Parenting of Adolescents

Programming Guidance
Programming Guidance for Parenting of Adolescents
Acknowledgements

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Parents play an essential role in influencing how adolescents interact with the complex, interlinked factors that shape their development. Not only do positive parental relationships enhance developmental outcomes for adolescents, effective parenting can also alleviate the impact of negative external factors. In addition, the influence of parenting practices can extend across generations. Building on parents’ existing strengths and equipping them to provide support to their adolescent children through parenting programming has the potential to have a profound positive influence on adolescent development.

The aim of this document is to guide efforts to strengthen evidence-based programming for parenting of adolescents, in support of UNICEF’s mandate to maximise adolescents’ developmental potential. It is targeted at practitioners and stakeholders working on responses to support parenting and caregiving of adolescents.

Parenting programmes of adolescents share features with parenting programmes of younger children, and should consolidate and magnify positive benefits from earlier investments. As children mature into adolescence, the parenting relationship evolves, and parents require new developmentally-appropriate skills and strategies to meet their children’s needs. Parenting programmes of adolescents are designed to respond to these needs, and the specific priorities and preferences of adolescents and their parents.

A comprehensive review of the existing evidence base underpins the recommended key considerations and core content areas for programmes described in this document. In terms of key considerations, parenting programmes of adolescents should:

- Use a strengths-based approach that recognises parents’ existing skills and experience, and in turn supports them to nurture the strengths of their adolescents
- Promote gender-equitable norms and reduce exposure to gender-specific risks
- Promote the safe and meaningful participation of adolescents within their families and communities, according to their evolving capacities
- Be inclusive of all parents, including the most marginalised, to meet the needs of their adolescent children
- Rely on the sizeable existing knowledge base on parenting of adolescents

Evidence-based programmes for the parenting of adolescents also share a number of core content areas, depending on programme aims and target audience. These include content to:

- Promote loving, warm and affectionate relationships between parents and their adolescent children, using age-appropriate strategies, to promote adolescent well-being
Executive Summary

- Improve parents’ knowledge of adolescent physiological, cognitive, social, and emotional development, to enable them to meet their adolescent children’s needs more effectively
- Develop parents’ skills to communicate respectfully with adolescents in a manner that respects their evolving capacities
- Support parents to employ positive, non-violent discipline techniques that rely on communicating expectations and setting parameters around adolescents’ behaviour
- Empower parents to create safe environments, by reducing exposure to risks, and to assisting their adolescent children to access support services
- Support parents to provide for adolescents’ basic needs, such as through the inclusion of parenting programmes in social protection schemes supporting families living in poverty, whilst taking account of adolescents’ growing decision-making roles in the household
- Protect and promote parental mental health and link them with further care as required

This guidance also outlines how to plan for scale-up and sustainability, from the initial stages of development to ensure extended reach and lasting impact. It describes how to develop strong monitoring and evaluation systems, which are essential to support and inform programme implementation. Finally, additional resources to support programmers are provided in Annex 1, which sets out specific activities required to design, deliver and evaluate parenting programmes of adolescents and plan for future scale up, following a nine-step process.
Introduction

Adolescence (10-19 years of age) is a significant stage marking the transition from childhood to adulthood, which offers a critical second window of opportunity, after infancy, to promote positive development.\(^4\) During this period, positive environments and relationships can enhance developmental outcomes, while the impact of negative experiences can be intensified and have long-lasting influence into adult life.\(^4\)
There is growing recognition of the critical role of engaging parents and caregivers as key partners to nurture and support healthy adolescent development, including in contexts where families face challenges and adversity. As adolescents mature, their relationships with their parents shift and adapt to meet their age-specific needs. Throughout these changes, even as adolescents’ independence increases and their capacities evolve, parents retain important influence over critical aspects of development, such as identity, emotional well-being, and interpersonal relationships. This is of particular relevance in the context of the COVID-19 pandemic, where adolescents may not be able to access the usual places they study, work and socialize, and may be spending more time with parents than in usual circumstances.

UNICEF is committed to ensuring that adolescents can meet their full developmental potential, contribute positively to their societies, and safely and healthily transition to adulthood. Specifically, there are four key areas of UNICEF’s response to support adolescents’ development:

i. Maximizing physical mental and social well-being
ii. Supporting adolescent learning and acquiring skills for learning, citizenship, employability and personal empowerment
iii. Ensuring adolescents feel safe and supported
iv. Providing opportunities to civically engage in their communities

An individual’s relationship with their parent/s is one of the most important relationships that they have. Developing parenting programme responses that support parents to recognise and nurture both their own and their adolescent children’s strengths provides a powerful and underutilised opportunity to influence adolescent development.

What is the aim of this document?

The aim of this document is to guide efforts to strengthen evidence-based programming for parenting of adolescents, in support of UNICEF’s mandate to maximise adolescents’ developmental potential.

It consists of three sections:

- A description of the role of parents in promoting healthy adolescent development
- An evidence-based overview of key considerations and core content for parenting of adolescents programmes
- An Annex with detailed information on how to develop programming responses, covering integration into existing services as well as new initiatives

The document also contains a set of case studies of existing programmes, with a focus on programmes from low and middle income country settings (LMIC).

Who is this document for?

This guidance is targeted at practitioners and stakeholders working on programmes to support parenting and caregiving of adolescents. In addition, it is also a valuable resource for stakeholders looking to strengthen policy and programming responses to promote and nurture adolescent development.
Parenting of adolescents and COVID-19

The COVID-19 crisis is exacerbating existing vulnerabilities and limiting access to health and care services, learning, work, and social support for adolescents and their parents. In addition to the health threat of the virus, measures used to prevent and control the spread of COVID-19 are exposing adolescents and their parents to broader risks through disruptions to families, friendships, routines and wider community activities. They are at risk of heightened isolation, anxiety and stress, endangering their mental health; whilst also experiencing changes to routines and social infrastructure, which ordinarily foster resilience to challenging events. With school closures and declines in the formal and informal supply of paid childcare, the demand for unpaid childcare provision is falling heavily on women in particular, not only because of the existing structure of the workforce, but also because of deep-rooted, discriminatory gender-based social norms.

Parents have a heavy burden to bear. Not only do they need to deal with worries about their own health (including mental health), economic insecurity, and uncertainty about the future, but they are also responsible for the well-being of their children throughout these challenging times, against a context of rolling school closures and limited access to childcare. Parents need to support their adolescent children to protect themselves and others from contracting the virus, to help them to find ways to connect safely with friends, to maximise their opportunities to access available education and skills training, and to communicate openly and honestly about the impact of economic insecurity on the family and household.

Key audiences for this guidance include:

- Legislators and policy makers who are building comprehensive multisectoral responses to support adolescent development
- Strategic planners across relevant sectors who are planning programming responses to promote optimal adolescent development
- Governmental or non-governmental practitioners and implementers of programmes for parents and/or adolescents within different sectors
- Programme specialists or humanitarian practitioners who are working on adolescent development programmes and initiatives
- Funders of programmes to promote positive adolescent development
- Advocates, including adolescent, youth and parenting advocates
- The private sector working to support parents in the workforce

How does this guidance document complement existing global frameworks and resources?

The document has been developed in line with UNICEF’s Global Parenting Framework, and to complement existing UNICEF parenting guidance, including Designing Parenting Programmes for Violence Prevention: A Guidance Note, Standards for ECD Parenting Programmes, and the Caring for the Caregiver package. The key considerations and core content areas mapped out below, along with the resources in Annex 1 which intend to support the development of the programming response, are aligned with these resources.
**Key definitions**

UNICEF defines **parenting** as the interactions, behaviours, emotions, knowledge, beliefs, attitudes and practices associated with the provision of nurturing care. This refers to the process of promoting and supporting the development and socialization of the child. It is the entrusted and abiding task of parents to prepare children, as they develop, for the physical, psychosocial, and economic conditions in which they live, work, play, learn and thrive. Amidst the many influences on child development, parents are critical to children’s development, protection, empowerment, adjustment and lifelong success.

In this document we refer to **parents** with the understanding that a parent is not only an adolescent’s biological mother or father. The term refers to any caregiver or guardian who is responsible for the care of an adolescent child. This includes mothers and fathers, brothers and sisters, grandparents, other relatives or non-related carers. In addition, parenting is often not performed by one individual only, but by a number of family members at once.

An **adolescent** is an individual (including boys, girls, and other identities) between 10-19 years of age. Younger adolescents are between 10 to 14 years of age and older adolescents are between 15 to 19 years of age. However, it is noted that in different contexts, definitions of adolescence differ vastly, and in some cases, children are considered to transition directly from childhood to adulthood, which has implications for parenting.

The document also complements key global frameworks focused on promoting the transformative power of adolescence, across LMICs in particular. These include the Sustainable Development Goals and the 2030 Agenda on Sustainable Development, the Global Strategy for Women’s, Children’s and Adolescents’ Health (2016–2030), the Global Accelerated Action for the Health of Adolescents (AA-HA! ) Guidance to Support Country Implementation, and the Guidelines for Working with and for Young People in Humanitarian Settings. UNICEF-specific documentation includes UNICEF’s Strategic Plan (2018-2021) including the section on adolescents as an emerging priority, the UNICEF Programme Guidance for the Second Decade, the Gender Action Plan (2018-2021), and UNICEF’s Strategy for Health 2016-2030.

**Key resources for programming for pregnant and parenting adolescents**

This guidance document does not specifically cover programming to support the development of parenting skills of pregnant and parenting adolescents. However, the guide is relevant for programming directed at these adolescents’ own parents, to support them to manage their changing psychosocial and material needs as they start their parenting journey.

Pregnant and parenting adolescents are an important group requiring special support and whose needs are also covered in other related guidance from UNICEF and partners.

Adolescence is a significant developmental stage marking the transition from childhood to adulthood. It is characterised by an emerging sense of self-identity, exploration of personal interests, beliefs, values and goals, increased independence and autonomy beyond the family, growing responsibility, increased engagement in risk behaviours, emerging sexuality, amplified significance of peers, intensification of gender stereotypes, and shifting relationships with parents and caregivers.
Interventions delivered during adolescence can build on earlier investments and prevent their impact from diminishing over time. Increased neural plasticity during adolescence means that the developing adolescent brain is extremely sensitive to positive and negative influences. Positive environments and relationships can enhance developmental outcomes, while the impact of negative experiences can be intensified and have long-lasting influence into adult life.

Adolescents are distinguished by personal, social, development and cultural factors, including but not limited to sex, gender, age, stage of development, ethnic and racial background, abilities and disabilities, and other life circumstances, and may require different support throughout their various life course. They require age sensitive policy and programming initiatives at multiple levels in order to maximise their opportunities to reach their developmental potential. A critical part of this response is supporting parents to recognise and nurture their own and their adolescent children’s strengths, to shape and influence adolescents’ identity and well-being as they mature from young adolescents into early adulthood.

**Why is parenting during adolescence important?**

Adolescents need ongoing love and support as they undergo and manage rapid physical, social, sexual, and psychological changes and explore developing their own identity. As they mature, their relationships with their parents shift and adapt to meet the age-specific needs that emerge. Adolescents seek increased independence and autonomy, which requires ongoing renegotiation and re-organisation of the parent-child relationship. This can lead to higher levels of conflict and less closeness in the caregiving relationship. However, ultimately this period of transition leads to a more equal and mutually supportive relationship, characterised by shared decision-making and power. Thus, although the caregiving relationship changes during adolescence, it remains vitally important. Effective parenting during this period can maximise adolescent’s developmental trajectories, enhance their capacity for resilience in the face of adversity, and have long-lasting effects on a number of health and educational outcomes.

The parent-child relationship has significant and lasting effects on brain development. This is apparent from the early years, and persists into adolescence. Parent-adolescent relationships that are characterised by high levels of criticism, conflict and unpredictability are associated with poor neurological development in regions of the brain responsible for cognition and emotional regulation. On the other hand, warm, supportive and mutually respectful relationships between parents and their adolescent children are associated with favourable brain development outcomes. For example, the frequency of positive maternal behaviour during early adolescence is linked with structural changes in areas of the brain associated with better cognitive development and mental health.

Parents and adolescents, and the environments in which they live, work, study, and conduct relationships, are greatly affected by a range of personal, social and political factors, including socio-economic status, physical and mental health, employment and employment conditions, access to education, community safety, and cultural norms. These factors, which are interlinked and mutually reinforcing, can greatly influence the quality of interactions between parents and adolescents. For example, many parents living in poverty experience high levels of stress, stigma and shame as they try to meet their families’ basic needs. In turn, elevated parental stress is linked
to poorer emotional, social, and behavioural outcomes for adolescents. In addition, exposure to violence and limited access to opportunities for education, skills building and employment, influence adolescent physical and mental health, sexual and other risk-taking, and how adolescents interact with their parents.

Parents have an impact on how adolescents interact with the complex interlinked individual, family, peer, community and societal factors that influence their development (see Figure 1: Multilevel Influencers on Adolescent Development). Under parents’ care, family homes can be a safe haven, providing essential support for adolescents as they experience profound physiological, sexual, cognitive, social, and emotional changes. For example, effective communication between adolescents and parents about aspects such as sexuality can influence adolescents’ healthy sexual behaviours. On the other hand, homes can be environments in which adolescents have negative experiences which affect their well-being, such as witnessing or being victims of violence, parental substance abuse or chronic marital conflict.

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**Figure 1: Multilevel Influencers on Adolescent Development**

![Figure 1: Multilevel Influencers on Adolescent Development](image-url)
Positive parenting can alleviate the influence of negative external factors on adolescent development. For example, through keeping track of friendships, parents may be able to support their adolescent children to engage in protective and affirming relationships with their peers. Through assisting their adolescents to navigate unsafe environments, such as communities or online spaces, they can protect them from exposure to potential harms that might influence their physical and/or mental health and well-being. There is evidence showing the potential protective effect of positive parenting on the development of the adolescent brain in the context of adversity: a positive maternal relationship has been found to mitigate impact on frontal lobe development in adolescents living in disadvantaged neighbourhoods.

Parenting practices influence transmission of positive or negative outcomes across generations. There is a growing understanding of how multigenerational exposure to adversities can have a cumulative negative influence on developmental outcomes in children and adolescents. Adolescents who experience risk factors such as poor supervision, neglect, harsh punishment, and family violence, are more likely to later engage in similar forms of behaviour with their own children, in turn placing them at risk for negative outcomes. On the other hand, positive parenting behaviours, and supportive parental relationships, are linked with better child and adolescent well-being and educational attainment, and thus have the potential to confer positive benefits to the next generation.

When is parenting important? A life course perspective

Effective parenting of adolescents builds on the existing strengths, skills and experience of parents, and the benefits of early investments. Better quality parent-adolescent relationships are evident where there has been a history of sensitive and responsive interactions since the early years. Parenting programmes of adolescents thus have the potential to consolidate and magnify positive outcomes for adolescents into adulthood, and into the next generation.

While the parent-child relationship adapts and shifts over time, there are certain aspects which remain constant, such as providing one’s children, whether babies or adults, with warmth, love and affection. Other aspects of parent-child relationships change in nature over time. For example, positive parental control during childhood ideally shifts to monitoring without control during adolescence. Parenting programmes of adolescents also require specific focus on the emerging sexuality of young people, to promote healthy sexual and reproductive health behaviours.

What are parenting programmes of adolescents?

Parenting programmes are broadly defined as “a set of activities or services aimed at improving how parents approach and execute their role as parents, specifically their parenting knowledge, attitudes, skills, behaviours, and practices.” Parenting programmes of adolescents share many features with parenting programmes of younger children (both core content and delivery-related) and, ideally, should build on earlier interventions. As the parenting relationship evolves, however, parents require new developmentally-appropriate skills and strategies to meet their children's needs. Parenting programmes of adolescents are designed to respond to these needs, and the specific priorities and preferences of younger and older adolescents and their parents. Parenting programmes of adolescents also require specific focus on the emerging sexuality of young people, to promote healthy sexual and reproductive health behaviours.
### Table 1: Parenting Across the Life Course
As children age, the knowledge and skills that parents need adapts to meet their developmental stage.

<table>
<thead>
<tr>
<th>Early childhood</th>
<th>Late childhood</th>
<th>Early adolescence</th>
<th>Late adolescence</th>
</tr>
</thead>
<tbody>
<tr>
<td>prenatal-4y</td>
<td>5-9y</td>
<td>10-14y</td>
<td>15-19y</td>
</tr>
<tr>
<td>Knowledge of early physical, cognitive, emotional, social development</td>
<td>Understand ongoing physical, cognitive, emotional, social, sexual development</td>
<td>Understand ongoing development, specific emphasis on puberty, sexual development, and risk taking</td>
<td>Understand ongoing developmental changes</td>
</tr>
<tr>
<td>Secure attachment</td>
<td>Ongoing warm relationship</td>
<td>Nurturing a connected relationship, including quality time, allowing for growing independence</td>
<td>Continue to nurture a connected relationship</td>
</tr>
<tr>
<td>Opportunities for learning</td>
<td>Opportunities for learning</td>
<td>Communicating about future life decisions</td>
<td></td>
</tr>
<tr>
<td>Emerging gender socialisation, modelling gender equality</td>
<td>Positive discipline techniques (setting clear boundaries and consequences)</td>
<td>Positive discipline techniques (rules about communication and behaviour, and agreed age-appropriate consequences)</td>
<td>Addressing gender socialisation as it becomes more entrenched, modelling gender equality</td>
</tr>
<tr>
<td>Introducing positive rewards and boundaries</td>
<td>Providing a safe physical environment, protection from harms outside of the home</td>
<td>Active awareness and some control of whereabouts, activities, friendships</td>
<td>Continued active awareness of whereabouts, activities, friendships</td>
</tr>
<tr>
<td>Providing a safe physical environment</td>
<td>Control of whereabouts, activities and friendships</td>
<td>Emerging engagement in decision-making, in line with capacity</td>
<td>Increased engagement in decision-making, in line with capacity</td>
</tr>
</tbody>
</table>
Not all parents require or desire the same types of intervention. Different types of parenting programmes of adolescents cover different content and provide varying levels of support. Programmes can be universally delivered (designed as a primary prevention strategy to all parents of adolescents), selective (delivered to specific at-risk groups, such as parents of pregnant adolescents, LGBTIQ+ adolescents), or indicated (delivered to parents of adolescents with specific identified needs, such as behavioural problems, disabilities, or child protection concerns). Parenting programmes of adolescents can be delivered to groups or individuals, by professionals, lay workers or peers, in a range of settings (see Annex A, Step 6). As with other types of parenting programming, parents may need to move between different types of programmes, depending on the challenges that they and their adolescent children are facing. Thus, programmes should consider the developmental stage of the adolescent beneficiaries, and/or needs of the parent and adolescent, and tailor programme and information according to key considerations.

Parenting programmes of adolescents can effectively strengthen parenting behaviours that promote and protect adolescent development. There is a strong knowledge base for parenting programmes of adolescents. The evidence shows that through increasing understanding of early and late adolescent development (including sexual development), improving attitudes about parenting, providing opportunities for skills expansion, and empowering parents to effectively use strategies, programmes can lead to improved adolescent outcomes. Outcomes of programming vary according to the aims of the programme, core content areas (see Annex, Step 2) methods of delivery, and the targeted population (see Table 2: Examples of Adolescent Outcomes of Parenting Programs for Adolescents).

Programmes to promote positive parenting of adolescents should strengthen efforts to address poverty and inequality, reduce exposure to violence and promote access to services such as childcare, education, social protection, skills development, safe recreational spaces, and health services (including HIV, sexual and reproductive health, and mental health services).

How are skills taught through parenting programmes?

Parenting programmes rely on different techniques to support parents to develop their parenting skills.

Skills that are commonly taught include communication skills, goal setting, giving affection, setting rules and limits, realistic expectations, clear routines, praise, parent coping skills, activity scheduling, problem solving, relaxation, tangible reward, monitoring, personal safety skills, social skills training and contingency management principles.

Techniques used to help parents to internalise these skills include homework, modelling, role play, psychoeducation, active skills training or coaching, practice and repetition of skills and feedback following direct observation of parent–child interaction.
### Table 2: Examples of Adolescent Outcomes of Parenting Programmes of Adolescents

<table>
<thead>
<tr>
<th>UNICEF areas of response</th>
<th>Maximising physical, mental and social well-being</th>
<th>Supporting adolescent learning and acquiring skills</th>
<th>Ensuring adolescents feel safe and supported</th>
<th>Providing adolescents with support to engage in their communities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Examples of parenting programme outcomes</td>
<td>▶ Improved adolescent mental health</td>
<td>▶ Improved access of adolescents to education and skills building</td>
<td>▶ Raised parental awareness of adolescent sexual abuse, gender-based violence, peer pressure, and bullying</td>
<td>▶ Improved adolescent communication and negotiation skills</td>
</tr>
<tr>
<td></td>
<td>▶ Improved adolescent physical health</td>
<td>▶ Improved awareness of adolescent development (parents)</td>
<td>▶ Improved age appropriate positive discipline techniques</td>
<td>▶ Increased opportunity for adolescents to express views and be involved in decision-making in families</td>
</tr>
<tr>
<td></td>
<td>▶ Improved sexual and reproductive health/behaviours</td>
<td>▶ Improved parenting knowledge and practices (parents)</td>
<td>▶ Improved parental mediation in digital spaces</td>
<td>▶ Shifting of social norms that prevent adolescents from participating in their communities</td>
</tr>
<tr>
<td></td>
<td>▶ Improved positive gender norms</td>
<td>▶ Increased parental participation (male and female) in child care activities</td>
<td>▶ Shifting social norms that are harmful to adolescents</td>
<td>▶</td>
</tr>
</tbody>
</table>
Parenting programming should be based on the best available evidence. Research shows that there are specific elements that are important in programming for parents of adolescents. These include: i) key considerations and ii) core content areas for programmes, described in more detail in this section.
Key considerations for developing parenting programmes of adolescents include: the use of a strengths-based approach; promotion of gender-equitable norms; promotion of adolescent participation; inclusion of all parents; and reliance on the existing knowledge base on parenting of adolescents.

Use a strengths-based approach

Key message: Using a strengths-based approach in parenting programmes of adolescents builds on parents’ skills and experience, and supports them to nurture the strengths of their adolescents.

Parenting programmes of adolescents should use a strengths-based approach. In practice, this means that programming should value and build on parents’ existing strengths, skills, experience, knowledge, and resilience. This is in contrast to a deficits-based model, which focuses on negative parenting practices (often as perceived by another). Efforts to implement parenting programmes risk focusing on negative aspects of parents’ situations, minimising their skills, and attributing blame for contextual factors beyond parents’ control. Strengths-based approaches encourage collaboration between parents and programmers, and support the development of responses that maximise existing individual and community assets.

In turn, parents’ efforts to use a strengths-based approach in parenting their adolescent children should be reinforced and supported through parenting programmes. Having parents who are able to identify, acknowledge, and encourage their children’s strengths is associated with better adolescent well-being. Programmes should integrate this approach across their activities, and support parents of adolescents to implement strategies to nurture and reinforce their adolescents’ individual positive qualities and abilities.
**Promote gender equitable norms and reduce exposure to gender-specific risks**

Key message: As gender socialisation becomes more entrenched, promoting equitable norms and reducing exposure to gender-specific risks through parenting programmes of adolescents is critical.

Building the capacity of the parenting workforce to deliver gender-responsive programming across early and later adolescence is critical. All adolescents, regardless of their sex and/or gender should be able to live a healthy and fulfilled life and be accepted for who they are. Yet, gender roles and expectations become more deeply entrenched during adolescence, often restricting girls’ opportunities and choices, and forcing boys into stereotypical masculine behaviours. Often adolescents who do not conform to traditional ideas about gender face pressures to adjust their actions, or experience mistreatment by family, peers, teachers, and face condemnation by their communities. How adolescents see themselves and their abilities plays an important role in development processes as they transition to adulthood. Gender stereotypes and biases can hold adolescents back from participation, interaction and learning, and from realising their full identity and potential.

Intervening during this period provides opportunities to promote positive gender socialisation messages prior to adulthood, and reduce exposure to gender-specific risk factors. Through parenting programmes, parents can be made aware that gender stereotypes are harmful for adolescent development, and of the importance of equity, respect, and the recognition of individual strengths. In addition, programmes should actively seek to include fathers or other male caregivers, to engage them in activities to promote positive parenting, to raise awareness of the impact of harmful gender socialization on their adolescent children, and to support them to model gender equitable behaviours in their homes. This will require designing programmes in a way that facilitate their participation and can overcome contextual barriers (see Annex 1, Step 7).

Depending on context, population, developmental stage, and desired outcomes, programmes can include specific focus on gender-related issues that are important for adolescents. These include shared responsibility for prevention of pregnancy, HIV and STI infection, prevention of gender-based violence, and promotion of positive sexual and reproductive health behaviours and menstrual health. In some contexts, specific issues such as child marriage may need to be addressed through parenting programmes. Programmes should support and empower parents to communicate with their adolescent children on sensitive issues regardless of their or their child’s gender.
Ensure adolescent participation

Key message: Parenting programmes for adolescents should support the safe and meaningful participation of adolescents within their families and communities, according to their evolving capacities.

Adolescents have the right to develop and express their views and opinions on issues that affect them including within the family. The Convention on the Rights of the Child outlines how a gradual transfer of responsibilities takes place as children mature into adolescence and develop improved capacities for decision-making, becoming increasingly less reliant on their parents and other adults for guidance and protection. Parenting programmes of adolescents should reflect this shift. Programmes should support parents to learn how to engage with their adolescent children and create conditions within families for both younger and older adolescents to meaningfully participate in matters that affect them and their families, including education, partnerships, friends, employment and money. Parents should consult adolescents about decisions that affect their lives within the family environment, and create opportunities for them to engage and participate outside the home.

Adolescent participation is also a key consideration for ensuring that programmes are acceptable for them, and responsive to their experiences, needs, and concerns. Adolescents should be consulted about initiatives to strengthen the parenting capabilities of their caregivers. Adolescents and their parents should be involved in the design, adaptation, implementation and evaluation of programming. These participatory processes can be especially empowering for adolescents as they adopt leadership roles, and become active partners in creating responses that can have wide impact. They signify respect for adolescents’ opinions, and encourage age- and culturally-appropriate engagement, independence, and critical thinking.

Ensure inclusivity of programming

Key message: Programmes should be inclusive of all parents, including the most marginalised, to meet the needs of their adolescent children.

Parenting programmes of adolescents should be non-commercialised, inclusive and accessible for all adolescents and their parents, including those from marginalised groups. Programmers should consider the needs of parents from marginalised groups, such as those from indigenous or minority ethnic groups or displaced individuals, and/or those whom have adolescent children with complex needs (e.g. experiencing issues relating to sexual orientation, HIV, pregnancy, child marriage, substance use, and other challenges). Programmes should focus on broadening the scope of parenting of adolescents, by including the full range of potential primary caregivers, not only biological mothers. Importantly, programmes need to be accessible to both adolescents and parents with different disabilities, which may require using multiple formats of delivery.
Additional investment and effort is required to ensure that the priorities and preferences of diverse groups are included in programmes, and to avoid programmes becoming an opportunity accessed by relatively advantaged families only. While there is no one set of criteria for ensuring a parenting programme of adolescents is adequately accessible and inclusive, creating conditions for inclusive programming can be achieved through a number of strategies. These include actively engaging with different groups at all stages of strengthening the response (e.g. through existing networks), designing responses that reflect different groups’ needs, and ensuring that the workforce is capacitated to work on issues relating to adolescents in a manner that is age, culturally and gender sensitive. Tracking access, uptake and impact of programming for different groups through the use of disaggregated data is also critical. Programmers should not have to pay for access to evidence-based parenting programmes, and should, wherever possible, draw from existing open access intervention packages to enhance accessibility, as well as maximise potential for scale up.

**Evidence-based programming**

Key message: **There is a good evidence base supporting parenting programmes of adolescents. Programmes should make use of knowledge and experience available.**

There is a strong knowledge base for parenting programmes of adolescents. Evidence-based programmes should integrate the best available research evidence with the priorities and preferences of parents and adolescents in the given context. While most of the available evidence is from high income countries (HIC), parenting programmes of adolescents are effective in improving a range of adolescent outcomes in LMIC.\(^5,46,55\) Many parenting programmes evaluated in LMIC were developed elsewhere and adapted for their new settings,\(^6\) but it has been shown that these transported programmes can be as effective as home grown LMIC programmes in improving adolescent outcomes.\(^56,57\) Effective programmes in these settings usually undergo a process of adaptation before implementation, to identify existing assets and strengths in the given context, as well as ensure that programme design takes account of contextual barriers such as lack of access to water or electricity, or safety constraints in high-violence contexts.\(^55\) (See Annex A, Step 4).
There are a number of core content areas that are covered in effective evidence-based parenting programmes. These include content to: promote loving, warm and affectionate relationships between parents and their adolescent children; improve parents’ knowledge of adolescent development; develop parents’ skills to communicate respectfully with adolescents; support parents to employ positive, non-violent discipline techniques; empower parents to create safe environments for adolescents; support parents to provide for adolescents’ basic needs; and protect and promote parental mental health.

Not all content areas need to be covered in all programmes, but should be selected according to programme aims and target group (see Annex A, Step 2). Each of these are described in more detail in this section.

**Core content areas of parenting programmes of adolescents**

There are a number of core content areas that are covered in effective evidence-based parenting programmes. These include content to: promote loving, warm and affectionate relationships between parents and their adolescent children; improve parents’ knowledge of adolescent development; develop parents’ skills to communicate respectfully with adolescents; support parents to employ positive, non-violent discipline techniques; empower parents to create safe environments for adolescents; support parents to provide for adolescents’ basic needs; and protect and promote parental mental health.

Not all content areas need to be covered in all programmes, but should be selected according to programme aims and target group (see Annex A, Step 2). Each of these are described in more detail in this section.

**Caring with love, warmth, and affection**

Key message: Supporting the development of loving and warm relationships between parents and their adolescent children improves adolescent well-being. Programmes should promote the development of positive reciprocal relationships using age appropriate strategies.

Caring for children with love, warmth and affection is important throughout the life course, although the ways which parents display warmth and affection may change as children get older. Parental warmth during adolescence is characterised by interest in adolescents’ activities and peers, enthusiasm and praise for their achievements, and demonstration of affection and love. Across diverse cultural contexts, warmth in the parent-child relationship is associated with a number of positive outcomes for adolescents such as higher adolescent self-esteem, reduced stress, increased prosocial behaviour, improved adolescent mental health, better parent-child communication, fewer psychological and behaviour problems, academic competence, reduced risk of pregnancy, alcohol use, higher social support, and proactive, problem-focused coping styles. A lack of warmth is associated with alienation, hostility and aggression, impaired self-esteem, and antisocial and risk behaviours in adolescents.

Programmes that promote parental warmth support parents to strengthen their relationships with their adolescent children, through strategies such as:

- Encouraging demonstration of love and affection with adolescents
- Providing adolescents with regular praise
- Showing interest in adolescents’ ideas and activities
- Setting aside time to spend with adolescents
- Considering how to meet their emotional needs and provide support, including stressors resulting from the COVID-19 pandemic

Programmes should consider differences for younger and older adolescents, as well as adolescents with disabilities, who may be alternately overprotected and rarely disciplined, or treated more harshly, and parented in ways that are not age appropriate. They should employ a strengths-based approach to make all parents feel affirmed and encourage behaviour change; making parents feel valued and respected so that they, in turn, are empowered to do the same with their adolescent children.
Case Study:
**Strong Families and showing adolescents love under difficult circumstances**

Caregivers act as the main protective factor against the development of mental health difficulties and behavioural problems, including for vulnerable children living in humanitarian settings. The United Nations Office on Drugs and Crime (UNODC) developed the **Strong Families** programme to improve parenting skills, child well-being and family mental health with older children and young adolescents. It was designed to be delivered in humanitarian or low resource settings, to be brief, delivered by lay workers, open source, and cost-effective. The program was group based and attended by both the caregiver and child, in parallel and combined weekly sessions. The content was focused on the strengths of families and aimed to draw these out by creating opportunities for parents to reflect positive parenting behaviours that work for them. The intervention was delivered over three weeks with one session per week. A core part of the programme was a specific focus on “love and limits”, which is the theme of one of the sessions. It includes discussion on how parents show love to their adolescents, listen to them and help them to deal with stress. The session consists of opportunities to practice positive, warm communication with their children.

The programme was evaluated in Afghanistan through a pre- and post-test design, with a 6 week follow-up. Participants included female caregivers and children aged 8-12 who were recruited through schools and drug treatment centres. Results indicate that the programme improved child mental health, parenting practices and family adjustment skills.67

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**Increasing knowledge about adolescent development**

**Key message:** Improving parents’ knowledge of adolescent development enables them to meet their adolescent children’s needs more effectively. Programmes should include content on the physiological, sexual, cognitive, social, and emotional changes that adolescents experience.

Parents benefit from gaining knowledge on adolescent development, as it impacts how they perceive their children and guides their interaction with them to be supportive of their development. Parents also play a critical role in explaining aspects of adolescent development to their children in developmentally-appropriate ways. Adolescents need to be aware that they are undergoing physiological, cognitive, social, and emotional changes, what causes them, and how they manifest. This includes their sexual development, both before and after puberty. Programmes should empower parents to communicate with adolescents about these changes and help them to understand what is taking place, to make their impact more predictable, and less stressful and isolating.
Parenting programmes of adolescents can improve parents’ knowledge of adolescent development by:

- Integrating content on usual adolescent development into interventions\(^6\)
- Building parents’ awareness of how to help adolescents to access services and support for their needs, such as sexual and reproductive health services or substance use counselling
- Empowering parents to teach their adolescents about keeping healthy, for example by avoiding misuse of substances, engaging in protected sex, or wearing a mask in public
- Building parents’ knowledge, skills and confidence in their ability to discuss sensitive issues such as emotional and mental health, and gender and sexual identity
- Enhancing parents’ knowledge of risk reduction strategies. Parents are better equipped to support their adolescent children if their own knowledge about protective behaviours, such as condom use and contraception, is accurate\(^5\)
- Building parents’ understanding of the impact of being separated from friends for adolescents as a result of the COVID-19 pandemic and help them to find safe ways to stay socially connected

Programmes should consider the developmental stage of the adolescent beneficiaries of the programme and tailor information according to their age and gender.

Case Study:

**Programming for mothers’ of young adults with intellectual disabilities to improve their knowledge of their sexual developmental needs in Turkey**

All adolescents are confronted with emerging sexual desires. Adolescents living with disabilities are not different. Often, they are not supported to understand these changes, or free to engage in sexual relationships with others, in part because of social taboos. A lack of sexuality education denies them their rights and also places them at risk of abuse.

In Turkey, the **Sexuality Education Program for Mothers of Young Adults with Intellectual Disabilities (SEPID)** sought to improve parents’ knowledge of the sexual development of their young adult children with intellectual disabilities to equip parents to support their children more effectively. The intervention content focused on: child neglect and sexual abuse, sexuality and sexual development, masturbation, menstrual period, sexual intercourse, sexuality education for special young adults, and relationships. The material was designed to help parents to understand sexual development, highlight and deal with issues that may arise during adolescence and early adulthood, increase awareness of abuse, and equip their children with developing skills to keep themselves safe. It was delivered over four hour long sessions using video, audio and printed materials. In a randomized trial, the programme was well-received, positively altered the viewpoint of mothers regarding their children’s sexuality education and improved levels of social support.\(^6\)
Respectful communication

Key message: Respectful communication between parents and their adolescent children improves the quality of their relationship, particularly in the context of growing adolescent autonomy. Programmes should include a focus on developing parents’ skills to communicate with adolescents in a manner that respects their evolving capacities.

As they mature, adolescents often become more distant from their parents, sometimes expressing opposition and defiance, in an attempt to gain independence and autonomy. In response, instead of increasing control, parents need to adapt their styles of engagement with their children, in order to maintain open communication. Successful communication with adolescents during this period is characterised by parents giving time, attention and interest to what their adolescent is communicating, even during periods of conflict. This is particularly relevant in the current context of COVID-19: being confined at home with parents and other family members may lead to heightened interpersonal conflict.

Parents need skills for non-violent engagement and to model respectful communication. Parents should be emotionally available to their adolescent child, and willing to actively listen and provide constructive feedback when he or she is ready to communicate with them around certain issues, without threatening their growing need for independence, privacy, and autonomy. Respectful communication with adolescents takes account of their developmental stage, evolving capacities and growing responsibilities as decision-makers within their families and households. Parents need to provide adolescents with opportunities for their views to be heard and considered, particularly in contexts where adolescents are not encouraged to express themselves openly.

Improving communication between adolescents and their parents has been shown to improve their relationship, as well as improve mental health outcomes and reduce mental health conditions. There are also benefits for other health outcomes. For example, parenting programmes can improve parent-adolescent engagement around sexual and reproductive health issues (such as puberty, pregnancy, sex, HIV prevention, coercion, abuse and same sex relationships).

To improve communication, parenting programmes of adolescents can:

- Promote mutual respect within and between generations through modelling of respectful communication in sessions
- Develop parents’ skills to engage with adolescents around sensitive issues, and decisions that need to be made for the well-being of the adolescent, their family and/or household
- Improve parents’ awareness of adolescents’ needs for information and safe platforms for discussing sensitive topics, such as sexual and reproductive health, mental health and substance use, as well as empowering them to have the confidence to communicate with their children on these issues
Case Study:

**Improving communication around difficult topics for adolescents living with HIV and their caregivers in South Africa**

The HIV pandemic has deeply affected families in sub-Saharan Africa, placing the well-being of adolescents living with HIV at risk. The **VUKA Programme** in South Africa was designed to improve family relationships, mental health and risk behaviours, and antiretroviral treatment adherence in adolescents living with HIV in South Africa. Formative work showed that adolescents were experiencing a range of challenges, including bereaving the loss of parents, difficulty accepting HIV status, high perceived stigma, and low adherence. Yet, adolescents and caregivers identified that they had difficulty communicating about important topics such as sexual and reproductive health and grief.

The program involves 10 sessions over three months. The sessions are facilitated in an engaging and structured manner through the use of a culturally sensitive cartoon storyline and curriculum. The delivery of the intervention is designed to facilitate discussion between adolescents and caregivers, and to promote collaborative problem solving for issues that arise. Session topics included:

1. AIDS-related loss and bereavement;
2. HIV transmission and treatment knowledge;
3. Disclosure of HIV status to others;
4. Youth identity, acceptance and coping with HIV;
5. Adherence to medical treatment;
6. Stigma and discrimination;
7. Caregiver-child communication, including on sensitive topics such as puberty and HIV;
8. Puberty;
9. Identifying and developing strategies to keep children safe in high-risk situations where sexual behaviour and drug use are possible; and
10. Social support.

The results of a pilot trial of the intervention showed that the VUKA program helped to improve adolescents’ adherence to ART, encouraged them to build a positive self-concept and future plans, and helped strengthen open communication with caregivers.

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**Employing positive discipline techniques**

**Key message:** As adolescents mature, effective non-violent discipline techniques evolve. Programmes should develop parents’ skills to support adolescents in their growing autonomy, whilst also communicating expectations and setting parameters around adolescents’ behaviour.

Non-violent discipline strategies, which are age- and developmentally-appropriate, are important because they teach children and adolescents to self-regulate, protect them from potential harm, enhance cognitive, socio-emotional and executive functioning skills, and reinforce positive behavioural patterns. Parents of adolescents are responsible for modelling positive behaviours, clearly communicating behavioural expectations, explaining why expectations are important, and outlining the consequences of not meeting expectations. As adolescent grow older, the types of consequences for poor behaviour shift and often include penalties such as withdrawal of co-operation or privileges. To be most effective, adolescents should be given the opportunity to initiate and give input regarding behavioural expectations and consequences of not meeting expectations.
Parenting programmes of adolescents should:

- Develop parents’ skills to engage with their adolescent children around behaviour and discipline which are developmentally appropriate according to their adolescent’s age. For example, for younger adolescents, parents can set out clear rules for behaviour, and implement proportionate and realistic discipline techniques, such as withdrawal of co-operation or privileges. For older adolescents, parents’ role shifts to communicating with adolescents to determine behavioural expectations and consequences of not meeting expectations
- Support parents to jointly plan with adolescents how to avoid poor behaviours and risky situations, including sexual risk taking
- Show parents how to role model positive behaviours and non-violent approaches to conflict resolution, particularly in contexts where corporal punishment is commonly used

Case Study:
Reducing the use of violent discipline through a parenting of adolescents programme in South Africa

Harsh discipline of adolescents is a major public health issue and can predict negative outcomes during adolescence and beyond into later life.

The Parenting for Lifelong Health SinovuyoTeen programme in South Africa was designed to reduce violence against adolescents inside and outside the home. By including joint sessions on sensitive topics it promotes collaborative learning, mutual respect, and provides opportunities for adolescents and their parents to spend time together, develop positive behaviours and reduce physical and verbal use. Sessions involve development and practice of positive parenting skills including praise, joint and collaborative problem solving, non-violent discipline, rules and routines, and caregiver-adolescent planning to avoid risky situations in the community, among other topics. The programme relies on core principles of evidence-based parenting programs, including skills development, home practice and discussion, and active participation. It consists of 12 weekly sessions, each lasting 2-2.5 hours. A randomized controlled trial of the programme in the rural Eastern Cape, South Africa showed that it reduced use of corporal punishment and improved positive parenting behaviour.
Creating safe environments

Key message: Adolescents face a range of potential harms in their homes, communities and online. Programmes should teach parents to identify and reduce exposure to these risks in partnership with adolescents, and facilitate adolescents’ access to support to mitigate the impact of these behaviours.

As adolescents increasingly spend time outside the home they are exposed to new risks, such as community and gender-based violence. Yet, parenting programmes can strengthen parents’ capacity to create safer environments for their adolescent children. Parental awareness (as parental control wanes) of their adolescent child’s movements, activities, and friendships, can contribute to the quality of the relationship between parent and child, when done in a caring, attentive, and supportive way. Maintaining a close relationship is critical for parents to be able to recognise when their adolescent is in a dangerous situation—such as experiencing sexual abuse or violence, or engaging in risky behaviours such as substance use. It can also create a safe space for adolescents where adolescents feel comfortable to share concerns and experiences.

Parenting programmes of adolescents should:

- Teach parents about the nature of risks that adolescents face, including pregnancy and sexual abuse
- Show parents how to seek services, or support adolescents to support services as they become more independent
- Promote parent-adolescent communication, joint decision-making on setting limits and family routines
- Build networks and connections with schools and custodians of other social environments where adolescents spend time to promote safe and supportive environments

For specific situations where adolescents are at high risk, such as adolescents at risk of self-harm, parents should be supported to restrict access to alcohol, tobacco, illicit substances, and firearms.

Parenting programmes and child marriage

In some cases, parents directly cause or contribute to harm to adolescents. Child marriage is common across many countries and regions, and linked with social norms, religious beliefs and practices. It affects long-term health, education and safety, and places girls at increased risk for gender-based violence and early pregnancy. Across different settings, parents report a variety of reasons for arranging or agreeing to marriages for their children, including social pressure, poverty, increase in social status, lack of support systems, stigma about adolescent sexuality and low priority placed on girls’ education.

Initiatives to prevent child marriage can be strengthened by engaging directly with parents. For example, the **UNFPA-UNICEF Global Programme to Accelerate Action to End Child Marriage** in Niger works directly with parents and families to address multilevel issues that perpetuate child marriage, through reinforcing community-based child protection mechanisms, engaging community leaders, improving social support networks, improving access to poverty alleviation programmes, and by promoting more effective engagement in joint decision-making with adolescents around issues that affect them.
Case Study:
Empowering caregivers to mitigate the impact of political violence on adolescents in post-war Burundi

Parents have a critical role in mitigating the impact of humanitarian emergencies on adolescents. There is an ongoing need for programmes that are acceptable and feasible to implement in complex emergencies. Parenting programmes have the potential to improve parents’ awareness on the impact of violence, including political violence, on children in these contexts and help them to manage the mental health effects.

In post-war Burundi, a brief parenting intervention was rolled out to increase understanding of understanding of psychosocial and mental health problems of adolescents in the context, and supported parents to help their adolescents cope. Participants were parents of school-going children aged 10-14 years, living in especially difficult circumstances, who presented with emotional and behavioural problems. The parenting programme took place over two group sessions and was delivered by trained lay community counsellors. The content included psychoeducation about problems affecting adolescents in the context, positive parenting strategies, and a focus on problem-solving and the promotion of help-seeking and self-help strategies. A randomized controlled trial of the intervention showed a reduction in conduct problems in intervention participants compared to controls, especially benefitting boys.

Parents also have an important role to play in promoting online safety of adolescents. While the internet brings valuable personal and social opportunities to adolescents, they may also witness or participate in risky behaviour online which can undermine their well-being, such as cyberbullying, cyberstalking, grooming by adults, exposure to graphic content, and unregulated marketing of harmful products such as alcohol. While internet use and its impact on well-being varies significantly, negative outcomes may manifest more in adolescents, as self-regulatory processes and control are still developing. Programmes to promote online safety require many of the same skills promoted in other parenting programmes of adolescents, such as a strong relationship between parent and child. In addition, programmes should teach parents other strategies to protect adolescents from severe risks, including:

- Developing family media plans (appropriate rules around internet use, limits for social media use etc)
- Promoting monitoring (not control) of internet use (e.g. keeping device in shared space) and jointly setting rules about internet use
- Modelling appropriate behaviour of healthy internet use, e.g. restricting their own phone usage and having a respectful online presence
- Co-using media with adolescents
- Encouraging internet use that supports social interaction
- Developing adolescents’ skills to engage online responsibly and maintain privacy
Providing for basic needs

Key message: The provision of basic needs is critical for adolescents’ development. Programmes for parents and adolescents living in poverty should include socio-economic strengthening components, whilst taking account of adolescents’ growing decision-making role in the household.

Parents play a critical role as providers of shelter and food, throughout a child’s life. During adolescence, parents also facilitate access to a range of other basic needs, such as continued education, access to health care (including nutrition, sexual and reproductive health, mental health, and HIV/AIDS services), protection (from violence, abuse and exploitation) and participation (the right to express their views freely about all matters that affect them).

As adolescents mature, in many contexts they increasingly become more involved in work that supports or sustains the household. Within the home, they may begin to work within specific roles (such as caregiving, housework, farming, maintenance). External to the home they may transition to working full time, or part-time to meet their own expenses, such as school materials.

In response, parenting programmes of adolescents can include aspects relating to financial management. These programmes can result in greater communication around financial issues within the family.

To enable parents to meet the needs of their families, programmes should:

- Include socio-economic strengthening components, such as cash transfers, material support, membership of savings clubs, and financial education
- Support parents to gradually engage with adolescents about decision-making for the family, according to their evolving capacities
- Empower parents to communicate with adolescents about the economic impact of the COVID-19 pandemic on their family and mitigating the impact of the pandemic on future plans and prospects

Protecting and promoting parental mental health

Key messages: Poor parental mental health can impact on parents’ ability to use their skills and experience to effectively parent their adolescent children. Programmes should provide mental health support to parents and link them with further care as required.

Many parents experience poor mental health and are able to continue to effectively parent their children. However, in some cases, mental health conditions can make it difficult for parents to fully provide the care that their children require. Parenting during adolescence may pose additional challenges to parents’ mental health, because of stress associated with changes in existing routines, practices, and the parental relationship. There may also be new stressors, such as concerns about adolescents well-being, changing behaviours, increasing financial burden, or concerns about their children’s future.
Case Study: Combining parenting programming with an economic strengthening intervention in Tanzania

Combining parenting programming with poverty alleviation initiatives has potential to enhance adolescent development outcomes and provide financial protection for families. Parenting programmes have often been combined with cash transfer programmes, but less often with sustainable business models appropriate for LMIC settings.

In Tanzania, the Skillful Parenting and Agribusiness Child Abuse Prevention Study (SPACAPS) tested an intervention to compare and evaluate the individual and combined impact of parenting of adolescents skills training and an economic strengthening programmes in rural Tanzania. Two thirds of the participants were men, and fathers recorded high levels of participation in the intervention programme. The programme took place over 12 sessions, consisting of content focused on parenting skills, child protection, and family budgeting. The economic strengthening programme, which took place over three workshops, was an agribusiness intervention, providing access to drought-resistant seeds, guidance about farming techniques, market connections, credit for farm inputs, and ongoing support through harvesting season. In a cluster randomized trial, families who received the parenting and combined parenting and economic intervention fared the best, with lower reported rates of adolescent maltreatment.

Mental health conditions often cluster in families, driven by both genetic, biological and environmental factors. Adolescence is a time when many mental health conditions and risk behaviours first initiate. Higher levels of parental stress are linked to poorer emotional, social, and behavioural outcomes for adolescents. Related issues, such as parental substance use and intimate partner violence also increase the risk of poor adolescent mental health and increased risk behaviours.

In order to positively influence parental mental health, programmes should:

- Teach parents self-care practices
- Promote the recognition of parents’ strengths
- Share effective coping strategies
- Provide opportunities for problem solving within available resources
- Facilitate the development of support networks
- Link parents requiring additional mental health support to services through referral pathways
Programmes designed to support the parents of adolescents should consider and plan for scale-up and sustainability in the initial stages of development. Scaling up refers to widening the coverage of the parenting programme and reaching the target audience at a larger scale. Often, when effective parenting interventions are rolled out at scale they lose effectiveness. This is largely due to a lack of planning for large scale implementation in the planning phase.⁹⁶
Parenting programmes at scale

Potential for sustainability and scale up is greatly enhanced when programmers:

- Use existing delivery platforms and programmes to deliver interventions for parents, rather than establishing new standalone programmes (see Annex, Step 5)
- Partner with government departments and other institutions already engaging with issues facing adolescents and parents early in the programme development process
- Engage all key stakeholders across sectors who are working on relevant issues
- Aligning with existing government policy or priority areas of work
- Design systems to generate data to demonstrate credibility and cost effectiveness of the programme
- Identify sources of financial support to take the programme forward. This should include public finance plus the development of innovative private financing mechanisms as an adjunct support strategy

See Annex A, Step 8, for more information to guide this process.

Case Studies: Successful scale up of programmes

In Romania, the Parenting Education Programme of HoltIS has been successfully scaled up in 205 communities in three counties. It uses a strengths-based approach, focused on using positive experiences and successes to support parents to improve their parenting skills using weekly group-based sessions, with additional support provided as required. An impact evaluation of the programme showed improved parenting skills, relationships with children, parental interest in children’s education outcomes and involvement in school and other activities. Factors that supported the scale up of the programme included its integration within a package of services for parents and adolescents, low training costs, the creation of a network of community-based educators, the use of existing community resources, the use of online platforms, and ongoing investment in creating local and national level buy-in.  

Parenting for Lifelong Health (PLH) is an umbrella term for a set of group-based programmes which can be supplemented with home visits. The group sessions normally take place in community venues, delivered by trained and supervised staff from non-governmental organizations. Promising early results from PLH programmes have created global interest from international agencies and governments globally who plan to scale-up this parenting program with the intention to eliminate violence against children to support implementation of the SDGs. The adolescent programme has been shown to have promising effects in South Africa, with forthcoming data from Philippines, Thailand, Uganda, Moldova, North Macedonia and Romania. Currently there is rapid dissemination and scale-up of PLH in over 25 LMICs in areas in sub-Saharan Africa, Eastern Europe, Southeast Asia, and the Caribbean. Factors supporting scale up have included that the programme is highly portable and easy to implement, and that it is adaptable for different contexts and modes of delivery.
Monitoring and evaluation

Strong monitoring and evaluation (M&E) systems are essential for parenting programmes of adolescents, given the limited information available from real-world programmes, and need for information on how to scale and sustain parenting interventions. M&E systems track whether programmes are being implemented as designed and are having their intended impact. Data from these systems can improve accountability, and provide important information on service delivery, allocation of resources and cost effectiveness, as well as contribute to the evidence base on what works to improve parenting of adolescents.

Parenting programmes for adolescents need to ensure that they include outcomes for both parents and adolescents, that the tools are gender sensitive and disability inclusive for both groups. Similarly, data gathered should be disaggregated according to age, gender and disability status of both parents and adolescents, along with any other important local criteria.

Designing and implementing effective M&E systems for parenting programmes of adolescents requires detailed planning. This includes describing the objectives of the programme clearly, developing indicator frameworks (to track resources, activities and short and long-term outcomes), identified responsible people or agencies to collect data and selecting appropriate time frames.

See Annex A, Step 9, for more information to guide this process.

A nine step process for programmers

Annex A: Nine Steps to Design Parenting Programs of Adolescents offers practical steps to guide programmers in designing, delivering and evaluating parenting programmes, including scale-up planning. While each step can be completed sequentially, the order of completing each step may differ in different contexts, and in some cases, it may not be necessary to complete all steps in each setting.

Figure 4: Nine Steps to Designing Parenting Programmes

1. Needs assessment
2. Programme target groups
3. Support strategies and partners
4. Adapting appropriate curriculum
5. Delivery platforms, format and dosage
6. Identifying, training and recruiting parenting facilitators
7. Generating demand
8. Scale and sustainability
9. Monitoring and evaluation
Annex A

Nine Steps to Design Parenting Programmes of Adolescents

This Annex provides more detailed information and considerations to take into account when designing parenting programs of adolescents.
Step 1

Needs assessment

Conducting a comprehensive needs assessment is a crucial first step to strengthening programming for parents of adolescents. It provides useful information for determining parents and adolescents’ needs, identifying existing resources or programmes, and revealing current gaps in a given setting.

A needs assessment also provides an opportunity to engage with the intended beneficiaries of the response early on in the process, to ensure that the plans meet their needs, and are acceptable and feasible. As part of this process, it is important to obtain input from a diverse set of stakeholders including adolescents, parents, organisations working with adolescents, government representatives, teachers, and community leaders.

Specific considerations for conducting needs assessments for parenting programmes of adolescents

- How can adolescents and their parents be included as key informants about what their needs are, what programmes they and their parents are accessing, barriers to access, potential entry points, and what type of training they think the workforce needs?
- How can parents and adolescents from marginalised groups be included in the needs assessment process?
- How can the needs of these different groups be analysed and reported?
- How can the prevailing beliefs about adolescents in the context be captured? (e.g. their capacity to engage in decision-making and contribute to their families and communities).
- How can the prevailing beliefs and practices around parenting adolescents be captured?
The information gathering process

A number of different domains need to be covered during the information gathering process, to provide a full picture of the current needs, resources and opportunities for programming. Key considerations and questions for the information gathering process are described further below.

<table>
<thead>
<tr>
<th>Domain</th>
<th>Key questions and considerations</th>
</tr>
</thead>
</table>
| Needs of the intended beneficiaries        | ▶ What risks and protective factors (including systemic factors) for adolescent development are particularly prevalent? Which of these are most significantly affecting parents and their adolescent children?  
▶ Has the need for a parenting programme emerged as the result of another key issue in the community?  
▶ What types of support do adolescents and their parents need?  
▶ What are their preferences in terms of how they receive support? |
| Existing programmes in the setting         | ▶ Are there already support services directed at parents of adolescents? What are their purpose and who do they serve? Are there populations that they are not managing to reach? Why?  
▶ What existing services exist which can manage referrals from the programme for child protection, mental health and other complex needs?  
▶ Were there previously programmes in place?  
▶ What is working/has worked, or is not working/has not worked? Why?  
▶ What the current barriers to parents and adolescents participating in programmes?  
▶ What are the current facilitators that support parents and adolescents to take part? |
| Existing resources in the setting          | ▶ Are there local technical experts or organisations working with adolescents and/or parents who can be engaged?  
▶ Which organizations/institutions can you collaborate with that already works with adolescents that can extend their services to work more directly with parents (e.g., schools, health care systems and recreational facilities)? |
| Potential entry points for programming     | ▶ Where can you easily access parents with adolescent children? Where can you access parents of marginalised adolescents? Should digital delivery platforms be considered?  
▶ What systems and structures are already in place to deliver parenting programmes? |
| Capacity development needs                 | ▶ What level of systems development is required to support the response?  
▶ What is the competency level of the workforce required to implement parenting programmes of adolescents? Are there training requirements specific to the needs of younger and older adolescents that should be considered?  
▶ What type of supervision support do they require? |
| Funding                                     | ▶ Who are the main funders of parenting programmes in this context? (e.g., government departments, civil society, private sector, international donors) |
Step 2

Programme aims, objectives and target groups

Findings of the needs assessment should guide the process of determining which population of parents requires support, and the aims and objectives of the programming response. Depending on the target group, different entry points and delivery platforms will be required, and different partners will need to be engaged.

Specific considerations for identifying aims and objective and selecting target groups for parenting programmes of adolescents

- Does your programme aim to improve parenting skills, adolescent outcomes, or both?
- Who will benefit from the programme? Are you selecting the target group based on adolescents’ or parents’ needs in the context?
- Have you considered the specific developmental stage of your target group? Adolescence spans a wide age range, and even for a specific sub-group the strategies and skills required will vary.

Not all parents and adolescents benefit from the same types of programming. Different types of parenting programmes of adolescents cover different content and provide varying levels of support. In selecting the target group, consideration should be given to i) the characteristics and needs of the adolescent and ii) the characteristics and needs of the parents. Universally delivered programmes are delivered to all parents of adolescents. Targeted programmes are delivered based on the parent or adolescent’s membership of a population group at increased risk, while recognising that individual needs within groups may differ. Indicated programmes are generally delivered to parents with complex needs, or parents of adolescents with complex needs.

Examples of programme targeting

Depending on the level of exposure to risk factors, and individual needs of adolescents and their parents, different types of programming may be required. More detail on programme targeting is described below.

<table>
<thead>
<tr>
<th>Adolescent</th>
<th>Parent</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Universal</strong></td>
<td><strong>Beneficial for all adolescents, no specific characteristics, possible to limit to specific age group, e.g. younger or older adolescents, certain geographic areas</strong></td>
</tr>
<tr>
<td><strong>Targeted</strong></td>
<td><strong>Adolescent is at-risk, has complex needs e.g. LGBTIQ+</strong></td>
</tr>
<tr>
<td><strong>Indicated</strong></td>
<td><strong>Adolescent with additional individual needs e.g. in contact with the justice system</strong></td>
</tr>
</tbody>
</table>
Guiding questions for identifying target groups include:

- Will the programme be delivered to parents of adolescents only, or will adolescents also be involved?
- What group of parents and/or adolescents will the programme target? Will there be explicit inclusion of male caregivers?
- What specific changes do you want to achieve through the parenting programme, in terms of parenting behaviours and adolescent development?
- What institutions/organisations can be involved that can help facilitate the recruitment of the identified population?

The successful implementation of adolescent parenting programmes requires interlinked and complementary strategies at different levels to support programming efforts.

### Step 3
**Support strategies and partners**

The successful implementation of adolescent parenting programmes requires interlinked and complementary strategies at different levels to support programming efforts.

### Specific considerations for selecting support strategies and partners to support parenting programmes of adolescents

- Support strategies should build on and extend strategies implemented for parents of younger children.
- Support strategies should be developmentally appropriate for adolescents, not designed for children, or retrofitted from adult programmes.
- The specific needs of parents of adolescents should be clearly described within efforts to promote child and adolescent development so that they are not lost.
- Additional sectors to those which are traditionally involved in supporting parenting programmes of younger children need to be engaged, e.g. labour, skills development, and higher education.

Assessing the context-specific policy and legislative framework is essential to ascertain the level of support for parents of adolescents. Social interventions are more likely to produce positive outcomes if they share the same values and parameters of the legislative framework in which they operate, and are embedded in national legislation. Relevant laws and policies benefitting parents and children should be inclusive of adolescents, e.g. protecting adolescents from physical punishment, allowing adults paid leave to meet the needs of their children (e.g. when sick), promoting access to affordable, quality childcare, allowing for the payment of child benefits that extend to adolescent years, supporting gender equality, supporting the right to health, protecting adolescents from child marriage, and outlining provisions for adolescent and adult mental health and mental health services. Laws and policies should be developmentally appropriate, respectful and fair for adolescents. If there is not a supportive policy and legislative framework in place, programmers should consider what lobbying efforts are required.
Financial resources are critical for ensuring the sustainability and success of parenting programmes. Financial plans should utilize public funds but also include the development of additional complementary innovative financing mechanisms. National governments should ensure that there are adequate financial resources for adolescent programming, and that resources are allocated equitably to ensure coverage for marginalized adolescents and their parents in line with funding equity.\textsuperscript{100} Placing parenting programming in central ministries, such as the prime minister’s office or presidency, can advance efforts to prioritize and fund parenting support programs across multisectoral partners. Advocating for the allocation of resources requires partnering with a number of different entities beyond government alone, namely development banks, finance institutions, and the private sector.\textsuperscript{101}

**Strengthening delivery systems** requires sensitization of services to the needs of adolescents, particularly in contexts where support services are designed around the needs of younger children and their families.\textsuperscript{102} Investment in adequate human resources (including leadership and management) for parenting programs of adolescents is critical.\textsuperscript{99} This includes developing the capacity of frontline workers to deliver, supervise, and support parenting programs.

A **multisectoral approach** that engages diverse sectors is necessary for a comprehensive response to supporting parents of adolescents, given the complex determinants of adolescent development and parent well-being.\textsuperscript{102,103} Successful delivery of programming depends on collaboration between multiple sectors and stakeholders, including public, private, and civil society, at national and local levels. Additional sectors to those which are involved in supporting parenting programs of younger children need to be engaged, e.g., labor, skills development, and higher education. At the same time, sectors involved in supporting efforts for parenting of younger children, while important in order to ensure a cohesive approach, may not need to be as engaged e.g., early child development. Necessary steps include selecting appropriate coordination mechanisms and platforms for engagement, and identifying roles of each sector and potential entry points.

**Examples of roles for sectors**

Different sectors can play essential and complementary roles in developing and supporting efforts for parents of adolescents.

<table>
<thead>
<tr>
<th>Sector</th>
<th>Examples of roles</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Health</strong></td>
<td>Provision of entry points for programming through existing adolescent-friendly health services, adolescent sexual and reproductive health services and HPV vaccine contact points</td>
</tr>
<tr>
<td><strong>Education</strong></td>
<td>Provision of entry points for programming through schools, parent committees and related forums</td>
</tr>
<tr>
<td><strong>Social Development/Child Protection</strong></td>
<td>Provision of entry points for programming through child protection and family support services, telephone hotlines, provision of other forms of support including cash transfer programmes for parents that are inclusive of adolescent-aged children</td>
</tr>
<tr>
<td>Labour</td>
<td>Provision of entry points for programming through workplace-based employee health and wellness programming and child labour initiatives, support for businesses to commit to the family-friendly policies initiative</td>
</tr>
<tr>
<td>-----------------------------------------------------------------------</td>
<td>--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Communications</td>
<td>Provision of information for parents online, media campaigns to promote positive parenting of adolescents and safe use of internet by adolescents (including through social media sites already used by parents in the given context)</td>
</tr>
<tr>
<td>Justice and law enforcement</td>
<td>Ensuring that laws and policies are inclusive of the needs of parents and adolescents, ensuring laws protect rights of adolescent children within families, provision of entry points for programming through linking with parents of youth offenders, mandated parenting programming</td>
</tr>
<tr>
<td>Civil society/NGOs</td>
<td>Provision of entry points for programming through existing community-based support for parents and/or adolescents, including through religious organisations and sports clubs</td>
</tr>
<tr>
<td>Finance</td>
<td>Developing of financing mechanisms and budget allocation for programme efforts</td>
</tr>
</tbody>
</table>

Step 4  
**Adapting an appropriate parenting curriculum**

After selecting the target population, and the intended outcomes of the programme, the next step is to select a parenting programme which addresses the needs of parents and adolescents in the setting.

In some contexts, there may be existing programmes already in place for parents of adolescents that address or partially address the intended outcomes. In others, it might be necessary to initiate a new programme. However, it can be more cost-effective and time-efficient to transfer an evidence-based programme from another setting rather than develop a new one.44

**Specific considerations for selecting curriculum for parenting programmes of adolescents**

- When assessing existing programmes to determine their value for parents of adolescents, it is important to ensure that the programme is designed for parents of adolescents specifically, and that it is developmentally appropriate and delivered in a way that is accessible for this group (i.e. not reliant on delivery platforms for younger children).

- When selecting a programme from another setting to transfer, it is important to gather the views of adolescents and their parents on their relationships, parenting practices, support needs, and optimal delivery platforms and strategies in the setting, in order to make the necessary changes for the intervention to be acceptable and feasible in the new setting.
To assess existing programmes

In order to evaluate existing programmes, consider their **quality, content and delivery methods** to determine if the programme is effective and relevant for your target population.

Assessing existing programmes
The following steps are designed to assist in the appraisal process.¹⁰⁴

<table>
<thead>
<tr>
<th>Domain</th>
<th>Key considerations and questions</th>
</tr>
</thead>
</table>
| **Assess the theoretical base** | Evidence-based programmes are grounded in theory. This includes but is not limited to, the process taken to decide on the outcomes of the programme and the formative research that was conducted in the design of the programme. The following questions may assist:  
  ▶ Does the programme have a sound logic model or theory of change which maps out how the intervention works?  
  ▶ Was a needs assessment conducted in the development of the programme? Were key stakeholders consulted?                                                                                     |
| **Assess the evidence base**  | Evidence-based programmes have been evaluated using robust designs to assess their effectiveness before being rolled out at scale. The following questions are useful to consider:  
  ▶ Has the programme been evaluated in this or similar settings?  
  ▶ What types of study methodologies were used?  
  ▶ What were the results?                                                                                                                                                           |
| **Assess the content**        | Interventions should have developmentally appropriate content and perform better if they build skills in addition to transferring knowledge. Questions to ask include:  
  ▶ Is the programme developmentally appropriate (is it specifically designed for parents of adolescents, not younger children)?  
  ▶ Is there a balance between imparting knowledge and transferring skills?  
  ▶ Does the content match the aims of the programme?  
  ▶ Is there specific content for marginalised groups or is it easy to build in additional content?                                                                              |
| **Assess the delivery strategy** | Delivery considerations also have to be considered. This should include the dosage, training and supervision levels, and costs. The following questions may guide the appraisal process:  
  ▶ What is the programme dosage (the intensity and the duration of the programme)?  
  ▶ Is the programme delivered in person, digitally, or mixed?  
  ▶ What levels of training and supervision are required for staff?  
  ▶ How does the programme cater to marginalised groups?  
  ▶ What are the implementation costs of the programme?  
  ▶ What is the completion rate for the programme?                                                                                                                                 |
| **Assess the acceptability and feasibility of the programmes** | ▶ What feedback has been provided by the beneficiaries of the programme?                                                                                                                                                     |
To transfer an intervention

Transferring interventions to new settings requires careful consideration of context-specific factors, and a clear understanding of the ways in which an intervention may interact with a new system. Some interventions may be able to move to a new setting and remain effective with minor changes; however, others may be ineffective or even cause harm to the beneficiary population without adaptation.

Transferring an intervention
These steps are designed to help you think through the process.

<table>
<thead>
<tr>
<th>Domain</th>
<th>Key considerations and questions</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Consider the theory of change</strong></td>
<td>Most interventions have a theory of change, which maps out how the intervention works. Before undertaking adaptations, review the intervention’s theory of change:</td>
</tr>
<tr>
<td></td>
<td>▶ Core elements: What are the core elements of this intervention?</td>
</tr>
<tr>
<td></td>
<td>▶ Mechanisms of change: What are the reasons why positive change occurs (i.e. the intervention works)?</td>
</tr>
<tr>
<td><strong>Consider levels of adaptation</strong></td>
<td>Adaptation of interventions should strike a fine balance: changing an original intervention too much may mean that it does not look like the original any more.</td>
</tr>
<tr>
<td></td>
<td>▶ Do you want to transfer the intervention as is, contextualise it or fully adapt it?</td>
</tr>
<tr>
<td><strong>Consider what should not be changed</strong></td>
<td>Changes that are not typically recommended as they can change the nature of the programme, include:</td>
</tr>
<tr>
<td></td>
<td>▶ Reducing the number of sessions</td>
</tr>
<tr>
<td></td>
<td>▶ Reducing the key topics</td>
</tr>
<tr>
<td></td>
<td>▶ Changing the style of delivery (i.e. changing from participatory to didactic)</td>
</tr>
<tr>
<td></td>
<td>▶ Not training and supervising staff sufficiently</td>
</tr>
<tr>
<td></td>
<td>▶ Using less staff or having higher staff: beneficiary ratio</td>
</tr>
<tr>
<td><strong>Gather information</strong></td>
<td>Gather information about the suitability of the intervention in the new context and changes required by conducting a desk review, reviewing programme materials and holding individual interviews and focus groups with key informants, including adolescents and their parents.</td>
</tr>
<tr>
<td><strong>Determine changes required</strong></td>
<td>There are a number of factors that should be considered in determining required changes. Examples include: language, delivery workforce, training, and/or resource availability.</td>
</tr>
<tr>
<td><strong>Develop adapted version of intervention materials</strong></td>
<td>Using the information collected above, revise intervention materials, develop an implementation plan, pilot test the adapted version of the intervention, and finalise adapted programme materials.</td>
</tr>
</tbody>
</table>
Step 5

**Delivery platforms, formats and dosage**

Based on the results of the needs assessment, the identified target group, and the available resources and partnerships, it is important to identify **delivery platforms, formats and dosage levels** that are acceptable and accessible for intended beneficiaries.

### Specific considerations for delivery platforms, formats and dosage of parenting programmes of adolescents

- Parents of adolescents might not be as accessible as parents of younger children, as they don’t have regular engagements with health and social development services that can be used as entry points. Parents and adolescents might be more readily accessible through schools, social clubs, youth networks and workplaces.

- In some contexts, delivering programme content, or supporting information, via digital delivery platforms might maximise flexibility and accessibility for working parents and adolescents.

### Delivery platforms

Parenting programmes of adolescents can be delivered across a range of different delivery platforms. These include homes, workplaces, educational institutions, sports and recreation centres, non-formal learning platforms (e.g. community centres), health and social services, religious institutions, judicial systems, and through media including digital media. The delivery platform of the parenting programme should be aligned with the target population and the type of parenting programme being delivered.

Where possible, reaching parents of adolescents through existing delivery platforms will facilitate:

- Better access to programming
- Increased trust: parents are more likely to participate in a programme when they are recruited through established channels (e.g. linked to schools, health facilities, workplaces, etc.)
- Better awareness of the programme throughout the existing networks

How to identify platforms for delivery:

- What groups of parents are you hoping to target? (universal, selective, indicated)
- What specific needs do they have?
- Where can you find parents based on the identified need (health facilities, rehabilitation centres, workplaces, schools, social services, etc.)?
- Which other organizations are providing services to the target population? Is there potential for collaboration?
Delivery formats

Delivery formats include group settings, individual settings, combination of group and individual settings, or through digital media. The delivery format of a parenting programme should be determined by the target population and the type of parenting programme that is being delivered.

The following notes some considerations for different delivery formats:

<table>
<thead>
<tr>
<th>Group</th>
<th>Individual</th>
<th>Digital</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cost-effective delivery approach. Provides participants with the opportunity to meet other families in similar situations, build friendships, and provide mutual social support.</td>
<td>Effective for engaging a targeted population (e.g. parents with a pregnant adolescent). Facilitates the provision of individualised attention and tailored sessions to participants’ individual needs.</td>
<td>May help implementers to overcome barriers that are related to face-to-face delivered interventions and increase reach of interventions.</td>
</tr>
</tbody>
</table>

Dosage

Parents need ongoing, regular opportunities to practice new skills in order to internalise them. However, there is not a one-size-fits all optimal programme dosage or number of contact points. In some contexts, shorter programmes may have an advantage over longer ones as it is easier to retain participants. Rather than a focus on length, the aim of the programme and the circumstances of the target population and intervention site should be considered when determining the frequency and duration of programming. Formative research and discussion with multiple stakeholders can guide the decision on the appropriate dosage for a specific context and population group.

Ethical considerations of programme delivery

Programmes should be delivered ethically and with the well-being of all participants in mind. Important considerations include:

- Participants must be provided with sufficient information in order to make an informed decision about whether they want to participate.
- Programme staff are obliged to protect the identity, privacy and information of programme participants. In addition, participants should also agree to respect the confidentiality of other programme participants beyond the programming space.
- During programme implementation, it may become clear that some participants require extra support, beyond what is offered through the programme.
- It is important to develop referral protocols ahead of time.
In the majority of cases, participants should take part in the programme on a voluntary basis. Participants must be assured that if they decline participation they will not be deprived access to other, often linked, services, and no harm will come to them. However, exception to these are when programmes are mandated as a part of diversion/alternative sentencing programmes for youth in contact with the justice system, or as a part of supervision orders when there are child protection concerns in a family.

The role of the workforce is key to the delivery of parenting programs of adolescents. The design of programs should have a strong emphasis on workforce selection, training and supportive supervision of programme implementers.

### Specific considerations for identifying, training and supporting the workforce for parenting programmes of adolescents

- Programme implementers should be skilled in working with adolescents, understand their developmental stage and evolving capacities.
- Implementers require parenting experience, training and support to facilitate group-based discussion with adolescent participants.
- Engagement strategies that work well with adolescents include non-judgmental approaches, a focus on resilience rather than vulnerabilities and having relatable facilitators.
- In some contexts, programme implementer’s gender may be important when engaging with parents or adolescents.

### Recruitment

Depending on the context and entry points for programmes, different programme implementers will be tasked with roll-out. In some contexts, an existing workforce might be best positioned to take on these roles. In others, it will be necessary to recruit new staff members. Recruiting programme facilitators from the community in which the parenting programme will be implemented can be particularly beneficial, as they most likely will be attuned to the needs and realities of the target groups. In addition to having an interest in working with adolescents and their families, facilitators should be trained to be able to:

- identify and refer participants that are in need of additional support
- stimulate conversations and interaction amongst participants
- create a safe learning environment
- build upon participants prior knowledge and experience
- mobilize groups, encourage, give and receive feedback
- be provided with necessary strategies to ensure their own safety
**Training**

In order for facilitators (and supervisors) to effectively deliver programs that address key adolescent parenting issues, such as communication and relationship-building, they need to have training on the foundational skills required to share and these skills with program recipients.

**Training on foundational skills**

Key considerations and questions to guide choices about training include the following.

<table>
<thead>
<tr>
<th>Domain</th>
<th>Considerations and questions</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Opportunities for developing core intervention skills</strong></td>
<td>How will training be used to train implementers in the same skills that they are trying to impart to participants? Commonly identified elements for behavioural interventions include interpersonal skills, active listening, rapport building, shared decision-making, self-care, and education about issues surrounding ethics and confidentiality. These can be explicitly taught within training programs, but also subtly targeted in the context of in-practical training activities.</td>
</tr>
<tr>
<td><strong>Opportunities for modelling approach</strong></td>
<td>How will training be used to model the approaches that form part of the intervention method? E.g. using positive feedback, tokens and rewards, and a warm and supportive group environment, which can encourage trainees to feel empowered in their role as facilitators. If a digital intervention, can media such as videos or cartoons be used to show desired behaviours?</td>
</tr>
<tr>
<td><strong>Retention</strong></td>
<td>What role will implementers have in sustaining programme retention and what are the relevant training needs for keeping participants engaged and maximising access?</td>
</tr>
<tr>
<td><strong>Referral</strong></td>
<td>What role will implementers have in referral of participants in need of specialized support and what are the training needs?</td>
</tr>
</tbody>
</table>
**Supervision**

Effective supervision and support for those who deliver programs in community settings (i.e., CHWs) can influence the extent to which programs achieve their intended outcomes.

**Considerations for supervision**

Key considerations and questions to guide choices about supervision include the following.

<table>
<thead>
<tr>
<th>Domain</th>
<th>Considerations and questions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Structures</td>
<td>Which agency will be responsible for supervision? Which workers within this agency? Have they engaged in this type of supervision before? What training and support needs do they have?</td>
</tr>
<tr>
<td>Scheduling</td>
<td>How often will supervision sessions be scheduled? Regular sessions are important for providing support for facilitators and staff in terms of key intervention components, but should also include logistical and organisational support</td>
</tr>
<tr>
<td>Delivery</td>
<td>How will sessions be delivered? Supervision can be face-to-face or provided at a distance (e.g., through phone calls or online), manualized or not, and can use peer support (such as pairing facilitators)</td>
</tr>
<tr>
<td>Content of sessions</td>
<td>What will meetings cover? Content can include discussion of cultural adaptations (e.g., expanding sessions, translation issues, cultural adaptations of examples to illustrate concepts more effectively), engagement strategies, and implementation-related adaptations. An additional function of scheduled, regular supervision sessions is the opportunity for facilitators to debrief about their experiences, particularly in communities with high levels of adversity.</td>
</tr>
</tbody>
</table>
The successful implementation of programmes requires effective recruitment and retention strategies. There are a number of barriers to recruitment and retention of parents of adolescents in programming. Common barriers include transport challenges, childcare constraints, and opportunity costs for lost work time (especially in the informal sector), personal barriers such as health challenges (feeling unwell, or taking care of a loved one), and programmatic barriers such as facilitator or group dynamics, thinking programmes are not useful, feeling discouraged when other parents drop out, or thinking programmes are for female caregivers only, not males. On the other hand, there are a number of factors that promote participation. These include the timing of the delivery of the programme, family buy-in, and a sense of commitment and readiness for change. Content, facilitation style and positive group dynamics are also key.

Specific considerations for generating demand for parenting programmes of adolescents

- Parenting programmes of adolescent are not as commonly implemented as programmes for parents of younger children. Parents and adolescents may be unfamiliar with how they work and what the benefits are participating are.

- There is a need for dedicated outreach and planning for accessibility for parents or adolescents with disabilities, as well as other marginalised groups.

Understanding the views of parents is crucial in the identification of barriers and enabling factors for the programme participation. Consider factors such as the following when planning for optimal recruitment and retention:

- What recruitment strategies work best for the context (face-to-face, leaflet/posters, or a combination)?
- What specific recruitment strategies are required for male and female parents?
- How can the programme enhance family buy-in (home visits, several caregivers from one household)?
- What partnerships need to be developed to provide holistic support for the parents?
- Does the programme accommodate different learning styles?
- Can the programme be delivered close to where the parents live?
- What is the best way to provide child care services for parents involved in the programme?
- How can the programme cater to the other needs of the parents (e.g., provision of transport, provision of on-site childcare, provision of a meal)?
- What is the most convenient time to facilitate the programme?
- How can a safe space be created for the parents (confidentiality, respect, and no judgement)?

Types of actions that can be taken to overcome barriers to recruitment and retention include awareness raising about the programme, linking with partners, ensuring that parents’ needs are met and ongoing monitoring of the programme.
Generating demand
Key questions and considerations to help ensure effective recruitment and retention include the following.

<table>
<thead>
<tr>
<th>Domain</th>
<th>Key question or consideration</th>
</tr>
</thead>
</table>
| Awareness-raising of the programme | Do you need to develop a marketing strategy for the programme to raise awareness about it? If so, consider:  
  • Is the target population clearly defined? (i.e. is the programme for all parents or a specific group?)  
  • Are the benefits of the programme clearly articulated? (such as the strength-based approach, i.e. the opportunity to enhance existing skills and share of skills amongst parents)  
  • Are the tools used for marketing relevant and easy to understand? (consider language and culture) |
| Linking with partners | Establishing partners that can refer parents of adolescents to the programme can be extremely helpful. Consider:  
  • What are the potential referral sources for parents of adolescents (workplaces, schools, clinics, faith-based organisations)?  
  • What is the best strategy to develop and nurture relationships with referral sources? |
| Ongoing monitoring of recruitment, retention, and quality of the programme | Recruitment, retention, and the quality of the programme require on-going monitoring. Consider:  
  • What is the best way to track the recruitment and retention of parents/caregivers?  
  • What platforms can be used for parents/caregivers to provide regular feedback?  
  • What are the support needs of the programme staff to ensure the quality of the programme? |

Step 8
Scale and sustainability
Scaling up refers to widening the coverage of the parenting programme and reaching the target audience at a larger scale. Often, when effective interventions are rolled out at scale they lose effectiveness. This is largely due to a lack of planning for large scale implementation in the planning phase. It is essential that programmes designed to support the parents of adolescents consider and plan for scale-up and sustainability in the initial stages of development to ensure extended reach and lasting impact.

Specific considerations for planning for scale up of parenting programmes of adolescents

- Programmes for parents and adolescents are often multisectoral and involve a number of different partners, meaning that there is often not one “owner” of a programme who is responsible for driving scaling up.
- Programming responses should promote the institutionalisation of adolescent development initiatives into public sector activities and priorities.
Planning for scale-up and sustainability
Key questions to guide the integration of issues of scale-up and sustainability into programme planning include the following.

<table>
<thead>
<tr>
<th>Domain</th>
<th>Key question</th>
</tr>
</thead>
</table>
| Linking to relevant partners  | ▶ Which organizations, institutions, and government departments already working with adolescents and parents and other caregivers who might become potential partners?  
                              | ▶ What are the roles and duties of all partners in the current response and in the long term scale up phase?                                      |
| Engagement of key stakeholders| ▶ Are all key stakeholders involved in the planning process (adolescents, parents, policymakers, programme developers, NGOs etc.)?               |
| Relevance                     | ▶ Is the programme linked to an existing government policy or priority area of work, i.e. linked to adolescent development or parenting?         |
| Credibility                   | ▶ How will credibility of the programme be demonstrated?                                                                                     |
|                               | ▶ What data will be needed to show impact and how and when will it be collected?                                                             |
|                               | ▶ Will the programme be externally evaluated?                                                                                               |
| Comparative advantage         | ▶ How does the programme compare to other current programmes?                                                                                  |
|                               | ▶ Is the programme cost-effective?                                                                                                           |
| Support for scale up          | ▶ What are the potential sources for funding (government, international organizations, private sector)?                                         |
|                               | ▶ Can funders commit to longer funding cycles to allow scale-up?                                                                                |
| Transfer and adaptation       | ▶ Is the programme easy to transfer or adapt? It is important to consider the complexity of the programme, human resources as well as the infrastructure required. |
| Expectations of scale-up      | ▶ What are the expectations of scale-up and how can they be incorporated in the implementation and design of the programme?                       |
Monitoring and evaluation (M&E) systems measure how programmes are being implemented and their impact. They can be used to help programmers to plan and improve and assess the delivery of these programmes.

**Specific considerations for M&E systems for parenting programmes of adolescents**

- It is important to include outcome measures to track parent, parenting, and adolescent outcomes (not just adolescent outcomes alone) to fully understand the impact of the programme and the mechanisms by which it works.

- Tools used for data collection should be gender and age sensitive, for both adolescents and parents, and all data should be disaggregated by age and gender of adolescents and parents.

- Adolescents and parents should be involved in M&E activities, by helping to set aims, providing input on tool development, gathering, analysing and disseminating data.

Designing and implementing effective M&E systems for parenting programmes of adolescents requires detailed planning. This includes describing the objectives of the programme clearly, developing indicator frameworks (to track resources, activities and short and long term outcomes), identified responsible people or agencies to collect data and selecting appropriate time frames. Key steps are mapped out below.

**Considerations for monitoring and evaluation**

Key questions to guide the planning for monitoring and evaluation include the following.

<table>
<thead>
<tr>
<th>Domain</th>
<th>Key questions and considerations</th>
</tr>
</thead>
</table>
| Identify what information is needed | Once the goals and objectives of the programme has been defined, the indicators for tracking progress towards these goals needs to be defined.  
- Which program outcomes will the monitoring and evaluation plan focus on? For each outcome, identify what are the noticeable measures or indicators that will reflect that the parenting program is achieving its objectives.  
- Describe what information is required to show these indicators. For example, how many caregivers successfully completed the parenting program? |
Develop operational plan for data collection

- How will the information be effectively and accurately gathered?
- Who will be responsible for collecting, examining and distributing data? What are their training requirements and ongoing support needs?
- Which data collection tool will be used? Will it be able to measure the indicators? Does it provide information that is quantitative, qualitative or both?
- Example of data collection tools include – interviews with participants, focus groups with relevant stakeholders, surveys, questionnaires, observing facilitators conducting a session with the caregivers, etc.
- Make sure that the selected data collection tool will measure the desired outcome, it is appropriate for the target population & context, gender sensitive and any possible copyright issues are addressed.

Analysis and dissemination plan

The M&E plan should include details on what data will be analyzed and how to the results will be presented. The plan should also include how and to whom the data will be disseminated.
References


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111. Community Tool Box. *Identifying targets and agents of change: who can benefit and who can help* [Internet]. Available from: https://ctb.ku.edu/en/table-of-contents/analyze/where-to-start/community-sectors/main
