

Auditory Verbal UK's 'Family Links' Nurturing Programme

Evaluating the impact of a cognitive -relational parenting course on parents' and deaf children's wellbeing.

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Auditory Verbal UK

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Executive Summary

Introduction

Over the past two years, Auditory Verbal UK (AVUK) has expanded the delivery of The Centre for Emotional Health's 'Nurturing Programme' to assess its effectiveness for the emotional wellbeing of deaf children and their parents. This initiative, funded by the National Deaf Children's Society, reached 37 parents/caregivers across four 10-week programmes, showing significant positive impacts on parental health and children's pro-social behaviours.

Programme Overview

The Nurturing Programme is a 10-week cognitive-relational parenting course aimed at improving emotional health and family relationships. It focuses on self-awareness, appropriate expectations, positive discipline, and empathy. AVUK adapted this programme for parents of deaf children and delivered it online, making it accessible to a wider audience.

Adaptations to the Nurturing Programme

- i) To re-contextualise "developmental ages and stages" for families with deaf children
- ii) To highlight and discuss the increased importance of emotional health and wellbeing for families raising young deaf children
- ii) Adaptations to develop strategies and tools that are less heavily language-based

Project Goals and Delivery

The project aimed to:

- Provide high-quality family support
- Connect families with young deaf children
- Build long-lasting peer support and friendships

Courses were delivered twice a year, facilitated by trained professionals, and included both daytime and evening sessions to accommodate different schedules.

Evaluation and Outcomes

Data was collected using the Strengths and Difficulties Questionnaire (SDQ) and the Warwick-Edinburgh Mental Health Wellbeing Scale (WEMWBS). Key findings include:

- **SDQ Results:** 46% of parents reported an increase in their child's pro-social behavior, and 68% reported a decrease in emotional and behavioral difficulties.

- **WEMWBS Results:** Parents' mental wellbeing scores increased significantly, with 90% reporting improved wellbeing post-course.

Feedback and Reflections

Parents found the programme content highly helpful and felt more confident in their parenting skills. The virtual delivery was successful, enabling broader participation. However, areas for improvement include eliminating evaluation bias and ensuring consistent facilitation.

Conclusion

The project demonstrated the importance of providing emotional support to families of deaf children. Following the completion of this National Deaf Children's Society funded project, AVUK plans to continue delivering the programme twice annually, expanding our holistic programme delivery, to ensure deaf children receive the best support from the start.

Quotes from Participants

- *"It has given a completely new perspective... I plan to revisit it [the handbook] periodically during my parenthood journey."* – Dad of a 2-year-old
- *"The course provides a path to navigate the bewildering journey of parenting and makes it more fun and enjoyable."* – Mum of a 3-year-old

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Introduction

Over two years, Auditory Verbal UK (AVUK) have successfully expanded the delivery of The Centre for Emotional Health's¹ 'Nurturing Programme' to directly assess the effectiveness of targeted intervention practice for emotional wellbeing for deaf children and their parents. AVUK has delivered this programme four times, over a two-year period, reaching 37 parents/caregivers across four 10-week programmes. This report outlines the outcomes which show significant positive impact on parental health and wellbeing and improved outcomes for children's pro-social behaviors, following completion of the course.

This project has been possible through funding from the National Deaf Children's Society 'Early Years Research Challenge Fund' and has been delivered by AVUK in partnership with the National Deaf Children's Society and The Centre for Emotional Health.

This report describes the rationale for the project, the research goals, details of the course delivery, the results of the intervention and offers thoughts for developing the intervention for parents of deaf children.

Given the outcomes of this project demonstrating the importance of families accessing high-quality emotional support and the opportunities to build lasting peer-to-peer support and friendships, AVUK propose to continue the partnership with The Centre for Emotional Health to run the course once a year. It is hoped that with further collaboration from external facilitators it would be possible to run the course at least twice per year. This would support the aim of ensuring deaf children receive the best support from the start in the early years.

The Nurturing Programme

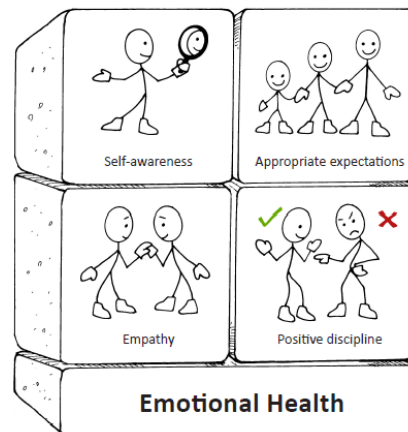
The Nurturing Programme is a 10-week parenting programme, developed by The Centre for Emotional Health (charity number 1062514), that improves the emotional health of both adults and children and strengthens family relationships.

It is a cognitive-relational programme, providing parents and caregivers with new skills to develop an understanding of behaviour in the context of relationships. The Centre for Emotional Health has adapted the course delivery and the handbook for groups of families parenting children with additional needs. AVUK facilitated our courses using this handbook. Other organisations have also delivered from this adaptation, but AVUK were the first to deliver the programme to cohorts of parents of deaf children and the first to do this via a virtual platform.

¹ The Centre for Emotional Health was formerly known as 'Family Links'

The Nurturing Programme is based upon four constructs or building blocks: self-awareness, appropriate expectations, positive discipline and empathy. It is for parents and caregivers of children of 2 years of age, up until age 12.

The Four Constructs of The Nurturing Programme



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Adapting the Programme for Deaf Children

In this project, AVUK expanded the delivery of The Nurturing Programme to directly assess the effectiveness of targeted intervention practice for emotional wellbeing for deaf children and their parents. The aims of the project were to offer group support to parents through evidenced, high quality family support, to connect families with young deaf children and to build long lasting peer-to-peer support and friendship.

Over the course of two years, working in partnership with Family links, AVUK has delivered this programme twice a year, reaching 35 parents across four 10-week programmes. For the first time, the course was delivered solely online, initially via MS Teams, but later changed to Zoom (after 3 weeks) following parental feedback. The programmes have been delivered by trained facilitators Amy Spicer (AVUK), Sian Wilson (National Deaf Children's Society) and Tania McCowliff (Freelance Trainer).

Course Dates

Course 1 – April - July 2023 (Evening)

Course 2 – January - March 2024 (Daytime)

Course 3 – January - March 2024 (Evening)

Course 4 – April - May 2024 (Evening)

Background – Why did AVUK propose expanding this programme for families of deaf children?

The National Deaf Children's Society published a [literature review in 2020](#) on the Emotional Wellbeing of young deaf children and their families. The review found that estimates of the prevalence of emotional wellbeing difficulties in deaf children and young people varied from between 11% to 63% with some studies suggesting a higher rate of prevalence in deaf children and young people when compared to their hearing peers.

The literature review also collected research on effective interventions for parents of deaf children highlighting what support or early interventions, if any, have been found to be effective in i) preventing emotional difficulties from developing, and ii) in supporting parents of deaf and/or disabled children experiencing emotional wellbeing difficulties.

The review concludes that family-centred early intervention support plays an important role in preventing emotional wellbeing difficulties and highlights the lack, if any, of evidence of effective interventions. Few studies suggest interventions specifically aimed at improving and supporting emotional wellbeing. However, findings from the reviewed studies point to the need to:

- i. Prioritise early intervention and aim to improve communication between parent and child
- ii. Acknowledge the role of the internet as an effective tool for socialisation for deaf teenagers
- iii. Ensure parents get the support they need with their child's development.
- iv. Promote self-esteem and identity for deaf children

AVUK wanted to extend and evidence good practice in supporting parents and their children to feel emotionally well and, more specifically, to address the recommendations above, identified in the literature review.

Existing Practice

Prior to the project, AVUK's Family Support Manager, Amy Spicer, had held an online parents' forum and consultation for families on the AVUK Auditory Verbal therapy programme to gather parental views and feedback as to how they could benefit from our family support and on how we could offer high quality, effective family support to the families with an emphasis on wellbeing, emotional health, information sharing and connectivity.

We posed the following question to families raising young deaf children: *"How can we best support you and your family during these early stages?"*

Parents responded by asking for more support with their wellbeing including workshops, group programmes and regular access to family support. Parents also wanted to feel more connected with other parents on the programme and form positive relationships to support one another.

AVUK saw the need to develop their core programme delivery to offer regular parent workshops focusing on wellbeing.

AVUK collaborated with The Centre for Emotional Health (formerly Family Links) to run a pilot delivery of online parenting workshops called, 'The Parenting Puzzle' to a group of parents of deaf children. Parents were offered the opportunity to connect with peer groups to develop positive parenting skills, an understanding of child development and of children's emotional needs, whilst embracing the importance of emotional wellbeing for the whole family. This pilot programme informed AVUK's application for funding through National Deaf Children's Society's 'Early Years Research Challenge Fund.'

Project Funding

Delivery of the Nurturing Programme was funded by the National Deaf Children's Society through the 'Early Years Research Challenge Fund.' The aim of the grant is to fund 'projects that might help [the National Deaf Children's Society] achieve [their] goal of making sure that deaf children receive the best support from the start in the early years.' AVUK were awarded £16,520 to deliver the programme over 2 years.

Project Goals

1. Run an innovative intervention to provide additional evidence in an area of existing good practice
2. Develop strategies and resources that parents need to build communication and language skills with deaf children at home
3. Develop strategies and resources that parents need to build understanding of good emotional health for their child
4. Develop strategies and resources that parents need to build good emotional health for themselves
5. Improve sharing of information and knowledge between facilitators and families
6. Support facilitators to develop their skills and expertise with deaf children
7. Co-produce resources and expertise with families
8. Focus on effective support for deaf children in the early years and their families

Recruitment

The first course was advertised via social media by both AVUK and the National Deaf Children's Society. Family Support workers in both organisations also contacted families directly who may have had an interest in the course. The second and third courses were advertised via social media by both organisations, email invitations were sent to those enrolled on the AVUK family programme and by CICS (Cochlear Implanted Children's Support Group). The fourth course was advertised via the same channels, excluding CICS. A taster session (week 0) was offered to all families before starting the course, except the fourth course due to a full sign-up list.

Cohorts

Over the four programmes, a total of 37 parents enrolled for the course, with 35 completing the 10-week programme.

Table 1- Breakdown of participation in each course run

Course	No. of parents that enrolled	No. of parents who completed the course	Number of parents' pre- and post- course evaluations		
			No of completed WEMWBS	No. of completed SDQ	Family Links 10-week End of Programme Feedback Questionnaire* ¹
1* ²	10	9	8	8	7
2	7	7	6	4	5
3	9	9	9	6	5
4	11	10	9	7	8
Totals	37	35	32	25	25

*¹ The 10-week End of Programme Feedback Questionnaire was conducted at the end of the course. No pre-course data was collected.

*² One set of data from course 1 (April – July 2023) was completed by one parent on behalf of their partner (they attended as a couple). Two parents attended the programme twice. In each case, we collected the set of data only from their first course (April-July 2023) **Parents attended remotely from around the world.**

Parent locations are listed below:

Within the UK

- Buckinghamshire x 1
- Devon x 3
- Essex x 3
- Glamorgan (Wales) x 1
- Hertfordshire x 2
- Kent x 1
- Lancashire x 1
- Lincolnshire x 1
- London x 4
- Milton Keynes x 2
- Manchester x 2
- Middlesex x 2
- Northamptonshire x 2
- Nottinghamshire x 1
- Surrey x 3
- Warwickshire x 2
- Yorkshire x 2

Outside the UK

- Australia x 1
- Malta x 1

Some parents travelled for work or pleasure during the course and so we also saw remote attendance from Poland and India.

For the families attending from the UK, data is broken down to show location by index of multiple deprivation rank. The Nurturing Programme drew interest from families from a very wide range of socio-economic backgrounds as shown in the table below.

Table 2- Local areas of families supported by Index Multiple Deprivation Rank and IMD Decile

Lower Super Output Area	Index Multiple Deprivation Rank	IMD Decile (1 is the most deprived area and 10 is the least deprived)
Blackburn with Darwen 009D	4170	2
Newham 033B	9464	3
Enfield 012B	7894	3
Bedford 014A	8837	3
Torridge 001A	13129	4
St Albans 016A	13880	5
Croydon 005E	13982	5
Redbridge 022D	18922	6
North-East Lincolnshire 007D	22843	7
Exeter 010B	19807	7
Thurrock 004A	22346	7
Barnet 028B	25046	8
South Northamptonshire 002D	24431	8
Braintree 015F	28220	9
Rugby 012B	26762	9
Surrey Heath 001B	29041	9
Broxtowe 016D	29247	9
Stockport 038B	27332	9
Runnymede 004C	28049	9
Chiltern 002C	30447	10
Sheffield 047B	29939	10
Richmond upon Thames 011B	30455	10

A range of family types attended the course, including:

- 25 mothers and 10 fathers
- 4 single parent families
- 27 parents were in paid employment. Working parents showed a preference to attend an evening course
- 7 couples attended the course together

“One of the most important things for me has been knowing that I now have other Dads I can be in touch with when we hit those big milestones like starting pre-school and school. It’s so good to know that someone else can be there to offer me advice having been through it themselves.”

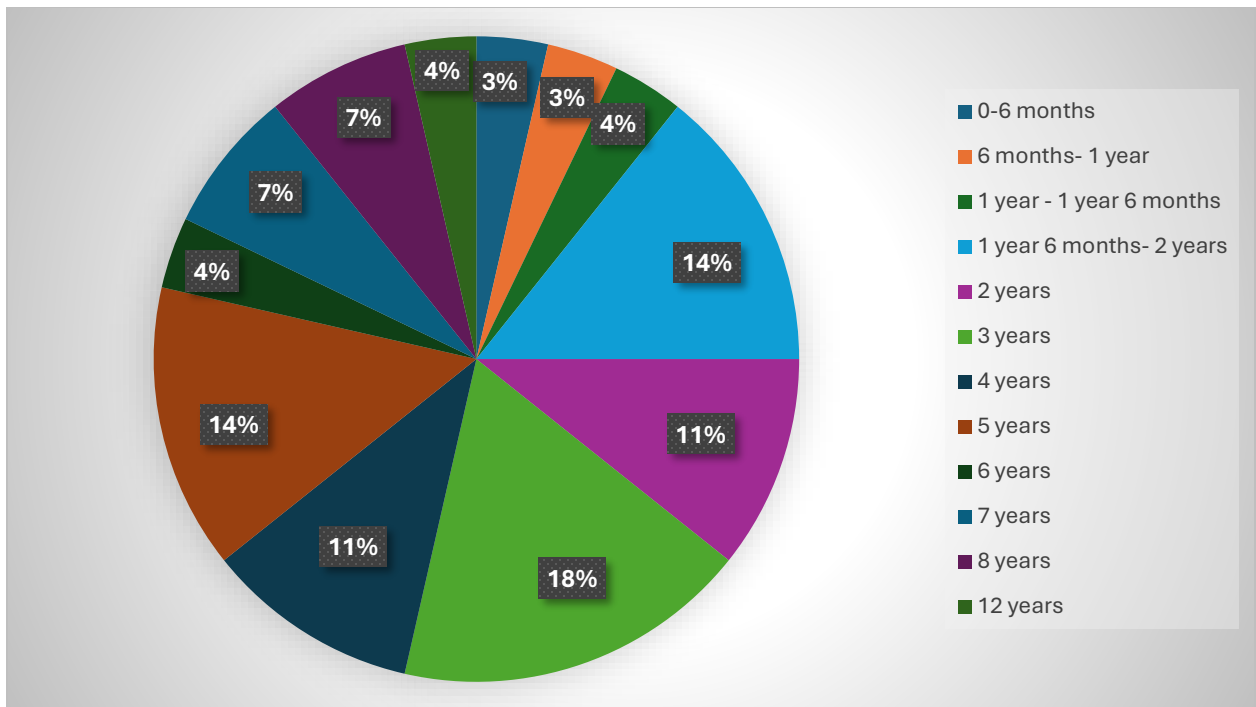
- Dad of child aged 2, Cohort 3

Participants came from a range of backgrounds. This is broken down below in terms of their self-description:

- Albanian (x1)
- Australian (x1)
- Black British (x1)
- British Asian (x2)
- Chinese British (x1)
- Indian British (x1)
- Jamaican (x2)
- Maltese (x1)
- Pakistani (x1)
- Polish (x1)
- Russian (x1)
- South African (x1)
- Vietnamese (x1)
- Welsh (x1)
- White British (x19)

All participating families were raising a deaf child. A total of 28 deaf children were reached by the project, aged between 18 months and 12 years old. Whilst the Nurturing Programme is aimed at parents of children aged 3-11 years, the facilitators felt it important not to exclude any families that applied for the course, as the knowledge gained could also be of benefit to parents of older children. The parent of a 12-year-old child gave feedback that the course was suitable to her child’s developmental age and understanding, unlike courses designed for her child’s chronological age.

The following graph shows the breakdown of age groups from participating children. Up to 2 years they are shown in six-month blocks, and following on from 2 years old they are per year:



Graph 1- Age groups of Supported Children (total of 28 children).

Twenty-four per cent of the children were less than 2 years of age; 40% were aged between 2 and 5 years inclusive. The remainder were over 5 years of age. Approximately 65% of the families had children of pre-school age.

The children each had varying degrees of hearing loss as described by their parents, and as shown in the table below. Seven children had additional needs in addition to their hearing loss. Only 20 parents shared information about their child's hearing loss.

Table 3- Distribution of children on the programme by degree of hearing loss.

Degree of hearing loss (parental description)	No. of children
Mild – Moderate	2
Moderate	2
Moderate – Profound	1
Moderate – Severe	4
Severe	3
Severe – Profound	2
Profound	6

Evaluation and Data Analysis

Qualitative and quantitative data was collected using the following evaluation tools:

- The Strengths and Difficulties Questionnaire (SDQ)
- The Warwick-Edinburgh Mental Health Wellbeing Scale (WEMWBS)
- Family Links 10-week End of Programme feedback
- Weekly feedback via Google Forms
- Dialogue in weekly feedback sessions
- Feedback in the 'Chat' function of Zoom/MS Teams
- Feedback emailed to the facilitator

The outcomes from the three evaluation tools below are the main focus of this report:

1. **Strengths and Difficulties Questionnaires (SDQs)** –

The Strengths and Difficulties Questionnaire (SDQ)² is a brief emotional and behavioural screening questionnaire for children and young people. The tool can capture the perspective of children and young people, their parents and carers across various domains of emotion and behaviour as outlined below. The SDQ can be used for various purposes, including clinical assessment, evaluation of outcomes, research and screening. The 25 items in the SDQ comprise 5 scales of 5 items each.

- Emotional symptoms subscale
- Conduct problems subscale
- Hyperactivity/inattention subscale
- Peer relationships problem subscale
- Pro-social behaviour subscale

For the purpose of this research, we looked specifically at pro-social behaviour. Pro-social behaviour is defined as doing something to benefit, help or care for someone else, because you believe other people's feelings are important.

Questionnaires to record the child's behaviour were administered prior to and after their parent/s completed the course. The SDQ measures how a child reacts emotionally to different situations. This information was collected by facilitators through a 1:1 parent interview conducted pre- and post-course completion via MS Teams. The SDQ consists of 25 emotional situations equally divided across five scales measuring emotional symptoms, conduct problems, hyperactivity-inattention, peer problems, and pro-social behavior. The Pro-social Scale is scored so that an absence of pro-social behaviour is recorded at the start of a course. The SDQ score indicates the content of the child's psychosocial behaviour and the severity of any difficulty in this regard. The difference between the pre- and post intervention scores reflects a change in these behaviours. The outcome of the parent's responses is categorized using the

² Goodman. R. (2001). Psychometric properties of the strengths and difficulties questionnaire. *Journal of the American Academy of Child and Adolescent Psychiatry*, 40 (11), 1337-1345.

evaluation and analysis data sheet produced by The Centre for Emotional Health, to determine average progress. The Centre for Emotional Health provided an algorithm for attributing each child's starting and completion status for the Strengths and Difficulties Questionnaire. The status fell into one of three categories, namely, 'Normal', 'Borderline', 'Clinical'.

2. **The Warwick-Edinburgh Mental Health Wellbeing Scale (WEMWBS)**³ - This scale records how parents feel about their mental wellbeing pre- and post-course completion. Facilitators collect this data through 1:1 parent interviews via MS Teams.
3. **The Nurturing Programme 10-week End of Programme Feedback** – This online survey used by The Centre for Emotional Health asks parents to score each strategy/programme area taught on the course, rating each based on how confident they feel using the strategy and how helpful they find using it day to day. The rating scale is 1-5.

Programme Outcomes

Strengths and Difficulties Questionnaire

Thirty-one parents completed an SDQ for their child. According to the responses for the different areas covered within the SDQ, the child's score is attributed to one of three categories. The transitions in category occurring for each of the 31 children from pre- to post-intervention are given in table 4 below. Amalgamating the data of the children from the four cohorts, the scores of 19 children (61%) fell within the 'normal' category, three children (10%) had 'borderline' and nine children (29%) had 'clinical' scores at the start of the intervention.

Of the 19 children whose pre-intervention score fell within the 'normal' category, the scores of 18 children remained within the 'normal' category and one child migrated from 'normal' to 'borderline'. Of the three children whose pre-intervention score fell within the 'borderline' category, one remained as 'borderline', one child's score moved to 'normal' and one child's score moved to 'clinical' at post-intervention. Of the nine children with pre-intervention scores in the 'clinical' category, four children had scores within the 'borderline' category post-intervention and the scores of five children did not change with regard to categorisation.

³ Tennant, R., Hiller, L., Fishwick, R., Platt, S., Joseph, S., Weich, S., Parkinson, J., Secker, J., & Stewart-Brown, S. (2007). *Warwick-Edinburgh Mental Well-Being Scale (WEMWBS)* [Database record]. APA PsycTests.

<https://doi.org/10.1037/t01628-000>

Table 4- Changes in categories for all data scores for Cohorts 1 – 4.⁴⁵

Change in category Pre- to Post-Course	Number of children	Percentage of all children
Normal --> Normal	18	58.1
Normal --> Borderline	1	3.2
Borderline --> Borderline	1	3.2
Borderline --> Normal	1	3.2
Borderline --> Clinical	1	3.2
Clinical --> Borderline	4	12.9
Clinical --> Clinical	5	16.1
Total	31	100%

The distributions of pre-intervention and post-intervention mean SDQ scores across all four cohorts were investigated to assess whether the scores followed a normal distribution. The modal values for the pre- and post-intervention scores were each in the 5 -10 range but neither the pre- nor post-intervention scores followed a Gaussian distribution. For this reason, a McNemar's (non-parametric) test was used to investigate the effect of the intervention (see Table 5).

The nominal data was collapsed into two categories: 'normal' and 'other' where 'other' encompassed 'borderline' and 'clinical'. The test statistic from an exact McNemar (2-tailed) analysis had a probability of $p=0.48$ indicating no statistically significant difference in the proportions of 'normal' and 'other' SDQ categories pre- and post-intervention.

Table 5- Relative proportions of children with 'normal' and 'other' SDQ scores pre- and post-intervention used in exact McNemar analysis.

	Post-intervention	
Pre-intervention	Normal	Other
Normal	18	1
Other	1	11

⁴ Normal range (scores 0 to 13) indicates a child is within the normal range for emotional and behavioural problems. This suggests they are experiencing typical challenges and strengths in their development. Borderline range (scores 14 to 16) suggests a child may be experiencing some difficulties, but they are not severe enough to warrant intervention or further assessment. Clinical Range: (scores > 17 or higher) suggests that a child is experiencing significant emotional and behavioural problems that may require further assessment and intervention.

⁵ Goodman. R. (2001). Psychometric properties of the strengths and difficulties questionnaire. Journal of the American Academy of Child and Adolescent Psychiatry, 40 (11), 1337-1345.

A more detailed analysis of the changes in Pro-Social Behaviour scores and Emotional and Behavioural Difficulties scores was conducted:

Pro-social behaviour

The SDQ focuses on five different domains from which a pro-social score is derived. On completion of the course, the scores of five out of eight parents (62.5%) in cohort 1, one out of four parents (25%) in cohort 2, one out of seven parents (14%) in cohort 3 and five out of seven parents (71%) in cohort 4, indicated an increase in the pro-social behaviour of their children. Overall, 12 out of 26 parents (46%) indicated an increase in pro-social behaviour.

Emotional and Behavioural Difficulties

SDQ analysis demonstrated a decrease in emotional and behavioural difficulties: In cohort 1, five of eight parents (62.5%) reported a decrease in their child's emotional and behavioural difficulties. Similarly in cohorts 2, 3 and 4, the figures were three out of four parents (75%), two out of six parents (33%) and seven out of seven parents (100%), respectively. Overall, 17 out of 25 parents (68%) reported a decrease in their child's emotional and behavioural difficulties.

Whilst there was not a statistically significant change in the pre- and post- intervention SDQ category scores, parents did report an increase in pro-social scores for approximately 1 in 2 of the children (46%) in this study. Approximately two in three parents (68%) reported a decrease in their child's emotional and behavioural difficulties over the course of the 10-week Nurturing Programme.

“Both kids are sleeping better on account of it. Some nights have been better than others, but they are both sleeping around 10 hours per night and seem less fighty in the daytime...”

- Mum of child aged 5, Cohort 1

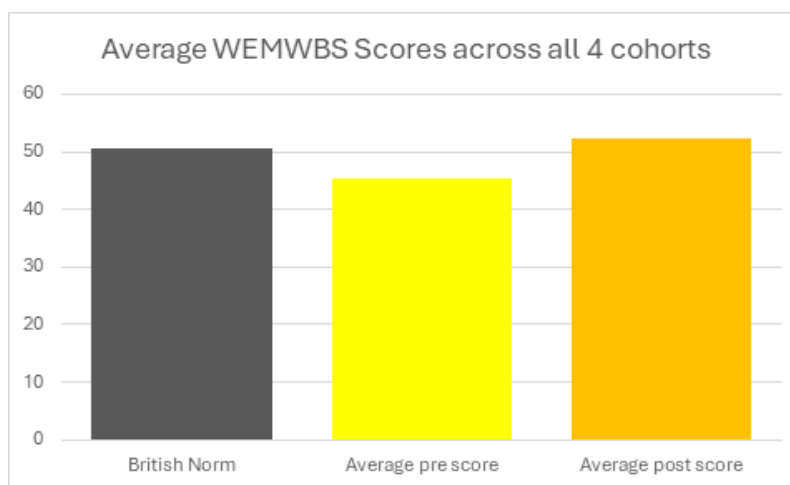
Warwick-Edinburgh Mental Health Wellbeing Scale (WEMWBS)

Across the four courses, 32 parents completed the WEMWBS. Table 6 shows the changes in all 32 parents' WEMWBS scores pre- and post-intervention.

Table 6- Pre- and post-intervention WEMWBS scores for each of the four cohorts

Cohort	No. of Parents who completed WEMWBS	Mean Pre-intervention WEMWBS score	Mean Post-intervention WEMWBS score	Mean Change in WEMWBS score	Percentage of parents showing Improvement in scores
1	8	46.6	52.5	+5.9	100%
2	6	44.5	53.0	+8.5	83%
3	9	44.8	53.4	+8.8	78%
4	9	45.8	50.7	+4.9	89%
Totals	32	45.5	52.5	+6.9	

On average, across the four cohorts, parents' score on the WEMWBS increased by 6.9 points. A paired t-test comparing pre- and post-intervention showed a highly significant difference in scores ($t = -5.80$; $p < 0.002 \times 10^{-3}$). Prior to intervention the mean score for the parents of each cohort (45.5) was below the British norm score of 50.6. Post-intervention data revealed a significant increase in the mean score (to 52.5) suggesting that the intervention is effective at improving parents' mental health and well-being (see Graph 2).



Graph 2. Bar chart to show Pre- and Post-intervention WEMWBS scores against British Norms.

Looking in more detail across the four cohorts, 28 out of 32 (~90%) parents reported an increase in their mental wellbeing after completing the 10-week course. Four parents reported a decline in mental wellbeing:

For Parent 1 and Parent 3, the course opened up a deeper understanding of how they were feeling, both in relation to their child's hearing loss but also an understanding of how they had neglected their own emotions and well-being during the journey of parenting. This understanding was reflected by a lower score at the end of the course as opposed to the 'I'm fine!' approach they had disclosed at the initial, pre-intervention scoring.

Parent 2 is a parent to four children, all of whom have complex needs. During the course, there were external challenges presented to her which impacted her wellbeing. However, having completed the 10-week course, she felt better equipped to support her family's emotional health.

Parent 4 cited issues at work as the reason for the decline in his wellbeing with tight deadlines, unhappiness at work and lots of travel keeping him away from his family.

There was a statistically highly significant improvement in parental WEMWBS scores indicating that the Nurturing Programme 10-week course is effective at improving parental wellbeing and emotional health for parents of deaf children.

“I thought talking about emotional wellbeing was going to be a bit ‘airy fairy’ but the course has helped me understand the importance of recognising both my own emotions and those of my daughter, I’m so pleased I’m equipped now to support her emotional development.”

- Dad of child aged 11m, Cohort 4

End of 10-week Programme Feedback

All of the parents who responded to the ‘End of 10-week Programme Feedback’ (n= 25) said that they would recommend the Nurturing Programme to other parents.

The content of the Nurturing Programme included discussion around the following areas: Praise, Boundaries and Family Rules, Rewards and Penalties, Choices and Consequences, Time Out, Honouring Children’s Feelings, Listening and Talking, Problem Solving, Ignoring Undesirable Behaviours and Nurturing Ourselves. Parents were asked to give feedback on each of the topic areas considering both the helpfulness of the information and the degree of confidence they now had in adopting the strategies described within the course content using a rating scale from 1 to 5. Below are the mean ‘Helpfulness’ and ‘Confidence’ ratings reported by parents per cohort for all four cohorts undertaking the 10-week course.

Cohort 1	Mean Helpfulness Rating	4.5
	Mean Confidence Rating	3.9
Cohort 2	Mean Helpfulness Rating	5.0
	Mean Confidence Rating	4.2
Cohort 3	Mean Helpfulness Rating	4.5
	Mean Confidence Rating	4.2
Cohort 4	Mean Helpfulness Rating	4.4
	Mean Confidence Rating	4.1

Table 7- Mean ‘Helpfulness’ and ‘Confidence’ ratings for each of the four cohorts.

Amalgamating the ‘Helpfulness’ data across the four cohorts, the mean ‘Helpfulness’ rating was 4.6 with a range of mean individual ratings across the different topic domains from 3.0 to 5.0 (with a maximum rating score of 5). Similarly, the mean ‘Confidence’ rating was 4.2 with a range of mean individual ratings from 2.5 to 5.0 (with a maximum rating score of 5).

It is interesting to reflect on the two different aspects of this feedback: Parents found the course content across the 10 different domains covered helpful with a mean high rating score of 4.6. The rating score for confidence was slightly lower at 4.2. If it is assumed that an increase in knowledge or understanding of topics covered in the 10 different domains would lead to an increased confidence in

parenting practice, we would expect there to be a correlation between the 'Helpfulness' and 'Confidence' ratings across individual parents. A Spearman's Correlation analysis (Spearman's rho, $r_s = 0.58$) suggests that there is a moderate, positive correlation between 'Helpfulness' and 'Confidence'. It is possible to look at this relationship in finer detail by considering the rating scores of each of the domains of learning (see Table 8).

Table 8- Mean parent helpfulness and confidence ratings across all 4 cohorts.

Programme Area/Strategy	Mean Helpfulness Rating	Mean Confidence Rating	Difference in mean ratings
Praise	4.68	4.44	0.24
Boundaries, family rules	4.36	3.84	0.52
Rewards and penalties	4.44	3.92	0.52
Choices and consequences	4.48	4.04	0.44
Time out	4.56	4.28	0.28
Honouring children's feelings	4.72	4.60	0.12
Listening and talking	4.64	4.56	0.08
Problem-solving, negotiating	4.44	4.00	0.44
Ignoring undesirable behaviour	4.24	3.64	0.60
Nurturing ourselves	4.52	3.88	0.64

The mean ratings for 'Helpfulness' were each greater than 4.00 (out of 5) across each learning domain and greater than 3.64 for mean 'Confidence' ratings. The highest mean 'Helpfulness' ratings were awarded for 'Honouring children's feelings' and was mirrored by the highest mean rating for 'Confidence'. The lowest mean rating scores were for 'Ignoring undesirable behaviour' in both 'Helpfulness' and 'Confidence'.

Across each of the 10 learning domains, the mean rating scores for 'Helpfulness' and 'Confidence' were highly correlated (Spearman's rho = 0.912; $p < 0.24 \times 10^{-3}$).

The difference in mean ratings in each domain of learning across all four cohorts for 'Helpfulness' and 'Confidence' was smallest for 'Listening and Talking' (difference = 0.08) which is very interesting given that each of the Nurturing Programme cohorts comprised parents of deaf children. It suggests that parents not only found the information helpful but were confident in transferring that knowledge to their everyday family life. The largest difference in 'Helpfulness' and 'Confidence' ratings was for the domain focusing on Nurturing Ourselves. One possible interpretation is that while parents found the information about 'Nurturing Ourselves' useful, this was the area of parenting which posed the greatest challenge regarding a change in adults' habits.

Feedback from parents on this 10-week Nurturing Programme was extremely positive with 100% endorsement for recommending the course to other parents. This is the first time that this Family Links Nurturing Programme has been delivered to cohorts of parents with deaf children. Parents'

feedback highlights that ignoring undesirable behaviour is an area that requires further support. The biggest difference in rating scores for 'Helpfulness' and 'Confidence' was found to be within the domain 'Nurturing Ourselves'. Parents found the information helpful, but the challenge remained in putting that knowledge into practice.

"This course has taught me so much and given me more confidence to be a better parent. I feel happier being more able to deal with stressors of family life and I feel certain that doing this course has improved the lives of my family and I. The facilitators are excellent, empathetic, and encouraging"

- Mum of child aged 5, Cohort 1

Long term Programme Feedback

Six to 18 months (dependent on cohort) after the course we surveyed parents to ask about the longer term impact of the course. We collected 5 responses from the survey and met with 3 parents virtually in a post-course online session.

"I try to apply various strategies that we had discussed with varying results. Being persistent is the key. My wife is also now currently enrolled in the course"

- Dad of child aged 18m, Cohort 1

"This programme has given me strategies for finding the exit from stressful situations and through that I have developed self-respect in a way I didn't ever expect"

- Mum of child aged 4, Cohort 1

"We have really considered management of tantrums. We give our child choices where we can. We use positive reinforcement regularly and try and ignore behaviour we don't want to draw attention to. We try to avoid saying no and instead reframe what message we're trying to get across. I think we use things we learnt on the Family Links course so regularly that some of our behaviours are second nature and difficult to pinpoint"

- Mum of child aged 3, Cohort 4

"Following many of the strategies discussed during the course and continuing to make family time a priority"

- Dad of child aged 4, Cohort 3

"The course has made me more aware of the day-to-day interactions and meaningfulness of just minor connections to make children feel loved and safe. In the past, I would have felt less confident in my own ability to parent and I am grateful for the course in giving me insight into myself, patience and an approach to difficult situations and a new found resilience I didn't know I had"

- Mum of a child aged 3m, Cohort 1

Reflections

This section explains what key elements of the course we would aim to deliver in future (subject to funding) and the peer-to-peer reflections of the course facilitators. It also identified potential areas for improvement in future courses.

What would remain the same:

- **Course content** - Parents enjoyed and responded very well to the content of the programme and therefore we would recommend continuing with the same programme of learning.
- **Virtual delivery** - Delivering the course online for the first time has proven successful and has enabled access to the Nurturing Programme for families who were unable to attend in-person classes. Parent feedback also demonstrates that families still felt they were able to connect with other parents and build supportive relationships in a virtual setting.
- **Targeted audience** - AVUK's expanded programme was the first to deliver the Family Links Nurturing programme to parents with deaf children specifically. We would aim to continue delivering the course for this group as we recognise the importance of offering expanded support to families of deaf children. We would aim to offer the programme to families both on and beyond the AVUK programme (subject to funding).
- **Adapted Family Links handbook** - For the course, Family Links adapted the Nurturing Programme handbook for parents of children with additional needs and made it available online for the first time. Parent feedback highlights how valuable parents have found having this resource and therefore, with continued funding, we would continue to provide the handbook to parents on the course.
- **Impact evaluation tools** - The evaluation tools have been valuable methods for measuring the impact of the course and ~~thus~~ we would continue to use them in future programmes.
- **Co-promotion** - Three organisations promoted the courses (AVUK, CICS, National Deaf Children's Society). This enabled the programme to have greater reach among families.
- **Daytime and Evening courses** - By providing courses at different times of the day, this has enabled a greater equity to families.

What we would do differently:

- **Eliminate evaluation bias** - To eliminate potential bias from parents' responses, course evaluation (1:1 parent interviews) would no longer be completed by the course facilitators, but rather, subject to funding by external independent evaluators.
- **Consistent facilitation** - Two courses were facilitated by Amy Spicer (AVUK) and Tania McCowdell (Freelance Family Links Trainer). Sian Wilson (National Deaf Children's Society) and Amy Spicer worked in partnership to deliver the other two courses. In future, we would try to ensure that course facilitators remain the same across all courses over a 2-year period. This will enable us to directly compare all course feedback and will provide consistency across all courses.

- **Detailed demographics** - To collect more comprehensive/representative data on the varying demographics among participating families, we will ensure more consistent collection of this type of data on future programmes.

Peer-to-Peer Reflections:

- **Peer support** - It was evident that, as well as the impact of course content itself, that the platform for bringing families of young deaf children together, created a peer-to-peer support system in itself. Families shared invaluable insights, experiences and advice that gave others hope and alleviated fears.
- **Virtual delivery** - Whilst not the traditional way of delivering the Nurturing Programme, the online platform enabled parents to access the programme in a way that may not have otherwise been possible. We saw international families attend; couples attend together who would otherwise have had to book childcare. We also saw increased interest from spouses of enrolled parents who had not signed up for the course themselves but would sometimes join one or two sessions to learn alongside their partners. By delivering the evening sessions we saw an increased uptake of fathers, couples and working parents access the course, as well as a parent across the other side of the world!

- **Content adaptation** - The content of the Nurturing Programme for children with additional needs can be further adapted for children who are deaf and those in the early years. In particular, facilitators wanted to reduce the amount of language used in the role play scenarios to make the content relevant to our cohort of families.

There was some overlap between the course content from The Nurturing Programme and the National Deaf Children's Society's programme 'Raising a Deaf Child'. Sian and Amy visited the content of the National Deaf Children's Society programme together to reflect on aspects of the programme that could be brought together or added to the Nurturing Programme to enhance the content for families of young deaf children.

The programme delivers team building activities and energiser breaks to help families get to know each other. Over the delivery of the courses, facilitators became more confident and creative to replicate the handbook activities in a virtual format and want to continue to consolidate these ideas for online delivery.

- **Confidence and empathy** - Parental confidence was evident throughout the course and parental discussions showed increased empathy skills for their peers and for their children.
- **Long term outcomes** - We have started to meet families six-month post-course completion to see if they continue to use the tools from the Nurturing Programme. We are in conversations with The Centre for Emotional Health as to how we might formalise these check-in points and measure the longer-term impact of the course.

"The group have been amazing. Everyone was respectful of each other, and everything was clearly explained."

- Mum of child aged 4, Cohort 4

Conclusion

National Deaf Children's Society funding has supported AVUK to run a pilot project focussing on an innovative intervention aimed at emotional and wellbeing support for parents of deaf children. Through highly competent facilitation, the project has achieved its goals of having:

1. Provided robust evidence regarding the effectiveness of additional emotional and wellbeing support offered to parents in an area of existing good practice
2. Developed strategies and resources that parents need to build communication and language skills with deaf children at home
3. Developed strategies and resources that parents need to build understanding of good emotional health for their child
4. Developed strategies and resources that parents need to build good emotional health for themselves
5. Improved sharing of information and knowledge between facilitators and families
6. Supported facilitators to develop their skills and expertise with deaf children
7. Co-produced resources and expertise with families
8. Focused on effective support for deaf children in the early years and their families

Over two years, we have successfully assessed the effectiveness of targeted intervention practice for emotional wellbeing for 35 families of parents of deaf children in the UK and across the world. The outcomes have demonstrated that by supporting parents of deaf children through this innovative programme, we are able to build on an area of existing good practice, equipping parents of deaf children with the strategies and resources they need to build communication and language skills with deaf children at home.

It is vital to recognise that running this programme has been possible even in a virtual setting, with the option of online learning enabling access to the Nurturing Programme for more families than ever, which is vitally important for inclusivity and involving families wherever they live.

In partnership with The Centre for Emotional Wellbeing, and with potential future funding, we could continue to deliver this programme to offer group support to parents as part of a broad programme of family support that helps to connect families with young deaf children and to enable them to build long lasting peer-to-peer support and friendship. AVUK plans to run the course once a year for families and hope to collaborate with external facilitators to run the course twice a year. This would support the aim of working together to ensure deaf children receive the best support from the start in the early years.

"It really has been one of the best courses that I have attended since completing my formal education. It has given a completely new perspective- the book is specially very well-curated and I plan to revisit it periodically during my parenthood journey."

- Dad of child aged 2, Cohort 1

"The course provides a path [to] navigate the bewildering disorientating journey of parenting and makes it more fun and enjoyable."

- Mum of child aged 3, Cohort 3

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