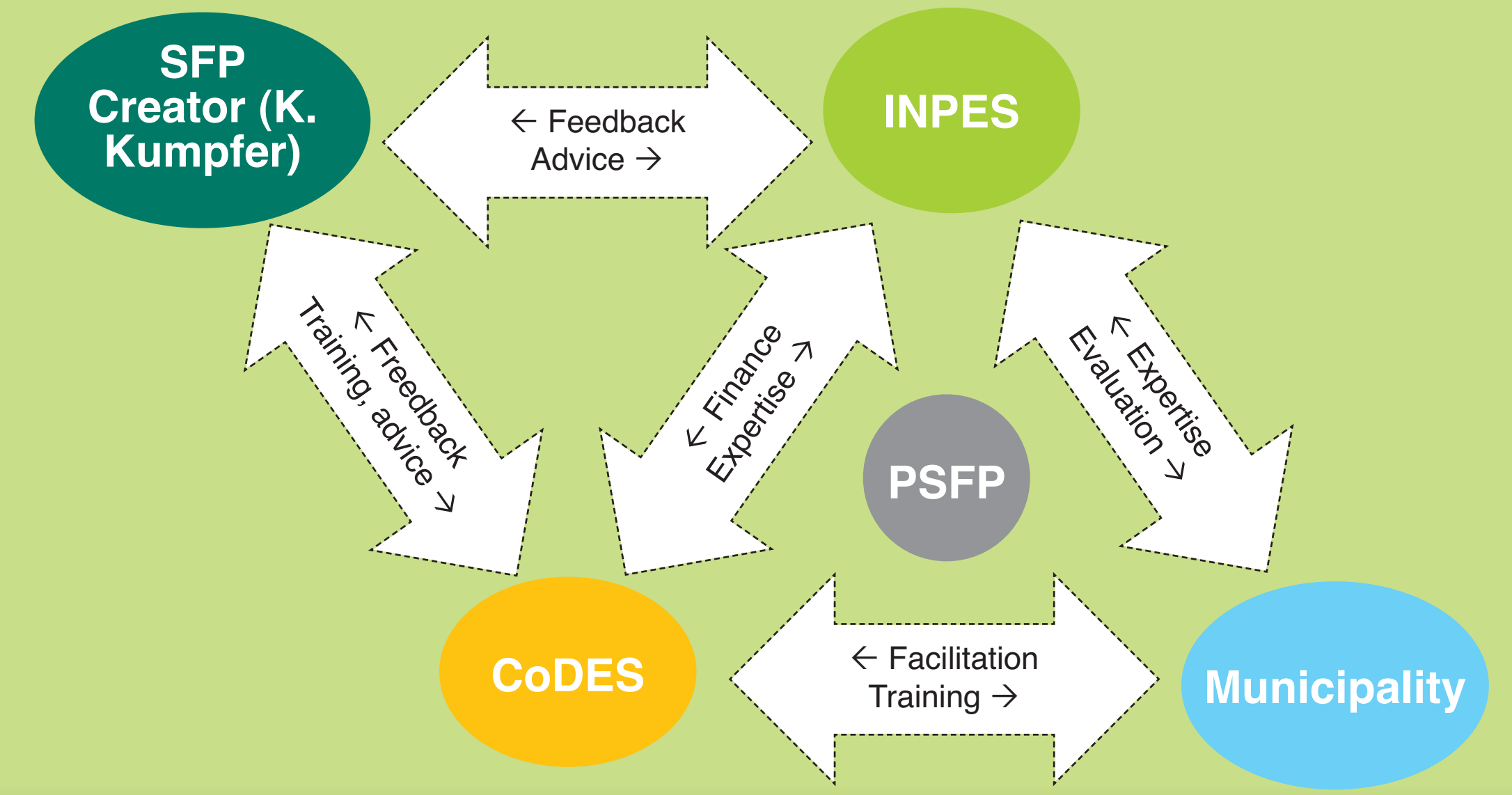


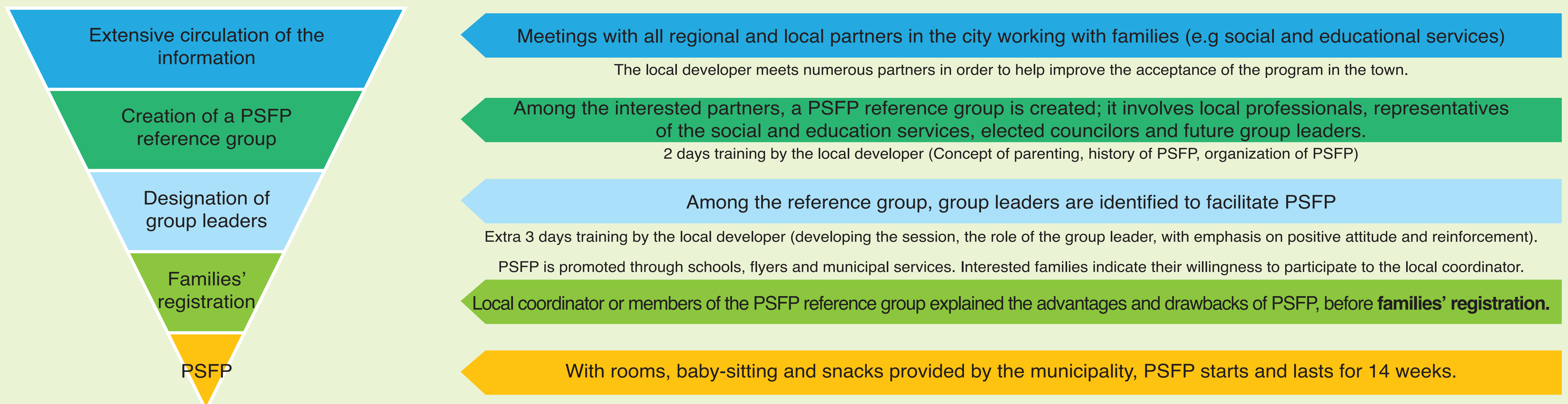
Context

Between 2011 and 2014, with the financial support of INPES, the CoDES 06 (C. Roehrig) has implemented and contextually and culturally adapted the American program Strengthening Families Program. A pilot study in a single town, including 12 families, has shown the feasibility of the program, renamed PSFP (Programme de Soutien aux Families et à la Parentalité), and its acceptability by the families and local professionals involved in parenting. The second implementation (3 towns, 26 families) confirmed the adaptation and implementation protocol which follows the shape of a reverse pyramid.

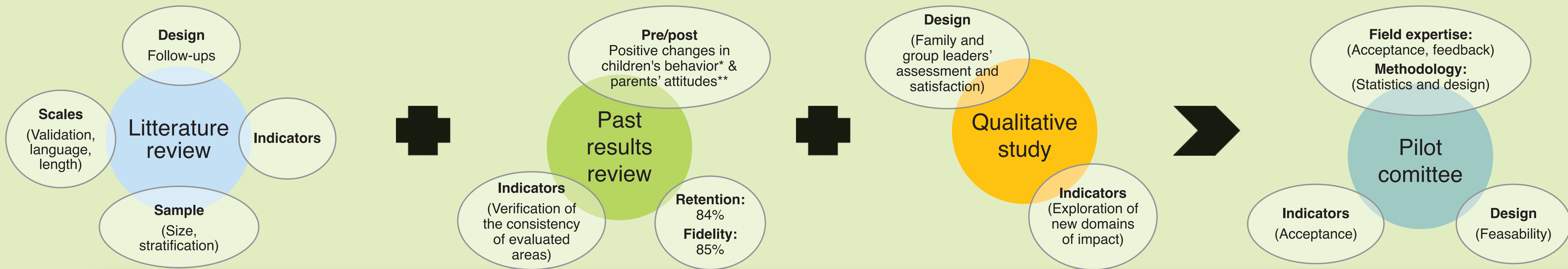
In 2014 following the success of the first implementations, the INPES financed the CoDES to deploy PSFP nationwide and is conducting an effectiveness evaluation to verify the impacts of the program on the families.



Implementation process

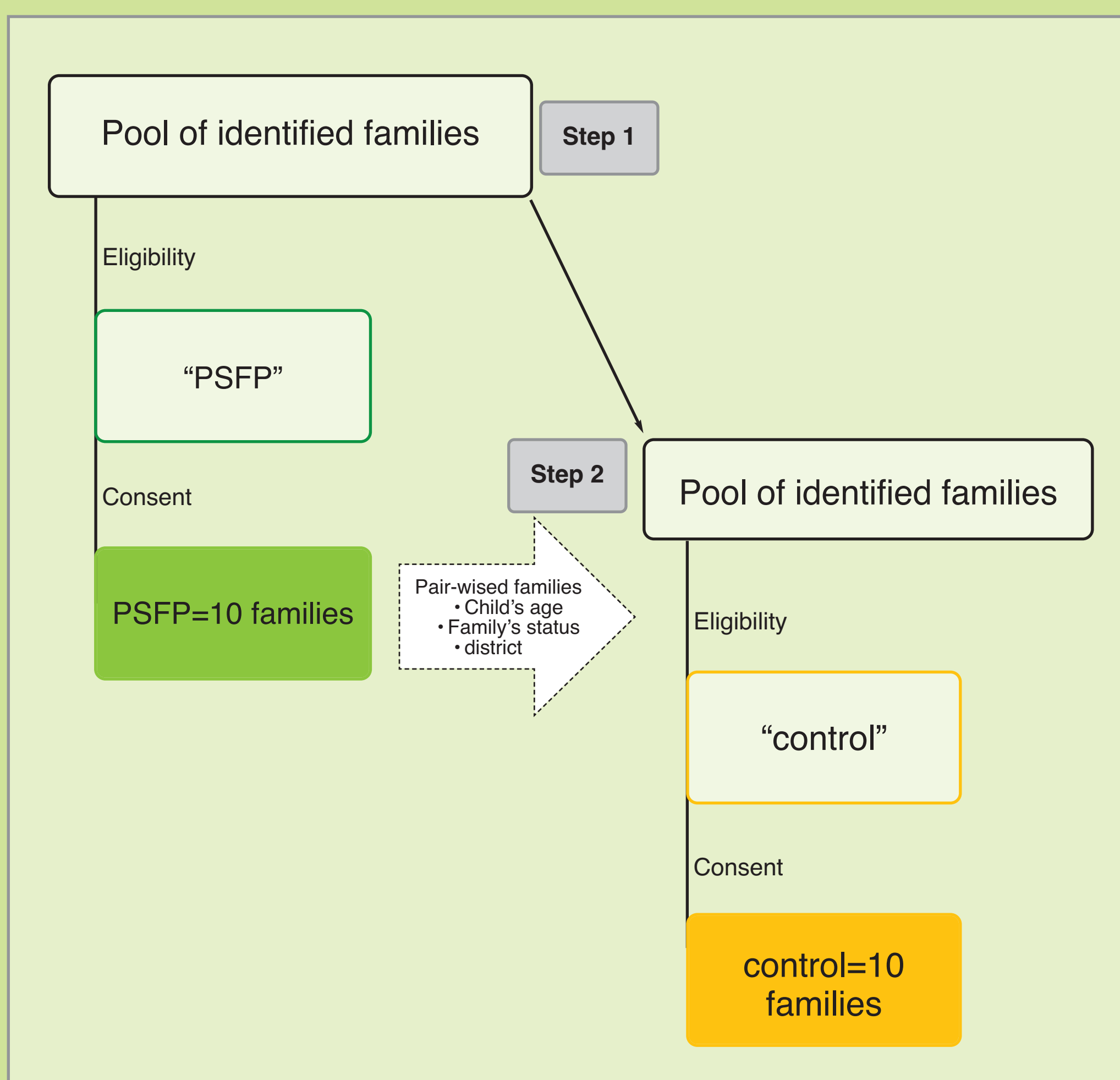


Methodology of elaboration of the evaluation



Design of evaluation

1 - Design 1: Pair-Wise quasi-experimental study



Pair-wise quasi-experimental study OR RCT with reserve group
 2 arms: PSFP vs. minimal intervention
 20 towns → Targeted sample: N exp = 200 / Ncontrol = 200

Inclusion

child → aged 6 to 11 years old, living in town of implementation
 parent and child → living together, self-involvement or involvement after notification of familial or behavioral issues, understanding French

Primary outcome:

I. Child's behavioral and emotional problems [Strengths and Difficulties Questionnaire]

Secondary outcome:

II. Child's relations to screen [adapted Health Behaviour in School-aged Children]
 II. Parental practices [Alabama Parenting Questionnaire]
 II. Family's relationships [Family Relationships Index (from Family Environment Scale)]
 II. Health related quality of life in children [KINDL'R]
 II. Parental stress and anxiety [General Health Questionnaire - 12]
 II. Parental resilience [Connor-Davidson resilience scale 10]

Tertiary outcome

III. Parent's satisfaction with PSFP
 III. Fidelity of implementation and retention

Data collection T0 (pre-PSFP) → T1 (post-PSFP) → T2 (6 m Follow-up)

Exclusion

Child or parent → psychiatric issue or participation in another parenting program
 Parent → firm opposition to participation from the partner, denial of the existence of problems

2 - Design 2: RCT with a reserve group

