

Case study 1: An evidence-based practice review report

Theme: Interventions implemented by parents

Are programmes for divorced and separated parents effective in promoting positive social, emotional mental health outcomes for children? A systematic review of the literature

1 Summary

There are a significant number of children and young people (CYP) who experience their parents going through divorce or separation. Research has shown that these CYP are at a higher risk of adverse outcomes including poorer social, emotional and mental health (SEMH) outcomes. Many different programmes exist that aim to provide targeted support for separated parents in order to communicate and relate to their children and ex-partner better. This review aimed to evaluate whether such programmes effectively promote positive SEMH outcomes for CYP and to critically examine the quality of the evidence. For the three interventions included in this review, none could demonstrate significant effects for CYP's SEMH outcomes although three studies indicated how significant mediating variables impacted the effectiveness of one intervention, The New Beginnings Program. These findings are discussed with reference to suggested future directions and the relevance of this field for educational psychologists' (EP) practice.

2.1 Introduction

2.1.1 CYP's SEMH outcomes and parental separation

Social, emotional and mental health (SEMH) needs in CYP are becoming an increasingly common reason why schools and parents request support from EPs in the UK. In 2021 and 2022, SEMH was the second most prevalent need for CYP on schools' special educational needs (SEN) support registers (DfE, 2022). Whilst many factors co-occur in the contribution of CYP's poor SEMH outcomes, one prominent risk factor frequently cited is family breakdown involving parental separation; on average children of divorced parents are more likely to have poorer SEMH and educational outcomes than CYP whose parents stay together (Kelly, 2007; Wallerstein & Kelly, 2008). Research in this field has explored the impact of parental separation on CYP through the associated increased risk to parents' poor mental health outcomes as well as the potential damage done to parent-child relationships as a result of parental conflict (Pruett & Barker, 2010). As a result, psycho-educational interventions aimed at supporting parents following their separation or divorce exist and aim to modify their way of relating to one another and their children (Martinez-Pampliega et al., 2021). There are a range of programmes and interventions that aim to support divorced or separated parents with varying structures and theoretical underpinnings.

2.1.2 Programmes for divorced or separated parents

Programmes for separated parents vary substantially in terms of length and structure, how participants are recruited and their target focus (deLusé & Braver, 2015; Pollet & Lombreglia, 2008) as well as the extent to which they have an evidence-base. Many interventions have none or limited rigorous evaluations to evidence that they work (Salem et al., 2013) and even fewer have looked at the impacts of these programmes on CYP's SEMH outcomes as many programs are primarily focused on meeting the goals of parents or courts (deLusé & Braver, 2015). However, one intervention that has been deemed effective is 'The New Beginnings Program' (NBP)

which has been rigorously reviewed in two randomised controlled trials (EIF Guidebook, 2023; Pruett & Barker, 2010). The NBP has been developed as a targeted parenting programme for divorced and separating parents and aims to support families with children aged three to eighteen years. In particular it aims to improve CYP's SEMH outcomes. The programme structure includes ten group sessions for mothers and fathers, although an adapted version of the program for fathers only has also been reviewed (NBP-Dads).

Whilst the NBP is a well-established intervention in the US, due to the paucity of evidence-based interventions for separated parents internationally, programmes in other countries are being developed and currently at an earlier stage of evaluation. One example is the 'Egokitzen' divorce education programme in Spain which is structured as eleven weekly group sessions and addresses three key areas; divorce and its impact, interparental conflicts and parenting approaches to discipline and communication. Quasi-experimental research with a small sample size conducted in clinical settings has suggested promising results that Egokitzen may improve CYP's SEMH outcomes (Martínez-Pampliega et al., 2016). Another recent example is the 'No Kids in the Middle' (NKM) intervention which has been piloted by researchers in the UK and consists of eight semi-structured group sessions for both parents and their children in separate groups. In this intervention, emphasis is placed upon the role of the parents' social network and parents are invited to bring key family members or friends to join them in the programme (Mortimer et al., 2021).

2.1.3 Theoretical underpinnings

In addition to a poor evidence-base, a vast number of programmes for divorced or separated parents also lack coherent theoretical underpinnings (Hardman et al.,

2019) and those that do cite different theories. Some programmes such as the Parents Forever programme cite Bronfenbrenner's ecological systems theory as a key framework in considering the interactions between a person and their environment within nested systems (Bronfenbrenner, 1979; Hardman et al., 2019). Similarly, the NBP is underpinned by a person-environmental transactional framework and a risk and protective factor model (Wolchik et al., 2007). The person-environment transactional model emphasises the bi-directional interaction between changes in one's environment and changes to one's development, for example how parenting can affect a CYP's SEMH and vice versa.

In contrast, 'Egokitzen' is underpinned by Grych and Fincham's (1990) cognitive-contextual model and Davies and Cummings' (1994) emotional security theory (Martínez-Pampliega et al., 2015). The cognitive-contextual model considers how CYP's experiences of their parents in conflict occurs through contextual, cognitive and developmental factors that mediate their understanding. Emotional security theory builds upon Attachment theory (Bowlby, 1979) and considers how children's outcomes are affected by their emotional security fears due to adverse experiences with parents in conflict (Davies & Cummings, 1994). NKM is underpinned by multi-family therapy (MFT) and the role of experiences in mediating learning (Mortimer et al., 2021). The MFT approach values the role of groups as a means of intensifying families' interactions by allowing them to observe those of other similar families (Minuchin, 1974).

2.2 Rationale

In 2018 there were approximately 2.4 million separated families with 3.5 million children in the UK (Department for Work and Pensions, 2020) and in 2021 the divorce

rates increased by 9.6% although it should be noted that this could reflect the impacts of the coronavirus pandemic (Office for National Statistics, 2021). A plethora of research has demonstrated that parental divorce frequently leads to adverse outcomes for children including educational outcomes (Brand et al., 2019) as well as their physical and mental health and social and behavioural outcomes (Fagan & Churchill, 2012; Wallerstein, 1991). However if parents can be supported to have healthy relationships and improved mental health then this may have benefits for their children's emotional wellbeing (McMunn et al., 2001; Mooney, Oliver & Smith., 2009). However, research in this area is fairly scarce and to the authors knowledge, no systematic review of the effectiveness of these programmes on CYP's SEMH outcomes had been carried out to date. As the EP role includes supporting the family around the child, it would be beneficial to know whether these programmes have an evidence-base behind them in order to signpost appropriately.

2.3 Review Question

Having carried out a broad scoping search, this review aims to answer the follow question: *Are programmes for divorced and separated parents effective in promoting positive social, emotional mental health outcomes for children?*

3.1 Critical review of the evidence base

3.2 Literature searching

A systematic literature review of four databases ERIC EBSCO, PsycINFO, Web of Science and Scopus was carried out in January 2023. Table 1 shows the searches that were carried out for each database including terms and keywords related to the

problem, outcomes, intervention and target population; the searches were also refined to only include peer reviewed journal articles published between 2000 and 2023 and written in the English language.

Table 1: Databases and list of search terms used for the review

Database	Title, abstract and key word search
ERIC EBSCO	divorc* program* OR divorc* training OR divorc* intervention OR parent* separat* program* OR parent* separat* training OR parent* separat* intervention*) AND (child* OR "young person" OR "young people" OR adolescen* OR pupil*) AND ("mental health" OR wellbeing OR "emotional health" OR "psychological health"
PsycINFO	divorc* program* OR divorc* training OR divorc* intervention OR parent* separat* program* OR parent* separat* training OR parent* separat* intervention*) AND (child* OR "young person" OR "young people" OR adolescen* OR pupil*) AND ("mental health" OR wellbeing OR "emotional health" OR "psychological health"
Web of Science	divorc* program* OR divorc* training OR divorc* intervention OR parent* separat* program* OR parent* separat* training OR parent* separat* intervention*) AND (child* OR "young person" OR "young people" OR adolescen* OR pupil*) AND ("mental health" OR wellbeing OR "emotional health" OR "psychological health"
Scopus	divorc* program* OR divorc* training OR divorc* intervention OR parent* separat* program* OR parent* separat* training OR parent* separat* intervention*) AND (child* OR "young person" OR "young people" OR adolescen* OR pupil*) AND ("mental health" OR wellbeing OR "emotional health" OR "psychological health"

3.3 Overview of the article screening process

The databases and search terms elicited 83 results, one of which was a duplicated result in two databases. This left 82 results which were initially title and abstract screened for inclusion in the review by identifying if they met the inclusion criteria outlined (see table 2). After excluding 73 studies, this left 9 studies eligible for full-text screening, 5 of which met the criteria to be included in the review for this

research question (see Appendix A for the reasons for exclusion). Figure 1 outlines the search and selection procedure adhering to the process set out by the PRISMA Statement recommendations (Page et al., 2021). The final studies included in the review are listed in table 3.

3.4 Mapping the field

The five studies included in the review comprised of different research designs, methods, outcomes measures and evaluated three different interventions. Table 4 depicts the details of the studies using criteria adapted from the initial study descriptors used by Bond et al. (2013).

3.5 The Gough Weight of Evidence Framework (2007)

In order to appraise the five studies, the Gough Weight of Evidence Framework (2007) was used; this was deemed appropriate owing to all five studies including quantitative data. One study included a mixed methods design (Mortimer et al., 2023) and for the purposes of this review only the quantitative data has been included for evaluation. This was in order to make comparisons across all the studies by analysing similar methodological designs involving pre and post quantitative data in order to give better focus to the review, in accordance with Pittway's (2008) 'focus' principle of systematic reviews.

The Weight of Evidence framework requires studies to be assessed based on their methodological quality, methodological relevance to the research question type and relevance to the research question topic. These are referred to as Weight of Evidence (WOE) A, B and C respectively throughout this review. Firstly, a WOE A score was established for each of the five studies using an adapted version of the Kratochwill (2003) coding protocol (see Appendix B for modified criteria with rationale

and Appendix C for the criteria used to code WOE A). In order to calculate WOE A, six key components in the Kratochwill (2003) protocol were used to determine an average overall score for the methodological quality of the studies (see Appendices D-E for WOE A and descriptor ratings and Appendix J for coding protocols).

Table 2: Inclusion and exclusion criteria for the review

Criteria	Inclusion	Exclusion	Rationale
Publication type	Peer reviewed article or journal.	Any publication that has not been peer-reviewed.	To ensure research is of higher methodological quality and integrity.
Participants	Parents with children of school age (3-19 years) who have separated or divorced.	If the intervention is not primarily aimed at parents. Children are not of school age (3-19 years).	To ensure the study is relevant to the review question which aims to evaluate the effectiveness of programmes for separating parents on children's outcomes.
Study design	Group-based, experimental design	Not a group-based experimental design.	To ensure the effects of the intervention can be critically reviewed by comparing outcomes between or within groups of participants.
Intervention	A structured programme for parents who have recently separated or divorced.	Does not evaluate a programme for parents who have recently separated or divorced. Programmes for the children of divorced or separated parents.	Interested in the effect of programmes predominantly for parents.

Setting	Any setting in an OECD country.	Any non-OECD countries.	To ensure the findings of the review are based upon implementation of interventions in countries and cultures of similar economic status.
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Criteria	Inclusion	Exclusion	Rationale
Outcome	The study must have at least one dependent variable assessing children's social emotional or mental health outcomes.	There is no outcome reporting children's social emotional or mental health measured.	This review is interested in the impact of parent programmes on children's outcomes.
Publication date	The research was published between the years 2000 and 2023.	Any research that was published prior to 01.01.2000.	To ensure the review focuses on the most up-to-date findings that are relevant in today's societal context.
Language of publication and geographical context	Publications are produced in English.	Publications are not produced in English.	Researcher's language is English.

Figure 1: Flow diagram to show the article screening process in accordance with the PRISMA Statement recommendations (Page et al., 2021)

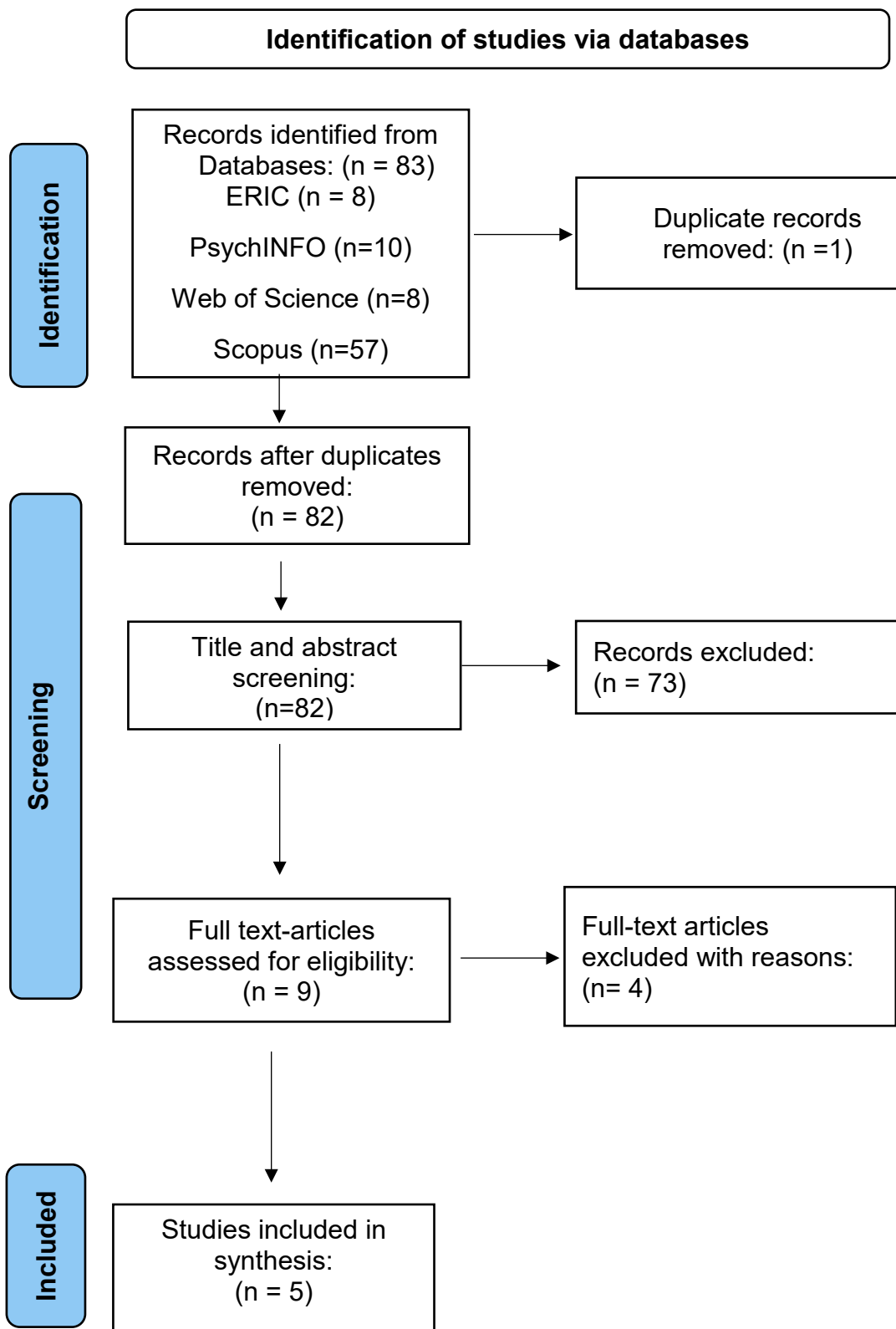


Table 3: Full reference list of studies included in the review

Study	Reference
1	<p>Martínez-Pampliega, A., Herrero, M., Sanz, M., Corral, S., Cormenzana, S., Merino, L., Iriarte, L., Ochoa de Alda, I., Alcañiz, L., & Alvarez, I. (2021). Is the Egokitzen post-divorce intervention program effective in the community context? <i>Children and Youth Services Review</i>, 129, 106220. https://doi.org/10.1016/j.childyouth.2021.106220</p>
2	<p>Mortimer, R., Morris, E., Pursch, B., Roe, A & Sleded, M. (2023). Multi-family therapy for separated parents in conflict and their children: intervention development and pilot evaluation. <i>Journal of Family Therapy</i>, 45, 94-117. https://doi.org/10.1111/1467-6427.12373</p>
3	<p>Sandler, I., Gunn, H., Mazza, G., Tein, J.-Y., Wolchik, S., Berkel, C., Jones, S., & Porter, M. (2018). Effects of a Program to Promote High Quality Parenting by Divorced and Separated Fathers. <i>Prevention Science</i>, 19(4), 538–548. Scopus. https://doi.org/10.1007/s11121-017-0841-x</p>
4	<p>Tein, J.-Y., Mazza, G. L., Gunn, H. J., Kim, H., Stuart, E. A., Sandler, I. N., & Wolchik, S. A. (2018). Multigroup Propensity Score Approach to Evaluating an Effectiveness Trial of the New Beginnings Program. <i>Evaluation & the Health Professions</i>, 41(2), 290–320. https://doi.org/10.1177/0163278718763499</p>
5	<p>Zhou, Q., Sandler, I. N., Millsap, R. E., Wolchik, S. A., & Dawson-McClure, S. R. (2008). Mother-Child Relationship Quality and Effective Discipline as Mediators of the 6-Year Effects of the New Beginnings Program for Children from Divorced Families. <i>Journal of Consulting and Clinical Psychology</i>, 76(4), 579–594. https://doi.org/10.1037%2F0022-006X.76.4.579</p>

Table 4: Initial study descriptors to 'map' the field of research studies

Author	Sample	Study design	Age of participants	Geographical context of study	Intervention	Deliverer	Key findings	Follow up
Martinez-Pampliega et al. (2021)	372 parents (260 intervention group, 112 control wait-list) And their children	Quasi-experimental	Average age of parents = 41.18yrs Average age of children = 7.59yrs	Spain	Egokitzen post-divorce intervention programme	Employees of the family visitation centres (FVCs), trained in the intervention and research methodology.	The intervention group had a greater decrease in rigid parental patterns and parents' symptomatology. There were no significant improvements in the children's scores on the Child Behaviour Checklist indicating no improvement in children's symptomatology.	2 follow up measures at 6 and 12 months post-intervention

Author	Sample	Study design	Age of participants	Geographical context of study	Intervention	Deliverer	Key findings	Follow up
Mortimer et al. (2023)	26 parents and 42 children completed the intervention	Pilot study with mixed methods. Quasi-experimental	Average age of mothers = 37.4 yrs Average age of fathers = 46.2yrs Average age of children = 8.5yrs	London, UK	No Kids in the Middle (multi-family therapy)	Multi-disciplinary teams of practitioners, all with experience of working therapeutically with families	Children's CORS and CRIES scores did not change significantly post-intervention. Children actually reported lower wellbeing after the intervention than before. The number of children scoring above the clinical cut off for the CORS decreased from 60% to 45% post-intervention. Mother and father reports on the SDQ varied considerably and there were no significant differences post-intervention.	None

Author	Sample	Study design	Age of participants	Geographical context of study	Intervention	Deliverer	Key findings	Follow up
Sandler et al. (2018)	384 fathers (201 intervention group, 183 comparison) And their children	RCT	Average age of fathers = 39.18yrs Age of children = 3-18yrs	Arizona, USA	New Beginnings Program-Dads (NBP-Dads)	A trained leader	Initial findings were non-significant however several mediating variables showed significant findings. Girls had fewer externalising problems after NBP-Dads, teachers reported lower externalising problems and total behaviour problems for older children after NBP-Dads. Ethnicity was also a mediating factor.	10 months post

Author	Sample	Study design	Age of participants	Geographical context of study	Intervention	Deliverer	Key findings	Follow up
Tein et al. (2018)	830 parents (474 mothers and 356 fathers)	RCT (using a multi-group propensity score approach)		Arizona, USA	New Beginnings Program	A trained leader	<p>NBP parents reported significantly greater parent-child relationship quality, discipline and lower psychological distress.</p> <p>However, the effects of child exposure to parental conflict, child risk and internalising problems were mediated by parents' gender. Fathers scored significantly greater differences after attending the NBP.</p>	10 months post

Author	Sample	Study design	Age of participants	Geographical context of study	Intervention	Deliverer	Key findings	Follow up
Zhou et al. (2008)	218 of the 240 families who had participated in the initial evaluation study 6 years earlier. Including: 191 residential parents, 27 non-residential parents and 209 adolescents.	Mediation analysis of RCT	Adolescents were 15-19 years old.	Arizona, USA	New Beginnings Program – mediating variables.	Co-led by two clinicians	Improvements in effective discipline and mother-child relationship quality from receiving NBP mediated the effect on adolescents' academic performance and mental health at the 6-year follow-up.	This study was the follow up to a 6 year longitudinal study of the NBP.

WOE B which concerned how appropriate the method was in regards to the research question was established using the guidelines in Petticrew and Roberts (2003) typologies of evidence. As the review question concerned the effectiveness of intervention it was deemed appropriate to follow the hierarchy of evidence (see Appendices F-G for a summary of WOE B ratings). WOE C which considered the relevance of the studies' topic in relation to the research question was calculated by considering four criteria (see Appendices H-I for the criteria with rationale and summary table of WOE C). WOE A, B and C were then averaged to give an overall weight of evidence D score. Table 5 shows the final scores that each study received as well as its overall WOE D score.

Table 5: Overall WOE D calculated by averaging the scores of WOE A, B and C

Study	WOE A Methodological quality	WOE B Methodological relevance	WOE C Topic relevance	WOE D Overall weight of evidence
Martinez-Pampliega et al. (2021)	1.67 (medium)	2.0 (medium)	2.25 (medium)	1.97 (medium)
Mortimer et al. (2023)	1.0 (low)	2.0 (medium)	3.0 (high)	2.00 (medium)
Sandler et al. (2018)	2.0 (medium)	3.0 (high)	2.0 (medium)	2.33 (medium)
Tein et al. (2018)	1.5 (medium)	3.0 (high)	1.75 (medium)	2.08 (medium)
Zhou et al. (2008)	1.0 (low)	3.0 (high)	1.0 (low)	1.66 (medium)

Note: Descriptors were assigned according to the criteria in table 11 (see appendix E)

3.6 Participants

In total, 1,830 participants were included across the five studies however it should be noted that the three studies looking at the NBP used some of the same participants as in previous effectiveness trials (Wolchik et al., 2007). Four studies included between 200 and 400 parents whereas Mortimer et al. (2023) only had 26 parents owing to the study's design and the impacts of the coronavirus outbreak. All the studies included either a parent or sets of parents who had divorced or separated. Studies included participant characteristics such as average parental age, and gender; Mortimer et al. (2023) and Sandler et al.(2018) referenced more criteria such as the ethnicity of participants and time that parents had been separated for which resulted in these studies receiving a higher rating for WOE C 'sample' score.

3.7 Study Designs

The studies used different designs to consider the effectiveness of programmes for divorced or separated parents; Martinez-Pampliega et al. (2021) used a quasi-experimental pre-post design with an intervention and wait-list control group and Mortimer et al. (2023) used a mixed-methods approach using pre-post questionnaire data as well as interviews with participants. This resulted in these two studies receiving a medium score for their WOE B in adhering to the Petticrew and Roberts' (2003) hierarchy of evidence for effectiveness studies. However, it could be argued that a quasi-experimental design was appropriate on ethical grounds as randomisation would have been inappropriate due to the sampling methods used in these studies; participants were referred from external sources due to high levels of parental conflict that was negatively impacting upon their children. However, Mortimer et al. (2023) did

not include a control group or follow up measure and so this is reflected in their lower WOE A score for methodological quality.

Sandler et al. (2018) conducted a randomised controlled trial (RCT) with an intervention and comparison control group comprised of voluntary participants. Tein et al. (2018) used a multi-group propensity score approach to provide additional analysis of the original RCT evaluation study conducted by Wolchik et al. (2007). Zhou et al. (2008) conducted a mediation analysis at the six-year follow-up to another Wolchik et al. (2002) study evaluating the NBP. As a result, these studies all received a higher WOE B rating for their use of RCTs which are deemed more appropriate for assessing intervention effectiveness (Petticrew & Roberts, 2003).

3.8 Interventions

Three different interventions were evaluated for their effectiveness on child outcomes. Martinez-Pampliega et al. (2021) evaluated the 'Egokitzen' divorce education programme in the community context following promising evidence of its efficacy in university trials (Apraiz et al., 2015; Martinez-Pampliega et al., 2016). Mortimer et al. (2023) conducted a pilot study of NKM; this utilised a multi-family therapy (MFT) approach that has been successfully used to treat various problems (Cook-Darzens et al., 2018; Gelin et al., 2018). These studies therefore received a high WOE C 'setting' score with the rationale that evaluating the intervention in the community is more ecologically valid. The three remaining studies all considered the NBP. Sandler et al. (2018) evaluated an adapted version of the programme called 'NBP-Dads' which was designed to specifically target the fathers of separated couples, whereas Tein et al. (2018) and Zhou et al. (2008) considered aspects of the NBP in its original format for both mothers and fathers.

3.9 Outcome measures

To comply with inclusion criteria, the studies had to include at least one outcome measure that assessed CYP's SEMH. There were some similarities in measures used such as the Child Behaviour Checklist (CBCL) however other measures differed. Martinez-Pampliega et al. (2021) assessed children's symptomatology using the CBCL measure which had good reliability when translated into Spanish ($\alpha = 0.92$) (Achenbach & Rescorla, 2001; Sardinero, Pedreira & Muniz., 1997). Use of a validated measure was reflected in WOE A, however as this was the only child outcome measure this contributed to a lower WOE C score. Mortimer et al. (2021) used three validated child-report and parent-report measures, the 'Child outcome rating scale' ($\alpha = 0.73$) (Duncan et al., 2003) the 'Strengths and Difficulties Questionnaire' ($\alpha = 0.66$) (Goodman et al., 2001) and the 'CRIES-8' ($\alpha = 0.74$) (Children and War Foundation, 1998). This led to this study receiving a higher WOE C score for topic relevance.

The remaining three studies reported the use of the CBCL and Pre-school CBCL (Achenbach & Rescorla, 2001), however Sandler et al. (2018) also used the child's and teacher's versions of the 'Brief Problem Monitor' (Achenbach et al., 2011) and the 'Teacher-Child rating scale' (Hightower et al., 1986). Therefore Sandler et al. (2018) received a higher WOE C 'outcome measures' score for measuring more child SEMH outcomes indicating better relevance to the topic. Zhou et al. (2008) also used the 'Divorce Adjustment Project Externalizing Scale' (Program for Prevention Research, 1985), the 'Children's Depression Inventory' (Kovacs, 1981) and the 'Children's Manifest Anxiety Scale-Revised' (Reynolds & Richmond, 1978). However Zhou et al. (2008) did not score as highly on WOE C for topic relevance as the study

did not measure the direct effects of the NBP on CYP SEMH. The study met the inclusion criteria however it addressed the review question more indirectly through considering how the mediating variables ‘mother-child relationship quality’ or ‘effective discipline’ influenced the effectiveness of the NBP on CYP’s SEMH outcomes. Therefore, this study was considered to have lower WOE C than the studies that had directly measured the effects of an intervention on CYP SEMH outcomes.

3.8 Implementation fidelity

In Martinez-Pampliega et al. (2021) and Mortimer et al. (2023)’s studies, how the quality of implementation of the intervention was monitored is quite clear including supervision of the trainers which is reflected in their WOE C scores. Implementation fidelity was also assessed via the Kratochwill (2003) coding protocol for WOE A which required studies to have the training procedures clearly outlined for those implementing the intervention which Mortimer et al. (2023) were lacking in and so did not score as highly for their methodological quality (WOE A). For the studies evaluating the NBP, implementation fidelity was less clear due to these being follow-up studies to the original evaluation of effectiveness and this was reflected in their WOE A and WOE C scores, particularly Tein et al. (2018) and Zhou et al. (2008) who largely referred back to the previous studies conducted for these details (Wolchik et al., 2002; Wolchik et al., 2007).

3.9 Conflict of interest and bias

Sandler et al. (2018) openly declare a conflict of interest in their study of NBP-Dads owing to Sandler and Wolchik being partners with a Limited Liability Company (LLC) that trains providers to deliver the NBP. The three studies that evaluated the

NBP were conducted by the same research team at the University of Arizona including Sandler and Wolchik as co-authors and so it is also presumed that there is some bias in these studies as well as it was in the researchers' personal interest to demonstrate positive outcomes from the NBP. As a result, where the reviewer included 'setting' as a criterion for WOE C these studies were considered to have lower ecological validity due to the influence of researchers' secondary interests. Therefore, it was decided that where conflict of interest is stated or presumed, a study will not be able to score '3' for WOE C 'setting'. This was in order to give acknowledgement to the effects of bias in the research as the context includes a secondary interest that may jeopardise the study's ecological validity even if the study was conducted in a community-based setting.

3.10 Key study findings and effect sizes

The approaches to analysis varied amongst the studies, Martinez-Pampliega et al. (2021) and Mortimer et al. (2023) reported Cohen's d and compared pre-post intervention differences. Neither study demonstrated significant changes to CYP's SEMH outcomes following parents attending 'Egokitzen' or NKM. Some CYP actually reported that their SEMH had worsened following NKM (Mortimer et al., 2021) although the authors note that this could be the result of CYP feeling more able to open up about their difficulties following involvement in the programme. This could indicate that the programme's length or duration may be insufficient to support CYP effectively and that it takes a longer time for meaningful changes to take place. However, Mortimer et al. (2021) scored low for WOE A due to its lack of control group or follow-up measure therefore these results should be interpreted with caution.

Sandler et al. (2018) and Tein et al. (2018) both primarily reported the significant mediators of differences found in CYP outcomes and the Cohen's *d* reported for Sandler et al. (2018)'s study was calculated by the reviewer. As shown in table 6, their reason for reporting the mediator effects was possibly because the main effect sizes were all non-significant. As it was in the researchers' interests to promote the studies' effectiveness, the significance of the findings was important to emphasise and so perhaps effort was made to focus the results section on anything with significance. Sandler et al. (2018) reported effect sizes after accounting for significant moderator variables such as child's sex, age and ethnicity. Small effect sizes were found for the child report BPM for girls; age and ethnicity were significant moderators for the teacher report BPM 'externalising' scale eliciting small to medium effect sizes. Some of the subscales of the teacher report 'teacher-child rating scale' were also significantly moderated by age, sex, baseline and ethnicity variables but still only gave small effect sizes. Tein et al. (2018) adopted a similar approach in comparing NBP to an inactive control group; owing to non-significant findings they report the mediating effect that parent's gender had on their child's risk index and internalising behaviour score at post-test with fathers reporting lower scores than mothers. Although all three studies scored highly for WOE B methodological relevance, Zhou et al. (2008) scored lower for WOE C due to its use of structural equation modelling and mediation analysis being an indirect measure of intervention effects of CYP's SEMH outcomes as well as only using one relevant outcome measure. These results are reported separately.

Table 6: Effect sizes for the included studies

Study	No of participants	Child outcomes measured	<i>P</i> values of pre-post differences	Effect size value	Effect size descriptor*	WOE D rating
Martinez-Pampliega et al. (2021)	Intervention group n = 260 Control group n = 112	Children's symptomatology:				1.97 (medium)
		- Global	0.90	0.11	No effect	
		- Somatization	0.43	0.06	No effect	
		- Anxiety/Depression	0.05	<0.01	No effect	
		- Aggressiveness	0.38	<0.06	No effect	
Mortimer et al. (2023)	26 parents and 42 children	Parent SDQ:				2.0 (medium)
		- Internalising	0.08	1.76	Large	
		- Externalising	0.90	-0.11	No effect	
		- Total difficulties	0.15	1.35	Large	
		CORS Questionnaire:				
		- CORS me	0.43	0.56	Medium	
		- CORS family	0.06	-1.43	Large	
		- CORS school	0.98	0.01	Negligible	
		- CORS everything	0.37	-0.63	Medium	
		- CORS total	0.48	-0.49	Small	
		CRIES-8 Questionnaire:				
- Intrusion	0.71	0.36	Small			
- Avoidance	0.07	2.03	Large			
- Cries total	0.15	1.53	Large			

Study	No of participants	Child outcomes measured	<i>P</i> values of pre-post differences	Effect size value	Effect size descriptor*	WOE D rating
Sandler et al. (2018)**	Intervention group n = 201 Control group n = 183	Child behaviour checklist:				2.33 (medium)
		- Internalising	0.33	0.12	No effect	
		- Externalising	0.60	0.07	No effect	
		- Total problems	0.45	0.10	No effect	
		The Brief Problem Monitor (child):				
		- Internalising				
		- Externalising	0.96	0.02	No effect	
		- Total problems	0.96	0.08	No effect	
			0.96	0.05	No effect	
		The Brief Problem Monitor (teacher):				
		- Internalising				
		- Externalising	0.81	0.08	No effect	
		- Total problems	0.81	0.06	No effect	
			0.90	0.04	No effect	
		Teacher-Child rating scale:				
- Learning problems						
- Assertive Social Skills	0.81	0.03	No effect			
- Task orientation	0.90	0.01	No effect			
- Frustration tolerance	0.81	0.03	No effect			
- Social competence	0.81	0.02	No effect			
	0.15	0.05	No effect			

Study	No of participants	Child outcomes measured	<i>P</i> values of pre-post differences	Effect size value	Effect size descriptor*	WOE D rating
Tein et al. (2018)	Intervention group n = 445 Control group n = 385	(NBP versus Inactive control group) Child Behaviour Checklist				2.08 (medium)
		- Internalising	0.82	-0.25	Small	
		- Externalising	0.13	-1.46	Large	
		- Total problems	0.33	-0.97	Large	
Zhou et al. (2008)	Intervention groups: n= 77 in “mother-programme”, n= 73 in “combined programme” Control group n = 68			n/a see mediation analysis results		1.66 (medium)

*Effect sizes were considered small at the 0.2 level, medium at the 0.5 level and large at the 0.8 level in line with Cohen (1992). Effect sizes smaller than 0.2 was considered to be negligible.

**The authors gave the main effect before and after applying the false discovery rate procedure. The *p*-false discovery rate is the one reported here. The reviewer used the Campbell Calculator (Wilson, 2023) to calculate effect sizes.

Note: Abbreviations for Child Outcomes measured: Parent Strengths and Difficulties Questionnaire (Parent SDQ); Child Outcome Rating Scale (CORS); Child Revised Impact of Events scale (CRIES-8)

Zhou et al. (2008) looked at whether 'mother-child relationship quality' or 'effective discipline' mediated the long-term effects of the NBP. 'Mother-child relationship quality' significantly mediated the effects of the NBP intervention on children's externalising scores on the CBCL (-0.21, $p < 0.05$) and 'effective discipline' mediated the effects of the NBP intervention on children's academic success (0.13, $p < 0.05$).

4.1 Conclusions and Recommendations

This review aimed to evaluate whether programmes for divorced or separated parents are effective in promoting positive SEMH outcomes for children. Three different interventions were considered in this review and overall, there were no significant differences for children's outcomes after their parents attended any of the programmes. The present findings are supported by previous qualitative research in the field; Hans & Fine, (2001) conducted focus groups with CYP aged eight to thirteen whose parents attended the 'Focus on Kids' programme who stated they felt caught in the middle of their parents' arguments and that the intervention did not effectively support CYP's outcomes.

The only significant results reported were in relation to mediating variables that impacted the correlation between attending the NBP and CYP's outcomes. This suggests that mediating variables have more bearing on CYP's outcomes than the interventions themselves. Attempts have been made to explore how mediators such as 'mother-child relationship' 'effective discipline', parent's gender, child's age and ethnicity interact with parents' attending the NBP as three studies demonstrated. The evaluations of 'Egokitzen' and NKM may need to follow a similar approach in

conducting further research on the effectiveness of these programmes. For example, one factor that could be explored is impact of socio-economic status and access to resources of the parents participating in the interventions which is known to be a major variable contributing to poor SEMH outcomes for parents and CYP (Pruett & Barker, 2010).

In addition, parental reports have been used as the primary source of outcome measuring in the five studies which could mean the results are subject to bias and inaccuracies (Arbuthnot & Gordon, 1996). It would be good practice for future research to utilise more child-report measures as these may provide a better insight into how children are impacted by their parents attending these programmes. There is also a need for more high-quality research to be conducted by third party researchers who have no affiliation to these programmes in order to give an accurate, unbiased view of the data.

At present, these programmes are not widely available for the majority of separated parents and the research focus is skewed towards families in high-conflict circumstances, which does not account for the many separated parents who have more amicable co-parenting arrangements. This means that families' engagement in these programmes varies considerably possibly due to feeling they have to attend because of referrals from external sources. Furthermore, research with voluntary participants may be beneficial to establish if this mediates the impact of Egokitzen and NKM. These newer programmes are important as older programmes such as NBP that were first developed in the 1980s primarily focus on supporting mothers and excluding fathers who had moved out of the home (Pruett & Barker, 2010) and are underpinned by perceived societal norms and values of the time. In today's society this leaves little applicability to the modern family set up which could include

homosexual partners or more fathers being the primary caregiver and so these are additional variables which future research could explore. Unlike other programmes for parents, programmes for divorced or separated parents come with additional challenges. All of the programmes discussed involved a group-based structure and in Mortimer et al.'s (2023) study this also involved participants having a social network group. Parents reported that they found this difficult due to the ongoing conflict between their friends and family and their ex-partner and so perhaps this contributed to their results.

In practice, the impact of this knowledge could be in relation to the referral process for parents attending these programmes, ensuring parents are allocated to an appropriate programme by screening for variables that are known to impact effectiveness. In addition, if further research supports the present findings, this may have significant implications for EP practice in recommending additional interventions for CYP of separated parents to support their SEMH needs directly.

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5.2 Appendices

Appendix A: Excluded studies at full-text screening

Table 7: Studies excluded at full-text screening with rationale for exclusion and full-reference

Reference	Reason(s) for exclusion	Related criteria number (see table 2)
Carr, A., Hartnett, D., Brosnan, E., & Sharry, J. (2017). Parents Plus Systemic, Solution-Focused Parent Training Programs: Description, Review of the Evidence Base, and Meta-Analysis. <i>Family Process</i> , 56(3), 652–668. Scopus. https://doi.org/10.1111/famp.12225	<p>This study looked at the effects of Parents Plus interventions. Whilst there is a version of Parents Plus for divorced or separated parents, this study was a review of all the Parents Plus programmes generally.</p> <p>This study was a systematic review rather than a group-based experimental design.</p>	<p>Intervention</p> <p>Study design</p>

Reference	Reason(s) for exclusion	Related criteria number (see table 2)
<p>O'Hara, K. L., Wolchik, S. A., & Sandler, I. N. (2021). The Development, Evaluation, and Implementation of Parenting-Focused Prevention Programs in Collaboration with Family Court. <i>Family Court Review</i>, 59(4), 710–724. https://doi.org/10.1111/fcre.12604</p>	<p>Not a group-based experimental design</p>	<p>Study design</p>
<p>Wolchik, S. A., Sandler, I. N., Tein, J.-Y., Mahrer, N. E., Millsap, R. E., Winslow, E., Velez, C., Porter, M. M., Luecken, L. J., & Reed, A. (2013). Fifteen-year follow-up of a randomized trial of a preventive intervention for divorced families: Effects on mental health and substance use outcomes in young adulthood. <i>Journal of Consulting and Clinical Psychology</i>, 81(4), 660–673. https://doi.org/10.1037/a0033235</p>	<p>Children are not of school age (3-19 years)</p>	<p>Participants</p>
<p>Zhou, Q., Chen, S. H., Cookston, J. T., & Wolchik, S. (2014). Evaluating the cultural fit of the new beginnings parent program for divorced asian american mothers: A pilot study. <i>Asian American Journal of Psychology</i>, 5(2), 126–133. Scopus. https://doi.org/10.1037/a0035519</p>	<p>There is no outcome reporting children's social emotional or mental health measured</p>	<p>Outcome measures</p>

Appendix B

Table 8: Modifications to the Kratochwill (2003) coding protocol with rationale

Modified section of the protocol	Rationale
I. General Characteristics Section B7-B8 removed.	Qualitative methods have not been coded for this review as only one study included any qualitative data.
II. Key Features for Coding Studies and Rating Level of Evidence/ Support: Section C. Primary/Secondary Outcomes Are Statistically Significant was removed	This review includes an in-depth critical discussion of the primary and secondary outcomes of the studies included in the review and so it was not necessary to replicate this detail in the coding protocol.
II. Section D. Educational / Clinical significance was removed	This review included consideration of educational and clinical significant and so it was not necessary to replication this detail in the coding protocol.
II. Section E. E1. Evidence for primary outcomes (rate from previous code) was removed.	This related to II Section C which was removed.
II. Section G. Replication was removed	Replication was not an essential criterion for studies to be included in the review.
III. Other Descriptive or Supplemental Criteria to Consider Other Descriptive or Supplemental Criteria to Consider was reduced	This section was modified to only include information that this review had scope to discuss.
III. Other Descriptive or Supplemental Criteria to Consider Section A2. External Validity Indicators – participant characteristics have been modified.	The participant characteristics have been modified to give appropriate information regarding the factors being investigated in addressing the research question.
III. Section A4. Receptivity/acceptance by target participant population (treatment group) was removed.	This is discussed as part of the findings of the study within the review and it was not necessary to replicate this detail in the coding protocol.

Appendix C

Table 9: Criteria for coding studies using the adapted Kratochwill protocol

Dimension	Criteria
<u>Dimension 1: Measures</u>	
For a rating of 3 studies should include:	Use of outcomes that produce reliable scores, use multi-methods, multi-sources and have validated instruments with the specific target group. All met with sufficient detail.
For a rating of 2 studies should include:	Three of the above criteria
For a rating of 1 studies should include:	Two of the above criteria
For a rating of 0 studies should include:	Fewer than two of the above criteria
<u>Dimension 2: Comparison group</u>	
For a rating of 3 studies should include:	Comparison group type explicitly mentioned, counterbalancing of change agent, group equivalence established and low attrition rates at post test and follow-up. All met with sufficient detail.
For a rating of 2 studies should include:	Three of the above criteria
For a rating of 1 studies should include:	Two of the above criteria
For a rating of 0 studies should include:	Fewer than two of the above criteria
<u>Dimension 3: Identifiable components</u>	
For a rating of 3 studies should include:	Design allows for analysis of identifiable components, number is explicitly stated and links to primary outcomes are clear, procedures for adapting the intervention are coherent, contextual features of the intervention are documented. All met with sufficient detail.
For a rating of 2 studies should include:	Three of the above criteria
For a rating of 1 studies should include:	Two of the above criteria
For a rating of 0 studies should include:	Fewer than two of the above criteria
<u>Dimension 4: Implementation fidelity</u>	
For a rating of 3 studies should include:	Clear evidence of acceptable adherence procedure, manualisation of training procedure clear, adaptation procedures are clearly specified. All met with sufficient detail.
For a rating of 2 studies should include:	Two of the above criteria met or all criteria met but lacking in detail.
For a rating of 1 studies should include:	One of the above criteria met or two criteria met but lacking in detail.
For a rating of 0 studies should include:	None or very limited detail on any of the criteria.

Dimension	Criteria
Dimension 5: Site of implementation	
For a rating of 3 studies should include:	Site of implementation is very clearly stated and described in detail.
For a rating of 2 studies should include:	Site of implementation is stated but with limited detail.
For a rating of 1 studies should include:	Site of implementation is inferred with limited detail.
For a rating of 0 studies should include:	None or very limited information about site of implementation.
Dimension 6: Follow up assessment conducted	
For a rating of 3 studies should include:	Timing of follow-up clearly stated, number of participants clearly stated with low attrition rate, consistency of assessment method used.
For a rating of 2 studies should include:	Two of the above criteria met or all criteria met but lacking in detail.
For a rating of 1 studies should include:	One of the above criteria met or two criteria met but lacking in detail.
For a rating of 0 studies should include:	None or limited detail on any criteria.

Appendix D:

Table 10: WOE A ratings for the included studies

Study	Quality ratings assigned for the 6 dimensions						Overall WOE A*
	Measures (0-3)	Comparison group (0-3)	Identifiable components (0-3)	Implementation fidelity (0-3)	Site of implementation (0-3)	Follow up Assessment conducted (0-3)	
Martinez-Pampliega et al., (2021)	2	2	0	2	2	2	1.67 (medium)
Mortimer et al., (2023)	2	0	1	1	2	0	1.0 (low)
Sandler et al., (2018)	3	2	1	2	1	3	2.0 (medium)
Tein et al., (2018)	2	2	1	0	1	3	1.5 (medium)
Zhou et al., (2008)	2	2	1	0	1	0	1.0 (low)

*Overall WOE A was calculated by adding up the scores of the individual dimensions and dividing by the total number of dimensions (6).

WOE ratings were allocated a descriptor as outlined in table 11

Appendix E

Table 11: Key to outline how WOE ratings were assigned to a descriptor

WOE A ratings	Level assigned
0-1.49	Low
1.50-2.49	Medium
2.5-3.0	High

Appendix F

Table 12: WOE B ratings for the included studies

Study	Study design	WOE B
Martinez-Pampliega et al., (2021)	Quasi-experimental	2 (medium)
Mortimer et al., (2023)	Quantitative and Qualitative mixed methods design, quasi-experimental	2 (medium)
Sandler et al., (2018)	RCT	3 (high)
Tein et al., (2018)	RCT (multi-group propensity score approach)	3 (high)
Zhou et al., (2008)	Mediation analysis of RCT	3 (high)

Appendix G

Table 13: WOE B criteria and rationale based upon Petticrew and Robert's typologies of evidence (2003).

Weighting	Type of study and design	Rationale
(Low) 1	Qualitative research, surveys, case-control studies	These studies are less suitable to the current research question concerning effectiveness of intervention and have lower internal-validity.
(Medium) 2	Cohort studies, quasi-experimental designs	These studies are moderately appropriate for the research question about effectiveness of intervention as they provide greater external validity but less causal inference than RCTs.
(High) 3	Randomised controlled trials	These types of designs, apart from systematic reviews or meta-analyses, are most suited to answering the research question around effectiveness of divorce education programmes on children's outcomes (Petticrew & Roberts, 2003).

Appendix H:

Table 14: Weight of evidence C criteria and rationale. WOE C evaluated the topic relevance of each study that was included in the review.

Criteria	Weightings	Rationale
Setting	<p>1 (low) – other</p> <p>2 (medium) – clinic or university setting</p> <p>3 (high) – community context</p>	<p>The generalisability and external validity of the study’s findings will be greater if conducted in the community context. However, where a conflict of interest is stated, a study will not be able to score ‘3’. This is in order to acknowledge the bias in the research as the research context includes a secondary interest that may jeopardise the study’s ecological validity.</p>
Sample	<p>1 (low) – The study gives few details around participant characteristics provided (1-2 from list in coding protocol)</p> <p>2 (medium) - The study reports 3-5 of the participant characteristics.</p> <p>3 (high) – The study reports more than 5 of the participant characteristics.</p>	<p>In order to assess effectiveness of divorce education programmes, characteristics such as ‘length of time since divorce’ and ‘levels of parental conflict’ could be important mediating variables to consider in determining which types of families these interventions may be most effective for.</p>

Criteria	Weightings	Rationale
Outcomes measured	<p>1 (low) – At least one measure assessed children’s outcomes in relation to their parent/s attending the intervention.</p> <p>2 (medium) – At least two measures assessed children’s outcomes in relation to their parent/s attending the intervention.</p> <p>3 (high) – Three or more measures assessed children’s outcomes in relation to their parent/s attending the intervention.</p>	<p>The review question concerns the effectiveness of divorce education programmes on children of divorce or separated parents’ social and emotional outcomes. Therefore, studies which evaluated more children’s outcomes were given greater weighting than those that had fewer or predominantly focussed on parent outcomes.</p>
Implementation fidelity of the intervention	<p>1 (low) – The study does not clearly state how fidelity of the intervention was measured.</p> <p>2 (medium) – Fidelity of intervention implementation was measure through use of self-report measures.</p> <p>3 (high) – Fidelity of intervention was measured via ongoing supervision or coding methods from someone other than the intervention facilitator in addition to or instead of self-report measures.</p>	<p>In order to mitigate against the effects of individual facilitator qualities, it is important that the study measures implementation fidelity to ensure that it is the effectiveness of the intervention that is being measured and that the effects of confounding variables are minimised.</p>

Appendix I:

Table 15: Overall WOE C ratings

Study	WOE C rating				Overall WOE C*
	Setting	Sample	Outcomes measured	Implementation fidelity	
Martinez-Pampliega et al., (2021)	3	2	1	3	2.25 (medium)
Mortimer et al., (2023)	3	3	3	3	3.0 (high)
Sandler et al., (2018)	2	2	3	1	2.0 (medium)
Tein et al., (2018)	2	2	2	1	1.75 (medium)
Zhou et al., (2008)	2	2	1	1	1.0 (low)

*Overall WOE C was calculated by adding up the scores of the individual dimensions and dividing by the total number of dimensions (4). WOE ratings were allocated a descriptor as outlined in table 11.

Appendix J: Example Coding Protocol used for the five studies

Coding Protocol 1

- Domain:
- School- and community-based intervention programs for social and behavioral problems
 - Academic intervention programs
 - Family and parent intervention programs
 - School-wide and classroom-based programs
 - Comprehensive and coordinated school health services

Name of Coder: uju132

Date: 21.01.2023

Full Study Reference in proper format:

Martínez-Pampliega, A., Herrero, M., Sanz, M., Corral, S., Cormenzana, S., Merino, L., Iriarte, L., Ochoa de Alda, I., Alcañiz, L., & Alvarez, I. (2021). Is the Egokitzen post-divorce intervention program effective in the community context? *Children and Youth Services Review*, 129, 106220.
<https://doi.org/10.1016/j.childyouth.2021.106220>

Intervention Name (description of study): 'Egokitzen' post-divorce intervention program

Study ID Number: __1_____

- Type of Publication:
- Book/Monograph
- Journal Article
- Book Chapter
- Other (specify):

1. General Characteristics

A. General Design Characteristics

A1. Random assignment designs (if random assignment design, select one of the following)

- Completely randomized design
- Randomized block design (between participants, e.g., matched classrooms)
- Randomized block design (within participants)
- Randomized hierarchical design (nested treatments)

A2. Nonrandomized designs (if non-random assignment design, select one of the following)

- Nonrandomized design
- Nonrandomized block design (between participants)
- Nonrandomized block design (within participants)
- Nonrandomized hierarchical design
- Optional coding for Quasi-experimental designs

A3. Overall confidence of judgment on how participants were assigned (select one of the following)

- Very low (little basis)
- Low (guess)
- Moderate (weak inference)
- High (strong inference)
- Very high (explicitly stated)
- N/A
- Unknown/unable to code

B. Participants

B. Statistical Treatment/Data Analysis (answer B1 through B6)

B1. Appropriate unit of analysis yes no

B2. Familywise error rate controlled yes no N/A

B3. Sufficiently large N yes no

Statistical Test: ANOVA_____

alpha level: 0.05_____

ES: 0.20, small; 0.50, medium; 0.80, large_____

N required: _____

B4. Total size of sample (start of the study): 372 (102 lost between pre and post-test, final sample 270)

N

B5. Intervention group sample size: 197_____

N

B6. Control group sample size: 73_____

C. Type of Program

Universal prevention program

Selective prevention program

Targeted prevention program

Intervention/Treatment

Unknown

D. Stage of Program

Model/demonstration programs

Early stage programs

Established/institutionalized programs

Unknown

E. Concurrent or Historical Intervention Exposure

- Current exposure
 Prior exposure
 Unknown

2. Key Features for Coding Studies and Rating Level of Evidence/Support

(Rating Scale: 3= Strong Evidence, 2=Promising Evidence, 1=Weak Evidence, 0=No Evidence)

A. Measurement (Estimating the quality of the measures used to establish effects)

A. Measurement (answer A1 through A4)

A1. Use of outcome measures that produce reliable scores for the majority of primary outcomes. The table for Primary/Secondary Outcomes Statistically Significant allows for listing separate outcomes and will facilitate decision making regarding measurement (select one of the following)

- A1.1 Yes
A1.2 No
A1.3 Unknown/unable to code

A2. Multi-method (select one of the following)

- A2.1 Yes
A2.2 No
A2.3 N/A
A2.4 Unknown/unable to code

A3. Multi-source (select one of the following)

- A3.1 Yes
A3.2 No Parent-report only
A3.3 N/A
A3.4 Unknown/unable to code

A4. Validity of measures reported (select one of the following)

- A5.1 Yes validated with specific target group
A5.2 In part, validated for general population only
A5.3 No
A5.4 Unknown/unable to code

Rating for Measurement (select 0, 1, 2, or 3): 3 2 1 0

B. Comparison Group

B1 Type of Comparison Group (Select one of the following)

- Typical intervention (typical intervention for that setting, without additions that make up the intervention being evaluated)
- Attention placebo
- Intervention element placebo
- Alternative intervention
- Pharmacotherapy
- No intervention
- Wait list/delayed intervention
- Minimal contact
- Unable to identify type of comparison

B2 Overall confidence of judgment on type of comparison group

- Very low (little basis)
- Low (guess)
- Moderate (weak inference)
- High (strong inference)
- Very high (explicitly stated)
- Unable to identify comparison group

B3 Counterbalancing of change agent (participants who receive intervention from a single therapist/teacher etc were counter-balanced across intervention)

- By change agent
- Statistical (analyse includes a test for intervention)
- Other
- Not reported/None

B4 Group equivalence established (select one of the following)

- Random assignment
- Posthoc matched set
- Statistical matching
- Post hoc test for group equivalence

B5 Equivalent mortality

- Low attrition (less than 20 % for post) No
- Low attrition (less than 30% for follow-up) No
- Intent to intervene analysis carried out? No

Findings: _____

Rating for Comparison group (select 0, 1, 2, or 3): 3 2 1 0

E. Identifiable Components (answer E1 through E7)

E2. Design allows for analysis of identifiable components (select one) yes no

E3. Total number of components: n/a

E4. Number of components linked to primary outcomes: n/a

Additional criteria to code descriptively: n/a

E5. Clear documentation of essential components (select one) yes no

E6. Procedures for adapting the intervention are described in detail (select one) yes no

E7. Contextual features of the intervention are documented (select one) yes no

Rating for Identifiable components (select 0, 1, 2, or 3): 3 2 1 0

F. Implementation Fidelity

F1. Evidence of Acceptable Adherence (answer F1.1 through F1.3)

F1.1 Ongoing supervision/consultation

F1.2 Coding intervention sessions/lessons or procedures

F1.3 Audio/video tape implementation (select F1.3.1 or F1.3.2):

F1.3.1 Entire intervention

F1.3.2 Part of intervention

Other – Trainers completed 'Adherence scale'

F2. Manualization (select all that apply)

F2.1 Written material involving a detailed account of the exact procedures and the sequence in which they are to be used

F2.2 Formal training session that includes a detailed account of the exact procedures and the sequence in which they are to be used

F2.3 Written material involving an overview of broad principles and a description of the intervention phases

F2.4 Formal or informal training session involving an overview of broad principles and a description of the intervention phases

F3. Adaptation procedures are specified (select one) yes no unknown

Rating for Implementation Fidelity (select 0, 1, 2, or 3): 3 2 1 0

H. Site of Implementation

H1. School (if school is the site, select one of the following options)

H1.1 Public

H1.2 Private

H1.3 Charter

H1.4 University Affiliated

H1.5 Alternative

H1.6 Not specified/unknown

H2. Non School Site (if it is a non school site, select one of the following options)

H2.1 Home

H2.2 University Clinic

H2.3 Summer Program

H2.4 Outpatient Hospital

H2.5 Partial inpatient/day Intervention Program

H2.6 Inpatient Hospital

H2.7 Private Practice

H2.8 Mental Health Center

H2.9 Residential Treatment Facility

H2.10 Other (specify): 'Community context'/Family visitation centre _____

H2.11 Unknown/insufficient information provided

Rating for Site of Implementation (select 0, 1, 2, or 3): 3 2 1 0

I. Follow Up Assessment

Timing of follow up assessment: 6 months and 12 months _____

Number of participants included in the follow up assessment: 105 and 69 respectively _____

Consistency of assessment method used: Questionnaire _____

Rating for Follow Up Assessment (select 0, 1, 2, or 3): 3 2 1 0

III. Other Descriptive or Supplemental Criteria to Consider (modified)

A. Participant Characteristics Specified for Treatment and Control Group

- Age of parent/s
- Age of children
- Gender of parents
- Ethnicity
- Home language
- Length of time since divorce / separation
- Levels of parental conflict
- Levels of children's social emotional difficulties

B. Length of Intervention (select B1 or B2)

- B1. Unknown/insufficient information provided
- B2. Information provided (if information is provided, specify one of the following:)

B2. weeks: 11_____

B2. months _____

B2. years _____

B2. other _____

C. Intensity/dosage of Intervention (select C1 or C2)

- C1. Unknown/insufficient information provided
- C2. Information provided (if information is provided, specify both of the following:)

C2.1 length of intervention session: 1hr 30min_____

C2.2 frequency of intervention session: weekly_____

Summary of Evidence

Indicator	Overall evidence rating 0-3	Description of evidence Strong Promising Weak No/limited evidence Or Descriptive ratings
General Characteristics		
Design		Quasi-experimental
Type of programme		Intervention programme
Stage of programme		Early-stage, effectiveness only established in laboratory context prior to this study.
Concurrent/ historical intervention exposure		None mentioned
<p>Key features: Post-divorce education programme, delivered by employees of Family Visitation Centres (Spain) and all had suitable qualifications in social or health sciences and several years' experience facilitating family interventions. Consists of 11 weekly 1hr 30 min sessions.</p>		

Measurement	2	Promising evidence
Comparison group	2	Promising evidence
Identifiable components	0	None / very limited evidence
Implementation fidelity	2	Promising evidence
Site of Implementation	2	Promising evidence
Follow Up Assessment Conducted	2	Promising evidence