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DEPARTMENT OF PSYCHOLOGY

# AN INDEXING OF PARENTING PROGRAMMES IN CAMBODIA

September 2015

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Sponsored by



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## ACRONYMS

CCWC	Commune Committee for Women and Children
CVACS	Cambodia Violence Against Children Survey
ICC	International Cooperation Cambodia
ICS	Investing in Children and their Societies
MoCR	Ministry of Cults and Religion
MoEYS	Ministry of Education, Youth and Sport
MoH	Ministry of Health
MoI	Ministry of Interior
MoWA	Ministry of Women's Affairs
NGOs	Non-Governmental Organizations
SSC	Social Services of Cambodia
TPO	Transcultural Psychosocial Organization
UCT	University of Cape Town
WCCC	Women and Children Consultative Committee

**RECOMMENDED CITATION:**

Royal University of Phnom Penh, Department of Psychology, GIZ and UNICEF Cambodia. An Indexing of Parenting Programmes in Cambodia, 2015.

**DISCLAIMER:**

The findings and conclusions of this report are those of the authors and do not necessarily represent the official position of the United Nations Children's Fund, GIZ, and Royal University of Phnom Penh, Department of Psychology.

# 1. INTRODUCTION

## 1.1 Violence against children in Cambodia

The results of the government-led 2013 Cambodia Violence Against Children Survey (CVACS) provided for the first time national estimates that describe the magnitude and nature of physical, emotional and sexual violence against children in Cambodia (Ministry of Women's Affairs (MoWA), UNICEF Cambodia and US Centers for Disease Control and Prevention, 2014). The CVACS findings showed that more than half of all respondents experienced at least one form of violence in childhood. More specifically, more than half of those surveyed had experienced physical violence, around one-quarter had been emotionally abused, and five per cent of both females and males reported being sexually abused at least once before the age of 18 (MoWA et al., 2014).

Importantly, the CVACS revealed that parents and caregivers play a key role in the persistence of violence against children in Cambodia and are common perpetrators of physical and emotional violence against children. Approximately half of those aged 13 to 17 years surveyed for the CVACS reported physical violence, and one-quarter reported emotional violence by parents, caregivers or other adult relatives. Children are commonly exposed to violence between adults in the home. Among the 13- to 17-year-olds who said they had witnessed physical violence in the home, 37.4 per cent of females and 34.7 per cent of males said they had witnessed such violence in the past 12 months. Parents and caregivers struggle to protect their children from violence in the multiple settings where children live, including home and school. Children are commonly exposed to physical violence perpetrated by teachers, and to sexual abuse by neighbours, family members, friends and dating partners (MoWA et al., 2014).

The CVACS also found that exposure to violence as a child was associated with a range of short-term health consequences and risk behaviours, including moderate mental distress, sexually transmitted infections, self-harm, problem drinking, smoking, intimate partner violence perpetration, moderate injuries and thoughts of suicide. The findings highlighted the emotional impact of all types of violence experienced by children, which often go unrecognized.

In the qualitative component of the CVACS, both female and male respondents felt disappointed about the lack of meaningful interaction with adults, expressing a strong desire for closer relationships with their parents, in which they could talk more openly about concerns and needs (MoWA et al., 2014). Both females and males used the expression "getting blamed" when they talked about their parents admonishing them. Participants provided examples where they knowingly misbehaved and therefore expected a rebuke, but overall scolding and censure seemed to be a frequent mode of communication from adults to children. This was particularly confusing and distressing for children, who reported that they regularly did not understand the reasons for a reprimand. It also implied that parents and children's relationships were often not emotionally close or open, and while both females and males said they would like to talk to their parents about problems and concerns, they did not feel that they could approach them. Children expressed a strong desire for affection and understanding from their parents. They wanted advice and constructive information over reproach.

## **1.2 Child-rearing in Cambodia**

The CVACS findings highlight an urgent need to appropriately address parenting in Cambodia. Gourley (2009) discussed the gap between Cambodian culture and children's rights and emphasized that cultural values influence the attitudes, perceptions and behaviours of individuals. Important Cambodian cultural values include hierarchy, reputation, patriarchy, patronage, harmony and collectivism (Gourley, 2009). Cambodian parents rarely praise their children and commonly blame them (Kelley, 1996; Simcox, 2014). A study on cultural beliefs and parenting in Cambodia found that the majority of mothers (n=211) and grandmothers (n=217) interviewed strongly agreed with the following proverbs: "Bend steel while it is hot", "If you love your children, do not show it," and "Don't praise your child, it will spoil him or her" (Klaus, 2015, p.11).

Another recent study looking at parenting styles in Cambodia found that approximately 80 per cent of mothers (n=211) and grandmothers (n=217) reported non-violent and positive parenting behaviours, including: i) calmly talking to their children when they did something wrong, ii) praising their children when they behaved well, iii) complimenting their children when they did something positive, and iv) letting their children know when they did a good job (Phul, Toch and Seng, 2015). Approximately 75 per cent of children (n=520) stated their parents used non-violent and positive discipline methods toward them. However, inconsistent parenting styles were commonly reported by grandmothers, mothers and children (Phul et al., 2015), for example, threatening to punish a child, but not actually doing so (Phul et al., 2015). Psychological aggression, such as yelling or screaming at a child was more commonly reported than corporal punishment (Phul et al., 2015).

## **1.3 Parenting programmes and interventions**

Many empirical studies indicate that strengthening parent-child relationships and parenting skills can effectively prevent violence (World Health Organization (WHO), UNICEF and University of Cape Town (UCT), 2013). Positive parenting is seen as a foundation for child development (Sanders, 2012). A warm and supportive parenting environment acts as a protecting factor, even in situations where children and their caregivers face poverty and deprivation. Parenting interventions have proven to be effective at promoting child well-being and preventing child maltreatment (Knerr, Gardner and Cluver, 2013; Mejia, Calam and Sanders, 2012; Chen and Chan, 2015). Chen and Chan (2015) conducted a meta-analysis on the effects of parenting programmes on the prevention of child maltreatment and found positive long-term effects both at the post-intervention evaluation and follow-up stages. Parenting programmes have been shown to prevent both behavioural problems in children, especially at an early age, as well as youth violence (WHO et al., 2013).

Positive effects of parenting programmes on the prevention of child maltreatment have been shown in developed and developing countries. Effects include improved parenting attitudes, parent-child interactions, positive parenting behaviours, and increased parental confidence and satisfaction (Chen and Chan, 2015).

In low- and middle-income countries, there is very little evidence of affordable parenting programmes. A recent randomized controlled trial of a short-term parenting intervention in a low-resource setting revealed moderate effects on behavioural difficulties at post-intervention and at three-months follow-up, and large effects at six-months follow-up (Mejia et al., 2015). The methodology employed in this trial represents a possible template for future work in other low-resource contexts.

### 1.3.1 Components of effective parenting programmes

The facilitators of a parenting programme must have adequate training and supervision that covers both the content of the programme and the skills required to successfully build rapport with parents (WHO et al., 2013). Efficient monitoring and evaluation procedures should be included to ensure the quality and efficacy of the programme and to guide any iterative changes as needed (WHO et al., 2013).

WHO et al. (2013) reviewed evidence-based parenting programmes and suggested effective programmes should have the following features in common:

- *Sound programme theory* – parenting programmes should be underpinned by a strong programme theory with clear assumptions and expectations about programme design and implementation
- *Clearly defined target population* – consider socio-economic status, educational background, family risk factors and the age of the children
- *Appropriately timed* – families have been found most vulnerable and open to parenting support during transitional periods in the development of their children
- *Acceptable to participants* – interventions should be seen as relevant and acceptable, addressing the needs and expectations of participants
- *Sufficient sessions* – taking into account the level of need of the target population. Programmes with a longer duration are generally more effective at tackling severe problems and high-risk groups. For less severe problems, positive outcomes have been achieved through ‘light-touch’ programmes
- *Well-trained and well-supervised staff*
- *Monitoring and evaluation*
- *Opportunities for parents to practice new skills*
- *Teach parenting principles, rather than prescribe techniques*
- *Teach positive parenting strategies, including age-appropriate positive discipline techniques*
- *Consider difficulties in relationships between adults in the family*

Chen and Chan (2015) looked at the following programme characteristics: i) country income level (high income versus low and middle income), ii) sample size (small, middle and big), iii) number of sessions (less than or equal to 12 sessions versus more than 12 sessions), iv) early start, and (v) participants (mothers only versus mothers and fathers). The findings

emphasize the impact of a country's income level on the effect of parenting programmes. Programmes with small to medium-sized groups were more effective than those working with big groups. A high number of sessions (more than 12) did not improve the effect of the programmes. Chen and Chan (2015) concluded that programmes should start early, either during or before the prenatal stage. Programmes that involved fathers and mothers seemed to yield fewer effects than those involving mothers only.

### **1.3.2 Culturally adapted parenting programmes**

Differences in literacy levels, family structure, cultural beliefs, child rearing practices and economic status may affect the outcome of parenting programmes (Knerr et al., 2013; WHO et al., 2013). This emphasizes the need for careful adaptation when introducing any parenting programme in a new setting (WHO et al., 2013). The adaptation process should take several concerns into account. First, the programme should be rooted in a coherent theory that explains the underlying programme structure (WHO et al., 2013). Although a programme may be shortened, essentially, the main features responsible for a programme's effectiveness are to be maintained. Second, the adapted programme must be monitored and evaluated in the new context. The results of such monitoring and evaluation processes should form the basis for further adjustments to improve the programme's fit for the new target group, while retaining its theoretical foundation (Knerr et al., 2013; WHO et al., 2013). Finally, the country's readiness to implement the programme must be considered with regard to existing knowledge and expertise of the parenting workforce, as well as available resources (WHO et al., 2013).

The findings of the CVACS showed a strong need for effective parenting programmes in Cambodia; programmes that strengthen two-way communication between adults and children (MoWA et al., 2014). Parenting programmes in Cambodia should focus on the importance of parent-child relationships involving high warmth and low criticism, and should address harmful cultural beliefs and traditional practices, while building on existing positive parenting practices common among Cambodian parents and caregivers (Phul et al., 2015).

## 2. METHODOLOGY

This indexing exercise aimed to gather information about existing parenting programmes implemented in Cambodia. It looked at programmes providing parenting support or interventions aimed at promoting effective parenting and healthy child development.

### 2.1 Respondents

In total, 25 non-governmental organizations (NGOs) were contacted via email or phone, and six relevant line ministries were approached for an interview. There were 11 NGOs and three ministries who agreed to participate. The non-participating NGOs or ministries appeared not to have parenting programmes, stated they were busy in the months of June and July or did not respond to the request.

Participating NGOs and ministries:

1. Save the Children and Social Services of Cambodia (SSC)<sup>1</sup>
2. Investing in Children and their Societies (ICS)
3. International Cooperation Cambodia (ICC)
4. Transcultural Psychosocial Organization (TPO)
5. Karol and Setha
6. HEDC – International
7. World Vision
8. Peace Bridges
9. Krousar Yoeung
10. Family Radio (FM 99.5)
11. The Department of Women and Education of the Ministry of Women’s Affairs (MoWA)
12. The Department of Early Childhood Education of the Ministry of Education, Youth and Sport (MoEYS)
13. Ministry of Interior (MoI)<sup>2</sup>

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<sup>1</sup> Have developed and are implementing a joint parenting programme and are considered one respondent.

<sup>2</sup> Interviewed in relation to the Commune Committees for Women and Children (CCWC).

## **2.2 Data collection tool**

The questionnaire consisted of 41 open-ended and closed questions. Its main features included:

1. Details of surveyed organization
2. Underlying programme theory (if existent)
3. Extent of the programme (number of sessions)
4. Target group (including developmental stage of the children)
5. Features of the training for facilitators
6. Level of intervention (primary, secondary or tertiary prevention)
7. Monitoring and evaluation procedures (if existent)
8. Specific components of the programme (the content of the intervention)
9. Successes, challenges and lessons learnt

Most respondents, 12 out of 14, were able to complete the questionnaire in full. Two respondents, MoWA and MoI, were not able to provide answers to all 41 questions, as not all questions were applicable to their context. As a result, the questionnaire was adapted to suit the interviews with these two ministries.

## **2.3 Sampling and data collection procedures**

The interviews were carried out between June and July 2015. All interviews were conducted face-to-face, and follow-up phone calls and emails were used to obtain additional clarification as needed. Snowball sampling was utilized to recruit relevant organizations. The interviews started with project partners Save the Children, SSC, ICS and MoWA. These organizations and institutions then shared the contact details of partners or other potential respondents. An Internet search using the search term ‘parenting training in Cambodia’ was performed to search for additional organizations providing parenting support or interventions in Cambodia.

NGOs who had not implemented a parenting programme in the past year or who did not have a parenting programme at all were excluded from the indexing. NGOs implementing a parenting programme were approached for interviews. They were asked to assign the staff members most responsible for the parenting programme or training to be interviewed. The interviewed respondents had various positions, including department chief, deputy director, director, project coordinator, project manager, trainer and training team leader. The indexing used self-reported data and respondents answered based on their experience and understanding of the programme.

For the ministries, an official request letter was signed by the Head of Psychology Department of the Royal University of Phnom Penh and sent to relevant departments or programmes. Those ministries who responded positively to the request letter were invited for an interview.

## **2.4 Data analysis**

Descriptive analysis was used for all quantitative data to present frequency and percentages using charts and tables. Qualitative data was organized according to themes and sub-themes structured around the main features of the NGOs' parenting programmes, such as the delivery modality, delivery setting, and duration and scope of intervention. These features were analysed and compared against the evidence-informed components of effective parenting programmes. The analysis provided insights into the current status of parenting programmes in Cambodia. Content analysis and quotes from the interviews were used where appropriate.

## **2.5 Limitations**

The aim of the study was to obtain a comprehensive overview of existing parenting programmes in Cambodia, however only 11 NGOs and three ministries could be interviewed. Only one ministry was found to implement what constitutes a parenting programme or intervention. As a result, the scope of this indexing is limited and the findings are presented and discussed within this limitation.

The use of snowball sampling to reach unknown respondents revealed some common limitations of this sampling method. As snowball sampling is a non-random selection technique, the selected sample cannot be generalized, especially as organizations shared contacts within their networks, implicating a potential bias of these networks (U.S. Geological Survey, 2015).

The modality of self-reported information must be seen as a further methodological limitation. Answers should be considered as subjective and may reflect the personal opinions and views of interviewees. The information presented may therefore be overly positive; this information could not be verified, as most respondents were not willing to share evaluation reports related to the parenting programme. More importantly, most existing programmes have not been externally evaluated.

### 3. RESULTS

The aim of the indexing was to obtain a comprehensive overview of the status of existing parenting programmes in Cambodia against evidence-informed components of effective parenting programmes. The findings are presented along the following six themes:

1. General features of the programme
2. Content of the programme
3. Cultural adaptations
4. Features of the training for facilitators
5. Monitoring and evaluation procedures
6. Challenges and lessons learnt

#### 3.1 General features of existing parenting programmes

This section reviews the features of the existing parenting interventions/programmes, in particular the programmes' objectives, theory, development and structures, as well as the level of intervention and coverage, targeted groups, duration and timing of the interventions.

##### 3.1.1 Programme objectives

The parenting programmes implemented by NGOs and ministries shared similar objectives. These objectives can be summarized as:

- Promotion of children's rights
- Safe, loving and warm environments for children
- Reducing domestic violence
- Positive relationships and non-violent communication in the family
- Child well-being

*“Our positive parenting programme aims to reduce domestic violence, to protect children to be safe in their home and their community, and to build good relationships in the family.” – SSC and Save the Children*

*“Our skilful parenting programme aims to support parents to solve the challenges in parenting, to reduce stress, to understand child development, to build a safe environment at home for children and the family, to strengthen adult (couple) relationships, to understand the roles of parents, and to reduce the rate of abandoning children to orphanages.” – ICS*

*“Our celebrating families programme aims to support and equip families so that they may create a safe and loving environment for their children's well-being.” – World Vision*

*“Cambodian children obtain their rights and receive psychological and emotional support.” – TPO*

*“We want to see children growing up positively, healthily and fully developed: to have their basic needs met in terms of nutrition, good parent-child relationships, physical and cognitive growth, language development.” – MoEYS*

Table 1 illustrates the five categories that reflect the programme objectives of the different institutions surveyed. Programme objectives overlap – most programmes look at improving relationships and communication between parents and children, however few programmes focus on the couple relationship and communication between parents, which is seen as a crucial factor in positive parenting. Many programmes focus on child well-being, including a child’s physical and psychological well-being and healthy development. The study was unable to investigate to what extent programme design and implementation was aligned with programme objectives.

**Table 1. Programme objectives of existing parenting programmes**

Ministry/ NGO	Promotion of children’s rights	Safe, loving and warm environments	Domestic violence	Relationship/ communication	Child well- being
1. TPO	✓				✓
2. SSC and Save the Children	✓	✓	✓	✓	
3. Karol and Setha			✓	✓	
4. ICS		✓		✓	✓
5. ICC	✓	✓		✓	
6. World Vision		✓		✓	✓
7. Peace Bridge			✓	✓	
8. HEDC				✓	✓
9. Krousar Yoeung			✓		✓
10. Family Radio				✓	✓
11. MoEYS				✓	✓

### 3.1.2 Programme theory

Parenting interventions are generally developed to promote effective parenting, however different schools of developmental psychology would lead to different orientations of programmes, such as an emphasis on attachment, self-regulation, behavioural consistency or the coercive reinforcement cycle. In international empirical studies, programme theories for parenting interventions follow diverse psychological concepts, including attachment theory, the emotion regulation model and behavioural training approaches (McCloskey, 2011).

More than half of the respondents could not give the specific source or theoretical model their programmes followed (see Table 2). In developing their parenting programme, most of the institutions surveyed had gathered existing local and international materials and merged those based on their experience and understanding of Cambodian culture and beliefs. Some institutions had involved international consultants/specialists, who also piloted and revised

these programmes. Two of the respondents based their programme on Christian values and bible verses, in addition to using other relevant parenting sources.

**Table 2. Programme theories of existing parenting programmes**

NGO/Ministry	Programme theory followed
<b>1. TPO</b>	- No specific theory model: pulled from international and local existing sources
<b>2. Save the Children and SSC</b>	- Positive Discipline in Everyday Parenting: piloted and adapted the method to the context of Cambodian parents
<b>3. Karol and Setha</b>	- No specific theory model: pulled from international and local existing sources
<b>4. ICS</b>	- Skilful Parenting: adapted from a parenting programme in Africa and piloted and adapted to the context of Cambodian parents
<b>5. ICC</b>	- No specific theory model: pulled from international and local existing sources, combined with Bible verses
<b>6. World Vision</b>	- No specific theory model: pulled from international and local existing sources, combined with Christian theology
<b>7. Peace Bridge</b>	- Non-Violent Communication to enhance social skills (concept developed by Rosenberg)
<b>8. HEDC</b>	- No specific theory model: pulled from international and local existing sources
<b>9. Krousar Yoeung</b>	- Montessori Pedagogic: with technical support from two expatriate advisors
<b>10. Family Radio</b>	- Not applicable: specialists or professionals from other NGOs are invited as guest speakers on the relevant topics
<b>11. MoEYS</b>	- No specific theory model: pulled from international and local existing sources

Four respondents referred to a specific scientific concept as the basis of their parenting intervention. The programme of Krousar Yoeung relies mainly on the ‘Montessori Pedagogic’ method, and this concept was adapted to the Cambodian context with technical support from two expatriate advisors. The ICS programme is based on the Skilful Parenting programme ICS implements in Africa; the Cambodian version was piloted and revised to fit the Cambodian context. Save the Children and SSC follow the Positive Discipline approach developed by Save the Children International. SSC also use a compendium of positive discipline approaches developed by an international consultant in collaboration with the local training team of the organization. The two last-mentioned NGOs collaborated in the adaptation and pilot process as well as the implementation of the actual parenting programme in Cambodia. Finally, Peace Bridges developed its family reconciliation programme based on Rosenberg’s concept of non-violent communication to enhance social skills within families.

### 3.1.3 Programme delivery

This sub-section looks at the modality, fees and delivery setting, and the duration and timing of the parenting programmes included in this study.

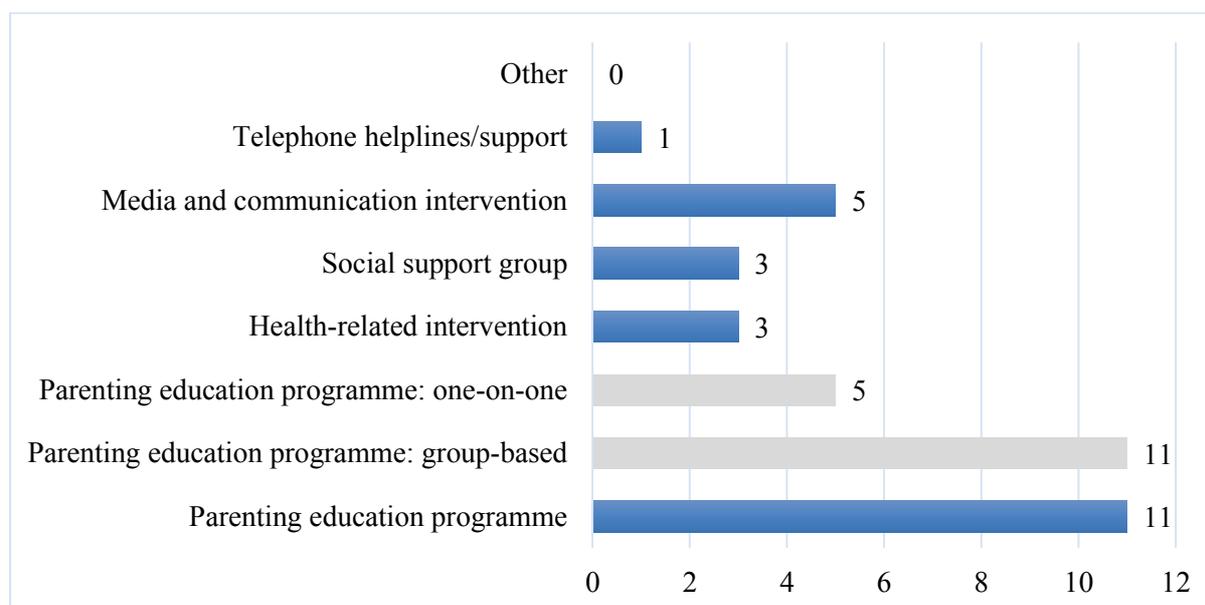
#### *Modality of parenting programmes*

Five programme modalities were identified:

- **Health-related interventions**  
Can be delivered as part of home visits or through individual sessions and generally focus on such things as nutrition, hygiene, prenatal and postnatal care.
- **Parenting education programmes**  
Can be delivered as group-based or one-on-one interventions.
- **Social support groups**  
Groups facilitated by trained parents, caregivers or village volunteers to carry out parenting training for other parents in the community.
- **Media and communication interventions**  
Parenting education endeavours through social media such as Facebook and purpose-built websites or radio and TV campaigns.
- **Telephone helplines/support**  
May provide counselling and support for parents, as well as general parenting advice and information.

All parenting programmes, both non-government and government, employ group-based parenting education approaches (see Figure 1). Five programmes combine this with one-on-one support based on need. It is most often offered to high-risk families or used as follow-up support.

**Figure 1. Modalities of existing parenting programmes**



Among all institutions:

- Four use parenting education only
- Three combine parenting education with one other modality
- Two combine parenting education with two other modalities
- Two combine parenting education with three other modalities

Three programmes combine health-related interventions with parenting education around nutrition, hygiene and care during pregnancy, and information about common diseases and illnesses, especially among minority groups or in rural areas far from public health centres. Media and communication interventions use video clips, posters, community workshops, awareness campaigns, radio and TV spots and the Internet (Facebook and/or websites). One NGO (Family Radio) offers parenting education through radio broadcasts, providing further support by means of a telephone helpline.

### ***Fees and delivery setting***

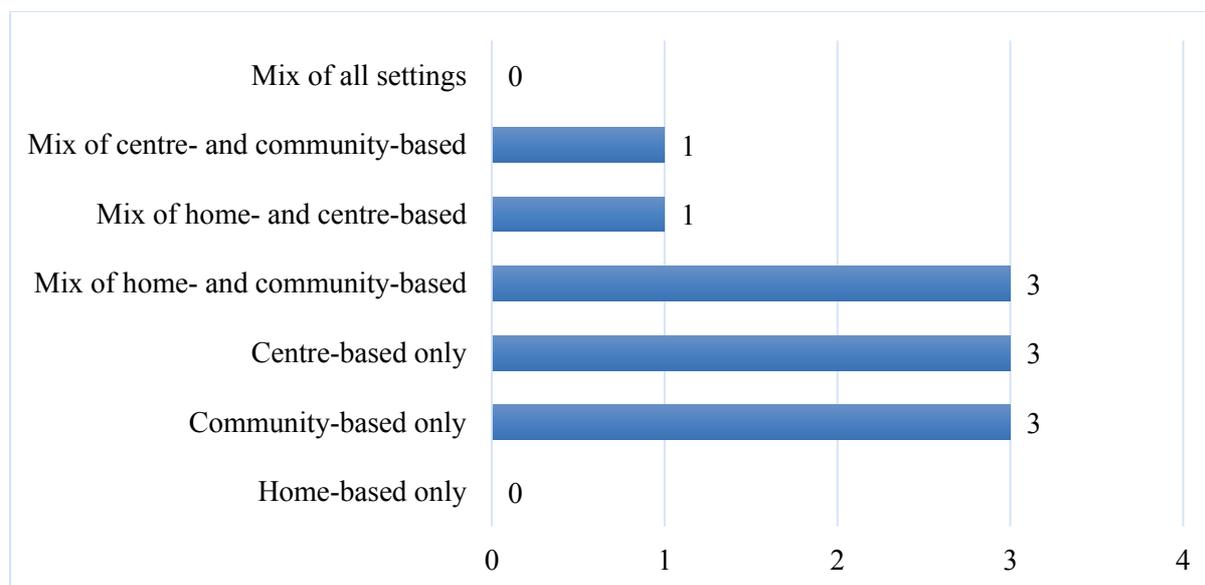
Three institutions offer fee-based programmes in centre-based settings in Phnom Penh<sup>3</sup>. The other eight institutions offer free parenting interventions. Some also provide training of trainers, either for free or at a cost.

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<sup>3</sup> These organizations also deliver training in other provinces based on demand.

Figure 2 shows the settings in which existing parenting programmes are delivered.

**Figure 2. Setting of programme delivery**

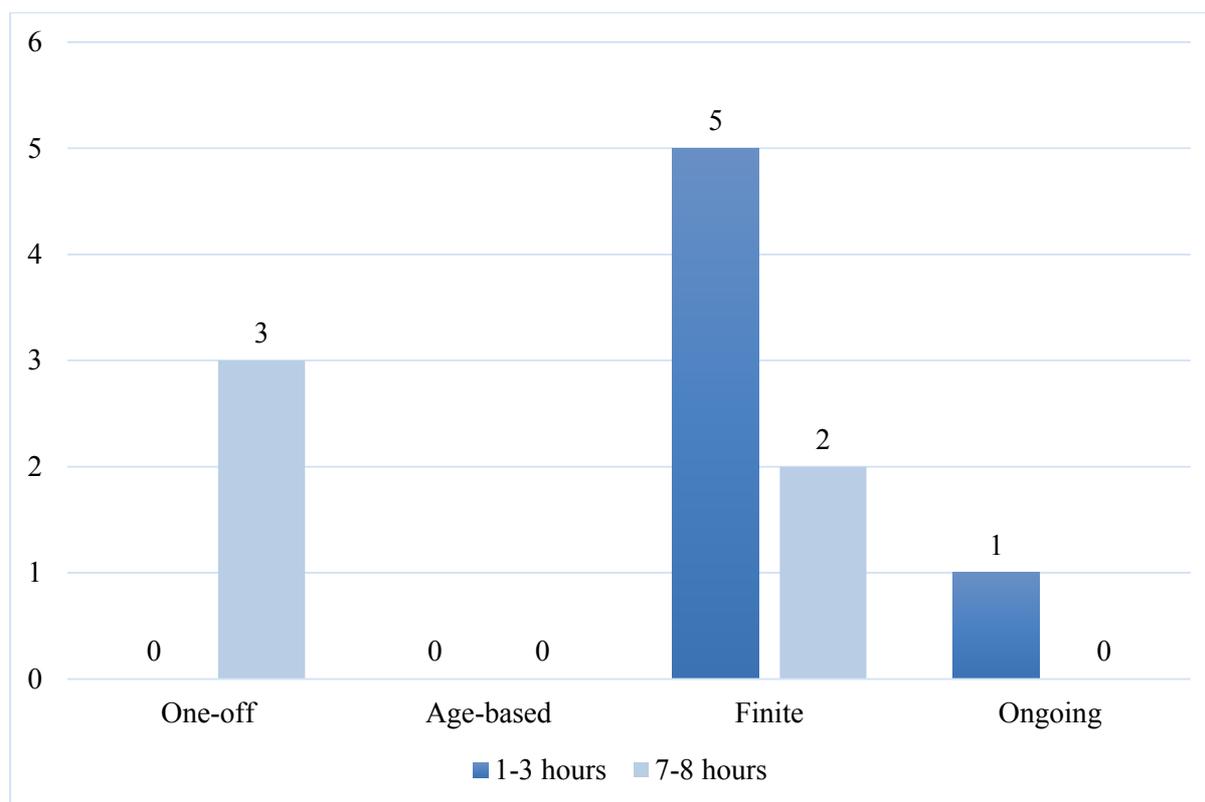


### ***Duration and timing***

The existing parenting programmes are delivered as one-off, finite or on-going interventions (see Figure 3). The five one-off interventions are organized over one to four consecutive days, each day involving seven to eight hours. The seven finite programmes use a range of approaches:

- Six to 12 weekly or monthly sessions (one to four hours per session)
- Five-day training session, and two follow-up sessions after six months (seven hours per day)
- Three modules involving three-and-a-half days per month, 42 days in total over a period of 12 months (seven hours per day)
- 24 monthly sessions over two years (two hours per session)

**Figure 3. Duration**



Six of the parenting programmes are delivered during weekdays, one programme is implemented on the weekend, and four programmes conduct sessions both on weekdays and/or weekends (see Table 3). While most of the programmes do not define any specific time in the year, three programmes do: TPO, ICC and World Vision. TPO delivers parenting training from June to December; ICC delivers training in March, June and September; and World Vision does not provide training to communities during planting or harvesting season.

**Table 3. Timing**

NGO/Ministry	Weekdays	Weekends
1. TPO	✓	
2. Save the Children and SSC	✓	
3. Karol and Setha	✓	
4. ICS	✓	✓
5. ICC	✓	
6. World Vision	✓	
7. Peace Bridge	✓	
8. HEDC		✓
9. Krousar Yoeung	✓	✓
10. Family Radio	✓	✓
11. MoEYS	✓	✓

### 3.1.4 Addressed level of intervention and coverage

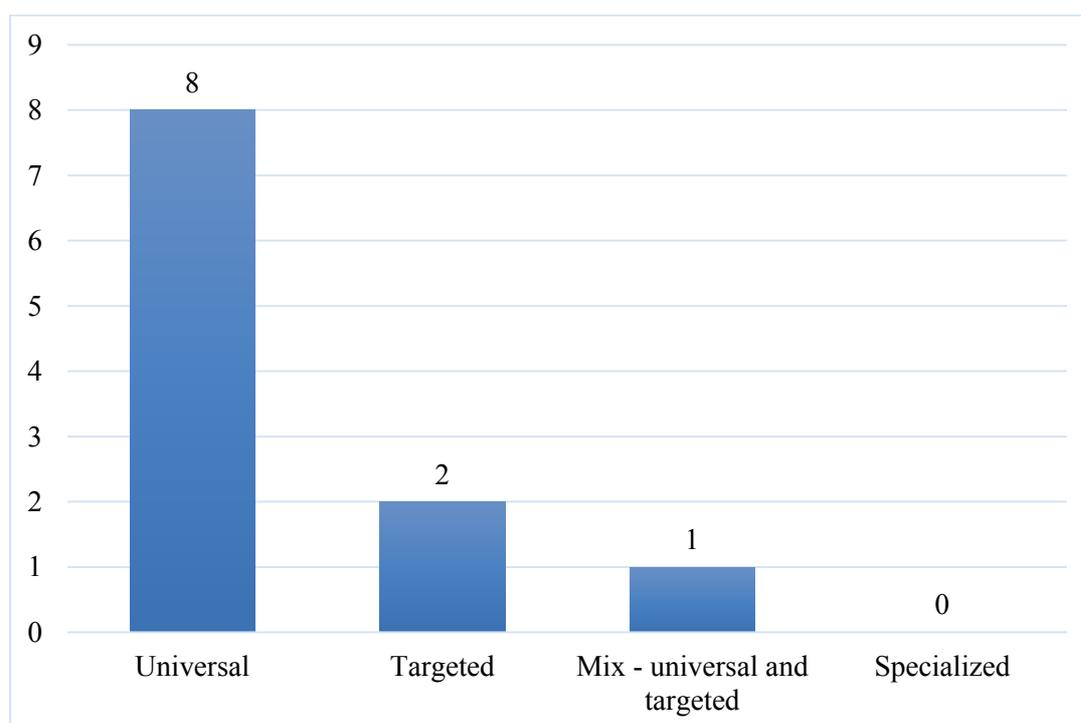
This sub-section describes the scope of the parenting intervention, the age range of the children targeted, programme coverage and the lead government partners (if applicable).

#### *Scope of intervention*

Parenting programmes can operate at three different intervention levels: universal, targeted and specialized. Parenting programmes operating at a universal level promote knowledge and awareness on parenting among all parents and caregivers. Targeted parenting interventions focus on sub-groups of parents, such as vulnerable families, families from ethnic minorities, families affected by HIV, or families with substance abuse problems. Programmes operating at the specialized level generally connote parenting programmes for high-risk families, such as families with children with physical or mental illnesses or children who expose to serious violence.

Almost all surveyed institutions use no targeting mechanism in the implementation of their parenting programmes (see Figure 4). A few programmes are delivered in provinces with high poverty rates, following data from Cambodia’s Socio-Economic Survey conducted by the National Institute of Statistics, or based on reports by staff. Although these programmes are delivered in poor areas, programme participation does not depend on socio-economic status. Three programmes target their parenting interventions (see Figure 4). World Vision is the only NGO with a parenting programme targeting vulnerable families and those with domestic violence problems. The NGO does not have clear criteria as to how such families should be identified and selected, but relies on observations from field staff. Similarly, the parenting programme by MoEYS targets poor families living in rural areas.

**Figure 4. Scope of intervention**



As seen in Table 4, Krousar Yoeung employs two scopes of intervention – universal and targeted. The organization targets ethnic groups, including the Tumpoun in Ratanakiri. For these targeted families, the programme focuses on information about physical needs in pregnancy and on prenatal development, as well as instructions for husbands related to emotional needs during pregnancy and how to support their wives.

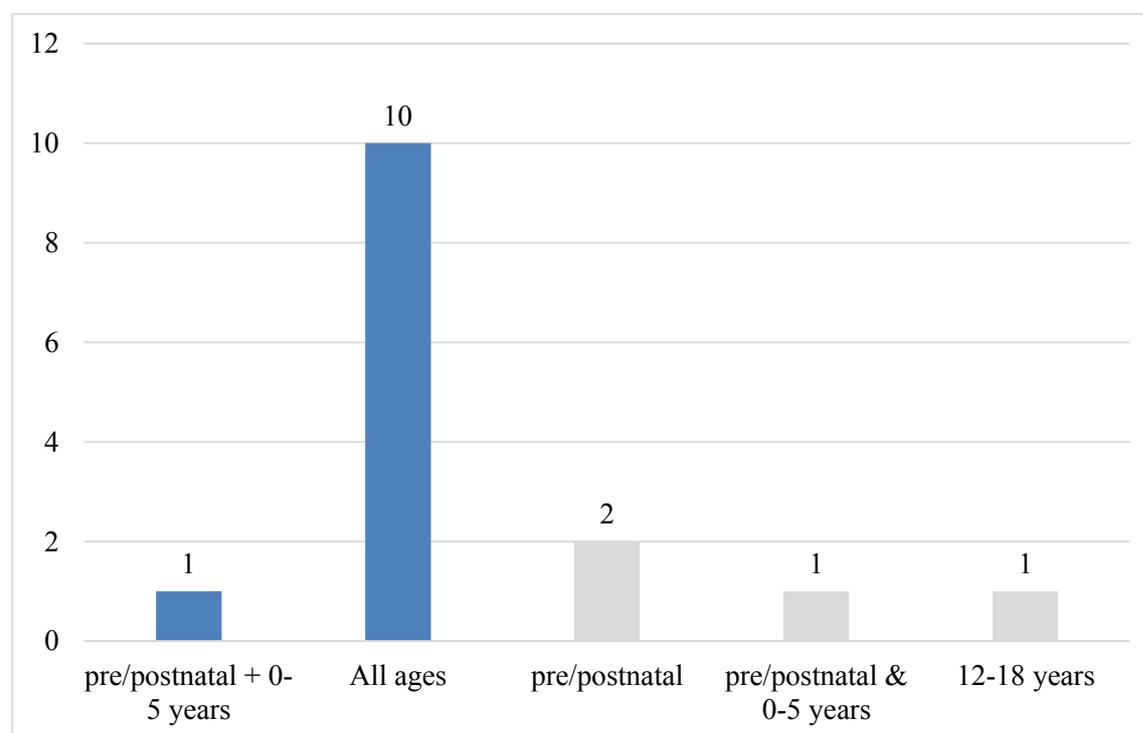
**Table 4. Scope of intervention by institution**

NGO/Ministry	Universal	Targeted	Specialized
<b>1. MoEYS</b>		✓	
<b>2. World Vision</b>		✓	
<b>3. Krousar Yoeung</b>	✓	✓	
<b>4. SSC and Save the Children</b>	✓		
<b>5. TPO</b>	✓		
<b>6. ICS</b>	✓		
<b>7. ICC</b>	✓		
<b>8. Karol and Seta</b>	✓		
<b>9. HEDC-International</b>	✓		
<b>10. Peace Bridges</b>	✓		
<b>11. Family Radio (FM 99.5)</b>	✓		

### *Age range of children targeted*

This sub-section describes the age range of children targeted within the existing parenting programmes, divided into five categories: pre/postnatal, 0-5 years, 6-11 years, 12-18 years, and children of all ages.

**Figure 5. Targeted age range of children**

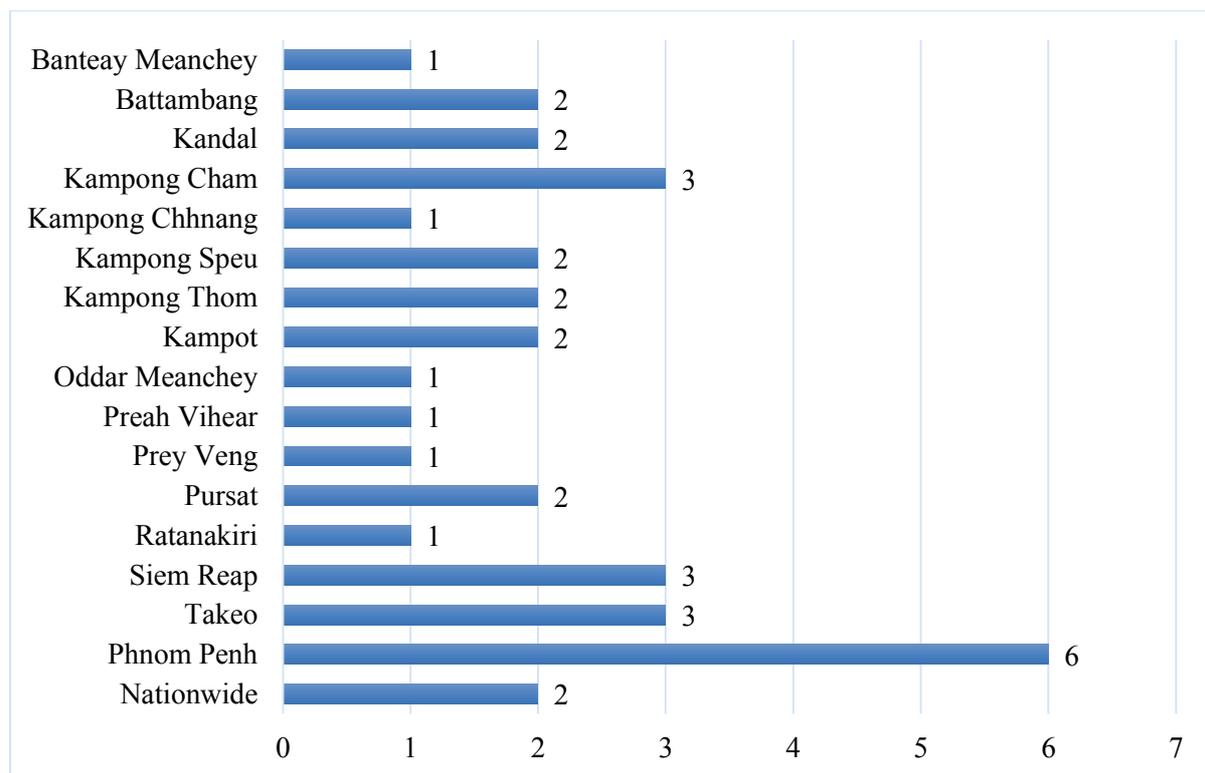


As seen in Figure 5, all programmes except one (MoEYS) target families with children of all ages, from 0 to 18 years. The MoEYS programme is the only one to focus on a specific age range, covering the pre/postnatal period and parents with children aged 0 to 5 years. Among programmes that target families with children of all ages, two programmes claim to have developed materials specific to the pre/postnatal period, one programme focuses on the pre/postnatal period and parents with children aged below 6 years old, and one programme pays special attention to parents of adolescents.

### *Geographic coverage*

Two parenting programmes, Family Radio and MoEYS, operate nationwide. Six parenting programmes are implemented in Phnom Penh and three programmes are delivered in Takeo, Siem Reap and Kompong Cham. There are two programmes implemented in different provinces, as seen in Figure 6.

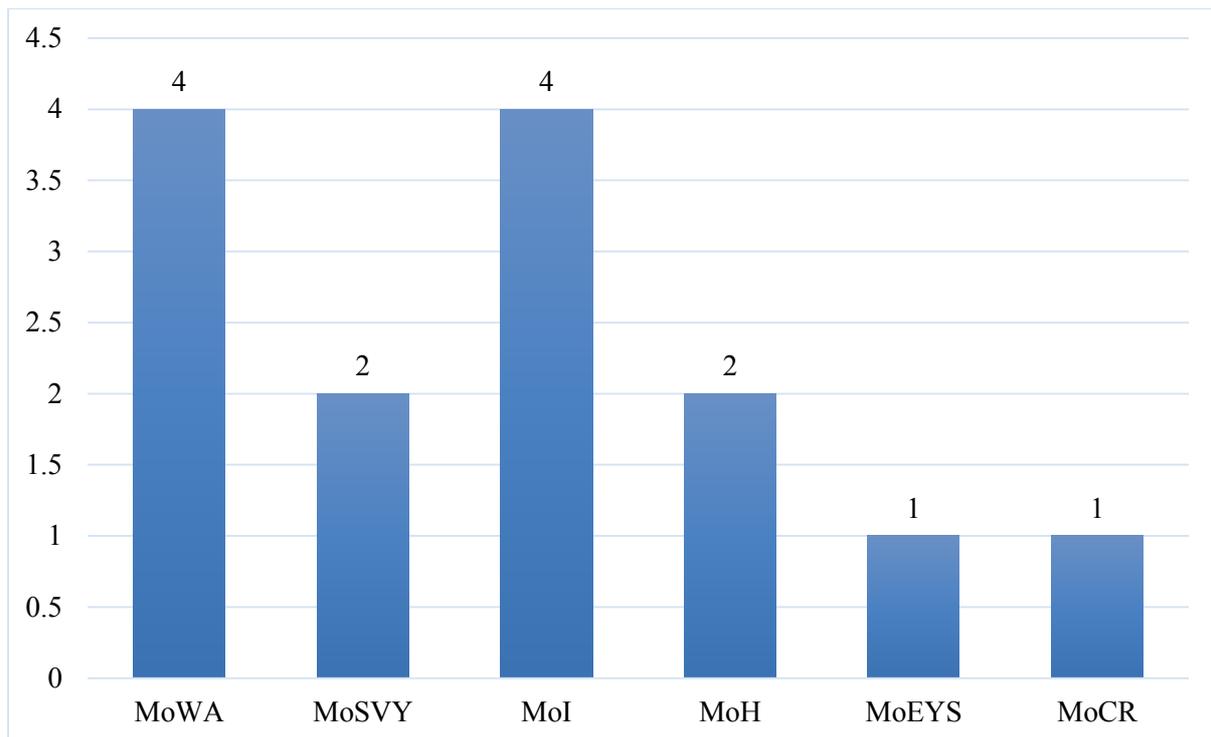
**Figure 6. Geographic coverage**



***Lead government partner(s)***

As seen in Figure 7, nearly two-thirds of NGO programmes work in collaboration with the Government, namely MoWA, the Ministry of Social Affairs, Veterans and Youth Rehabilitation, MoI, Women and Children Consultative Committees (WCCC), the Commune Committee for Women and Children (CCWC), the Ministry of Health (MoH), MoEYS and/or the Ministry of Cults and Religion (MoCR) .

**Figure 7. Lead government partner(s)**



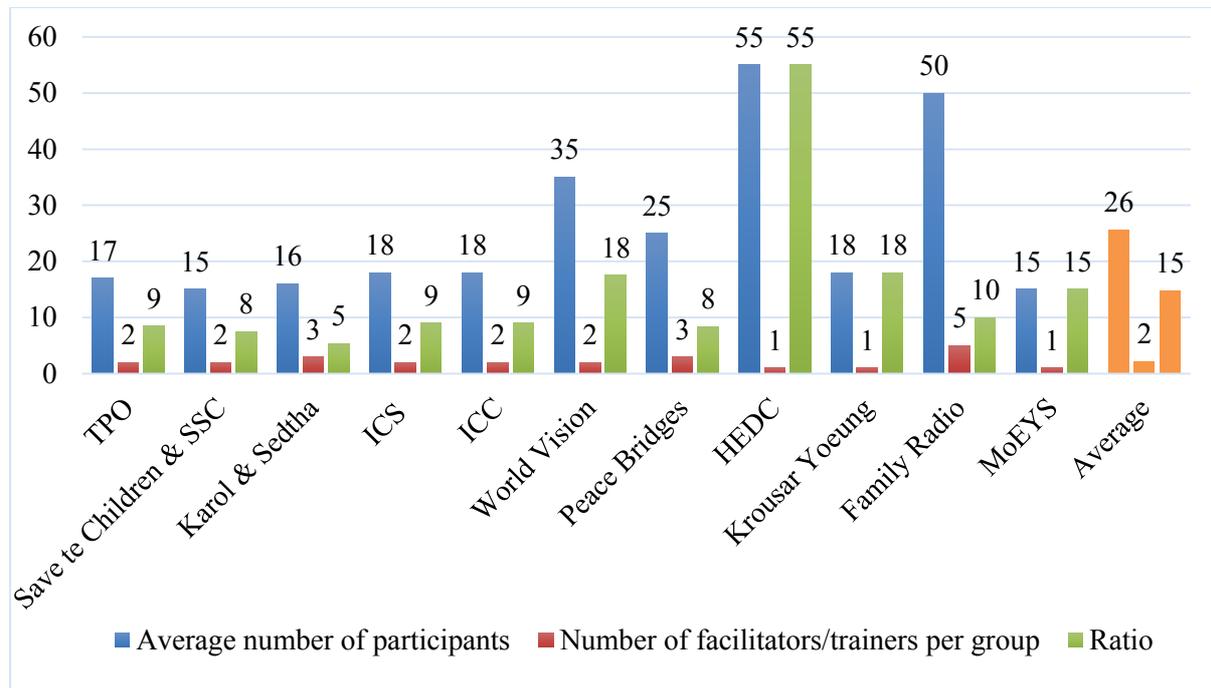
### **3.1.5 Structure of interventions**

This sub-section presents the size of the groups to which interventions are delivered, the allocation of incentives and types of caregivers targeted.

#### ***Group size in group-based parenting interventions***

The average group size ranges from 15 to 55 participants, with an average of 26 participants per group across institutions (see Figure 8). One to five facilitators support the groups. The facilitator-to-parent ratio ranges from five to 55 parents per facilitator, with an average of one facilitator per 15 parents.

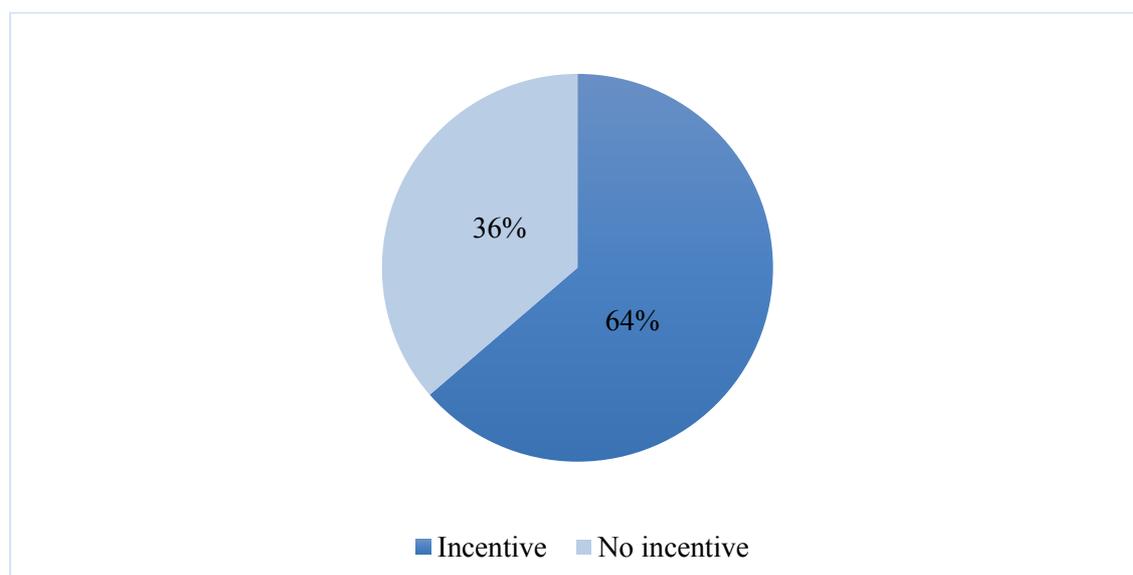
**Figure 8. Maximum number of parents per group during group-based parenting education**



### ***Incentives for participants***

Approximately two-thirds of all programmes offer some form of incentive to participants. Five programmes provide only refreshments and/or lunch during training sessions. Three programmes provide a reimbursement for transportation. One programme offers participants a per diem and implements the training at a popular venue or location, depending on available budget. Family Radio provides a range of incentives (for example towels, hats, water boxes and T-shirts) as prizes for winners of different games during its monthly live radio broadcasts organized at the community level.

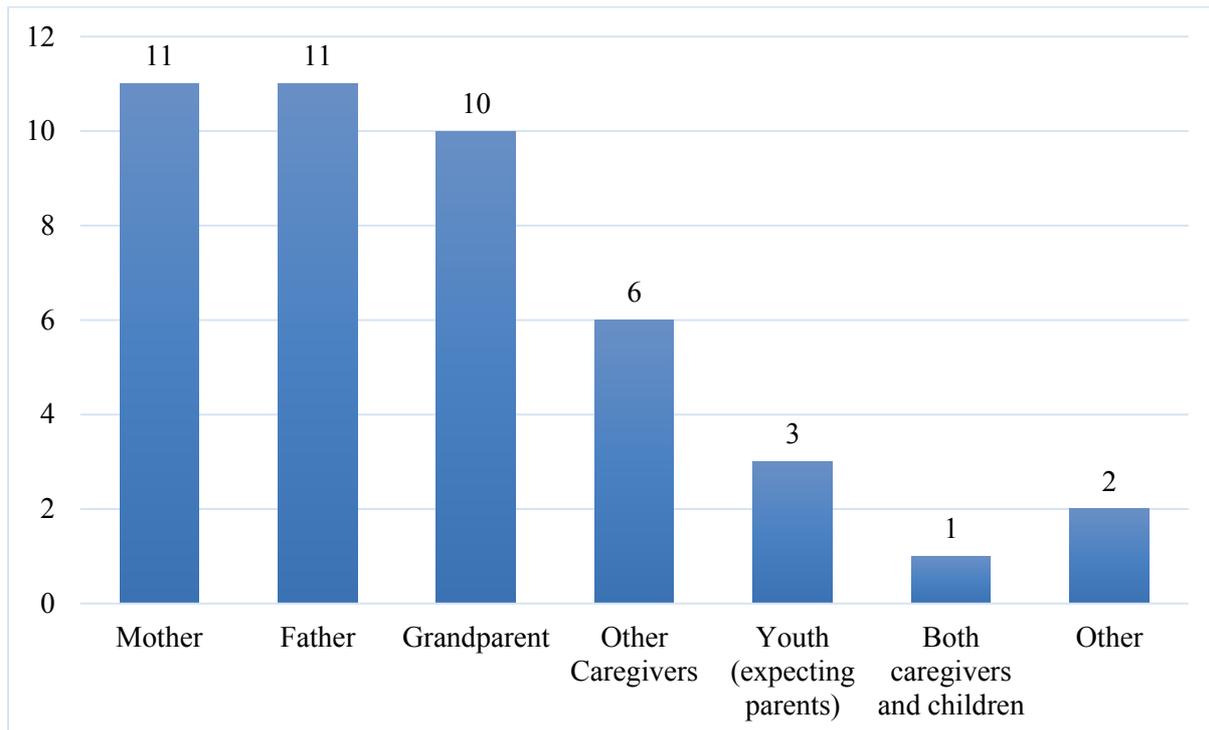
**Figure 9. Incentive for participants**



### *Type of caregiver targeted*

All programmes work with both mothers and fathers, and most stated that they work with grandparents (see Figure 10). Six programmes target other caregivers, three programmes involve youth (or expecting parents) and two programmes invite ‘others’ such teachers or village chiefs. Respondents said that participants are mostly females and mothers (participation by females or mothers is believed to range between 60 and 90 per cent per group).

**Figure 10. Participants**



### 3.2 The content of existing parenting programmes

The frameworks of the curricula of existing parenting programmes were structured around a series of modules and sessions that varied between: few modules with many sessions; many modules with few sessions; many modules with many sessions; and few modules with few sessions. The content focussed on children's rights, child protection and child development, establishing a safe environment at home, improving the parent-child relationship, the role of parents, positive discipline and setting goals. For example:

<b>Topics related to understanding children's rights, child protection and child development</b>	<ul style="list-style-type: none"> <li>- Valuing children and each other</li> <li>- Child development</li> <li>- Child rights</li> <li>- Child protection</li> <li>- Understanding how children think and feel</li> <li>- Child play</li> <li>- Taking care of disabled children</li> </ul>
<b>Topics related to a safe home environment</b>	<ul style="list-style-type: none"> <li>- Safety for children</li> <li>- 12 steps to a harmonious family</li> <li>- Growing a happy family</li> <li>- Peaceful family</li> </ul>
<b>Topics related to improved parent-child relationships</b>	<ul style="list-style-type: none"> <li>- How to communicate with children and adolescents</li> <li>- Providing love and warmth</li> <li>- Family communication</li> </ul>
<b>Topics related to the role of parents</b>	<ul style="list-style-type: none"> <li>- Being a parent</li> <li>- Parents' roles and responsibilities</li> <li>- Time for me (how parents can take care of themselves)</li> </ul>
<b>Topics related to positive discipline</b>	<ul style="list-style-type: none"> <li>- Parenting styles</li> <li>- Understanding positive parenting</li> <li>- Understanding good or positive discipline</li> <li>- How to manage child behaviour</li> <li>- Problem solving</li> <li>- Conflict solution</li> </ul>
<b>Topics related to setting goals and dreams</b>	<ul style="list-style-type: none"> <li>- My hopes and dreams for my family</li> <li>- Pursuing our dreams</li> <li>- How to help children set personal goals</li> <li>- Having long-term goals</li> </ul>
<b>Other topics</b>	<ul style="list-style-type: none"> <li>- Pregnancy, nutrition or safe delivery</li> <li>- Improving the economic situation of the family or family budgeting</li> <li>- Improving couples' relationships</li> </ul>

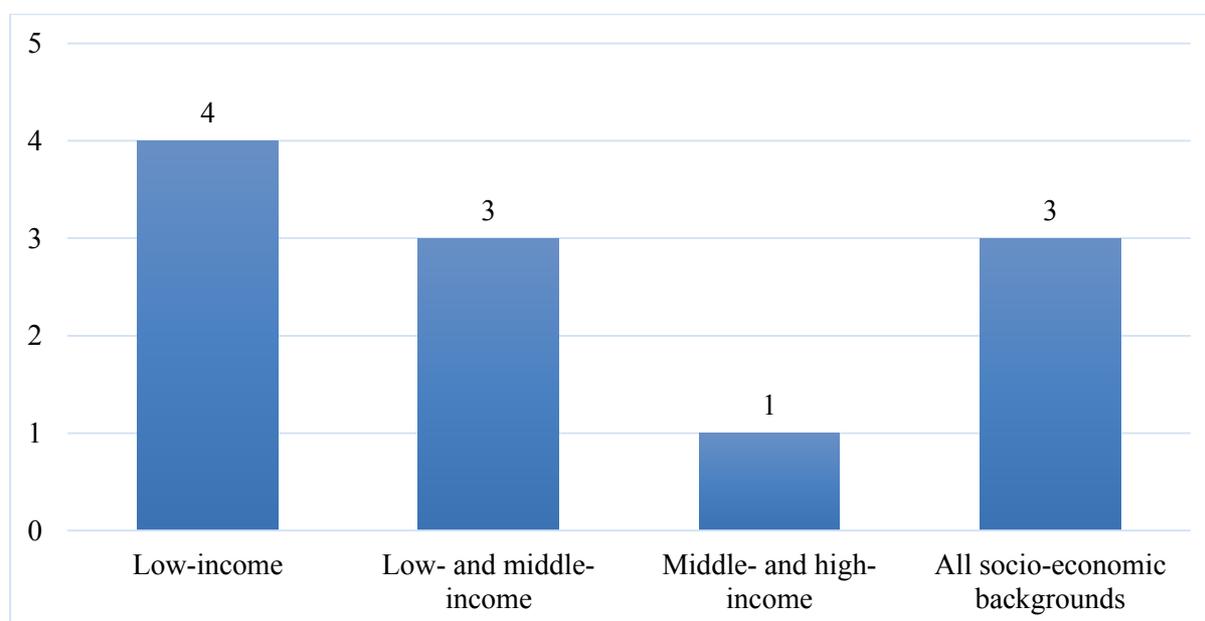
### 3.3 Cultural adaption of existing parenting interventions

This sub-section shows findings related to the socio-economic status of the target population, their educational attainment and cultural beliefs related to parenting in Cambodia.

#### 3.3.1 Socio-economic status of participants

None of the parenting programmes document the socio-economic status of participants joining their parenting interventions, therefore, respondents made general guesses. Almost all respondents said their programmes were suitable for parents from all social levels. Asked to specify further the socio-economic status of the majority of the participating parents, four programmes preferred to stay with ‘all socio-economic status’. The programmes that charge for their parenting training, Karol and Setha, HEDC and TPO, tend to have participants from high and middle socio-economic backgrounds. The parenting programmes that deliver non-paid interventions at the community level felt participants generally came from low-income and middle-class backgrounds (see Figure 11).

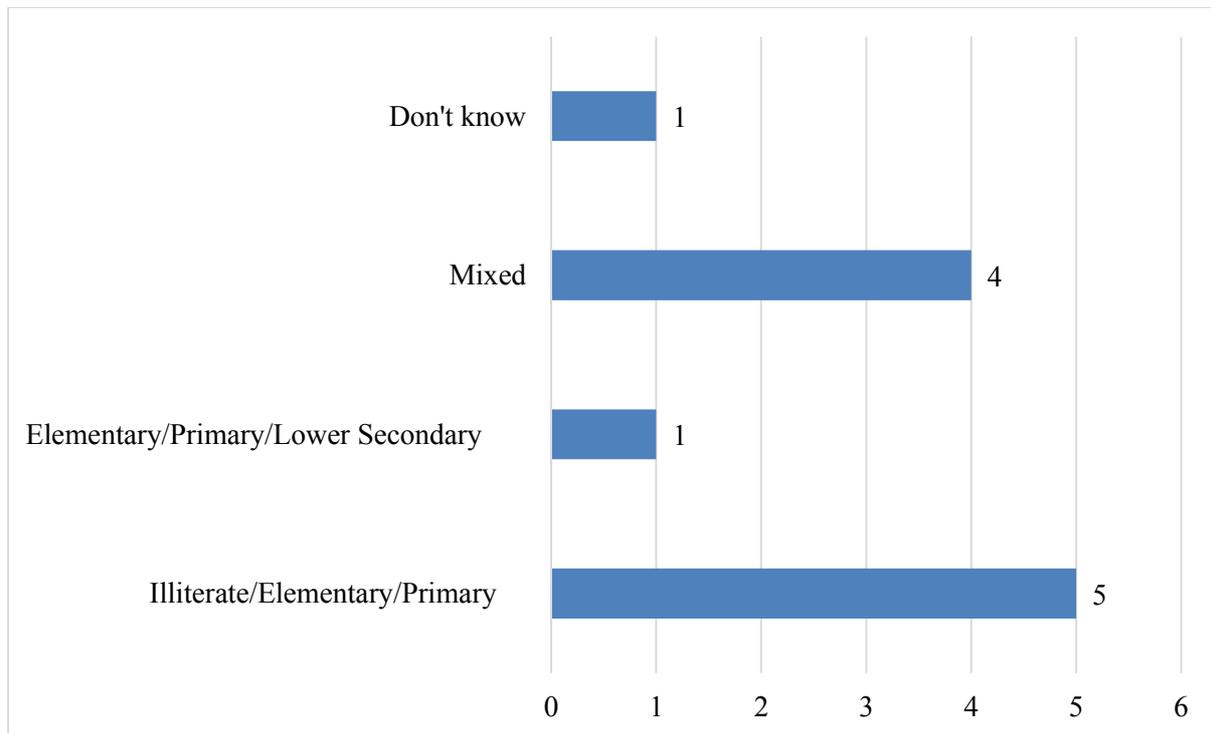
**Figure 11. Socio-economic status of target population**



#### 3.3.2 Educational attainment of participants

Similarly, the educational attainment of participants was not clearly recorded. Respondents reported mixed educational attainment levels among their participants. Respondents working with organizations delivering parenting interventions at the community level generally reported lower educational attainment among their participants. As seen in Figure 12, the majority of participants were believed to be illiterate or had accomplished only primary school.

**Figure 12. Education attainment of target population**



### **3.3.3 Cambodian cultural beliefs on parenting**

Almost all existing parenting programmes aim to address harmful cultural beliefs or traditional practices. Most facilitators attach high value to discussions around these sensitive issues. Parents are generally encouraged to share their beliefs in relation to parenting and child rearing, to reflect on and discuss the consequences of such beliefs as a group.

The following common beliefs and harmful cultural practices are addressed in existing parenting programmes:

- Parenting styles or beliefs related to authority, hitting, blaming or insulting
- Bathing a new-born baby with beer
- Putting a knife over a new-born baby's head
- "Bend steel when it is hot; educate children when they are young"
- "Don't show affection or love to children"
- "All power in the family has to be with the man"
- "Bad spirits cause sickness; do not bring children to the hospital"
- "Children know nothing"
- "Parents are the ones who know more and make decisions"

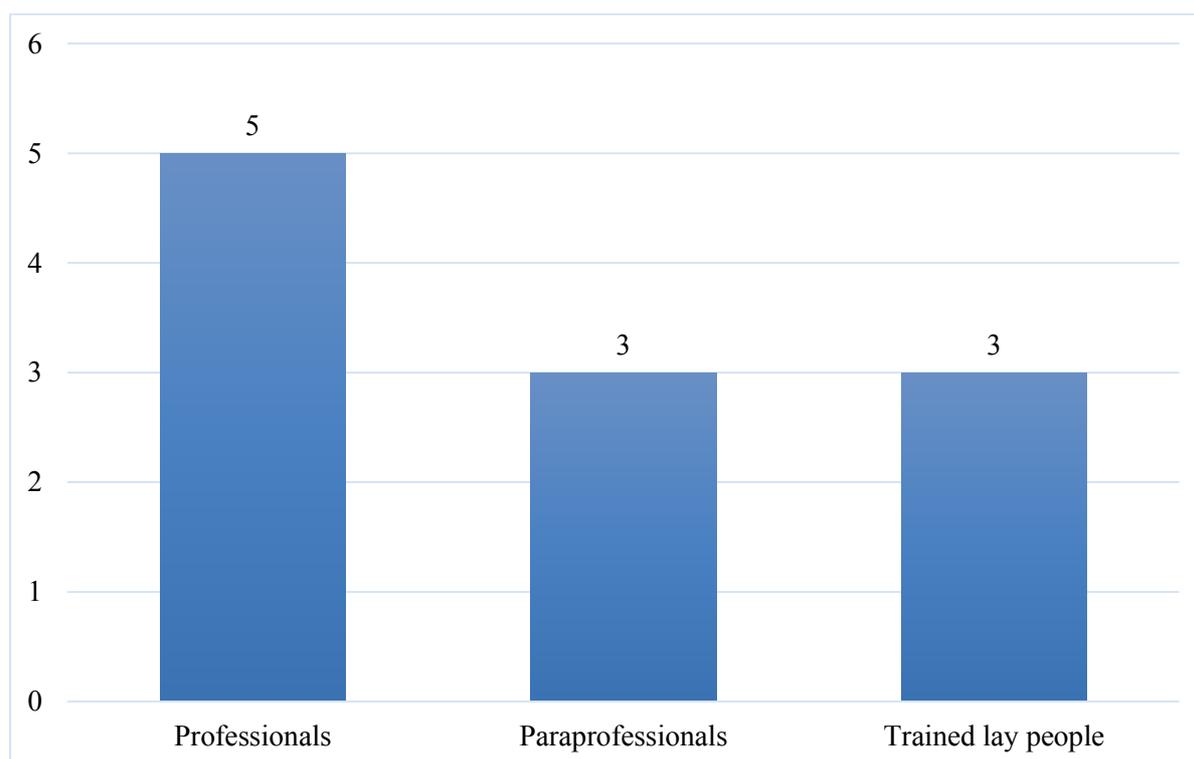
### 3.4 Features of the facilitator training

This section focuses on the training of facilitators delivering parenting interventions. It covers who the facilitators or trainers are, the content of their training, their facilitating skills and supervision of them as facilitators.

#### 3.4.1 Facilitators/Trainers

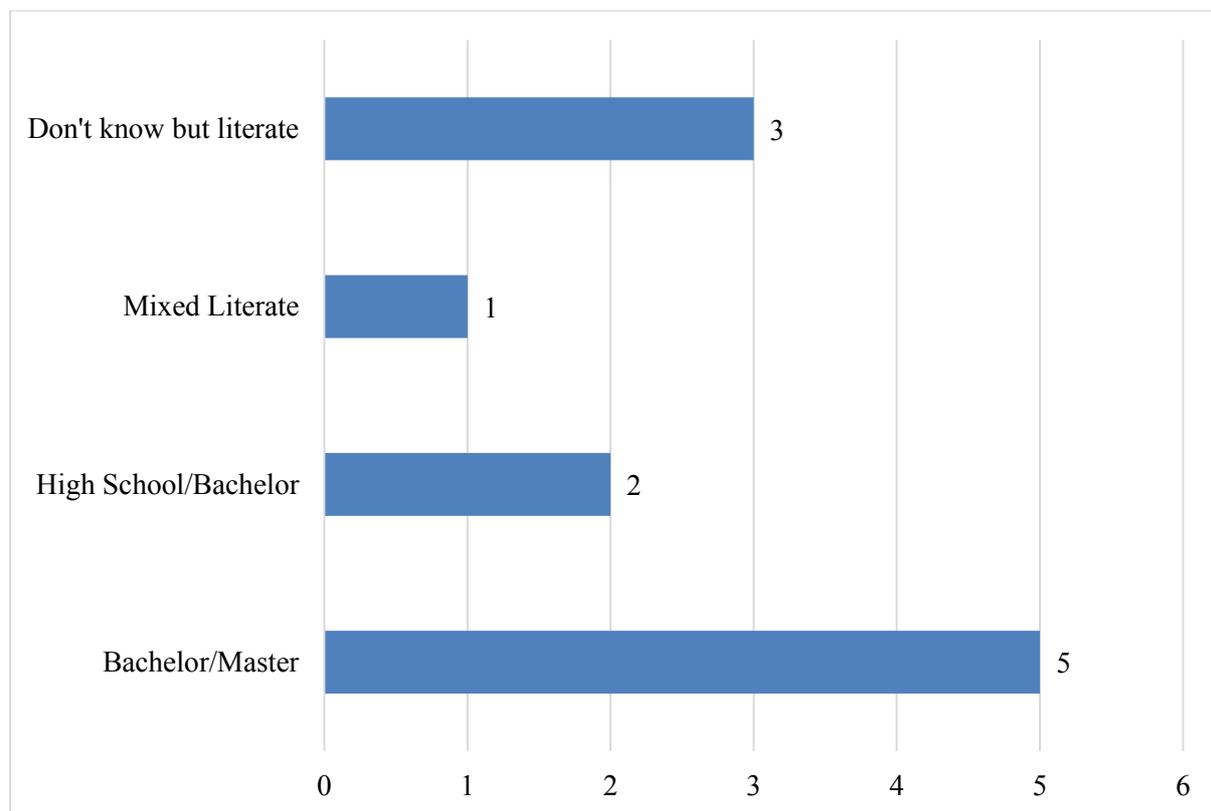
In this study, facilitators or trainers are defined as the people who deliver the parenting intervention to parents – the facilitators or trainers of five parenting programmes (see Figure 13). Professionals are characterized as academically trained individuals, such as social workers, psychologists, trained health workers or individuals from other relevant professions. The three community-based parenting programmes – ICC, World Vision and Peace Bridges – work with paraprofessionals. Paraprofessionals are individuals who have been extensively trained on-the-job, for example as community development workers. The other three community-based programmes work with lay people – so-called core parents, village volunteers or community volunteers. After basic training on core parenting concepts, the lay people deliver parenting interventions in the community. Save the Children and SSC, Krousar Yoeung and MoEYS operate in this way.

Figure 13. Facilitators/Trainers



The findings show that all facilitators or trainers are literate (see Figure 14). All facilitators or trainers attended at least primary school, and many facilitators have a Bachelor's or Master's degree. The three organizations implementing community-based parenting programmes did not define the educational background of their facilitators, but stated that their facilitators were able to read and write in Khmer.

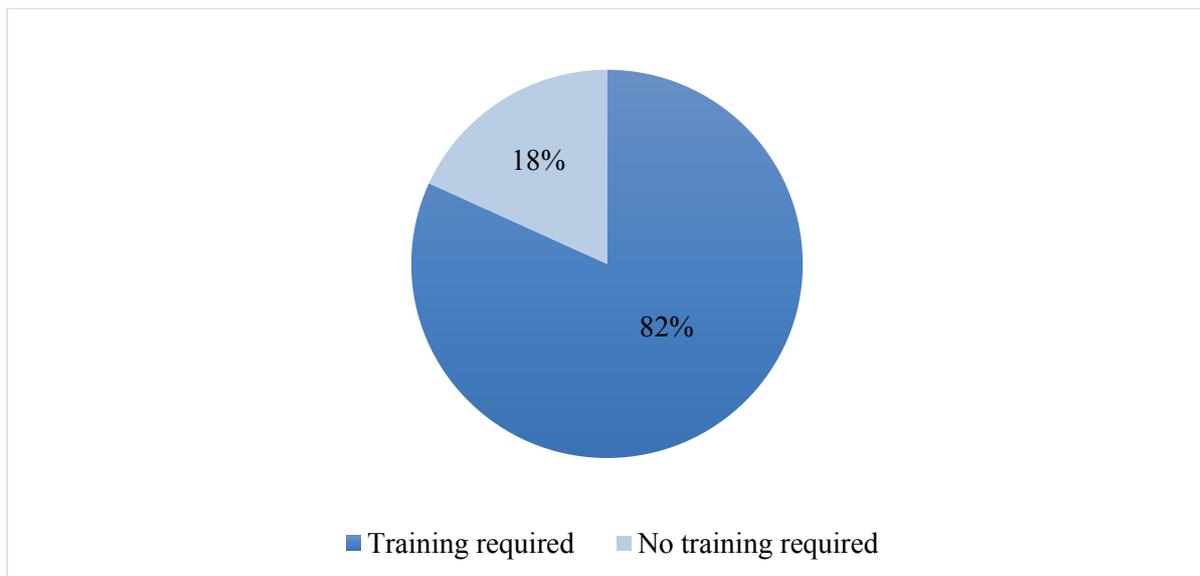
**Figure 14. Education background of those delivering the intervention (in general)**



### **3.4.2 Training of programme content and facilitating skills**

Among all institutions, 80 per cent offer a specific training to facilitators/trainers ranging from five- to 13-day trainings, a 35-day training, a 42-day training and a one-year training and examination (see Figure 15). The training follows the content of the particular parenting programme of each organization and aims to strengthen facilitation/training skills and empower facilitators/trainers. Two organizations – TPO and HEDC – do not have specific training for people conducting their parenting programme, as their trainers are professionals with extensive work experience and a high educational background.

**Figure 15. Training required for those delivering the intervention**



Aligning with the educational backgrounds of the facilitators/trainers, as well as of the parents or participants, different organizations design different materials and adopt different methods. However, most organizations use one or more of the following methods: group discussion, case studies, sharing practical problems and experiences, demonstrations/role plays, and usual materials like posters and leaflets. Training methods and materials range from lectures/slides, images/pictures, paired work, drawings, games or plays, video clips/video discussions, reflection, forums, theatre, reverse roles, social scales, creative work with play-dough, drama, storytelling, perspective interaction, singing, radio features and spots.

### **3.4.3 Supervision of facilitators**

Nearly 70 per cent of all organizations have one or more supervisors or mentors who provide technical support to those implementing the parenting interventions. Supervisors are part of the organization's staff who are generally experienced in delivering training and have academic backgrounds ranging from a Bachelor's degree to a PhD.

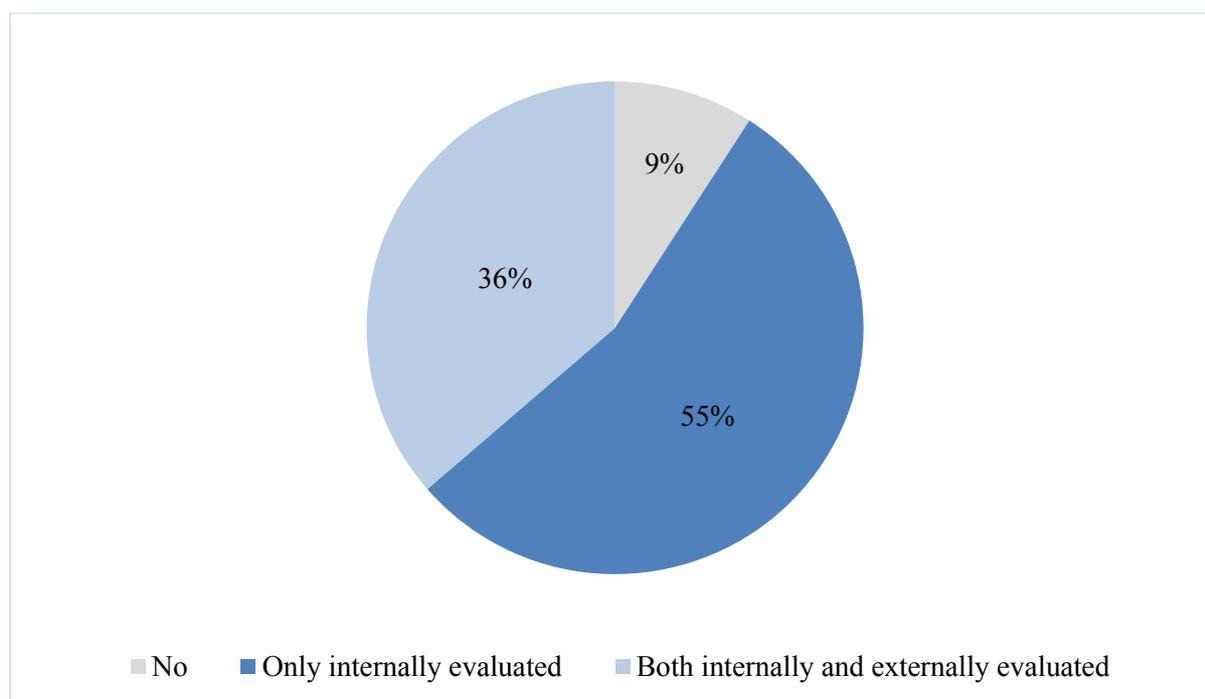
### 3.5 Monitoring and evaluation

Monitoring and evaluation is seen as a main feature of effective parenting programmes, so this section presents the findings on the monitoring and evaluation frameworks of existing parenting programmes, feedback from participants (parents/families), successes and lessons learnt and drop-out rates.

#### 3.5.1 Monitoring and evaluation framework

Apart from HEDC, all parenting programmes have some sort of monitoring and evaluation mechanism in place. Around 90 per cent of the existing parenting programmes have been internally evaluated (see Figure 16). However, the quality and characteristics of these evaluations varied. Respondents reported pre- and post-training evaluations, specific parenting programme evaluations, or evaluations of parenting interventions as part of larger programmes. Four parenting programmes had also been externally evaluated.

Figure 16. Type of evaluation

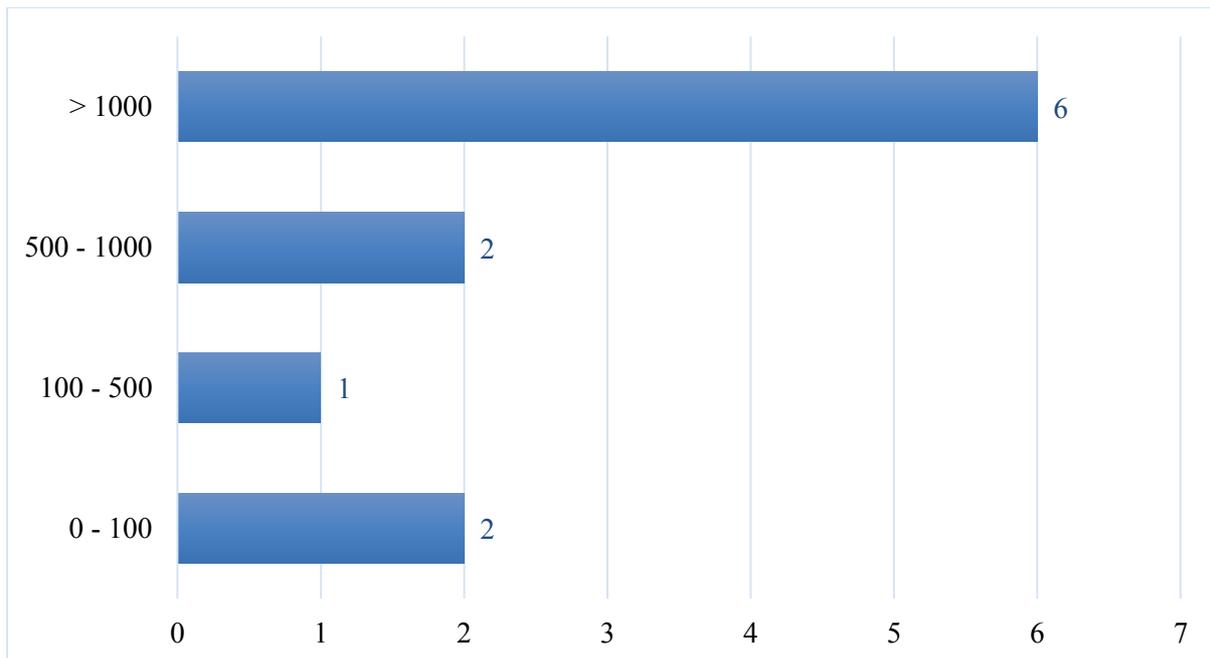


The most common and basic mode of internal evaluations seemed to include pre- and post-training evaluations, feedback from participants, and observations of participants' behaviour during the training. Some programmes conducted follow-up sessions in the form of home visits during the intervention or after the training. Monitoring happened monthly, or every four or six months. One organization implemented monitoring and evaluation across three phases, including a baseline survey conducted before the intervention, a mid-term evaluation implemented once the intervention had been completed, and a final evaluation conducted one year after the intervention. For some organizations the parenting intervention was a component of a larger programme, and their entire programmes or projects were evaluated by donors or external consultants. One organization had two international specialists evaluating their teaching materials. These specialists also supervised sessions implemented in the community to check comprehensibility among participants.

### 3.5.2 Number of parents/families reached in 2014

More than half of the parenting programmes reached between 1,100 and 7,848 parents/families in 2014, however, most stated these were subjective estimations (see Figure 17). Three programmes were able report exact numbers following programme documentation – Save the Children and SSC, World Vision and MoEYS. MoEYS reached 7,848 parents in 2013 and 2014, with 2,600 core parents trained. Four out of five of the parenting programmes that reached more than 1,000 parents were programmes involving trained lay people or paraprofessionals delivering the intervention.

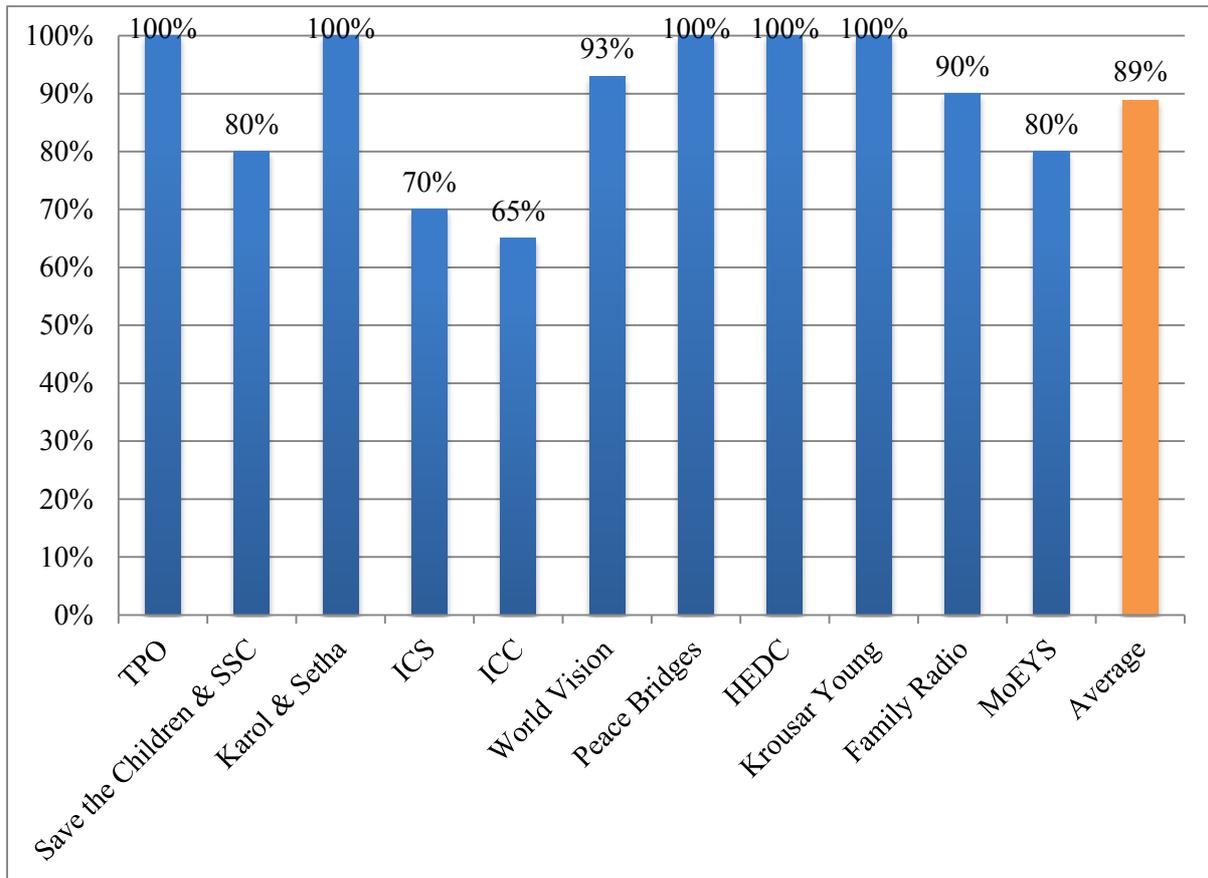
**Figure 17. Estimated number of parents/families reached in 2014**



### 3.5.3 Drop-out rates

Based on the estimated number of parents/participants reached in 2014, the percentage of participants who managed to accomplish the full intervention or programme was said to range between 60 per cent and 100 per cent (see Figure 18). For the three one-off training programmes, the rate of participants completing the full training ranged from 93 per cent to 100 per cent. Similarly, three finite programmes reported 100 per cent retention rates. However, it is important to note that these figures involve self-reported data and could not be verified against programme documentation. This question was not applicable to Family Radio.

**Figure 18. Estimated percentage of participants who completed the full programme**



### 3.6 Challenges

One organization, HEDC, did not report any challenges related to the implementation of its parenting programme. The director of this private institute designs and manages all training courses, and offers parenting programmes tailored to participants' suggestions and needs. The other institutions – government and non-government – shared the following challenges:

- **More female participants/mothers than male participants/fathers.** Male participants or fathers were reported as not having time to attend the trainings due to work obligations.
- **Applying new techniques at home in an environment with low support for positive parenting.** It can be challenging for parents to apply what they learnt at home when others in the family do not understand or support the new attitudes and practices related to positive parenting. In many cases participants are not supported by their family members, instead they face criticism in regard to their changed behaviour – especially when it concerns behaviour linked to listening to children and/or expressing love and affection to children.
- **It is challenging to promote positive parenting, positive discipline, or positive parent-child relationships due to strong cultural beliefs.** These cultural beliefs strongly determine the conservative parenting style adopted by many families. It takes time to change these beliefs, attitudes and behaviours of parents and families, however, programmes focusing specifically on these issues are able to engage and retain parents.
- **High illiteracy rates and low educational attainment among participants makes implementation a challenge.**
- **Absence is a problem.** Participants are absent at times due to other commitments, so they send other family members to some training sessions instead.
- **Drop out as a result of migration.** Some participants drop out because they migrate to other provinces or abroad.
- **Determining the right time to deliver the intervention.** It is difficult to schedule sessions in communities because many participants have other commitments during the day. Some organizations require their facilitators/trainers to work on weekends or in the evening.
- **Sustainability.** Sufficient funding is a challenge for some organizations. MoWA stopped its parenting programme at the community level three years ago when funding ran out. One parenting programme is looking for new donors as its current donors are reaching the end of their 10-year funding agreement. Another parenting programme scaled down its geographic coverage due to a lack of funding, and some of its NGO partners who received training of trainers never ended up implementing parenting programmes due to funding limitations.

### **3.7 Lessons learnt**

This section presents lessons learnt against three sub-groups of parenting programmes, namely: i) government programmes, ii) commercial programmes, and iii) community-based programmes.

#### **Government programmes**

The programmes implemented by MoEYS and MoWA were able to reach a large number of parents and families in all provinces in Cambodia as a result of their working structures reaching provincial, district and commune levels. In addition, they work closely with relevant government ministries and institutions at national and sub-national levels, including MoH, WCCCs and CCWCs. Both collaborate with non-governmental partners in implementing their programmes.

Mobilizing parents and families was said to be easier when the WCCC or CCWC were involved as partners. However, it takes more time for line ministries to plan and implement parenting interventions as a result of government structures and administrative procedures. In the short term, their programmes can be complemented by those operated by NGOs.

#### **Commercial programmes**

Lessons learnt from the commercial parenting programmes – TPO, HEDC and Karol and Seta – can be summarized as:

- Promoting children's rights should start at the family level.
- Positive parenting education should be included in formal education programmes, starting from high school.
- Allow sufficient time during training for parents to share their experiences.
- Facilitators can learn from participants (for example through their experiences).
- Relationships at different levels could be seen as the root cause of further problems (including couples, parent-child and broader family relationships).
- Action methods are effective tools - activating reflection on problems and feelings and leading from action to insight - as participants actively engage and have fun using these methods during their learning process.

## Community-based programmes

Important lessons and sustainability come from community-based parenting programmes related to training facilitation, collaboration with the CCWC and existing community groups:

- Good materials and committed trainers generally yield good results and change in the community.
- Trainers should review the lessons as well as practice the principles within them in their daily lives.
- It is important to work with CCWC; programmes will be more sustainable when the CCWC sees their value and supports them.
- Behaviour change takes time, so demands/expectations should be realistic. Even minor progress should be valued.
- Village volunteers who facilitate parenting programmes to parents are also potential key role models for the community.
- Organizations should reflect on their presence in the community ('Do no harm' approach).
- Facilitators/trainers need to establish a safe and trusting atmosphere so participants feel welcome and can build trust among each other before starting the sessions.
- It is good to integrate a parenting programme within existing community groups, such as savings groups.
- The context of parenting needs to be considered, but attention is also needed for other practical issues parents might struggle with, such as safe transportation for their children, reproductive health, etc.
- It is good to provide specific criteria for facilitators/trainers to help them select participants for specialized interventions, for example, families who are at risk of abusing or neglecting their children.
- It is good to limit the number of participants per session to 10 to 15 people, and focus on quality rather than quantity.
- It is important to simplify the lessons for illiterate community participants, for example by using pictures and real life stories.

## **4. DISCUSSION**

The purpose of this study was to gather comprehensive information about existing parenting programmes in Cambodia and to gain a better insight into the current status of those programmes. The results show that existing parenting programmes have been developed by various organizations and come with a broad range of features. This section examines these features against the evidence-based components of effective parenting programmes, to arrive at an overview of the strengths and gaps within existing parenting programmes in Cambodia. The second section focuses on endeavours to adapt parenting programmes to the Cambodian culture.

### **4.1 The main components of effective programmes**

The features of effective programmes follow a report entitled, “Preventing Violence: Evaluating Outcomes of Parenting Programmes”, developed by the World Health Organization (WHO), UNICEF and the University of Cape Town in 2013. Those components and the findings related to existing parenting programmes in Cambodia are presented and discussed below.

#### **4.1.1 Sound programme theory**

WHO et al. (2013) emphasize the importance of a solid, evidence-based programme theory. McCloskey (2011) introduces several models – attachment theory, the emotion regulation model, or the behavioural training approach – as proven conceptual frameworks for effective parenting programmes.

Existing parenting programmes in Cambodia share common objectives, such as creating a safe, loving and warm environment for children at home, to build positive relationships and promote non-violent communication in the family, and to ensure children grow up to reach their full potential. However, this indexing did not explore how these parenting programmes formulate their interventions in line with these objectives. Many of the investigated parenting programmes do not follow a specific theoretical framework or model to guide their design. Most of the institutions surveyed simply pulled from available international and local sources related to topics such as child development, children’s rights, child protection, Cambodian beliefs in relation to parenting, parenting styles, or bible verses. Four parenting programmes followed a specific model – Skilful Parenting, Positive Discipline, Non-Violent Communication (Rosenberg) and Montessori Pedagogic.

#### **4.1.2 Clearly defined target population**

WHO et al. (2013) state that parenting programmes are more likely to be effective when they have a sound reason for targeting a particular group of parents, and that information for targeting should be gathered from a formal needs assessment.

Three of the existing parenting programmes in Cambodia define a target group. Others focus on certain geographical areas, believing this would enable them to reach poor families. However, in selecting participants, these programmes do not limit eligibility to parents or participants from a specific socio-economic status. Most programmes however do not define a specific target group. None of the programmes used formal needs assessments to gather information to strengthen targeting.

Some institutions stated that parenting programmes in Cambodia are still relatively new, and that the effort needed to design programmes targeting specific groups of parents would overstrain current institutional capacities and complicate the recruitment of interested parents. Several respondents spoke about the challenge of introducing concepts related to positive parenting and positive discipline as people have deeply engrained beliefs around these issues and tend to stick to their conservative approach. They added that the advantage of a universal approach within targeted areas was that it helped convince communities about such programmes and that this facilitated having more families join the intervention. More importantly, these respondents hoped that the word-of-mouth approach would lead high-risk families to join the programme, disregarding the fact that such families often live in social isolation.

#### **4.1.3 Appropriately timed**

Parenting programmes will be most effective if implemented during transitional periods in the development of children, as it is at those times that families are most receptive to change (WHO et al., 2013). Further, Chen and Chan (2015) found that parenting programmes were more effective when they started during pregnancy or the postnatal phase.

Most of the surveyed parenting programmes support parents no matter the age of their children. MoEYS and Krousar Yoeung specifically target parents with children under the age of six years. Some respondents raised concerns about addressing parents with children of a certain age as it would limit the number of participants their programmes could reach.

#### **4.1.4 Acceptable to participants**

Parents are more likely to be actively engaged in the programme and show improvements in behaviour when programme objectives align with their goals (WHO et al., 2013).

All parenting programmes surveyed, both commercial and community-based, select participants who were interested in the programmes. The proportion of participants said to fully complete the programmes is between 60 per cent and 100 per cent, noting this involves self-reporting in most cases. Respondents felt parents appreciated the ability to share parenting experiences. A stronger picture would emerge if all programmes were to be externally evaluated and formal needs assessments were conducted.

#### **4.1.5 Sufficient sessions**

Programmes are more effective when they involve participants for a sufficient amount of time. The optimal duration and intensity of a programme will vary according to the risk level of the target population. Programmes targeting high-risk populations generally need to be more intense and last longer than programmes working with parents facing less severe problems (WHO et al., 2013).

The majority of institutions indicated that all interested parents could join their programmes. Existing parenting programmes varied in their duration and timing, and were offered as one-off, finite or on-going interventions. Some of the one-off programmes lasted from one to four consecutive days, with sessions lasting seven to eight hours per day. Other finite programmes involved six to twelve sessions organized over a longer duration and with sessions lasting from one to four hours. Without strong empirical evaluations it is difficult to state with confidence which approach is more effective. Other important factors include the setting in

which the intervention is delivered, the availability of participants and the socio-economic and academic profile of participants. Such factors logically influence how programmes are designed and their duration and timing. According to Chen and Chan (2015), implementing more than 12 sessions yields no additional significant effects.

#### **4.1.6 Well-trained and well-supervised staff**

The effectiveness of parenting programmes is influenced by the quality of the training of facilitators and trainers, as well as by the quality of supervision (WHO et al., 2013). This seems to be all the more important as empirical studies involving parenting programmes in low- and middle-income countries recommend working with paraprofessionals as facilitators or trainers, as well as community workers and trained lay people. This is due to the high cost of working with professionals and the shortage of such trained professionals (WHO et al., 2013).

Almost half of the surveyed parenting programmes are delivered by professionals, one-quarter are facilitated by paraprofessionals, and one-quarter are delivered by trained lay people working directly in communities.

Paraprofessionals and trained community lay people may need more technical support for them to correctly grasp the concepts and develop the needed facilitation skills. Three existing parenting programmes work with community lay people in delivering their parenting interventions. Two of these programmes employ several supervisors – namely Save the Children and SSC, and Krousar Yoeung. Three existing community-based parenting programmes work with paraprofessionals as facilitators. Two of these programmes, ICC and Peace Bridge, have supervisors to monitor the quality of the paraprofessionals' work. Three out of the five parenting programmes working with professional facilitators have one supervisor holding or working towards a Master's degree. However, this study did not explore in detail how often or for how long supervision is conducted, nor what specific facilitating skills are covered in the training of trainers.

#### **4.1.7 Monitoring and evaluation**

Monitoring and evaluation is a crucial component to any effective programme, and the monitoring and evaluation processes should be implemented throughout the entire duration of the programme (WHO et al., 2013).

More than half of the existing parenting programmes were stated to have been internally evaluated, and four out of the 11 programmes were externally evaluated. However, the intervals at which evaluations were conducted varied and evaluations were not necessarily rigorous. Methods to evaluate programmes included pre- and post-training assessments, parenting programme evaluations and evaluations of parenting interventions as part of broader programme evaluations (evaluations involving all programmes in the organization, not just the parenting programme). Some programmes developed more structured monitoring and evaluation procedures involving a baseline assessment at the start of the interventions, a mid-term evaluation after the intervention, and an end-line evaluation one year after the intervention. Some programmes were evaluated after every session, others every month, four months, or six months.

Community-based parenting programmes working with paraprofessionals and trained lay people may require well-structured monitoring and evaluation frameworks. In addition, it

may be difficult to accurately monitor and evaluate interventions involving training of trainers, as is observed in the work of line ministries. The effectiveness of train the trainer processes may need special investigation.

#### **4.1.8 Opportunities for parents to practice new skills**

It is essential that parents are given opportunities to practice their newly acquired skills through role play, video feedback, direct practice in their own homes and/or through other relevant methods (WHO et al., 2013).

All respondents said they worked in line with this recommendation as they used role-play, video clip discussion, group discussion and demonstration techniques. Some institutions use a broader range of facilitation methods than others, following their programme structure, the educational background of their facilitators/trainers and participants, and the setting of delivery.

#### **4.1.9 Teach parenting principles rather than prescribed techniques**

This component emphasizes that training should focus on teaching parenting principles rather than dictating specific parenting responses or prescribed techniques in managing child behaviour, as parents are in the best position to decide what works for them and their children (WHO et al., 2013).

Existing parenting programmes seem to focus their content around topics such as children's rights, child protection, child development, being a parent, understanding positive parenting or positive discipline, parent-child communication, providing warmth and structure or valuing children and each other. Some institutions were reluctant to give their training manuals and materials or to be specific about the details of their parenting training. It is therefore not possible to conclude whether existing programmes focus on parenting principles or prescribed techniques.

#### **4.1.10 Teach positive parenting strategies, including age-appropriate positive discipline**

Parenting strategies should be positive and involve age-appropriate advice on how to deal with child behavioural problems. To allow for lasting change these strategies should be complemented by a focus on establishing positive parent-child relationships, through plays and praise (WHO et al., 2013).

Two-thirds of the existing programmes tailor their approaches and/or materials to children at different developmental stages, for example by introducing case studies on children in a specific age range or through discussions among sub-groups of parents with children in the same age range. The content of most existing programmes looks at non-violent communication techniques and positive parent-child relationships. However, as stated above, because the study was not able to see the curricula of all institutions, it is not possible to draw conclusions as to the actual quality of this content or the age-appropriate modifications.

#### **4.1.11 Consider the difficulties in relationships between adults in the family**

Difficulties in relationships between adults in the family must be considered as they impact on long-term improvement (WHO et al., 2013).

One parenting programme emphasizes this issue and focuses on positive parent-parent relationships, as well as positive parent-child relationships. The organization believes that a positive relationship between parents will promote positive relationships with their children. Another parenting programme works on family conflict and family reconciliation and promotes non-violent communication within the family. As seen in the challenge section, participants report experiencing stress when they try to apply their new parenting skills at home if there is no understanding or support within the family. It is therefore important for existing parenting programmes to consider how to address issues between adults in the family to achieve long-term improvements.

## **4.2 Adapting parenting programmes to Cambodian culture**

Cultural adaptation is defined as “the process of adjusting a programme so that it reflects the cultural and socio-economic situation of those taking part in the programme, while keeping it true to the programme’s core elements” (WHO et al., 2013, p. 12).

Parenting programmes, both existing and in future, may consider the four common concerns emphasized by WHO et al. (2013) in the design of culturally appropriate and evidence-based programmes:

- Finding the right balance between staying true to the original programme design and adapting it to reflect the differences in the new setting;
- Adopting a solid programme theory that clearly specifies the underlying mechanisms through which the programme aims to achieve its goals;
- Having the adapted programme evaluated to make sure that it is effective in the new setting;
- Considering the country’s readiness to implement the programme in the adaptation process.

Most existing parenting programmes did not adopt a specific theoretical model, rather they pulled from various local and international sources to design them, using materials they believed would fit the Cambodian context. To a certain extent, technical teams attempted to take Cambodian parenting beliefs and practices into account, however, the process seemed to be based mostly on observations, experience and anecdotal information. Some organizations piloted their adapted programmes in the new context. In future, it would be essential to have evidence to inform cultural adaptation processes to arrive at effective parenting programmes.

## RECOMMENDATIONS

The institutions interviewed for this study offer their programmes in different target areas. Some community-based programmes stated that they specifically targeted poor areas, however actual selection of participants seemed to be based on internal reports and staff observations. To improve the effectiveness of existing parenting programmes, it would be helpful to conduct a formal needs assessment to define a target population and select participants. Such assessments would also help institutions understand better if their programmes are acceptable among targeted groups. Parenting programmes should ideally start from pregnancy or during the prenatal phase.

Most institutions' goals were closely aligned with the CVACS recommendations around safe, stable and nurturing environments for children. However, this study was not able to explore in further detail how programme objectives were translated to practice. Most parenting programmes were internally evaluated, while some were externally evaluated. The timing and quality of these evaluations seemed to vary. Programmes need to develop comprehensive monitoring frameworks and implement rigorous evaluations to improve effectiveness. To increase learning on parenting in Cambodia, institutions should make evaluations publicly available.

Working closely with government was regarded as an advantage, and most organizations with community-based parenting programmes work closely with different ministries and sub-national authorities. One-third of the existing parenting programmes work with MoWA and/or MoI (primarily in relation to the WCCC and the CCWC). It will be important to align with these two ministries in the development of a nationwide positive parenting programme.

Sustainability should be carefully considered in the promotion of parenting programmes in Cambodia. Empirical studies suggest that training paraprofessionals and lay people to implement parenting interventions is more realistic in developing countries in terms of available financial and human resources. Some of the existing parenting programmes already use this approach. Save the Children and SSC defined clear criteria for the selection of village volunteers (core parents) as facilitators, as well as clear descriptions of their roles and responsibilities. Equally important, they established clear supervisory structures to offer technical support to these village volunteers. They also recruit and train lay people to work as community social workers, who work closely with village volunteers to support high-risk families. Save the Children and SSC involved the CCWC from the start and engaged them in the selection of potential village volunteers and community social workers, as well as during the implementation of their programme.

Funding constraints are a considerable risk to the sustainability of NGO programmes; it is a challenge that affects several organizations. The respondent from MoI emphasized the importance of ensuring programme sustainability. He explained that government approval would be needed to include the implementation of parenting programmes and interventions as a permanent task of WCCCs or CCWCs, and that such programmes and interventions should be funded, at least in part, by the national budget. This in turn would need the Ministry of Economy and Finance to be involved in discussions around positive parenting strategies and implementation plans.

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