</tr>
<tr>
<td>Familias Fuertes</td>
<td>Significant increase of parental monitoring of SV; increased community-level discussion of child sexual abuse and parental knowledge of support services (Zimbabwe).</td>
<td></td>
<td>61% of parents and 62% of children (Kenya) and 76% of parents and 74% of children (Tanzania) reported increased positive parental monitoring.</td>
</tr>
<tr>
<td>Families Matter!</td>
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<tr>
<td>Programme</td>
<td>Physical and Emotional Violence</td>
<td>Sexual violence (SV) and child marriage (CM)</td>
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<tr>
<td>Go Girls! Initiative</td>
<td>Parent-reported reduction in beating and yelling (qualitative evidence).</td>
<td></td>
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<tr>
<td>Happy Families</td>
<td>Parent-reported 18% reduction in beating, swearing at children; adolescent-reported 15% reduction in beating.</td>
<td>Increased parent-adolescent communication on sexual coercion but no change in broader gender norms underlying SV. Effects reduced at 6-month follow up – though they remained in parent reports they almost disappeared in adolescent reports.</td>
<td></td>
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<tr>
<td>Imbadu Ekhaya</td>
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<td></td>
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<tr>
<td>Let’s Talk</td>
<td></td>
<td>Statistically significant increase in participant parents discussing sexual coercion with adolescents.</td>
<td></td>
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<tr>
<td>Ligue 132</td>
<td>Statistically significant reduction in parent-reported physical abuse against adolescents.</td>
<td>Statistically significant reduction in parent-reported neglect and increase in positive parental monitoring of adolescents.</td>
<td>Statistically significant improvement in parent – and adolescent-reported parental styles including parental monitoring of adolescents.</td>
</tr>
<tr>
<td>Parceria project</td>
<td>No impact on risk of parental abuse but improved family communication.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Parenting psychoeducation intervention</td>
<td>Parent-reported reduction in physical punishment (qualitative evidence).</td>
<td>Average of 78.5% increase in school enrolment of under-18s at follow-up.</td>
<td></td>
</tr>
<tr>
<td>School for Parents programme</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SFP 10–14</td>
<td>Statistically significant increase in parent- and adolescent-reported calm communication and discipline without shouting by parents.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sinovuyo Teen</td>
<td>Parent-reported reduction in physical and emotional abuse at 1-month and 5–9 months post-intervention in pilot programme. Adolescents reported a reduction in abuse at 1-month but no change at 5–9 months. Parent-reported reduction in use of corporal punishment, but no change in adolescent reports at 1-month post-intervention (main programme).</td>
<td>No statistically significant impacts on adolescent exposure to sexual abuse, however larger sample needed for an accurate measurement.</td>
<td>Reduced parent ‘poor supervision’ and increased ‘positive monitoring’ found in pilot but not main programme; increased parent-child communication.</td>
</tr>
<tr>
<td>SRH education programme for parents of adolescents with intellectual disabilities</td>
<td></td>
<td>No statistically significant impacts on parents’ self-efficacy in protecting children from sexual abuse.</td>
<td></td>
</tr>
</tbody>
</table>
participating and reported relatively frequent use of harsh verbal punishment such as scaring their children, swearing, and shouting, (Sim et al., 2014), though at baseline they also reported ‘rarely’ taking out anger on their children (Puffer et al., 2017, p. 11).

Eleven programmes aimed to reduce physical and/or emotional violence against adolescents, through improving family communication and general parent–child relationships, and by helping parents develop ‘positive discipline’ skills; the evaluations reviewed show evidence of a reduction in nine of these (Table 3). Studies of two programmes (COMPASS in DRC and Parceria Project in Brazil) found no evidence of reduced violence. Two – the studies of Sinovuyo Teen and Happy Families – found mixed evidence with reductions on some indicators but not others. The scale of change (where reported) varied considerably between programmes (Table 3).

These programmes used two main strategies from the framework outlined in Table 1: helping participants develop new knowledge and attitudes, and enabling parents to develop new modes of behaviour, which over time could become normalised in their families and reference groups.

**Changing attitudes through new knowledge**
Qualitative data from South Africa indicates that programmes affected parents’ attitudes towards harsh discipline by raising awareness of the physical and psychological harm it causes adolescents and its ineffectiveness:

We have learnt that we were abusing our authority over our children. We learnt that the treatment we gave our children sometimes had bad results. (Paruk et al., 2009, p. 64)

If you raise your voice to a child or beat her, she will completely ignore you. I was like that before … (Doubt et al., 2018, p. 25)

Participants also reported learning that refraining from using violent discipline did not mean that they could no longer carry out their responsibility to educate their children:

I learnt that there is not [a need] to shout to a child in order to get your point across. I should be calm, sit him and gather the facts. So that he could be at ease to tell me. I should not raise my voice at him and beat him. However, I must show him that I am disappointed in what he did. (Doubt et al., 2018, p. 25)

Parents participating in CHAMP in South Africa explained that the programme had helped them understand their rights in a context where they believed children’s rights meant they were unable to discipline them:

We couldn’t talk to our children the way we wanted … when you were instructing the child or smacking the child for something that she/he had done wrong, the child would tell you that she/he is going to take you to court …. You wouldn’t feel like a parent to the child, but felt that the child was more powerful than you …. CHAMP was able to solve that problem by teaching us parents how far children’s rights go and how far parents’ rights go … We were able to have a proper discussion with our children and there was good communication … and the child was able to realise that she/he is still a child and this is a parent. (Paruk et al., 2009, pp. 63–64)

**Developing new norms through practising new behaviour**
Helping parents communicate more effectively with their children, through developing new norms around parent–child communication, and by practising communication skills through role-plays was the most common programme approach to reducing parent violence against children. As well as practising talking with adolescents, adult Sinovuyo Teen participants reported learning tips for managing anger and stress:

I learned that I should not take out stress on my child, I … take a pause or do anything like read a book to distract it – then the stress would disappear. (Loening-Voysey et al., 2018, p. 26)

Adolescent Sinovuyo participants reported adopting similar approaches when in disagreement with siblings, and as a result, perpetrating less physical violence against them (Doubt et al., 2018).
The evaluation of a parenting psychoeducation initiative in Burundi also recorded some reduction in adolescent violence as a result of programme participation (Jordans et al., 2013).

The studies reviewed found both quantitative and qualitative evidence of behaviour change. For example, Maalouf and Campello’s (2014) study of the Strengthening Families Programme in Guatemala, Honduras, Panama and Serbia found that the programme led to a statistically significant increase in parents’ self-reported agreement with the statement: ‘I tell my child when I am irritated without blaming or criticising’. A mother participating in Go Girls in Botswana commented:

This program has helped me build a better relationship with my children. I used to be very strict with my children – I would beat them or yell at them. I attended the Go Girls! Adult–Child Communication program and now I can sit with them and tell them that I love them. I can give them advice without beating them or yelling at them. (Schwandt & Underwood, 2013, p. 1182)

As participants in Sinovuyo Teen in South Africa, reported, these changes in communication represented a substantial shift in norms:

As black people we ... do not want to speak to our children about crucial matters. They taught us to communicate with our children, spend time with them and not sideline them on issues. (Doubt et al., 2018, p. 22)

**Parent neglect of adolescents**

Encouraging parents to implement newly learnt communication skills was also the key strategy used by programmes aiming to reduce neglect of adolescents, examined in six studies. These studies were primarily quantitative, with limited qualitative insights on processes of norm change around engaged parenting. The evaluations that drew on parents’ reports found positive impacts on indicators such as increased engagement with children, increased positive monitoring of adolescents (Orpinas et al., 2014; Valente et al., 2018), and in the case of School for Parents, school enrolment (Pereira Lima et al., 2007).

The studies that drew on adolescent reports found more mixed results. For example, Stark et al.’s (2018) study of the COMPASS programme found no change in adolescent girls’ reports of feeling uncared for, though it did find an increase in parental warmth and affection towards their children. The evaluation of Sinovuyo Teen’s pilot programme found reports of reduced parent ‘poor supervision’ and increased ‘positive monitoring’ from both adolescents and parents, while that of the subsequent larger-scale programme found no impacts on the same indicators (Cluver et al., 2016; Cluver et al., 2018). The timing of measurement (2–6 weeks after the intervention in the pilot evaluation, 5–9 months post-intervention in the main programme) may explain these findings as impacts may have started to fade over time.

Qualitative research from Sinovuyo Teen suggests that the changes reported arose from parents and adolescents spending quality time together both during, and as a result of participation in, the intervention (Doubt et al., 2017, p. 773). This led both to increased communication and greater mutual respect. For example:

We share our problems. And that makes us close. (Teen, Doubt et al., 2018, p. 22)

We sit down and talk and it is really nice. He tells me about what goes on at school and he has really pushed himself. He even plays cricket, they received a trophy and I would praise him. (Caregiver, Doubt et al., 2018, p. 22)

These changes are early indications of shifts in behaviour that may, over time, start to form new norms around parent–adolescent interaction, and parental engagement with adolescents. Through strengthening bonds between participants, some of the group programmes (such as CHAMP and Sinovuyo Teen in South Africa) also strengthened community social networks and helped reinstate norms about community responsibility for supporting and guiding children and adolescents that had weakened over time. As a CHAMP participant observed:
You find a child [who is not in school] and you send or accompany her/him to school … And then the mother comes to you and says – I heard that you sent my child to school. Thank you very much, that was very helpful. Before, the mother would have said – What is the matter with you? That was not your business…. Now, there is that spirit of togetherness, that I have seen the child doing wrong, and let me correct her/ him. (Paruk et al., 2009, p. 65)

None of the evaluations of initiatives aiming to reduce physical or emotional violence or neglect comment directly on whether programmes stimulated discussion among participant parents about prevailing norms around harsh punishment, or supervision of adolescents. The evidence outlined above suggests a stronger focus on changing individual beliefs and behaviour, and on change through creating a new descriptive norm, rather than through participants deliberating on prevailing norms. This contrasts with the programmes aiming to reduce sexual abuse and child marriage discussed in the next section, which had a stronger focus on challenging norms as well as practices.

**Sexual violence and child marriage**

Studies of five programmes (COMPASS, FMP, Let’s Talk and Imbadu Ekhaya and an un-named SRH education programme in Turkey) explored their effectiveness in helping parents protect adolescents from sexual violence, while evaluations of three programmes (Bihar PCCP, Choices-Voices-Promises and COMPASS) examined their impact on support for or incidence of child marriage. Five of these seven studies recorded some degree of positive change in terms of greater capacity to protect adolescents from sexual violence, and reduced support for child marriage. In common with the programmes discussed in the previous sections, these initiatives provided information and enabled parents to practise new communication skills. All also involved some critical reflection on prevailing gender norms.

Part of the curriculum for Let’s Talk, a worksite-based SRH and parenting education programme, and Imbadu Ekhaya, a similar, community-based initiative, focused on recognising violence and abuse in relationships and avoiding sexual coercion. By naming violence within relationships and making it visible, these programmes were helping to challenge norms that condone such violence and consider it beyond challenge. The evaluation of Let’s Talk found a statistically significant increase in participant parents reporting discussing sexual coercion with their adolescent children over the course of the programme. By contrast, among the control group, reported discussion of sexual coercion slightly decreased (Bogart et al., 2013). The evaluation of Imbadu Ekhaya included discussion of sexual coercion and consent in its measure of ‘breadth of communication’ between parents and children and found statistically significant evidence of change on these measures. However, it also found little shift in broader gender norms which underpin vulnerability to sexual violence and abuse, which the evaluators attribute to the relatively limited time (one session out of six) devoted to discussion of gender norms (Armistead et al., 2014). In a similar vein, Stark et al.’s (2018) evaluation of the COMPASS programme in the DRC found that it had had no effect on adolescent girls’ exposure to any form of sexual violence or incidence of child marriage. The evaluation attributed this lack of impact to the crisis context (for which the curriculum was perceived to lack relevance), the infrequent parent meetings (once a month), which were insufficient to raise awareness and build commitment to act, and to the focus on girls and their parents, rather than working to change norms in the wider community, and in particular, among potential perpetrators of sexual violence or abuse.

The Families Matter! programme (FMP) provides an example of a parenting initiative which, through a strong focus on understanding and challenging norms, has proven effective in enhancing parents’ understanding of sexual abuse and exploitation, and strengthening their capacity to protect their children. The module on child sexual abuse helps parents understand the gendered norms their children may be having to negotiate, including norms that encourage being sexually active, and the social ridicule that girls can experience if they lack material goods that others have, such as mobile phones (CDC, 2019). Unusually among the programmes we examined, Families Matter encourages
discussion of ‘pressures to conform to norms of masculinity, which may include alcohol and drugs in the context of male group socialising, pressure to be sexually aggressive or else suffer social exclusion, and embarrassment to seek out information about sex’ (Miller et al., 2016, pp. 414–415).

Like many of the programmes discussed in this article, FMP sessions include role playing to help parents and adolescents recognise, and practise skills for negotiating potentially risky situations, such as:

What would you do if … you are walking through the neighbourhood when the tailor calls you over and whispers in your ear that he’s made you a beautiful dress: why don’t you come into his workshop and try it on?

What would you do if … the neighbour who has been kindly paying your school fees since your father lost his job asks you to come over to his house that evening? (Miller et al., 2016, pp. 414–415)

FMP also makes use of audio-narratives modelling good parent–child communication, including encouraging parents to discuss consent with both sons and daughters (Miller et al., 2016). Research in urban Zimbabwe found that after taking part in sessions based on this module, parents and children reported significantly higher levels of parental monitoring about child sexual abuse. Significantly more parents also reported conversations with people in their community about child sexual abuse and knowledge of where to access services if their child was abused (Shaw et al., 2019).

Two studies examined changes in attitudes and norms around child marriage. Jejeebhoy et al.’s (2014) study of the Bihar parent–child communication intervention in India found a statistically significant change in mothers’ acceptance of sons and daughters having a say in their marriage partners (but no change for fathers). The study of Choices-Voices-Promises in Nepal found that taking part in workshops about raising adolescents in a gender-equitable manner did not lead to increased agreement among parents that ‘it is bad for a community if girls marry late’, and indeed that parents who had taken part were less likely to disagree with this statement (i.e. were more likely to support early marriage), though it had a small positive effect in raising the average preferred age of marriage. Parents also reported a strong sense of social pressure to marry their daughters by their early 20s, to avoid gossip that might harm family reputations (Lundgren et al., 2018). Unsurprisingly, this was unchanged through a few community education sessions.

**Strategies for strengthening programmes’ impact**

Overall the evidence discussed in the previous sections indicates that parenting programmes can be effective at reducing physical and emotional violence and neglect of adolescents, increasing parents’ capacity to protect children from sexual violence and reducing their support for child marriage. The evidence presented above also shows the limitations of relatively short programmes in changing ingrained patterns of behaviour upheld by prevailing social norms – with changes on some indicators and not on others, and sometimes contradictory reports from parents and adolescents. In this section we discuss how programmes’ impact may be strengthened. These recommendations are organised around two themes: widening programmes’ reach and increasing sustainable impacts; and issues related to programme structure and content.

**Widening programme reach and increasing sustainable impacts**

Changing norms that underpin violence against adolescents requires a critical mass of people to be exposed to new ideas and practices. With the exceptions of FMP, Familias Fuertes/ SFP and Sinvuyo, which is currently being scaled up and replicated (Cluver et al., 2017), most of the programmes examined were small pilot initiatives with the majority reaching fewer than 500 families. There is some evidence of programmes’ reach extending beyond immediate participants, through family members reading printed handouts and materials and discussing programme learning, neighbours taking part in home visits alongside people who were registered for programmes, and some
spontaneous diffusion activities, such as Sinovuyo participants sharing their learning through church groups (Cluver et al., 2018). However, overall, the numbers reached remain low. For parenting programmes to make a significant contribution to changing norms that underpin violence against adolescents, they would need to be implemented on a substantially larger scale (scaled up horizontally) (Carter et al., 2019). As the INSPIRE handbook shows, such horizontal scaling can be done cost-effectively and, where programmes are effective, can help prevent ‘downstream’ costs to individuals and society (WHO, 2018). In the next section, we discuss ways that this scaling-up might be achieved. It should be noted that these recommendations emerge from analysis of successes and gaps across the set of programmes we examined, rather than from quantitative studies that have demonstrated the efficacy of specific approaches.

Institutionalising programmes. Many programmes were piloted by researchers and/or international donors in collaboration with NGOs or, less frequently, government departments. None of the studies examined discussed how initiatives were, or could be embedded within public services, such as public health programmes, or offered through schools; one study (of a SRH-focused initiative in the wider review) piloted a model of working through churches. These approaches deserve further consideration as they represent a possible way of extending programmes’ reach and longevity, and thus the likelihood of sustainable norm change (Learning Collaborative, 2019). They also provide a means of engaging ‘norms influencers’ – people whose opinions and behaviour exert particular influence on others, often by virtue of their social position and networks. Our wider review found that these included community health workers and priests (Jejeebhoy et al., 2014; Puffer et al., 2016).

Investing in strengthening social networks among participants. Strengthening social support networks among programme participants and former participants may be a promising way to sustain programme impacts and increase their chance of contributing to changing norms among participants, and in the wider community. Community-building activities, such as eating together, songs or prayers can help strengthen these bonds (Doubt et al., 2018; Sim et al., 2014). Sinovuyo Teen also entrusted programme volunteers as ‘buddies’ who offered peer support between sessions. These were particularly important for participants with low levels of literacy, who struggled to read printed materials, but also helped reinforce the sense of a community among participants more broadly (Cluver et al., 2016).

As a CHAMP participant in South Africa reported:

> with people that attended the programme, friendship and trust did develop. Since we met, we bonded so much that it came to a point where when you have a problem … you go to your friend that you met when you attended the programme. We are now able to help each other and phone each other as neighbours. (Paruk et al., 2009, p. 65)

At least one Sinovuyo group resolved to continue meeting after the end of the parenting course (Doubt et al., 2018). As well as acting as a personal and social support source, informal social networks of this kind remind parents that they are part of a reference network of people in their communities who are trying to parent in a different way.

**Reaching a wider range of participants, particularly men**

Consistent with other reviews of parenting programmes (such as Bacchus et al., 2017; Panter-Brick et al., 2014), the main participants in all but one of the programmes we examined were women. A major reason for this was gendered norms ascribing primary responsibility for parenting to women, and responsibility for breadwinning to men. This meant that attending parenting programmes was generally considered women’s responsibility, particularly where programmes did not also offer economic strengthening activities and/ or where parents were not living together. In some cases, sessions were held at times that clashed with men’s work commitments. As a consequence of these gendered patterns of attendance, some women participants in South Africa and El Salvador commented that they were constrained in implementing their new learning because their male partners had not taken
part and continued to parent in authoritarian ways (Loening-Voysey et al., 2018; Pan-American Health Organisation, 2006).

The single exception where men comprised the majority of participants – Let’s Talk in South Africa – ran at workplaces, with parents being given time off work to attend (Bogart et al., 2013). This potentially promising strategy (well established in HIV prevention but less so in parenting education) deserves further exploration, as does partnering with religious institutions (Marcus et al., 2019). The growing number of programmes engaging fathers with the care of young children, such as Programme P (ABAAD & Promundo, 2019; Doyle et al., 2018) and REAL Fathers Initiative (Bacchus et al., 2017) may also have lessons for initiatives working with the fathers of adolescents.

**Programme structure and content**

As well as scaling up, our review suggests that effectiveness of parenting programmes can be increased through changes to programme structure and content to increase the depth of attention to norms that underpin violence against adolescents.

**Increasing programme length**

Many of the programmes we examined involved relatively few sessions, five to seven being most common. Some evaluations (e.g. COMPASS, Imbadu Ekhaya) indicated that programme length or frequency of sessions was insufficient to change attitudes, norms and behaviour. There is a trade-off between programme length and attractiveness to participants; while longer courses may enable stronger bonds between participants to develop and can facilitate greater exploration of deep-seated norms, they can only do so if participants are not put off by programme length, drop out or attend irregularly. Longer programmes, such as Sinovuyo managed to retain participants over a three-month period, but attendance levels were moderate (around 60%). Irregular attendance led to Sinovuyo also offering ‘catch up’ home visits, which participants appreciated, but were more costly, more demanding of facilitators, and therefore presented trade-offs for scalability (Loening-Voysey et al., 2018). A compromise may be to add one or two sessions – for example, FMP has recently added an additional session to strengthen learning on sexual abuse, which as discussed above, has had substantial positive effects on parents’ knowledge and preparedness to prevent sexual abuse.

**Linking parenting education to other poverty reduction and developmental activities**

Recognising that poverty-related stresses contribute to and exacerbate violence against adolescents, three programmes in our wider review provided parent–adolescent workshops on financial management and budgeting. Qualitative evidence suggests that both parents and adolescents found these workshops beneficial, and, in the case of Sinovuyo, to contribute to improved economic well-being among participant families (Cluver et al., 2018). Inclusion of meals aids concentration and builds social connections among participants, which can function as a support and reference group after courses finish. One programme provided food rations, which were much appreciated: ‘There was a day I did not have anything to eat and SFP 10 –14 gave me a bag of food. The bag was huge and it lasted for an entire month’ (Mejia et al., 2012, p. 62), and one provided cash transfers and support for accessing employment (Pereira Lima et al., 2007), though the evaluations did not attempt to measure the effects of these factors on learning or behaviour change. Integrated anti-poverty and parenting education programmes focused on younger children, such as Chile Crece Contigo (Daly et al., 2015) may have lessons for programmes focusing on the parents of adolescents.

**Expand discussion and deliberation around social norms**

Our analysis of programme curricula suggests that explicit discussion of norms is far more common in programmes focusing on sexual violence and child marriage than in those focusing on physical
and emotional violence. The latter typically focus more on sharing information and practising communication skills (see Table 1). We know that norms condoning or even mandating violent discipline in certain situations are widespread, and that efforts to shift such norms among parents of young children have achieved a considerable reduction in such violence; indeed, the connections between norms condoning intimate partner violence and child maltreatment mean that norms shifting programmes can be effective in reducing both simultaneously (Bacchus et al., 2017). Programmes aiming to reduce violence against adolescents would do well to learn from the structured and systematic approach to changing harmful norms used by programmes such as REAL Fathers and SASA! in Uganda. These involved discussion of gendered social norms around violence and engaged parenting, as well as helping participants develop effective communication skills between couples and with their children (Bacchus et al., 2017).

The way that programmes engage with norms is critical to their success. As compared to other non-formal education programmes, parenting programmes more commonly draw on curricula developed in other contexts, adapting them for local use (Marcus et al., 2019). This adaptation is critical for effectiveness and needs to encompass understanding of, and engagement with the specifics of norms that influence violence against adolescents. Several evaluations (such as those of COMPASS in DRC and Parceria Project in Brazil) suggested that inadequate understanding of the local normative context affected participants’ receptiveness to programme content and contributed to the lack of change on a number of indicators. Indeed, Stark et al. (2018) suggest that further efforts are needed to adapt parenting programmes to contexts of humanitarian crisis, given specific norms affecting parenting practices and perceptions of acceptable risks and levels of supervision in these contexts. The Happy Families programme with Burmese refugees in Thailand represents a promising example: the programme took as a point of departure the ‘meta-norm’ of ‘loving kindness’ as a framework. This enabled facilitators to emphasise the ways suggested practices were consistent with widely accepted norms and values, even where they required a behavioural shift and represented a challenge to connected norms, such as that children should obey parents and that parents should take decisions without any need to consult their children (Sim et al., 2014).

**Invest in sustaining programme impacts**

There is relatively little evidence of whether impacts have been sustained, one indicator of whether norms are really changing. Only two studies (Paruk et al., 2009; Pereira Lima et al., 2007) reported on impacts beyond two years. Promisingly, both found lasting impacts. However, two studies that undertook surveys immediately post-participation and around six months later, found that behaviour changes started to weaken over time (Cluver et al., 2018; Sim et al., 2014). Many of the strategies discussed earlier (such as increasing systematic focus on norms, increasing engagement of fathers and norms influencers, strengthening peer support networks) are likely to contribute to a greater degree of sustainable change. In addition, programmes could consider holding refresher sessions, reunions, ad hoc follow-up support, or in contexts where access to mobile phones is common, reminders via text message or WhatsApp. These could all help sustain both in-person and virtual reference groups, reinforcing learning and behaviour change.

**Conclusion**

Overall, the evidence in our review suggests that parenting programmes appear to be contributing to the building blocks of change in norms that underpin violence against adolescents, and if expanded, could extend impacts and catalyse a more substantial process of change. Given the huge scale of violence against adolescents globally, and its long-lasting life consequences, our review suggests that parent education programmes are an approach that deserves greater attention, as part of multifaceted efforts to improve family wellbeing.
Notes

3. For reasons of space, hereafter we will refer to parents and caregivers as ‘parents’ while recognising that not all adolescents live with their parents.
4. For two programmes, FMP and Sinovuyo Teen, it also draws on the available supplementary reports.
5. Some of the studies reviewed additionally indicated that supplementary qualitative studies had taken place but did not report their findings.
7. Sim et al. (2014); Jordans et al. (2013).
8. Whether adolescents were included in any sessions was not clear for the other two programmes.
9. Some studies only reported on study sample rather than the number of programme participants, thus possibly biasing numbers downwards.
10. In discussing these two forms of violence together, we are following the approach taken in majority of studies reviewed.
11. The two that did not were the SRH programme in Turkey (Kok & Akyüz, 2015) and COMPASS (Stark et al., 2018).
12. Families Matter! is currently active in 11 countries in Sub-Saharan Africa and Haiti. It is aimed at 9–12 year olds and their parents with adolescents up to the age of 14 commonly participating (K. Miller, personal communication, September 10, 2019).
13. It is important to note that our analysis may be affected by the level of description of curricula, which is highly variable between evaluations.

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