



Incredible Years Autism Programme Process Evaluation Report

FINAL

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Process Evaluation Report – Final

Incredible Years Autism – Process Evaluation Ministry of Education

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Glossary

Term	Definition
Caregivers	When we talk about programme participants, we use caregivers to include parents, whānau and others who are caring for children.
Children on the autism spectrum	We talk about children on the autism spectrum rather than children with autism or children with Autism Spectrum Disorder. This includes children who are displaying behaviour consistent with being on the autism spectrum as well as children who have been diagnosed with autism.
Conclusions	Conclusions point out the factors of success and failure of the evaluated project, programme or intervention, with special attention paid to the intended and unintended results and impacts, and more generally to any other strength or weakness. A conclusion draws on data collection and analysis undertaken, through a transparent chain of arguments.
Data collection tools	Methods used for collecting information during an evaluation. Examples include surveys, workshops, interviews, focus groups, and literature search and review.
Effectiveness	The extent to which a project, programme or intervention's outcomes/objectives were achieved, or are expected to be achieved, considering their relative importance. Also used as a judgement about the merit or worth of an activity, i.e. the extent to which an intervention achieves its intended outcomes/objectives.
Group leaders	Each programme has two trained group leaders who work in partnership on all aspects of the programme and are involved in all activities and tasks.
Impacts	Positive and negative, primary and secondary long-term effects produced by a project, programme or intervention, directly or indirectly, intended or unintended. Also see 'Outcomes'.
Incredible Years	The Incredible Years® is a set of interlocking, comprehensive, and developmentally based programmes for parents, teachers and children. Separate programmes have been developed for babies (0-1 years), toddlers (1-3 years), pre-schoolers (3-6 years) and schooled aged children (6-12).
Incredible Years Autism Parent	The Incredible Years "Autism Spectrum and Language Delay" programme for caregivers.
Incredible Years Autism	Includes both the Incredible Years Autism Parent programme and the Incredible Years Autism Teacher programme.
Incredible Years Autism Teacher	The Incredible Years "Helping Preschool Children with Autism" programme for teachers.
Incredible Years Parents	Incredible Years Parent is the basic Incredible Years programme for caregivers of children aged 3–8 years, which provides caregivers with skills to better manage children with behavioural problems, creating a home environment that is conducive to positive social and educational outcomes.
Incredible Years Teacher	The Incredible Years Teacher is the basic Incredible Years programme for teachers of children aged 3–8 years, which provides teachers with approaches to help turn disruptive behaviour around and create a more positive learning environment for their students.
Make up session	Group leaders provide shortened alternative sessions in location or home for parents or teachers who could not attend an IYA programme session.
Model	A diagram or narrative that explains the cause and effect or contribution relationships between the inputs, activities, and outcomes of a project, programme or intervention. In this evaluation, the model diagrammatically depicts how the Framework is expected to regulate rating valuations.
Outcomes	The likely or achieved short-term and medium-term effects of a project's, program's or intervention's outputs. Also see 'Impacts'.
Parent Guidelines	Ministry Guidelines for the Incredible Years Parent (basic) Programme.
Parent Provider	An organisation that the Ministry of Education has contracted to deliver the Incredible Years Autism Parent programme.

Participating Caregiver	A caregiver who is participating or who will be participating in the Incredible Years Autism Parent programme.
Participating Teacher	A teacher who is participating or who will be participating in the Incredible Years Autism Teacher programme.
Performance	The degree to which a project, programme or intervention operates according to specific criteria/standards/guidelines or achieves results in accordance with stated goals or plans.
Relevance	The extent to which the system (regulatory framework) meets the needs and is suited to the priorities and policies of the key stakeholders and has been designed to be 'fit for purpose'.
Stakeholders	Agencies, organisations, groups or individuals who have a direct or indirect interest in an intervention or its evaluation.
Supplementary Guidelines	Ministry Guidelines for the Incredible Years Autism Programmes.
Teacher Guidelines	Ministry Guidelines for the Incredible Years Teacher (basic) Programme
Teacher Provider	An organisation that the Ministry of Education has contracted to deliver the Incredible Years Autism Teacher programme.

List of Acronyms

Acronym	Description
ASD	Autism Spectrum Disorder
ECE	Early childhood education
IY	Incredible Years
IYA	Incredible Years Autism
IYAP	Incredible Years Autism Parents
IYAT	Incredible Years Autism Teacher
IYP	Incredible Years Parents
IYT	Incredible Years Teacher
the Ministry	Ministry of Education

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Executive Summary

Incredible Years Autism (IYA) is part of the suite of evidenced-based Incredible Years® programmes for parents, children and teachers developed in the United States. 2018 is the first year IYA programmes have been delivered in New Zealand with Treasury funding and led by the Ministry of Education (the Ministry). IYA programmes focus on parents of children aged between two and five who are on the autism spectrum, and their teachers. IYA aims to build skills and confidence in the key adults in those children's lives to be able to promote their emotional regulation, positive social interactions, communication skills and relationships with others. IYA programmes are delivered as IYA Parent (IYAP) programmes for caregivers and IYA Teacher (IYAT) programmes for teachers.

Process evaluation purpose

This process evaluation reports on the progress and learning of the initial implementation of IYA programmes and provides conclusions on four focus areas: (1) demand, access and reach, (2) programme implementation, (3) feasibility, and (4) learnings to inform the impact evaluation. The intended primary audience is the Ministry to whom the present report aims to inform the planning and delivery of future IYA programmes. To this end, this process evaluation provides insights into the implementation of the IYAP and IYAT programmes and offers lessons learned. Additionally, the process evaluation seeks to inform the evaluation of the programme's impact. A particular focus of this process evaluation is to examine the IYA programme's intent in the New Zealand context as implemented by the Ministry and regional service delivery by providers as well as links with health services. Providers who deliver IYA programmes are the intended secondary audience of the present report.

The evaluation used administrative data provided by the Ministry and qualitative data collected by the evaluation team through semi-structured interviews with stakeholders. The evaluation team undertook fourteen interviews, including group discussions with participants and group leaders of IYAP and IYAT programmes as well as managers of providers delivering the programmes (total sample size N=74). Interviews were guided by evaluation questions around the four focus areas.

Findings

Demand, access and reach

The lack of data makes it difficult to assess the actual demand in New Zealand for IYA programmes. Further, there are challenges in identifying children on the autism spectrum that fall into the focus age group that have to do with no systematic screening in New Zealand and exposure to entry points to IYA programmes.

On average, IYAP programmes met minimum targets for families participating in the programme. Identified pathways used by carers to access IYAP are generally through health, education or social systems. In most cases, providers of IYAP used established networks to promote IYAP programmes. Struggles in recruiting families were found in some regions and had to do with delayed marketing and limited existing networks. Barriers for families attending IYAP programmes were considered plentiful given their challenging situations.

Demand for IYAT appeared high. Teacher participants are being sourced through the IY connections. All interviewed teacher participants have previously been IYT trained.

Programme implementation

Overall, IYA programmes have been positively perceived. Both IYAP and IYAT appear to achieve intended outputs. However, the implementation of the programmes was seen as rushed. Alignment of IYAP and IYAT programmes has not happened, yet. Programmes are considered to still be at the initial implementation stage and require advice and coordination support from the Ministry.

IYAP and IYAT have been delivered in compliance with programme fidelity requirements. In most regions, group leaders tailored the programme to participants' needs. Māori concepts, such the Māori health and well-being model *Whare Tapa Wha* as well as Māori language (Te Reo) and protocols (tikanga) have been generally

incorporated in the IYA programme delivery. Relievers had been hired to release teachers attending IYAT programmes. Caregivers faced greater challenges to commit their time to IYAP programmes.

IYA strategies are considered most effective if consistently used by all key adults interacting with children on the autism spectrum, which include both parents and teachers. Alignment of IYAP and IYAT programmes is proving to be challenging requiring communication and coordination with health and education services and providers. However, stakeholders consider this should remain a goal with dual entry points through both teachers and parents of children on the autism spectrum.

Differences existed between Parent Providers and Teacher Providers in their communication with the Ministry. The Ministry contracted and communicated directly with Parent Providers. Both managed to build respectful relationships and were collaborating. Teacher Providers have been contracted and managed through Massey University. The head contract relationship between the Ministry and Massey University provided some communication challenges with IYAT programme providers.

Feasibility

Group leaders play a key role in the success of IYA programmes. The consult day was widely valued and increased group leaders' confidence in delivering the programme. Cross-regional gatherings present an opportunity for consolidating best practice IYA programme delivery on a national level.

However, lack of available group leaders to deliver IYAP and IYAT programmes have been signalled in various locations. Co-delivery between providers and the Ministry was effective where providers could not meet the requirement of two trained group leaders per programme.

The contract funding for IYAT was assessed as realistic and providers see benefits in Incredible Years® established professional development pathways and accreditations. The IYAP funding was adjusted during 2018 to ensure sufficient funding for 14 sessions at 2.5 hours was provided.

Learnings to inform impact evaluation

The selection of measurement tools for collecting data informing the longer-term impact evaluation has been adjusted during the initial implementation. Three measures were changed in response to feedback from providers. However, these changes have also caused some confusion and frustration on the part of providers and group leaders delivering IYAP and IYAT.

Conclusions

A key learning from the process evaluation was that the initial programme intent had to be adjusted and, consequently, the design of the programme logic model be updated. The Ministry has been adaptive in its approach for the initial implementation of the IYA programmes in the New Zealand context and responded to emerging risks and stakeholder feedback. This approach contributed to the increased appropriateness and programme fidelity of IYA programmes in the diverse regional and cultural settings in New Zealand context. Having an evaluation alongside the programme implementation was good practice and considered useful from a programme management point of view.

Based on the updated model, the IYA programme is, overall, being implemented successfully for IYAP/IYAT programmes dimensions while dealing with workforce constraints. Stakeholders involved in the initial implementation (i.e. the Ministry, providers and group leaders) have worked consistently to get the initial implementation phase well underway. IYA programmes are meeting a recognised need, knowledge and practical gap in New Zealand in supporting children on the autism spectrum. Reports from IYA programme participants (caregivers and teachers) on changes with strategies and confidence, and children on the autism spectrum indicate the programme is and will positively impact further on the lives of children on the autism spectrum. This is through more educated and skilled key people around them using consistent and relevant strategies. These observed changes are in line with findings of international studies outlined in the literature review.

However, there are constraints over training IY and IYA group leaders and being accredited. Group leaders of IYAP and IYAT programmes play a key role in programmes' success. Appropriate training and coaching is paramount. Sustainability of the programmes is highly dependent on the ability to strengthen and further build the current workforce in New Zealand. This needs to be undertaken on a regional basis, which the Ministry is focusing on for 2019.

Key recommendations

- Consider streamlining data collection for 2019; consolidating administrative (including socio-demographic information), waiting lists, reporting and impact data (ideally) in digital form in support of an improved and systematic database for IYA.
- Consider including user representatives (e.g. provider) to the Programme Steering Group overseeing and supporting the identification and confirmation of impact measuring approach and tools in order to make considered decision of what is useful and feasible.
- Expand IYAT programmes to provide increased teacher professional development opportunities and aligning with IYAP programmes in regions.
- Keep national oversight with Ministry coordinating IYA programmes to allow regions more time to establish networks and consider transitioning coordination to regions from late 2019.
- Consider how to ensure sufficient group leaders in all regions are trained and are supported to become accredited IYA group leaders, peer coaches and mentors.

1. Introduction

Incredible Years Autism (IYA) is one of three investing for social wellbeing initiatives the Ministry of Education (the Ministry) is leading to provide a joined-up approach and targeted support for children aged 0–8 years¹. IYA is a set of programmes focusing on key adults (i.e. caregivers and teachers) in the lives of children aged 2–5 years who are on the autism spectrum. This is the first time IYA programmes is being delivered in New Zealand with Treasury funding. Part of the overall design of the programme is the requirement to evaluate concurrently.

1.1. Background and context to the Incredible Years Autism programme

Children on the autism spectrum have neurodevelopmental impacts on their communication skills, emotional regulation that result in challenging or isolating behaviours. Parents who are raising children on the autism spectrum often have high levels of stress associated with their children’s behaviour. There is a strong evidence base to suggest that early intervention has great potential to offset longer-term negative outcomes for these children and their families (Dababnah & Parish, 2016a, 2016b; Hutchings et al., 2016).

IYA programmes are from the suite of evidenced-based Incredible Years® programmes developed by Dr Carolyn Webster Stratton in the United States. Incredible Years (IY) programmes are used worldwide² in schools and mental health centres and have been shown to work across cultures and socioeconomic groups. The goal of these programmes is to improve young children’s communication skills, emotional regulation and parental wellbeing. There are IY programmes for parents (IYP) and for teachers (IYT) that have been delivered in New Zealand since 2001. IYA programmes are a recent extension from the basic IY programmes with the focus on children on the autism spectrum. The evidence base for IYA programmes is still being built.

1.2. Programme description

IYA programmes encompass Incredible Years Autism Parent (IYAP) and Incredible Years Autism Teacher (IYAT) programmes in the New Zealand context. Together, IYAP and IYAT aim to promote children’s emotional regulation, positive social interactions and communication skills. Group leaders of IYA programmes must already be accredited in the relevant basic IY programme.

IYAP involves a 14 (2.5-hour) session parent programme (delivered approximately once a week). Apart from its intend of increasing young children’s skills, the programme aims for improved mental health (wellbeing) of parents/caregivers. The IYAP programme topics³ include:

- Child-directed narrated play promotes positive relationships
- Pre-academic and persistence coaching promotes language development and school readiness
- Social coaching promotes friendship skills
- Emotion coaching promotes emotional literacy
- Pretend play promotes empathy and social skills
- Promoting children’s self-regulation skills
- Using praise and rewards to motivate children
- Limit setting and behaviour management.

¹ The two other programmes the Ministry is running as part of this joined up approach are the Oral Language Learning Initiative (OLLI) and the Expansion of Behaviour Services (EBS).

² It should be noted that although the Incredible Years programme is used worldwide, the Incredible Years Autism programmes has only been run in a smaller number of countries (United States of America and the United Kingdom).

³ Refer also to Incredible Years® objectives <http://www.incredibleyears.com/about/incredible-years-series/objectives/>

The target numbers for each IYAP programme is a minimum of seven children drawn from seven different families. One or more caregivers from one family may attend. However, the maximum programme size is set at 12 parents, whānau or caregivers. Parents, whānau or caregivers who have already attended the basic IY programme may be accepted for IYAP.

Families are not required to have a medical diagnosis of autism for the child who is the focus of the programme. The Ministry provides up to \$3,400 per programme that providers can use to support families and the programme, such as petrol vouchers, childcare costs, food, and venue.

IYAT is a six (2.5-hour) session teacher programme (delivered weekly or fortnightly). It aims to increase early childhood teacher's capability in supporting children on the autism spectrum. The IYAT programme covers:

- Language development.
- Social interactions and school readiness.
- Emotional literacy and self-regulation.

IYAT programmes are targeted at 10-12 participants each. Priority should be given to teachers who are working with children whose caregivers are participating in IYAP programmes and teachers from Early Childhood Education (ECE) centres who are working with a child on the autism spectrum. Teachers who have already attended the basic IY programme may be accepted for IYAT.

In contrast to the basic IY programmes, which are delivered monthly, IYAT requires a considerable commitment from teachers and ECE centres (or schools) to attend weekly or fortnightly sessions. Teachers are released for the time they participate in IYAT programmes. The Ministry contributes \$900 per staff member per programme towards teacher release. This is to support teacher attendance from ECE centres and schools.

Before 2018, the Incredible Years Autism programme had only been delivered by Te Whānau Kotahi in Tauranga (Health provider) with the local Ministry office. It had not been delivered on a wider scale, and has not been evaluated in New Zealand, or on a large scale internationally⁴. Although larger scale research on this programme (in progress) will inform the programme in New Zealand, results are not directly transferable from one country to another, as the contexts (including the schooling and healthcare environments) can vary considerably.

The Ministry provided IYA specific guidelines to support the delivery of IYAP and IYAT. The *Supplementary Guidelines for Incredible Years* (in the further text referred to as *Supplementary Guidelines*) contain details on the programme background, design, target population, the programmes' fidelity and other requirements outlined by the Ministry.

In addition to the provision of programmes, the general IY structure requires all group leaders to receive coaching and they can apply for accreditation. The same structure applies to IYA programmes. Each IYA programme must be delivered by two group leaders who are accredited in the respective Parent or Teacher basic IY programme and have experience in working with children on the autism spectrum or their families. The training for IYA group leaders can only be provided by an IYA accredited trainer. Because New Zealand currently does not have any IYA accredited trainers, trainers from overseas provide the training.

⁴ A small pilot evaluation has been completed in Wales (see A pilot trial of the Incredible Years® Autism Spectrum and Language Delays Programme, 2016, <http://www.incredibleyears.com/wp-content/uploads/Hutchings-J.-Pilot-trial-of-IY-Autism.pdf>), with a larger Randomised Control Trial currently in progress by the same group of researchers.

The modality of IYA programme delivery in New Zealand is provided by one of the following three options⁵:

1. **Sole provider delivery** – the programme is delivered by two group leaders employed by one provider.
2. **Co-delivery** – the programme is delivered by one provider who leads the programme planning and a Ministry staff member.
3. **Sole Ministry delivery** – the programme is delivered by two group leaders employed by the Ministry.

1.3. Programme fidelity

For all IY programmes fidelity⁶ generally means that group leaders of programmes:

- Deliver the programme content in its entirety.
- Deliver the content in the correct sequence.
- Use the programmes' routines and practices (e.g. practice opportunities, role plays, collaborative questioning, brainstorm, and practice activities).
- Use the programme's resources (e.g. vignettes).
- Continually reflect on how to be responsive to specific needs and concern of participants and associate children.

The *Supplementary Guidelines* include IYA specific guidance indicate that group leaders of IYAP programmes:

- Record sessions (for self and peer review).
- Have access to coaching and participate in consult days to support them in delivering IYA programmes.
- Ensure evaluation forms and checklists (provided by the Ministry) are completed.

Evaluation forms will be further discussed in section 1.5.

1.4. IYA Programme theory of change

The IYAP and IYAT programmes are interventions focused on supporting caregivers, teachers and, ultimately, the child on the autism spectrum. The initial programme intent and theory of change was to target both the home and education environments, so that a child on the autism spectrum receives increased informed support from key adults in the child's life. The interventions sought to enhance the child's development and learning, and the wellbeing of both the child and caregivers while increasing confidence and skills of caregivers and teachers. This increased focus on wellbeing and learning leads to more inclusive and participatory lives for children on the autism spectrum and their whānau, who would also feel more supported and confident. The intervention logic for the programme is displayed below (Figure 1, over page).

⁵ Ministry of Education (n.d.), *Supplementary Guidelines for Incredible Years*.

⁶ Fidelity of IY programmes is specified in both *Incredible Years Parent Guidelines* and *Incredible Years Teacher Guidelines* published by the Ministry of Education and available on their website: <http://pb4l.tki.org.nz/>

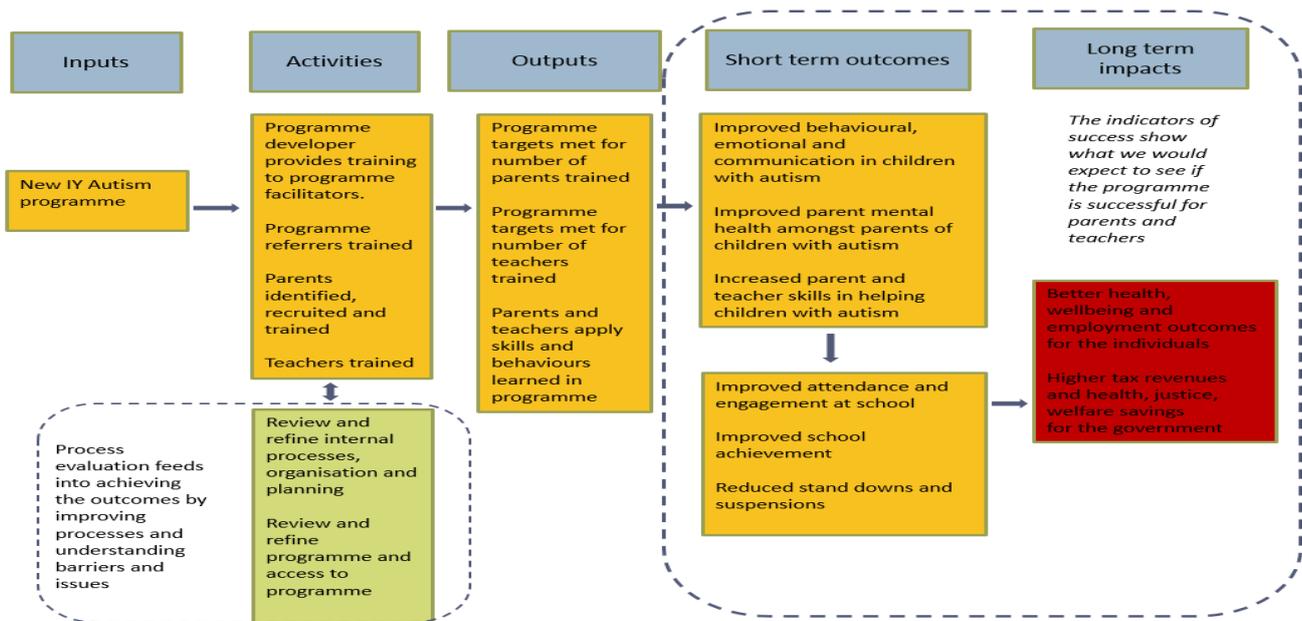


Figure 1: Initial intervention logic for IYA (source: Incredible Years Evaluation Plan)

1.5. Changes to the initial IYA implementation plan during 2018

The evaluation team noted various changes from the initial IYA implementation plan that occurred during initial implementation in 2018.

1.5.1. IYAP and IYAT delivery

There have been differences in the contracting of providers between those providing IYA Parent programmes (Parent Providers) and those providing IYA Teacher programmes (Teacher Providers). Parent Providers responded to an open tender and have been contracted by the Ministry directly. Teacher Providers, however, have been selected and contracted through Massey University who coordinate IYAT programmes under a head contract for the Ministry.

The original IYA programme intent in the New Zealand context was to have coverage of both IYAP and IYAT programmes in all ten education regions⁷. However, after the tendering process for IYAP, contracting for IYAT and the training of Parent and Teacher Provider group leaders in early 2018, there was insufficient workforce available for the planned implementation provision of both parents and teacher programmes in all regions. This was due, in part, to limited responses in some areas to the tender and a smaller number of group leaders being available after training due to changes in personal circumstances. Consequently, neither full coverage of all regions nor consistent alignment of IYAP and IYAT could be established.

In September 2018, advertising was undertaken to retender several IY contracts, including IYAT delivery and IYA workforce support and development. An open tender was also issued for IYAP in four regions: Tai Tokerau, Auckland, Hamilton, and New Plymouth. This was due to the Ministry contracting requirements and plans for expanding the regional implementation of IYAP and IYAT programmes in 2019. The Ministry has also contracted to provide further professional development in autism knowledge and strategies for group leaders during 2019.

⁷ The 10 Ministry of Education areas are: (1) Tai Tokerau Northland, (2) Auckland, (3) Waikato, (4) Bay of Plenty/Rotorua/Taupo, (5) Taranaki/Whanganui/Manawatu, (6) Hawkes Bay/Gisborne, (7) Wellington, (8) Nelson/Marlborough/West Coast, (9) Canterbury, (10) Otago/Southland.

1.5.2. Programme budget

The Ministry increased the price for the delivery of IYAP programmes. The initial contracted price for IYAP had been \$22,000 whereas the basic IYAP programme is priced at \$24,000. The leadership team approved increasing the programme price as follows:

- The cost per programme will be increased to \$26,776 for sole delivery and \$13,338 for co delivery.
- Disbursements remain at \$3,400 giving a maximum per programme cost of \$30,176 for sole delivery and \$16,788 for co-delivery (excl. GST).
- The new price applied from 1 August 2018 for new programmes.⁸

1.5.3. Promotion of IYA programmes

Following advice by autism sector groups, the Ministry initially took a soft approach in promoting IYA programmes to avoid raising hope and disappointment of families with children on the autism spectrum, given the limited capacity of IYAP programmes. The Ministry of Health had been involved to help distributing information about IYAP among partners that were considered appropriate contact points, such as District Health Boards, ASD coordinators, medical practices and Plunket. However, enrolment numbers for the first cohort fell below expectations, which prompted the Ministry to extend communication around IYA Programmes. In the meantime, support material, such as posters and brochures for both programmes (Figure 2) for public display in selected places (e.g. hospitals) have been produced and circulated.



Figure 2: Picture of IYAP poster

⁸ All prices in NZD.

1.5.4. Assessments for measuring outcome

The IYA initial implementation included a suite of five measurement tools to be collected within the IYA delivery and be used for the evaluation, as part of the agreed Treasury plan⁹. This selection of tools was refined prior to implementing IYA to better reflect the Ministry’s approach relevant to children on the autism spectrum.

The selection of initial measurement tools was further refined during implementation in 2018 to reflect the modification to the programme delivery approach, and in response to feedback from providers. From the initial introduction of “test assessment tools” in March/April to providers, the Ministry captured and responded to feedback. A broad assessment tool reset occurred in approximately April/May. Two additional changes followed: one assessment was removed from the IYAP programme in June and the second measure was removed from the IYAT programme in October.

Table 1: Assessments used for IYA programme evaluation considered in this evaluation, and the changes made

Programme	Assessments	Comment (use and change)
IYAP	Autism Parenting Stress scale	Introduced in April.
	Parenting Stress Index	Introduced in March and withdrawn in April due to provider-noted experience with a parent relating to participants’ mental health, ethical concern and appropriateness of providers administering this assessment.
	Parental Sense of Competency	Introduced in March and withdrawn in October due to feedback from providers in 5 regions and a health specialist that the questions could be harmful to parents.
	Ages and Stages Questionnaire (ASQ-SE-2.10)	Introduced in March
	Strengths and Difficulties Questionnaire (SDQ-P)	Introduced in March and withdrawn in April due to concerns raised about the numbers of assessments being used with parents.
IYAT	The measures identified for use for outcomes evaluation include a selection from the Incredible Years Teacher and Child care provider self-reflection inventory: <ul style="list-style-type: none"> • Emotion coaching & self-regulation (social coaching) • Positive Behaviour Management: Setting limits and rules 	Introduced in April Four assessments were used as self-reflection exercises are recommended to be removed by providers.

⁹ As part of the approved funding for IYA programmes by the Treasury, a stream of funding was provided for both the process and impact evaluation.

¹⁰ 24 months used based on advice from IY developer

Programme	Assessments	Comment (use and change)
	<ul style="list-style-type: none"> • Positive Behaviour Management: Differential attention, ignoring and redirecting • Positive Behaviour management: Time out to calm down and other consequences 	
	Sense of efficacy	Introduced in April
	Strengths and Difficulties Questionnaire (SDQ-T)	Introduced in April and withdrawn in June due to impracticality of capturing parental consent given required modifications to programme delivery, and the ethical ramifications here.

2. Process Evaluation

The overall approach to evaluation of IYA programmes is intended to occur over three stages:

1. A process evaluation to provide insights into the implementation of the IYAP and IYAT programmes.
2. An impact evaluation¹¹ to determine whether the programmes are achieving the intended outcomes for the participants.
3. The overall evaluation objectives are to assess the relevance, effectiveness and efficacy, fidelity, and feasibility of the programme.

This report is the first stage, the process evaluation component for the initial implementation of IYA programmes. Beside assessing the process of the initial implementation of IYAP and IYAT programmes, the process evaluation seeks to inform the forthcoming impact evaluation. This process evaluation was undertaken between May and October 2018.

The scope for this process evaluation is the first cohort of the IYAP and IYAT Programmes. The initial roll out of the IYA programmes has been in eight locations: Auckland, Tauranga, New Plymouth, Hawke's Bay, Wellington, Nelson, Christchurch and Invercargill.

2.1. Stakeholders

This process evaluation has a number of key stakeholders, listed below. Unless otherwise specified, these stakeholders are for both the IYAP and IYAT programmes (noting that 'participants' differ between programmes).

These stakeholders have been grouped into primary and secondary stakeholders. This reflects those who are directly involved in the programme, and those who either have an 'arm's length' interest in the programme (e.g. as the funder), or those who may be interested/have a future interest in the programme.

Primary stakeholders

- Ministry of Education (Learning Support leadership team, Project Programme Board and Early Learning and Student Achievement Group, Raukura/Chief Advisor Te Ao Māori and/or Group Manager Te Reo Māori for Early Learning and Student Achievement).
- Early Childhood Advisory Committee, Positive Behaviour for Learning Reference Group.
- Contracted providers.
- Participants (teachers/kaiako for the IYAT and caregivers for the IYAP).
- District Health Boards (Disability Support Services) where the programme is running.
- Ministry of Health (Child Development Services and ASD Coordinators).

Secondary stakeholders

- Treasury.
- Other prospective providers.
- Autism sector groups (e.g., Autism New Zealand, Children's Autism Foundation, Altogether Autism).
- Other teachers/educational professionals/ECEs/Schools (including representative bodies such as the Centre Managers, School Principals NZEI Te Riu Roa).
- Oranga Tamariki.
- Other District Health Boards.

¹¹ The design of the impact evaluation is yet to be determined. The appropriateness of a control group or other counterfactual approaches requires consideration

2.2. Process evaluation approach

The overall evaluation approach incorporated a mixed methods responsive design (Stake, 2014). Given the relatively recent IY programme expansion into the IYA programmes, the evaluation focused on gathering qualitative data from multiple stakeholders to examine different perspectives and assess the appropriateness of IYA in the New Zealand context. The evaluation team considered it was important to triangulate the findings from multiple stakeholders' perspective and within the regions given the diversity across regional contexts.

The evaluation approach was flexible and responsive, adapting where additional questions were identified during the early data collection activities, including national stakeholder interviews and initial field visit. Of particular focus was the IYA programme intent in the New Zealand context implemented by the Ministry and interfacing with health services and providers. Flexibility by the programme personnel and evaluation team was critical to effectively respond to the adaptive operating environment associated with the initial implementation of IYA programmes. The successful initial programme implementation was based on the fidelity in achieving the programme's intent (as it relates to the logic model) and the guidelines followed.

The programme's maturity¹² was considered, which is formalising as the IYA programme evolves its processes and resources from the early learnings during the initial implementation and inputs from the process evaluation. The timing lag in the initial implementation of the IYAP and IYAT programmes caused some challenges in examining the initial programme intent. However, the evaluation team consider the field visit and regional coverage were sufficiently robust to report key themes and draw conclusions. The evaluation team visited six out of the eight regions (Tauranga, Nelson/Motueka, Hawkes Bay, Wellington, Christchurch and Invercargill) and spoke with key stakeholders in the other two regions (New Plymouth and Auckland).

2.3. Ethics and consent

This evaluation was guided by ethical and culturally sensitive professional practice. It was also cognisant of other sensitivities identified as important in consultation with the Ministry's programme team¹³ and providers such as caregiver wellbeing and current contracting arrangements. Experienced evaluators, including Kate Averill and Shaun Akroyd, undertook the field work for this evaluation, which incorporated an insight into IYA appropriateness for Māori and Pasifika, and variations within the regional locations.

The evaluation team provided information on the purpose of the evaluation and formally sought consent of all interviewees for this evaluation. Given the small number of people in each region interviewed, the evaluation team have reported thematically under the evaluation focus areas to maintain confidentiality. To gain informed consent, an information sheet on the process evaluation research questions was provided to participants (see Appendices B and C). Participants were informed that no person would be identified in the reporting unless specifically asked for permission to illustrate emerging good practice in the New Zealand context.

The evaluation team adapted their approach for parent discussion groups given the evident impacts on mental and physical wellbeing of parents attending the programmes. The evaluation team were guided by provider managers and group leaders on the inclusion of group leaders in discussions with parents. Cultural sensitivity and the vulnerability of parents were considered during this evaluation. The two key evaluators (male and female) involved in the fieldwork were of Māori and European ethnicity and both had prior experience in evaluating processes and impacts for Pasifika.

¹² The evaluation team used the UK Office of Government Commerce developed Portfolio, Programme and Project Management Maturity Model (P3M3[®]) (Sowden, Hinley, & Clarke, 2010) to assess the IYA programmes maturity.

¹³ Early feedback from providers to the programme team at the Ministry of Education suggests that some caregivers participating on the IYAP may be on the autism spectrum themselves. Flexibility regarding face-to-face qualitative data collection strategies may be necessary to be sensitive to factors such as this.

2.4. Process evaluation questions

The evaluation questions for the process evaluation were framed around four focus areas, linked to the evaluation objectives (relevance, fidelity, feasibility and efficacy). The four focus areas included demand, access and reach; programme implementation; feasibility; and learnings to inform the impact evaluation. The questions, focus and objectives were confirmed with the evaluation team during initial planning and scoping phase.

Demand, access and reach (relevance)

1. *What is the demand for services, and who is accessing the programme (e.g. socio-demographic profile, location, ethnicity etc.)?*
2. *How are people accessing services differently, and is this access pathway working effectively?*
3. *How well is the programme in reaching the right children (i.e. do those who need the programme access it and do those who access the programme need it)?*
 - a. *Is the programme equitable in reaching Māori and Pasifika children?*
4. *What, if any, are the barriers to parents and teachers accessing the programmes?*

Programme implementation (relevance and fidelity)

5. *Is the programme being implemented as intended, and in a way that maintains its fidelity?*
6. *What aspects of the programme are working well/not well (e.g. participation and delivery, communications between relevant health/education stakeholders, such as DHBs, local ASD coordinator and/or sector groups)?*
 - a. *What aspects of the programme could be improved – for parents and for teachers?*
 - b. *Does the programme appear to work better in some areas than others? Why?*
7. *Are all of the aspects of the programme required to achieve the intended outputs and outcomes, or are some aspects more fundamental than others?*
8. *What changes (if any) are being made to the programme to ensure delivery is culturally appropriate for Māori and Pasifika, and why?*
9. *How well are the Ministry's processes around communication and implementation of the programme supporting best-practice delivery of the programme?*

Feasibility

10. *How adequate are our inputs and capacity (such as the workforce, the training requirements) in the Ministry of Education and the Incredible Years model to achieve the intended outcomes of the programme, now and in future? What are key considerations (if any) that would affect the longer-term sustainability of the model in New Zealand?*

Learning to inform the impact study (efficacy)

During this early learning stage, what key factors might influence the feasibility of the impact evaluation. Specifically:

11. *How appropriate are the measures (refer 1.5) for the different groups in this initiative for the longer-term impact evaluation?*
12. *How well does the demand for services enable a more robust evaluation approach through delayed enrolment or other mechanism (such as maintaining a register of interested participants in other locations)? To what extent could a list of interested participants (maintained as a register by providers) be used as a quasi-control group for the impact evaluation?*

In addition to the evaluation questions, the following assumptions were noted by stakeholders that needed to be tested during the process evaluation as well as the impact evaluations to better understand the fitness-for-purpose of IYA programmes in the New Zealand context.

- These programmes can be adapted (without compromising its fidelity) so that it is delivered in a way that is culturally appropriate to New Zealand participants.
- These programmes can be aligned with and support the New Zealand health and education setting, which is strengths-based (rather than deficit and treatment focused).

2.5. Data collection for the process evaluation

This section outlines the evaluation data collection methods and tools used, and also outlines the limitations of this evaluation. The full details of the evaluation methodology are provided in Appendix D.

The process evaluation research methods included:

- **a document review** including relevant background documents provided by the Ministry of Education, and a review of previous studies referenced in the evaluation plan.
- **a targeted online literature review** of key literature on autism programmes was undertaken (refer Appendix E for literature reviewed).
- **a review of existing programme administrative data** where consent process permitted, including a summary of relevant demographic data and an overview of how the programme was accessed.
- **collection of qualitative data including semi-structured stakeholder interviews** (ten interviews) guided by the evaluation questions, group discussions in six out of eight locations with participants (manager, group leaders, and parents and teachers (refer sample size n=89). Evaluation interviewee/discussion group ethnicity included: Māori, NZ European, Samoan, Indian.

The role segmentation for the qualitative interviews for this process evaluation is as follows.

Table 2: Groups and roles of research participants

IYAP programme evaluation participants			
Eight Sites	Provider manager	Group leader	Evaluation participants
Total	4	14	41

IYAT programme evaluation participants		
Two Sites	Group leader	Teacher participants
Total	4	10

(Note: 2 group leaders of IYAT programmes also acted as provider managers)

IYAP programme evaluation participants		IYAT programme evaluation participants	
Location	Evaluation participants	Location	Evaluation participants
Tauranga	14	Christchurch	12
Motueka	12	New Plymouth	2
Wellington	13	Total	14
Napier	6	Regional and national stakeholder evaluation participants	
Hastings	5	Evaluation participants	
Invercargill	6	National	8
Christchurch	1	Regional	8
Auckland	2	Total stakeholders	16
Total	59		

The analysis frame included the focus areas and the evaluation questions, supporting overall assessments of the programme and research questions. All data streams (primary and secondary, qualitative and quantitative) were analysed by the evaluators to identify substantiated findings against the four focus areas. Triangulation of data as evidence of what is working well, what is not (and for whom), and what can be improved was undertaken.

2.6. Limitations of the evaluation

The following limitations for this process evaluation were noted by the evaluation team.

A complete dataset of IYA administrative data was not available, which was due to project management and provider follow through (for example, ethnicity data should be collected by all providers and monitored by the Ministry). Incomplete data were found for attendance records as well as socio-demographic information of IYA participants, which affected the data analysis for the IYA programme and this evaluation.

The judgements made in this report are based largely on experiences and perceptions of Ministry staff, providers and participants, and, therefore, reflect the relevance of the IYA programme to the context rather than specialists' views on autism or measurement.

Our approach focuses on relevance, feasibility and fidelity of the inputs and activities rather than achievements of outcomes. However, some observed and reported outcomes are also incorporated in the present report where it was considered useful.

The sample size of parent participants was sufficient given the regional coverage of all 2018 IYAP programme locations covered (six out of eight locations had site visits) and congruent findings. The sample size for teacher programmes (i.e. teacher participants, group leaders and managers of Teacher Providers) is small given the limited number of programmes delivered in the first cohort. However, the findings were relatively congruent on the appropriateness and relevancy of the IYAT programmes.

Based on the data collected through interviews, the evaluation team is unable to sufficiently answer evaluation question 12 (i.e. enabling a more robust evaluation and use list of interested participants as quasi-control group). As evaluation specialists, we do consider baseline information of the interested and waiting list participants to be relevant baseline data.

2.7. Programme Literature review

An online review of literature was undertaken by members of evaluation team. Appendix E contains a matrix of the literature reviewed. Key findings and comments relevant to this IYA process evaluation and the planned impact evaluation are highlighted below.

Online literature review discussion

Prior to the development of Incredible Years Autism, several studies utilised the basic Incredible Years programme and offered this to parents of children with autism, often modified to suit these parents (McIntyre, 2008; Roberts & Pickering, 2010). Other studies where Incredible Years was tailored to suit families of children on the autism spectrum from different cultural groups include Zamora, Harley, and Hudson (2016) where Incredible Years parent training was offered to seven monolingual Spanish speaking parents whose children were on the autism spectrum.

In 2014, Dababnah and Parish (2016)¹⁴ conducted a pilot study which adapted the basic Incredible Years Parent programme for parents of children on the autism spectrum and language delays. The results of this study and their subsequent feasibility study suggested that an adapted version of IYP was acceptable to parents, showed promising results, and was feasible for this group (Dababnah & Parish, 2016a, 2016b; Hutchings et al., 2016).

Parents

More recently, Hutchings et al. (2016) conducted a pilot trial of the Incredible Years Autism programme. They found that parents rated the programme highly, and all eight parents who completed the programme identified it as helpful. Specific components parents found helpful included talking about the course, homework activities, meeting other parents, and learning strategies to help them ignore undesirable behaviour. In addition, all parents in this study reported that IYA had an impact on their parenting and had helped them to understand things from the point of view of their child.

Impacts

Research findings suggest that both the IY programme tailored to parents of children on the autism spectrum and the IYA programme have positive impacts on the families that participate in it. Findings include parents feeling less isolated (Roberts & Pickering, 2010), reduction of negative parent and child behaviour (McIntyre, 2008), decreased parent stress (Dababnah & Parish, 2016a), improved relationships between parents and children (Dababnah & Parish, 2016a) and positive impacts on parenting (Hutchings et al., 2016).

Barriers to participation

Current international research identified some barriers to participation in IY and IYA for families of children on the autism spectrum. For IY, Dababnah and Parish (2016a) identified that one parent cited disruption in children's night-time schedules as the reason they chose not to attend, and this issue was also identified by a parent that withdrew. Other issues that parents struggled with in this study were the distance to class, the desire for more one-on-one support, and the inability to bring their partner to the group. Furthermore, parents struggled with some parts of the programme, such as child-directed play, children being unmotivated by incentives, and not responsive to time-out strategies. Hutchings et al. (2016) identified that the location of the course was a barrier for some parents with some participants travelling considerable distances. One parent described how the cost of creche, buses, and their time made it hard to attend the course.

Support for families

Several studies described ways that they were able to support families to attend the courses. They described how they provided evening sessions, free childcare, and provided participants with dinner. In addition to this, they selected locations based on it being accessible for most participants. Furthermore, if participants experienced hardship due to transportation, the researchers provided bus tokens or arranged for taxis so that participants could attend the course. Roberts and Pickering (2010) also explained that they selected a facility with a relaxed, non-clinical, atmosphere with good parking facilities.

¹⁴ Note the original findings were part of a thesis published in 2014. After this study, in 2015, Incredible Years Autism was developed by Dr Webster-Stratton.

The location was central for the families who participated in the course and the researchers suggest that this may have contributed to the “good up-take” for the programme. Dababnah and Parish (2016b) provided childcare, which was used regularly or occasionally by eight of the fourteen parents. They reflected that all of the participants who used the childcare reported they would not have been able to attend the course if it had not been provided. Zamora et al. (2016) also provided free childcare and a light snack and identified that the location was accessible to all families by car, bus, or train.

Linking the literature and evaluation findings

The evaluation findings and insights, and contribution to the emerging knowledge base are referred to in the evaluation conclusions (section 4.) in this report.

3. Overall Findings

This section outlines overall findings from the process evaluation, consolidating both quantitative data (i.e. programme administrative records) and qualitative data (i.e. interviews) collected. The 2018 Incredible Years Autism Programme comprise of four input components. These include:

- Incredible Years Parent Programme providers.
- Incredible Years Teacher Programme providers.
- Workforce providers – mentors and coaching.
- Ministry of Education – national coordination programme oversight and workforce inputs and particular regional inputs to IYA programmes.

After an initial discussion IYA initial implementation, enrolment and attendance data, the process evaluation findings are structured under the four above mentioned input components, using the four evaluation focus areas and research questions (refer to section 2.4.).

Initial IYA Programme Implementation

For 2018, IYAP and IYAT programmes are delivered in the following regions:

1. Auckland (IYAP)
2. Tauranga (IYAP & IYAT)
3. Hawke's Bay (IYAP & IYAT)
4. Taranaki (IYAT)
5. Wellington (IYAP)
6. Nelson (IYAP & IYAT)
7. Christchurch (IYAP & IYAT)
8. Invercargill (IYAP)

Each programme is facilitated by two IY accredited group leaders who are trained to deliver IYA. The training of group leaders was undertaken by Dr Webster Stratton¹⁵ in February 2018. The Werry Centre is contracted to provide IYAP group leader coaching is using two independent IYP mentors and one Ministry of Education IYP mentor based in Hawkes Bay. IYAT group leader coaching is provided by Explore Services using two independent IYT mentors based in Taranaki. These mentors have extensive IY Parent and Teacher programme experience and need to complete delivery of sufficient IYA programmes in their role as group leaders to become accredited IYA group leaders and peer coaches. Coaching in IYA for these IY mentors is being provided by the programme developer.

The modality of IYAP programme delivery varied between regions. For this cohort of programmes, sole provider delivery is currently found in Wellington, Motueka (Nelson), and Hastings (Hawkes Bay). Co-delivery (provider together with the Ministry) is currently provided in Tauranga, Invercargill and Christchurch. Sole Ministry delivery is currently found in Napier (Hawkes Bay) and Auckland.

¹⁵ The American Incredible Years® developer.

IYA Enrolment and attendance

Table 3 below presents a summary on administrative data for the initial implementation of IYA programmes, specifying enrolment and attendance data from March to October (12th) 2018, which was provided by the Ministry.

Table 3: Summary administrative data (IYAP and IYAT combined)

	Enrolments			Attendance at first & last session		Estimated Children *		Attendance at all sessions **													Drop outs
	#	#	Av	First	Final	#	Av	1	2	3	4	5	6	7	8	9	10	11	12	13	#
IYA Parent-Completed only	7	70	10	55	43	49	7	63	60	59	49	52	46	50	42	41	40	43	42	39	17
%				79	61			90	86	84	70	74	66	71	60	59	57	61	60	56	24
IYA Parent	15	143	10	128	N/A	112	7														
IYAT Teacher-completed only	6	68	11	66	63	N/A	N/A	66	66	63	61	61	63								1
%				97	93			97	97	93	90	90	93								3

Provided by the Ministry of Education

* Excludes children where the parent dropped out within the first three sessions or did not turn up to the first session.

** Up to session 13 for parent because for most providers this is the last session they are counting.

Overall, both IYAP and IYAT programmes met targets in terms of enrolments and based on average numbers. On average, a completed IYAP programme included seven children from seven different families with ten caregiver participants in a programme. Completed IYAT programmes hit, on average, the maximum limit of twelve enrolments of teacher participants in a programme.

However, there are marked differences between attendance levels of IYAP and IYAT programmes. While for both programmes, attendance levels decrease over the course of the programme, IYAT attendance remains high at 90% and more (on average). The IYAP attendance levels drop to around 60% in the second half of the programme (on average). Similarly, the drop-out numbers for IYAP programmes average 24% on all enrolments. Further analysis of enrolment and attendance data for IYAP and IYAT programmes is incorporated in sub-sections 3.1. and 3.2. respectively.

In the following, this section is further structured by the four input components comprising the IYA programme and include:

1. Incredible Years Parent Programme (delivery).
2. Incredible Years Teacher Programme (delivery).
3. Workforce (for IYA programmes).
4. (Role of) the Ministry of Education.

The evaluation focus areas (1) demand, access and reach; (2) programme implementation; (3) feasibility; and (4) learnings to inform the impact evaluation are addressed where relevant within the four inputs components.

3.1. Incredible Years Autism Parent programme

IYAP programmes are evaluated against the four focus areas. Findings in this section refer to the perspective of the on the ground programme delivery, represented by group leaders delivering the programme and participants. In the following text, participants are referred to as 'caregivers' to include the wider family or whānau members beside the parents of children on the autism spectrum. The evaluation team conducted interviews with group leaders (in pairs) and caregivers (as group) in all eight locations delivering IYAP programmes.¹⁶

3.1.1. Demand, access and reach

Evaluation questions for focus area *Demand, access and reach* included questions 1-4:

1. *What is the demand for services, and who is accessing the programme (e.g. socio-demographic profile, location, ethnicity etc.)?*
2. *How are people accessing services differently, and is this access pathway working effectively?*
3. *How well is the programme in reaching the right children (i.e. do those who need the programme access it and do those who access the programme need it)?*
 - a. *Is the programme equitable in reaching Māori and Pasifika children?*
4. *What, if any, are the barriers to parents and teachers accessing the programmes?*

Each question is addressed in the following in respective order.

Demand for the programme

As mentioned above and shown in Table 3, on average, IYAP programmes achieved target numbers for enrolments on IYAP programmes. However, regional differences exist with some regions just below the minimum target (i.e. seven children from seven different families). Table 4 (over page) provides enrolment and attendance data for each IYAP programme¹⁷. Providers who did receive minimum enrolments in their first round of programme delivery included IYAP locations Motueka (Nelson) and Christchurch. Tauranga (Bay of Plenty) delivered two programmes in parallel, one of which had a maximum of twelve caregivers enrolled but only involved five children from different families.

Challenges with meeting target numbers have been explained by group leaders with delayed advertising of the programme or last-minute personal situational changes for caregivers and/or their children of already enrolled families, such as transfers or drop outs of families. Advertising issues have been dealt with in the meantime and results to these changes are already being seen, at last by one provider. For example, Christchurch is now reporting that they have a waiting list of families wanting to enrol in the programme.¹⁸ Names were provided to the evaluation team.

The data available for the present evaluation does not allow for drawing a socio-demographic profile of families accessing the IYAP programme. The evaluation team found diversity (in terms of families' ethnicity backgrounds) within a programme varied from region to region. From the limited enrolment data provided it was apparent there were more Māori participants in IYA programmes in regions such as Hawkes Bay and Tauranga. This is line with population demographics in the regions. However, the first cohort of IYAP programmes appeared to include limited Pasifika families.

¹⁶ Eight location include Hastings and Napier (both Hawkes Bay), Tauranga (Bay of Plenty), Auckland, Wellington, Motueka (Nelson), Christchurch, Invercargill.

¹⁷ Data retrieved 12th October 2018

¹⁸ Note that the evaluation team did not see this waiting list and hence cannot verify this information.

Table 4: IYAP regional administrative data

	Dates		Participant numbers				Drop outs	
	Start	End	Enrolled Caregivers	Attended session 1	Attended final session	Estimated children families at start	Participants who received at least one make up session	Number
Bay of Plenty	27-Mar	26-Jun	12	11	9	8	9	2
Bay of Plenty	28-Mar	27-Jun	12	7	2	5	3	4
Hawkes Bay	6-Apr	10-Aug	12	9	4	9	3	5
Invercargill	2-May	15-Aug	7	7	4	7	2	3
Wellington	17-May	13-Sep	11	9	11	8	6	0
Nelson	28-May	24-Sep	8	7	8	6	5	0
Hawkes Bay	18-Jun	1-Oct	8	7		7		
Christchurch	19-Jun	28-Sep	8	5	5	6	1	3
Auckland	7-Aug	6-Nov	9	6		6		
Auckland	8-Aug	6-Nov	11	11		10		
Auckland	9-Aug	22-Nov	11	11		9		
Bay of Plenty	2-Aug	13-Nov	11	9		9		
Bay of Plenty	3-Aug	14-Nov	8	8		7		
Wellington	15-Aug	21-Nov	9	5		7		
Wellington	24-Aug	7-Dec	6	5		5		
Totals			143	117	43	109	29	17

Access pathways to the programme

Identified pathways used by caregivers to access IYAP are generally through health, education or social systems. IYAP programme access points mentioned by caregivers and documented in the sample of administrative data provided are listed below.

- Health:
 - ASD (Autism spectrum disorder) coordinators
 - Paediatricians
 - Mental health support services
- Education:
 - Early intervention teacher
 - Speech language therapists
 - Pre-school
 - Playgroups
 - Massey University
- Social:
 - Social worker

The evaluation team found another relevant pathway in IY programmes, themselves. Many caregivers reported to have been involved with the basic IYP programme previously and named IYP as their access point to IYAP. Some of these caregivers had been reportedly on waiting lists for months before starting their IYAP programme.

In view of the expanded communication and advertisement material, the evaluation team finds it worth noting that one of the interviewed caregivers reported to have learned about the programme through a IYAP poster advertisement sighted in a hospital.

Reach of parent programme

IYAP is reaching families with children on the autism spectrum, many of which have more than one child on the autism spectrum (including older children outside the IYA focus age group). Parent Providers and group leaders who are generally well connected in their community and to regional early education and health services have been using their already established networks to promote IYAP programmes.

In all locations, group leaders reported to have started or intended exploring new ways and opportunities for partnership and collaboration to extend the IYA reach to families. Such efforts reportedly incorporate reflections and learnings from the first round of programmes. This is particularly true for regions with lower enrolment numbers. For example, group leaders reported contacting pre-schools and speech therapists, approaching hospitals and Autism New Zealand, and establishing relationships to ASD coordinators. On a more general note, the importance of a cross-sector approach with broad partnerships between the education and health sector in the way forward was highlighted by a group leader and IY mentor. A key role in terms of first contact points was seen in paediatricians, which needs to be a focus for future work according to the group leader and IY mentor. This coordinated approach is occurring in Christchurch, which has resulted in both parents and teachers attending IYA programme and two children on autism spectrum are having the use of IYA strategies at home and at school.

IYA may benefit in future from word-of-mouth communication similar to the basic IY programmes. Caregivers are reportedly recommending the programme to other families with children on the autism spectrum. Accordingly, Parent Providers have reported that they are increasingly seeing caregivers referring themselves to IYAP programmes.

In some cases, IYAP programmes in this initial implementation phase have been filled with caregivers with extensive pre-existing knowledge levels on topics covered by IYA, which led the group leader to question whether they had reached the “right” families. While families met eligibility criteria, the group leader considered some caregivers “over-trained” and consider the programme might have been more useful to less informed families. There are no formal prerequisites in the *Supplementary Guidelines* for attending IYAP programmes. However, from the process evaluation group discussions, it was evident that over half of the caregivers attending IYAP programmes had already attended other parenting programmes, including the basic IYP programme. Many caregivers said they have attended some general Autism awareness programmes, which were aimed at increasing knowledge about children on the autism spectrum.

Complete administrative data on IYAP participating families’ ethnicities is unavailable, hence, the present evaluation cannot judge whether the programme is reaching Māori and Pasifika equitably. Observations and qualitative data indicate generally low participations of Pasifika families while participation of Māori families is higher in some regions (e.g. Hawkes Bay). The provider in these areas used their existing networks to reach out to iwi and interested caregivers. Many group leaders reported they had limited networks to Pasifika communities and acknowledged this was an area to investigate further for future programmes.

Barriers to accessing the programme

Barriers for families accessing IYAP heavily depend on resources available to them. IYAP means a considerable time commitment for caregivers who are (more often than not) working and have young children displaying challenging behaviours.

Group leaders who are dealing with families directly saw barriers in

- Childcare / family support available.
- Families with several children on the autism spectrum.
- High stress levels (“parents have a lot going on in their lives”).
- Parents with anxieties.

Some providers offered night sessions to make it easier for working caregivers to attend the programme. Where there were only daytime sessions, caregivers suggested to have night sessions, so their partners could join the programme. The evaluation team considers further examination of IYAP schedule time may be useful in view of maximising attendance.

3.1.2. IYAP programme implementation

Evaluation questions for focus area *Programme implementation* included questions 5-9:

5. *Is the programme being implemented as intended, and in a way that maintains its fidelity?*
6. *What aspects of the programme are working well/not well (for example, participation and delivery, communications between relevant health/education stakeholders, such as DHBs, local ASD coordinator and/or sector groups)?*
 - a. *What aspects of the programme could be improved – for parents and for teachers?*
 - b. *Does the programme appear to work better in some areas than others? Why?*
7. *Are all of the aspects of the programme required to achieve the intended outputs and outcomes, or are some aspects more fundamental than others?*
8. *What changes (if any) are being made to the programme to ensure delivery is culturally appropriate for Māori and Pasifika, and why?*
9. *How well are the Ministry's processes around communication and implementation of the programme supporting best-practice delivery of the programme?*

Each question is addressed in the following in respective order.

Fidelity of the programme

Fidelity in the context of IY and IYA programmes have been defined in section 1.5. above. Overall, group leaders have been following the programme, including filling out forms provided by the Ministry and complying with the programme's agendas. Both group leaders and participants confirmed that:

- profiles have been created and maintained throughout the course,
- vignettes been used (see Figure 3),
- role plays been applied, and
- strategies practiced at home.

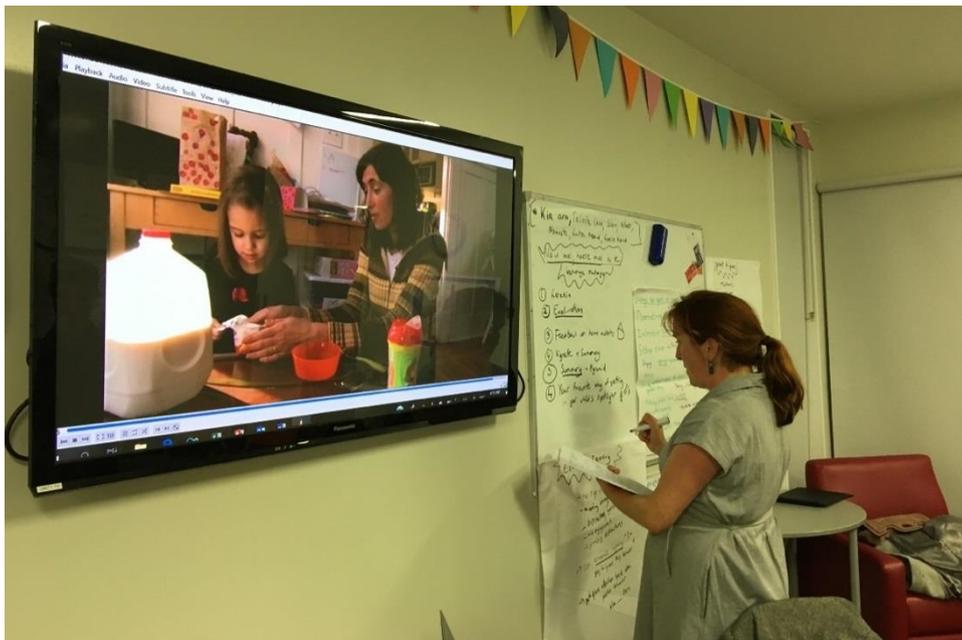
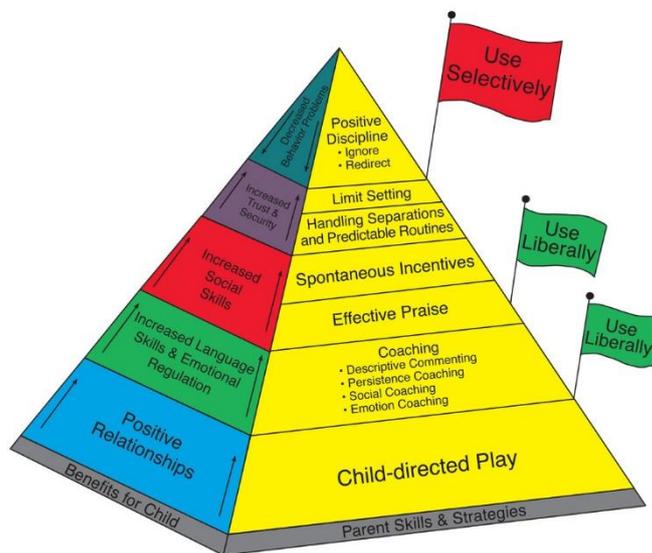


Figure 3: Example of vignette played at IYAP session.

Group leaders generally aimed to deliver the programme content in its entirety and in the correct sequence. However, because of considerable differences in caregivers’ level of pre-existing knowledge relevant to the programme, adjustments had to be made. For example, in some regions group leaders had to make time to explain basic IY concepts (e.g. parenting pyramid – see Figure 4) to caregivers as the group had little or no pre-existing knowledge on Autism or IY.



Parenting Pyramid
Toddlers (1 - 3 years)



Figure 4: IY parenting pyramid

Contrasting examples were also found. For example, in Wellington, group leaders found a highly informed group of caregivers who had very specific interests in the programme, such as behaviour management strategies, which were covered in the later sessions of the programme. Both scenarios created challenges for group leaders in either adding more content to the already comprehensive programme content or responding to caregivers’ specific expectations.

Administrative data indicates sporadic attendance of caregivers in most regions (see Appendix F), which raises the questions whether they received the full content of the programme. Many group leaders reported offering caregivers make-up sessions to catch up on programme content they have missed. According to group leaders, most caregivers have used make-up sessions. However, group leaders also reported on caregivers missing sessions out of time constraints and refused make-up sessions for the same reason. (Note, it is not clear to the evaluation team if or how make-up sessions are recorded. Information on make-up sessions are based on information given by interviewees. For discussion on sustainability of providing make-up session refer to section 3.3.).

Group leaders’ responsiveness to caregivers and their children’s needs varied. In most cases, the evaluation team found group leaders have been flexible and responsive, which was confirmed by interviewed caregivers respectively. Such responsive approach included tailoring the programme’s content to the families’ children, group leaders followed up with caregivers between sessions, providing childcare and vouchers for reimbursement of travel costs from Ministry funding where needed. However, providing extra support for families did not always prevent caregivers from dropping out of the programme. A few programmes experienced high drop-out rates, which raises the question whether there are other key factors that influence caregivers’ regular attendance.

Programme experience and possible improvements

With the exception of one programme, IYAP was generally perceived as a positive experience by caregivers. Beside the educational purpose of the programme, IYAP offered caregivers a place to meet other families facing similar challenges. Many caregivers noted the programme had functioned as a support group for them and intended to maintain regular catch-ups with the other families beyond the programme.

*For me, the wonderful thing about his course is that I understand that I am not alone in this process, there are so many other families and parents in the same situation.
(Caregiver interviewee)*

The focus on individualisation to make the programme content more relatable to caregivers' children generally worked well in combination with the relatively small sized groups and the gentle pace of the programme. However, the timeframe of 2.5 hours per session pushed the limits in covering all content and engaging caregivers at the same time. Time pressure was felt by group leaders and many caregivers.

With regard to role-plays, in particular, caregivers' feedback was mixed and varied between seeing value in this practice to feeling uncomfortable with it. From observation of the evaluation team, there appears to be a link between how comfortable caregivers are with role-plays and the degree of established trust relationships within the group.

While group leaders highlighted the usefulness of vignettes to engage the group discussion, different views existed on the part of caregivers regarding the modality of playing vignettes around group discussions. Incredible Years® suggest a stop-start approach for playing vignettes where vignettes are interrupted for group discussions throughout. However, about a third of interviewed caregivers preferred to watch vignettes uninterrupted with a group discussion at the end.

Interviewed group leaders and caregivers in all programmes noted the vignettes were missing non-verbal children, which made it hard to caregivers with non-verbal children on the autism spectrum to relate to the vignettes.

*With these vignettes I'd perhaps like to see a little more variety of children and some non-verbal children. Almost all children on the vignettes are verbal. ... The grandma who was sitting next to me said what a waste of time because that is not like my grandson.
(Group leader interviewee)*

Other suggestions made by caregivers for possible improvements of IYAP include:

- IYA specific resource book.
- New Zealand-specific vignettes.
- Option to bring child along (occasionally).
- Access to database with existing support services and key contacts.
- More time on behavioural management.

While all IYAP programmes experienced absent caregivers over the course of the programme, as indicated in section 3.1.1, attendance appeared more stable in programmes that managed to establish strong trust relationships, both between group leaders and the group, and caregivers among themselves.

Achieving intended outputs and outcomes

IYAP programmes appear to be contributing to intended outputs and (short-term) outcomes – as it refers to the logic model and based on available process evaluation data. The initial analysis of the assessment data was done by the Ministry with the available data at this stage.¹⁹ Without exception, caregivers reported to have learned from IYAP. Learnings included strategies to communicate with their children and manage difficult behaviours but also deeper understanding of their children’s challenges and different way of thinking. Caregivers reported IYAP had increased their confidence in being able to support their children. Many caregivers stated the programme had helped them to accept who their children are and felt closer connected to their children.

Caregivers also observed changes in their children. For example, many children improved their language skills since the time caregivers had started attending the IYAP programme. However, some of the changes may be also linked to child’s development stages. Therefore, the evaluation team considers care in drawing any causal relationships between the participation of the caregiver in IYAP and behavioural changes in the child.

All aspects of the programme appear relevant towards achieving intended outputs and outcomes. IYAP programmes are structured in a way that enforces gradual learning. Programme content is taught in stages building upon each other. Caregivers who came to the programme to learn about behavioural management specifically (a topic that is taught towards the end of the programme) acknowledged they had to go through all the previous learning stages to comprehend subjects to their full extent.

We wanted to start at the top of the pyramid, but we had to build up to it and you can see now this how much we did. We had to do all the previous bits...they were all building and crucial. (Caregiver interviewee)

New Zealand context and Māori and Pasifika

Te Reo (Māori) language and tikanga (Māori protocols) are being incorporated in the IYA programme delivery. This is fundamental to appropriate service provision in the New Zealand context under the Treaty of Waitangi principles.²⁰ Interviewed caregivers considered the programme culturally appropriate. The holistic child centred approaches used (such as profiling the child and then documenting observations or changes with using different strategies) were valued.

The evaluation team found the Māori health and well-being model (Figure 5, over page) Whare Tapa Whā (Durie, 2004) consistently being incorporated in IYAP programmes through regular self-care practice (Figure 6, over page) and session discussions in all regions. Caregiver and whānau well-being were a key focus for IYAP sessions as well as the different dimensions of hauora (well-being).

Other Māori concepts could be also found. For example, in Hastings (Hawkes Bay) group leaders described taking what is a strengths-based approach to facilitation and engagement with parents that incorporates tikanga Māori principles, e.g. Tuakana-Teina (mutually supportive and mana-enhancing relationship), karakia, kai, laughter, providing koha (petrol vouchers or money for baby-sitting) so parents can attend the sessions.

¹⁹ Note the current data available are too few to make any claims at this stage.

²⁰ Waitangi Treaty principles include partnership, reciprocity, autonomy, active protection, options, mutual benefit, equity, equal treatment and redress. For more information see the Waitangi Tribunal website: <https://www.waitangitribunal.govt.nz/treaty-of-waitangi/principles-of-the-treaty/>

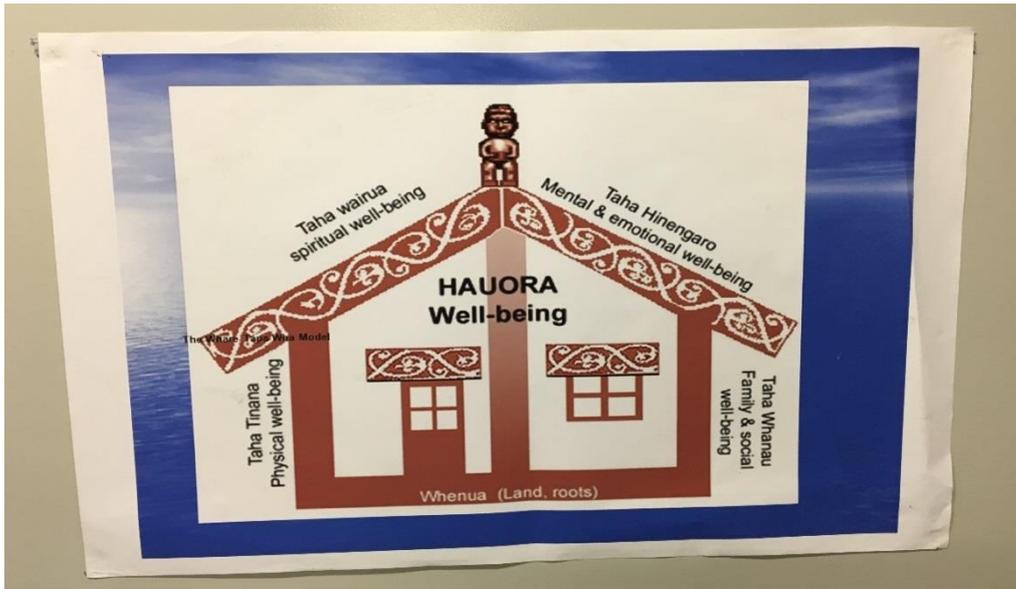


Figure 5: Te whare tapa whā' model on the wall during IYAP sessions.



Figure 6: Example of self-care kete at IYAP session

The Ministry's communication and implementation

Communication between the Ministry and providers has been through managers of Parent Provider organisations, which will be reflected on in the section 3.3. below. Overall, group leaders appreciated the Ministry was supporting IYA programmes. Where subsequent to the tendering process providers could not meet the two accredited group leaders per programme requirement the Ministry supported the programme through co-delivery.

However, the initial implementation of IYAP programmes started off with difficulties for group leaders, in particular. The implementation was widely perceived as rushed. Group leaders reported the communication was unclear at times around measurement tools and the changes in tools. Further, the “amount of paperwork” (i.e. forms) caregivers were confronted with concerned group leaders. The forms also contained too much text for participants and were considered not user-friendly.

3.1.3. Feasibility

The evaluation question for focus area *feasibility* including sustainability was question 10:

10. How adequate are our inputs and capacity (such as the workforce, the training requirements) in the Ministry of Education and the Incredible Years model to achieve the intended outcomes of the programme, now and in future? What are key considerations (if any) that would affect the longer-term sustainability of the model in New Zealand?

The evaluation team found that group leaders presented a key factor to the success of the programme. Group leaders required both strong knowledge and soft skills to educate caregivers and response to their individual needs. Therefore, appropriate training and coaching of group leaders is paramount for achieving intended outcomes of the programme.

The consult day with Peter Loft in July 2018 was widely valued by group leaders. It presented group leaders with an opportunity to directly address their questions to the American Incredible Years® team. Many reported that getting confirmation on their tailored approach relevant for the New Zealand context and having questions answered increased their confidence in delivering the programme. The consult day was also an opportunity for group leaders from all regions to meet and exchange their experiences. Such gatherings were highlighted as a way towards consolidation of the way IYAP is delivered on a national level.

When we are providing coaching and support it's more the supervision, you know, professional practice level, but the actual cohesiveness of how the programme is built in and what it's done in the different regions really could move with the progress of the programme. (Group leader interviewee)

3.1.4. Learnings to inform the impact evaluation

Evaluation questions for focus area *Learning to inform the impact evaluation* included questions 11 and 12:

- 11. How appropriate are the measures²¹ for the different groups in this initiative for the longer-term impact evaluation?*
- 12. How well does the demand for services enable a more robust evaluation approach through delayed enrolment or other mechanism (such as maintaining a register of interested participants in other locations)? To what extent could a list of interested participants (maintained as a register by providers) be used as a quasi-control group for the impact evaluation?*

Overall, group leaders were critical of the tools provided to measure impact. Some had trouble understanding the purpose or value of the tools. Group leaders expressed concern about the use of the Parenting Sense of Competence scale as they found it included inappropriate questions that may be harmful on participants.²²

Regarding the impact evaluation, there is considerable contextual knowledge and experience with providers and group leaders, which could be used to choose appropriate existing measurement tools or design new ones. Some Parent Providers mentioned they have designed their own questionnaires for collecting data for their own records.²³ The *Eyberg* measurement tool (used for the IYP basic programme) was favoured by several group leaders. Other stakeholders mentioned tools, such as the *Young children's participation and environment measures (YC-PEM)* and the *Assessment of preschool children's participation (APCP)*. These measures were identified as potentially useful for the impact evaluation as they were tested for validity and

²¹ Refer to section 1.5.

²² The Parenting Sense of Competence scale has been removed in the meantime and is no longer been used in IYAP programmes.

²³ Note the validity and reliability of these data cannot be confirmed without the appropriate process put in place to test it. This would be required for the impact evaluation.

reliability: (a) assessed on children on the autism spectrum among primary aged children (i.e. accuracy) and (b) able to be administered as a “self-assessment” by parents (i.e. feasible). The group leaders and managers requested involvement in the design and use of assessment tools given their professional expertise and experience.

The evaluation team found that profiles of children have been consistently used and maintained over the course of IYAP programmes (see Figure 7). This appears as a potential tool to be considered for the impact evaluation. The holistic approach of the child’s profiles supports the hauora (wellbeing) dimensions and strengths-based view for health and autism in the New Zealand context. Maintaining profiles have been a way of documenting changes in the child over the course of the programme and made progress more visual to caregivers.

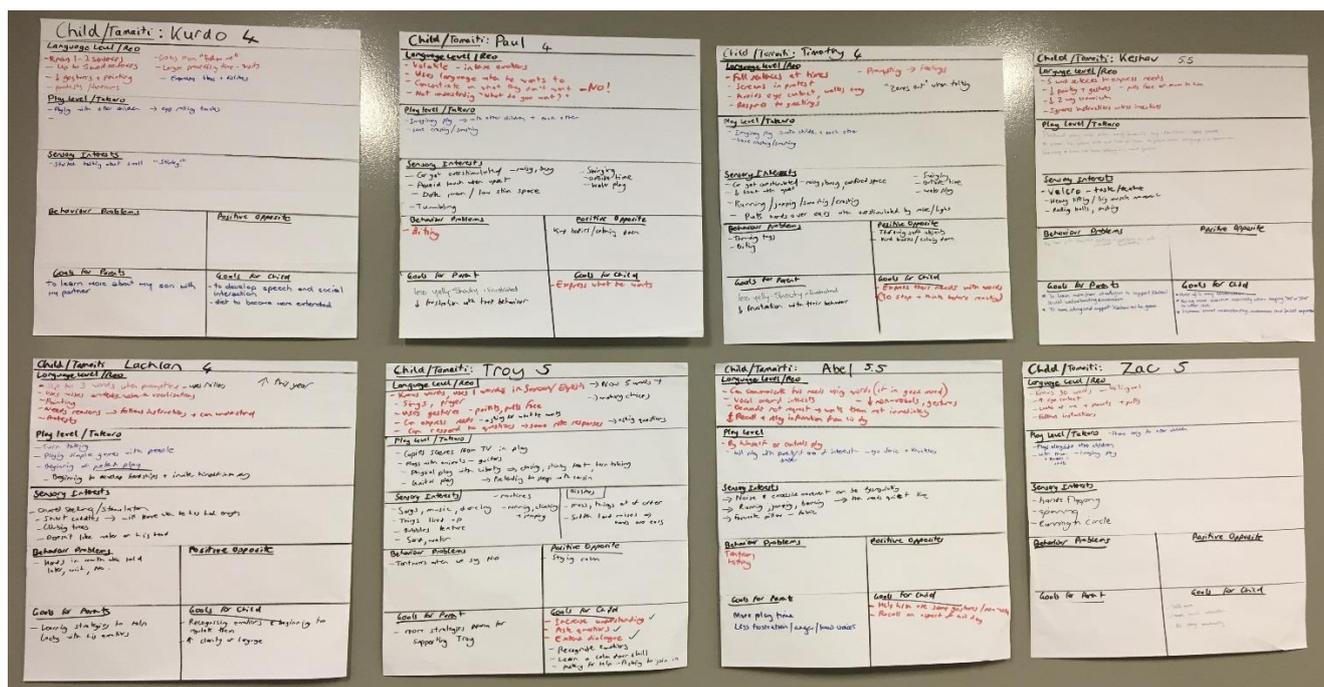


Figure 7: Example of childrens’ profiles hanging on the wall during IYAP sessions.

The evaluation team consider that providers need to be more involved with finalising administration and process and impact data to enable a more effective and collaborative process that is manageable and useful.

Based on the data collected through interviews, the evaluation team is unable to sufficiently answer evaluation question 12 (i.e. enabling a more robust evaluation and use list of interested participants as quasi-control group). However, interviewed Health sector stakeholders and evaluation specialists considered the use of families with children on the autism spectrum who are interested in participating in IYAP but on waiting lists could be used as baseline information for the evaluation. A pre-questionnaire was considered an adequate baseline measurement approach to use.

3.2. Incredible Years Autism Teacher programme

IYAT programmes are evaluated against the four focus areas. Findings in this section refer to the perspective of the on the ground programme delivery, represented by group leaders delivering the programme and participants. In the following text, participants are referred to as ‘teachers’. The evaluation team conducted interviews with group leaders (in pairs) delivering IYAT programmes in Taranaki and Christchurch and teachers (as group) in Christchurch. The Taranaki programme is being delivered by the only two IYT mentors in New Zealand. They have been trained by the Ministry to deliver IYAT and are contracted to Massey to deliver the programme and to Explore Specialist Services NZ to provide coaching support to IYA group leaders.

3.2.1. Demand, access and reach

As for IYAP programmes in section 3.1., evaluation questions for focus area *Demand, access and reach* included questions 1-4. Each question is addressed in the following in respective order.

Demand for the programme

The programme administrative data for IYAT in Table 5 suggests high demand for the programme, which is supported by the qualitative data. Teacher Providers are required to enrol a minimum of 10 and a maximum of 12 teacher participants.²⁴ Programmes have been run to their maximum or near maximum participation capacity. However, the evaluation team did not find any existing waiting lists that could provide more insight into the extent of demand for IYAT programmes. Non-existing waiting lists was explained by one IYAT group leader by the lack of an established referral system.

Table 5: IYAT regional administrative data

	Dates		Participation			How many ECEs/Schools		Participants who received at least one make up session	
	Start	End	Enrolled teachers	Attended session 1	Attended final session	ECE	Schools		
Taranaki	18-May	15-Jul	12	11	8	7	0	0	8
Christchurch	21-May	26-Jun	12	12	12	8	0	0	0
Hawkes Bay	18-Jun	23-Jul	11	10	10	9	1	1	0
Nelson	5-Jul	20-Sep	10	10	10	10	0	0	0
Bay of Plenty	24-Jul	2-Oct							
Hawkes Bay	30-Jul	3-Sep	11	11	11	11	0	0	0
Taranaki	13-Aug	24-Sep	12	12	12	12	0	0	3
Hawkes Bay	13-Aug	29-Oct							
Christchurch	13-Aug	24-Sep							
Hawkes Bay	1-Oct	5-Nov							
Christchurch	15-Oct	19-Nov							
Bay of Plenty	24-Oct	28-Nov							
Totals			68	66	63	57	1	1	11

²⁴ According to provider contracts with Massey University, which is in line with Ministry’s *Supplementary Guidelines for Incredible Years*.

IYAT presents a valuable professional development opportunity. Interviewed teachers expressed high motivations for enrolling onto IYAT:

When I saw that this course was coming up, I was very excited. (Teacher interviewee)

The skills we learning here are really important skills for teachers to have...I see things and want to support them [the children] and so we were looking for help, a connection to help us understanding these children so we can do a better job. (Teacher interviewee)

Access pathways to the programme

Interviewed group leaders and teachers confirmed that all teachers participating in their IYAT programmes had previously completed the basic IYT programme, therefore, were familiar with the IY series. Pathways used by interviewed teachers to access IYAT included:

- ECE centre manager who approached teacher.
- Own initiative- sent off an expression of interest.
- Word-of-mouth.
- Social media (e.g. Facebook).

One teacher reported to have been approached by a parent of a child the teacher was working with who was attending IYAP. While this was an individual case among interviewed teachers, it shows that interactions between IYAP and IYAT can evolve naturally without intervention of either providers or the Ministry – given, of course, that both IYAP and IYAT programmes are provided in the region.

Reach of teacher programme

Similar to IYAP programmes, Teacher Providers used their own networks for promoting IYAT. All teachers interviewed came from ECE centres and were working with a child on the autism spectrum or recognised as potentially requiring assessment. The teachers enrolled on the Christchurch teacher programme all reported they had previously attended the basic IYT programme, although there are no formal prerequisites to enrol on the IYAT programme. Therefore, teachers in IYAT programmes had good knowledge of the IY basic concepts.

Again, similar to IYAP programmes, group leaders understood the need to expand their reach and reported on intention to approach teachers in the wider region, which they described as a “work-in-progress” endeavour. It was also pointed out that, given IYA programmes had been newly introduced to New Zealand, it usually takes some time to build engagement. Group leaders reported that previous experience with IY programmes showed that engagement increases after three rounds of programme delivery.

Barriers for accessing the programme

The evaluation team did not identify any barriers for teachers accessing the programme. Teachers could be released to participate in IYAT programmes, however, appropriate lead-in time to arrange for relief teachers was emphasised (refer also section 3.2.4.). Interviewed teachers were more concerned about barriers for caregiver accessing IYAP. Assessments of the value using teacher-parent relationships to promote and reach teachers and parents for both programmes differed significantly between interviewed group leaders and teachers. While group leaders saw the interaction between caregivers and teachers as a natural way to promote both IYAT and IYAP, teachers expressed concern about approaching caregivers of children they had identified as being on the autism spectrum. Teachers explained that they often had to be the first person to use the term ‘autism’ in front of caregivers and emphasised their need to be equipped to start this kind of conversation.

3.2.2. IYAT Programme implementation

As for IYAP programmes in section 3.1., evaluation questions for focus area *Programme implementation* included 5-9. Each question is addressed in the following in respective order.

Fidelity of the programme

The evaluation team found that group leaders followed the programme and visited teachers prior to the programme. However, variations were found in terms of session frequency and length in delivering programmes. For example, Christchurch provided weekly sessions, which reportedly worked well for teachers who managed to practice learnings between sessions. Taranaki tailored delivery of the programme to align with teachers' schedules, which resulted in a combination of fortnightly and weekly sessions as well as half- and full-day blocks. While the *Supplementary Guidelines* indicate fortnightly sessions as a standard, these group leaders considered that merging session into a full-day session was reasonable where session topics were closely related. The evaluation team considers this modality requires further examination as to whether having half- or full-day sessions is an appropriate delivery modality option for IYAT programme fidelity.

Compared to IYAP programmes, attendance for IYAT was relatively stable. Only Taranaki teachers experienced some absentees. This was explained by the group leaders due to injuries and other emergency situations, for which they reportedly provided make-up sessions. The evaluation team suggests documenting reasons why teachers (and participants, in general) miss IYA programme sessions in order to track absentees and be able to respond accordingly (As with IYAP programmes, it is not clear to the evaluation team if or how make-up sessions are recorded.)

Programme experience and possible improvements

Overall, participation and delivery appear to be working well for both teachers and group leaders. Up to two teachers are attending from each ECE centre or school. The Ministry provides a contribution towards teacher release so that ECE centres and schools can release teachers to attend IYAT programmes. This way, IYAT programme sessions had been integrated in teachers' normal work schedule without requiring them to invest extra or their own leisure time. Interviewed teachers and group leaders reported reliever teachers had been booked for four hours (for weekly IYAT sessions), allowing teachers extra time for discussions and exchanges with other teachers in the group. In Christchurch, providers provided lunch to encourage such exchanges.

Teachers emphasised the value of IYAT – and the IY series, in general – lay in the practical nature of the programmes. Because they could practice new learned strategies right away with children at their ECE centres and in real situations, their learning development reportedly felt enormous and hugely effective. A key learning for teachers was that children on the autism spectrum needed social engagement.

They [the children] are quietly going about their day and it's the awareness that...these children who are not asking for attention and connection need it just as much as [other children]. (Teacher interviewee)

As mentioned above, teachers interviewed had already been involved with the IYT programmes. Teachers explained that their learnings from that basic programme were an important knowledge foundation going into the more specialised IYAT programme. However, while teachers could find some of the IY tools used again in the IYA setting (e.g. emotion strips – see Figure 8, over page), autism-specific tools and strategies sometimes profoundly differed from those taught in basic IYT programmes. Teachers reported that, for example, “getting into the child's spotlight” was neither a strategy taught in IYT programmes nor one that teachers' would

normally use with other children. Vice versa, strategies teachers learned at IYT programmes were not appropriate for children on the autism spectrum.



Figure 8: Emotion strip in kete (basket) used in IYAT session

Achieving intended outputs and outcomes

Based on the interviews conducted for this process evaluation, IYAT is showing intended outcomes in terms of increased skill set and confidence of teachers working with children on the autism spectrum. Teachers reported the programme had helped building their confidence, knowledge and skills and they felt better equipped working with children on the autism spectrum than before the programme. Resources (i.e. materials and knowledge) received through IYAT have been reportedly shared with peers at teachers' ECE centres, sometimes also with parents of children teachers were working with.

Teachers also reported on observed changes in the children they were working with since they had started participating in IYAT, which they said had been also noted by some parents of these children in their discussion with teachers. For example, some children had started talking or socialising with other children, others had developed some fine motor skills. Excitement in teachers about such achievements (as changes in children were generally perceived) were openly expressed.

We have been trying and trying to get him [the child] to socialise and then we are learning this technique of getting in their spotlight and doing a commentary about what they are doing...it's been like being on steroids, which is not what we normally would do with other children...well, our wee guy, he is now actually playing with other children in the last months or so...That was like a real wow! It was amazing! (Teacher interviewee)

It was a life-changing experience for us as teachers to know that we can change his [the child's] life. (Teacher interviewee)

New Zealand context and Māori and Pasifika

Based on the evaluation team's observation, group leaders have incorporated cultural protocols, including karakia (welcome) and kai (food) as part of the programme sessions. With a holistic and well-being focus, the programmes appear to align with Māori hauora (wellbeing) concepts. This IYA wellbeing focus is a key factor for the tailored IYA programmes aligning with the New Zealand health context. However, the evaluation team noted that the vast majority of teachers were New Zealand European. This is an area that requires further examination (for example, by examining consistency of this finding with IYT programmes where sufficient ethnicity data is available).

The Ministry's communication and implementation

Communication with the Ministry was through Massey University and will be discussed in section 3.3.

3.2.3. Feasibility

As for IYAP programmes in section 3.1., the evaluation question for focus area *Feasibility* referred to question 10.

As mentioned above, the Ministry provides a contribution for teacher release for teachers attending IYAT programmes. This approach appeared to work well for teachers.

A group leader pointed to the usefulness of keeping the structure designed by Dr Webster-Stratton (i.e. accredited group leaders become peer-coachers who become mentors) and suggested regular get-togethers (e.g. every 6 months). This was seen particularly important at the current stage where everybody is still learning. In this context, the consult day was mentioned as critical part of the learning process and beneficial towards group cohesiveness of group leaders, not just on a regional but also on a national level. Group cohesiveness was stressed in terms of knowledge sharing and continuous learning, which was felt as very important given the complexity of the programme. Further, it was argued that it was important to keep tailoring the programme alongside the learning process.

We have other programmes here in New Zealand which are funded by the Ministry of Health and I think it is really important that all these programmes at some point are joined up so it is seamless for parents, seamless for families. I think that's got to be a goal.
(Group leader interviewee)

3.2.4. Learnings to inform the impact evaluation

As for IYAP programmes in section 3.1., evaluation questions for focus area *Learning to inform the impact evaluation* included questions 11 and 12.

The relevance of the measurement tools was not clear to teachers. Teachers felt the questions were confusing and repetitive. Further, various teachers noted that the language and type of communication referred to in the tools did not respond to those used at ECE centres. Another teacher suggested the measurement tools should be tailored to the learning development process during the programme.

Group leaders also felt the measurement tools required some more work. Some group leaders noted the 'Positive Behaviour management – Time-out' tool, in particular, was neither autism nor programme sensitive as it is not an appropriate strategy to apply to children on the autism spectrum. This was also noticed by teachers.

3.3. Workforce for IYA Parent and Teacher programmes

In this section, evaluation focus areas *Demand, access and reach, Implementation* and *Feasibility* are addressed from the perspective of the workforce, represented by Massey University (in their capacity of umbrella contractor for all IYAT delivery contracts) and the managers of four Parent Providers and one Teacher Provider. Neither Massey University nor managers of Parent Providers have been involved in the use of assessments in the programme, hence the focus area *Learning to inform the impact evaluation* is not covered in this section.

3.3.1. Demand, access and reach

Providers initially used their own networks to reach out to families and teachers interested in and eligible for the IYAP and IYAT programmes. In multiple cases this worked well with providers meeting sufficient demand to deliver IYAP and IYAT programmes in the first year of cohorts. Where providers could not fall back on existing networks the Ministry provided advice. For example, in Christchurch the Parent Provider was advised to build new partnerships and collaborative relationships. They then systematically identified potential partners who were contact points for families with children on the autism spectrum (e.g. existing service providers, children with diagnoses, adaptive education and intervention centres, etc.) and contacted them to recruit caregivers. The manager reported they intended to maintain this approach as it had worked well for them.

On the part of IYAT programmes, demand is believed to be high and the need to educate teachers how to work with children on the autism spectrum was stressed. IYAT presents an attractive professional development opportunity and is seen as an “easy sell” to teachers. Given the perceived high demand among ECE teachers, the numbers of provided IYAT programmes was considered as insufficient for the demand.

With regard to access and reach, the question was raised whether, from a strategic point of view, the selected locations for IYAP and IYAT delivery had been the most appropriate. Particularly if a priority was to reach Māori and Pasifika families, other regions such as Gisborne or Whangarei could have been considered. Current delivery areas also did not include especially low social economic areas or rural regions.²⁵

3.3.2. Workforce implementation

Because of the different contracting modalities for IYAP and IYAT, relationships and communication between the Ministry and Parent Providers differed from those to Teacher Providers.

The evaluation team found the Ministry and Parent Providers managed to build respectful relationships and were collaborating well. Despite inconveniences regarding the changes to the suite of measurement tools being used for the evaluation (mentioned in section 1.5. and in 3.1.4.) and uncertainties around how far to market the programme, communication from the Ministry was generally perceived positively by Parent Providers and the Ministry has been responsive to providers’ needs.

I think they [Ministry programme team] have worked really hard and did the best that they’ve been able to and been quite responsive. Whenever we had a worry, they did their best to follow up on that. (Parent Provider manager interviewee)

For all providers except Te Whānau Kotahi, IYAP and IYAT had been delivered for the first time. The programme was considered to be at the initial implementation stage. Providers reflected on learning from delivering the programmes to the first cohort and considered improvement for future programmes.

²⁵ Note none of these regions had providers responding to the open tender for IYAP programmes or have been approached by Massey University.

They have had to get familiar with it [the programme] and know how it would work on the ground with the parents. So, I think each programme will become better and better because they will be more comfortable with the concepts and the way you have to work and the parents they are working with and so forth. I think, it will become much smoother as they progress to deliver each programme. (Parent Provider manager interviewee)

Parent Providers have been mindful of the challenges caregivers face. Most providers have made efforts to accommodate caregivers' special needs and make it easier for them to attend the programme (e.g. using Ministry disbursements funding for petrol vouchers and childcare and carrying out make-up sessions, home visits and follow-ups) as explained in section 3.1. Some Parent Providers offered further services on their own initiative, including two full extra sessions to allow more time going through the programme's content or providing caregivers with autism information material they could hand out to people when needed.

Overall, the evaluation team observed that the more flexible providers were to respond to caregivers' needs that higher the attendance in the programme. However, the time commitment of the programme combined with the constraints of families remains a challenge.

With the parents, though – and time will tell, I guess – the lengths and number of sessions: how that is actually going to go for parents that we are talking about? [Families] that have already a lot of pressure and a lot of competing demands and a lot of professionals involved in their lives...wondering whether there is a sustainability issue...We had families who found it difficult to sustain for the whole time. (Parent Provider manager interviewee)

The delayed roll out of IYAT programmes caused challenges in aligning IYAP and IYAT programmes, which affected the recruitment of teachers and the ability to comply with formal protocols.

The Ministry's guidelines for IYA provided that priority was to be given to:

1. Kaiako (teachers) working with a child whose caregiver was participating in IYAP, then
2. Kaiako (teachers) from early learning services who are working with a child on the autism spectrum.²⁶

It was reported that Teacher Providers recruited solely according to the second priority criteria. Also, in some cases, where the IYAT programme started before the IYAP in the same in region, the procedure outlined in the *Supplementary Guidelines* to seek consent from caregivers allowing Teacher Provider to contact their child's early learning service or school could not be applied.

Overall, the implementation was perceived as rushed. For the alignment of IYAP and IYAT, in particular, the timing was crucial to be able to link up programmes with regard to receiving and sharing information of referrals and planning accordingly. For the first cohort of IYA programmes interviewed, this was not achieved.

The Implementation Review Day in August 2018 provided an opportunity for providers of both programmes to meet, exchange and discuss possibilities to address challenges. Interactions between providers as well as group leaders delivering either IYAP or IYAT was generally perceived as beneficial.

I think this [the implementation review day] was a really good initiative because I think that networking between providers is a great learning opportunity about what's worked well and what hasn't worked well. (Parent Provider manager interviewee)

²⁶ The Ministry of Education, *Supplementary Guidelines for Incredible Years*, p. 12

At the Implementation Review Day providers also discussed with the Ministry the sustainability of providing make-ups for sessions participants had missed. IYA providers found three make-up sessions was sustainable for them to provide with the funding available.

3.3.3. Feasibility

Regarding the sustainability of IYA programmes, the evaluation team found IYA programmes had both strengths and constraints. Interviewed Provider managers assessed the contract funding as realistic²⁷ and saw benefits for them in terms of the established professional development pathways and accreditations.

However, a lack of available group leaders to deliver IYAP and IYAT programmes have been signalled as a constraint in various regions. Two IYAP programmes (Christchurch and Bay of Plenty) have been co-delivered by the provider and the Ministry in order to meet the requirement of two accredited group leaders per programme, because providers alone could not meet the requirement. In this context, a critical issue seems to be the capacity of trainings for accreditation of group leaders. For example, Christchurch reported they had difficulties to get training spaces for potential new group leaders. In view of possible expansions of the IYAP programme and requirement of IYA accredited group leaders, the need for enough training places for new group leaders to ensure sufficient capabilities for offering more IYAP programmes was seen as critical.

A possible partnership between the Ministry and providers in the governance of the programme was suggested. This would allow combining knowledge from all angles (i.e. service delivery on the ground, contracting, project management, etc.) and key documents could be developed, such as Terms of Reference and standards. Value was seen in relationship building and collaboration, which may also allow the creation and support of professional networks.

²⁷ Note only managers of Parent Providers had been interviewed.

3.4. Ministry of Education role

The evaluation team conducted interviews with both co-leaders of the IYA programme at the Ministry and a Ministry evaluation staff member involved in the programme. Views of stakeholders the evaluation team interviewed are incorporated in this section representing a strategic and national view.

3.4.1. Demand, access and reach

While responsibility to market IYA programmes and recruit participants is with the providers, the Ministry had a role in the overall communication and targeting strategy. Here, the Ministry had been faced with several challenges in measuring demand, making the programme accessible, and reaching focus groups. However, it also proved itself as being adaptive and responsive.

For example, given the focus of IYA on children aged between two and five, there are challenges in identifying children on the autism spectrum in this age group. There is no systematic screening for autism in New Zealand, therefore children at the age of two often have not been diagnosed. This makes measuring the potential demand for IYA programmes difficult. The Ministry responded to this situation by removing the eligibility criteria of a diagnosed child for IYA programmes in New Zealand, which has been positively acknowledged by both programme providers and participants. However, uncertainty about demand levels (in statistical terms) and patterns (demographic and geographic) remain a challenge. The evaluation team suggests a more formal approach asking providers to substantiate waiting lists. Currently, providers choose how to manage waiting lists.

In addition to the late diagnosis issue, identifying children within the IYA target population is challenged by the need for these children to be exposed to contact points linked to IYA programmes (such as ECE centres), which may not always be the case. The lack of exposure to contact points is likely to be found with children from families with lower socioeconomic status, which creates a potential gap for IYA programmes. Further, families themselves may also not recognise or misperceive their child's behaviour – characteristic of the autism spectrum – and do not seek for help, which also makes it difficult for these children to be identified.

3.4.2. Programme implementation

The Ministry took on the coordination for IYA programme in New Zealand. In this capacity, the Ministry managed contracts for IYA programmes delivery, provided advice to providers where needed and organised events, such as the consult day for all group leaders and the implementation review day for all providers. Overall, the evaluation team found the Ministry performed well on these tasks, which is evident in the feedback discussed in the previous sections.

The delayed roll out of the Teacher programme has impacted on the links between the parent and teacher programmes in the regions. However, the evaluation findings showed there were links, for example, in the Christchurch region between IYAP and IYAT programmes. This has resulted in a shared knowledge and understanding around a child of relevant strategies. Further, one of the teachers in an IYAT group discussion reported they were made aware of the teacher programme by a parent attending the parent programme.

The Ministry outlined in the Implementation Review Day held in August 2018 with providers (see Appendix H) and in the 2019 planning that the links between the two programmes will be strengthened with increased forward setting of dates for 2019 programmes. This forward planning is part of the programme consolidation activities undertaken by the Ministry to enhance programme outcomes and impacts.

The Ministry is underway with these consolidation processes in place in response to feedback from providers on review days and their internal awareness of the three-month minimum lead in time required to enrol parents and teachers on the IYA programmes. A clear understanding about the required length of lead-in time was not established for the first cohort of IYA Teacher and Parent programmes and this has been part of the learning for the Ministry and providers.

Increased lead in time will assist providers to undertake the appropriate pre-programme screening and support arrangements, particularly for parents. This support is reported as essential to support high levels of programme attendance and programme fidelity, which are recognised as adding the most value from both IYA Parent and Teacher programmes.

3.4.3. Feasibility

The Ministry plays a role as funder of IYA programmes. IY programmes have clearly defined professional development requirements and accreditation processes for group leaders. These requirements and accreditation processes have been causing constraints during the initial IYA implementation. Accreditation in the basic IY programme is a requirement for IYA group leaders. While there are many IYP and IYT group leaders in New Zealand only a few are accredited as accreditation is costly. Another constraint is the low number of IY mentors available in New Zealand to provide coaching to support the workforce. The workforce implications are key considerations in the feasibility of this programme in New Zealand. The Ministry is working to overcome these constraints with implementation and workforce planning for 2019.

3.4.4. Learnings to inform the impact evaluation

The evaluation team found that communication with providers and group leaders, in particular, around the impact measurements could be improved. The Ministry has noted a more collaborative approach is preferred but was not possible for the first cohort due to the rushed initial implementation. A more systematic and collaborative approach is now being used by the Ministry programme and evaluation personnel incorporating a qualified clinical psychologist for specialist advice and inputs from this process evaluation. Stakeholders request a steering group is used to provide oversight and support on measuring progressing and impacts. This group needs to include a user perspective from on the ground representatives (such as providers).

The roles in the data collection and ownership of the data was not clear to the evaluation team. The Ministry acknowledges that the initial implementation of these tools and the measurement approach was variable – as they would expect whenever embedding any new aspect into an emerging business process. In terms of the data collection the evaluation team consider the current paper-based system and manual data entry into spreadsheets is not ideal as is resulted in incomplete data and is causing contractual issues for providers and the Ministry. This system was adopted from the basic IYP and IYT programmes and initial implementation of IYA programmes did not allow for the development of a better system. Spreadsheets are also used as triggering payment from the Ministry to providers and for managing teacher release contributions for IYAT participants.

However, with some stakeholders requesting and the evaluation team consider by providing a digital platform for IYA with a database for providers to enter directly in their waiting lists, attendance data, and output, outcome and impact data may improve transparency, segmentation data of participants, accuracy and timeliness on IYA programmes.

3.5. Retrospective Counterfactual – IYA programmes

The retrospective counterfactual technique is a recognised technique in evaluation.²⁸ In this context, the following question is posed: *What would have happened without the IYA Teacher and Parent IYA programmes for participants?*

From the interviews and observation, the evaluation team found that the starting point for IYAT programmes was low in terms of autism specific knowledge levels. All teachers (N=14) reported very low confidence and had little to no prior knowledge on autism or of any relevant teaching strategies. Two teachers reported how they had struggled to engage an 18-months old child (they identified as on the autism spectrum) in class activities. However, after three sessions of attending the IYAT programme and using more explicit engagement activities the child started engaging not just with the teachers but also with other children. This is only one of many similar examples reported on by teachers, indicating that without IYAT programmes being offered there was likely to be no expansion of knowledge or improved practice in educational environments for children on the autism spectrum. Knowledge and resources gained through IYAT programmes were also being sought by other colleagues within early childhood settings. The IYAT programme is filling a recognised gap in educational training and practice for teaching children on the autism spectrum.

For caregivers, there were reported programmes such as Autism Plus, which is assisting parents increase knowledge about autism. However, caregivers considered the available courses did not cover practical strategies for social engagement and wellbeing of caregivers and their families. A positive aspect of IYAP was that programmes provided caregivers with a support group, which appears to continue after programme completion (e.g. through regular play dates or social networks such as Facebook). Caregivers reported they felt isolated and were lacking support from outside the family before coming on the IYAP programme. There are opportunities here for the Ministry to support wider communities of practice and follow on support to maintain networks and provide further links.

²⁸ Gertler, P., Martinez, S., Premand, P., Rawlings, L., & Vermeersch, C. (2011). *Impact Evaluation in Practice*. The World Bank

4. Evaluation Conclusions

The initial programme intent for IYA (see section 1.4.) was adjusted during the initial programme implementation. Adjustments had to be made in response to identified issues and stakeholder feedback as discussed in the findings of the present report (section 3.). Stakeholders unanimously reported perceiving the initial programme implementation was rushed. In the course of this process evaluation and through stakeholder engagement the original design of the IYA programme logic model was updated. The updated model is presented at the end of this section (section 4.5.).

Based on the updated model, the evaluation team concludes that, overall, the IYA programme is being implemented successfully for IYAP/IYAT programmes dimensions while dealing with workforce constraints. Stakeholders involved in the initial implementation (i.e. the Ministry, providers and group leaders) have worked consistently to get the initial implementation phase well underway. Reports from IYA programme participants (caregivers and teachers) on changes with strategies and confidence, and children on the autism spectrum indicate the programme is and will positively impact further on the lives of children on the autism spectrum. This is through more educated and skilled key people around them using consistent and relevant strategies. These observed changes are in line with findings of international studies outlined in the literature review. However, there are constraints that potentially affect the sustainability of the programmes and consolidation is required.

4.1. Demand, access, and reach

The following conclusions are made:

- **There is not enough information available to assess the real demand for IYA programmes.** Statistical data on children on the autism spectrum in New Zealand appears not to be available. Information on the demand are based on stakeholders' experiences. From the first round of IYA programmes, differences between IYAP and IYAT became apparent. There had been challenges for some Parent Providers to fill their IYAP programme while others had enough families to choose from. Struggles of Parent Providers seem to be due to promotion and outreach issues and do not necessarily reflect on lack of demand. For IYAT, there seem to be consensus among stakeholders that there is high demand for the programme among teachers. There also do not seem to be alternatives to IYAT in New Zealand.
- **IYAT programmes are a professional development opportunity for ECE teachers,** which could be linked to the Professional Learning Development strategies in each region and educational organisations. There is an opportunity to have more IYAT programmes led in regional New Zealand. This would assist addressing the recognised knowledge and skills gap for educators and benefitting children on the autism spectrum more widely.
- **Access appears to be through existing networks rather than systematic channels.** There seems to be a knowledge gap in terms of awareness about the IYA programmes. Proactive families who are integrated in providers' networks seem to be more advantaged in accessing the programmes. While there is no consistent ethnicity data available, it appears there is an access gap for Pasifika families, in particular. There are some links to Health networks as some providers already have links established through their profession. These and other links can be extended and strengthened to support more inclusion and equity, i.e. Pasifika and iwi networks.
- **IYA is reaching families with children on the autism spectrum and teachers working with children on the autism spectrum.** All participants of IYA programmes were dealing with children on the autism spectrum. However, whether the programme is reaching the "right children" is a question that cannot be answered by the evaluation team. It is not clear whether there is a definition for what children are considered the "right" children. An explicit strategy statement on who exactly the target group is would help providers marketing the programme and selecting families to IYAP programmes.

4.2. Programme implementation and fidelity of the programme

The Ministry has been adaptive in its approach for the initial implementation of the IYA programmes in the New Zealand context. Initial stakeholder and provider discussions were undertaken prior to and during the implementation in 2018. Regular feedback and learning were sought from providers at the consult days, site visits and regular discussions to support implementation. The evaluation team considers this adaptive approach and the responsiveness by the Ministry has contributed to the increased appropriateness and programme fidelity of IYA programmes in the diverse regional and cultural settings in New Zealand context. This has been a key lesson learned. Further, the evaluation team also found having an evaluation alongside the implementation process is good practice and allows for responding to emerging issues and stakeholder feedback in a timely manner. The Ministry IYA programme manager reported to find this practice useful during implementation and delivery.

Conclusions from the programme implementation (incl. programme fidelity) are:

- **IYA programmes are still developing** and the evaluation team considers a programme maturity level based on the Portfolio, Programme and Project Management Maturity Model (P3M3, of the UK Office of Government Commerce OGC) of somewhere between 2 (repeatable process) and 3 (defined process).
- **There is strong evidence that IYA programmes increase caregivers and teachers' confidence and skills.**
- **Fidelity of the programmes was evident.** Group leaders followed the programme. The consult day is vital for group leaders to have questions answered and get confirmation on their approach, which they do not receive otherwise.
- **More interaction between IYAP and IYAT is needed and opportunities for group leaders to meet, share knowledge and experiences, and develop best practice collaboration.** Similar to the consult day, further gatherings between group leaders were suggested to consolidate approaches in IYA programme delivery and for tailoring of programmes in the New Zealand context.
- **Challenges in the first cohort for IYAP.** There was higher and more stable attendance in IYAT programmes whereas attendance in IYAP programmes was more sporadic with a number of families dropping out of the programme. While flexibility and responsiveness to caregivers needs seem contributing factors to the success and fidelity of the programme, the key factor appears to be the degree to which a group is able to bond. The closer the bond between group leaders and participants, and participants with each other, the higher the attendance rate and the lower the drop-out rate. Group leaders play a key role here.
- **There is more pressure on caregivers to attend IYAP.** IYAT is integrated in teachers work schedule and supported by ECE centres and schools. For caregivers, on the other hand, participation in IYAP means an additional time commitment. Challenges for families with children on the autism spectrum are enormous, which affects their ability to commit to a 14-week programme. A key variable seems to be resources available, which impacts on better resourced families who are more likely able to commit to the time required by the programme. There is a risk of missing out families with lower socioeconomic status and hence particularly vulnerable children, which requires regional monitoring and manageable support.
- **Varying pre-existing knowledge levels and expectations of caregivers in IYAP programmes.** IYAP group leaders found groups of caregivers with consistently high knowledge levels or consistently low knowledge levels or mixed knowledge levels. Each scenario presented different challenges for group leaders. Well informed groups came with high expectations and specific interests to the programme, which group leaders had to balance against the programme's content and sequence without demotivating caregivers. Groups without any previous knowledge on IY or ASD required group leaders to spend time on building a basic knowledge base before getting into the actual IYAP content. A group

with mixed experiences challenged group leaders in finding the right pace that was not too fast for less informed caregivers and not too slow for more informed ones.

- **Building on from knowledge gained in basic IY programmes.** Many caregivers and teachers had attended the basic IYP and IYT programmes and were familiar with general IY concepts. Both caregivers and teachers reportedly found it useful learning basic concepts first and building specialised knowledge from there.
- **Alignment of IYAP and IYAT programme should still be a goal.** The value in providing both IYAP and IYAT programmes in parallel was seen by parent participant, teacher participant and providers alike. Having two entry points into the programme (i.e. through parents and then referring teachers, and teachers who then pass on details about the IYA programmes to parents) supports the IYA programme intent.
- **Consistency in using strategies is important.** The importance of having everybody who is regularly interacting with the child on the autism spectrum “on the same page” (i.e. using same strategies and language) was realised and stressed by both caregivers and teachers as well as group leaders. Otherwise, frustrations arise to lose momentum with strategies having limited effect on the child.
- **There were reported changes in children’s behaviour.** Both caregivers and teachers noted observable changes in children while they participated in IYA programmes and used strategies learned there. These changes may have occurred as a result of the programme. However, some of the changes may be also linked to child’s development stages. Therefore, the evaluation team consider care in drawing any causal relationships between the participation of the caregiver in IYAP and behavioural changes in the child. This can be looked into further over the impact evaluation part of the IYA evaluation.
- **There is potential for extended (but not measured) impact of IYAP** given that some families have more than one child on the autism spectrum (including older children who are outside IYA age-range). If caregivers are more engaged and empowered to manage challenging situations with their children, all their children benefit.
- **National coordination of IYAP and IYAT is still required while providers are building their networks.** Building networks – both on regional and national level – is important for sharing knowledge and building an IYA community, which is beneficial for both teachers and parents – and makes it easier for families, in particular, to move around in New Zealand with linked services and networks.

4.3. Feasibility

There are constraints over training IY and IYA group leaders and being accredited. The pipeline of both needs to be considered as IY experience is a prerequisite for IYA group leadership.

- **The fragile workforce is a sustainability risk.** A key lesson learned was the importance of workforce capacity planning to ensure sufficient coverage and availability of trained group leaders across the regions. The recruitment and training of group leaders and mentors group leaders is vital for the sustainability of IYA programmes in New Zealand. Group leaders play a crucial role for the success of IYA programmes, and they require both considerable understanding and knowledge of the programme’s content as well as the soft skills to foster group bonding. In some regions, there appears to be no back-up if any of the current IYA group leaders falls out. Lack of workforce was one of the reasons why IYAP and IYAT coverage in all regions could not be established in the first cohort.
- **There are constraints with regard to expanding workforce.** Because there are currently no accredited IYA trainers in New Zealand, all trainings and consultations have to be done by accredited IYA trainers from overseas. Scheduling more training and consultation days depends on trainers’ availability, which is limited. There are also significant cost implications with this approach.

4.4. Learnings to inform the impact evaluation

The following conclusions are made:

- **Selection of assessments had to be adjusted.** Three measurement tools have been either withdrawn or replaced during implementation because they were not considered ethical based on provider feedback. Selecting appropriate assessments requires autism-specific knowledge and psychological expertise. The need for technical advice on IYA appropriate assessments has been acknowledged by the Ministry.
- **There is considerable contextual knowledge and expertise with providers and group leaders.** It was predominately group leaders who provided feedback on assessments that were not appropriate to use in an IYA context, to which the Ministry responded accordingly.
- **Lack of understanding of the purpose or value of assessments among group leaders.** It is part of group leaders' responsibility to ensure IYA participants are completing evaluation forms and forms are returned to the Ministry. As such, group leaders play a key role in the data collection. However, many group leaders reported to not understand the use of the measurement tools, which may affect the thoroughness in the data collection. A more collaborative approach where group leaders are consulted and/or included in the selection of assessments may improve both the data collection and quality of data collected.
- **Collection of administrative data:** During the initial implementation, data was collected in paper form and then manually entered into excel spreadsheet. This process was adapted from the basic IY programme as most providers were familiar with it. Due to the rushed implementation there was also no time to develop an alternative system. However, this process affected quality and time of data entry. Providers and the Ministry both reported that an electronic system would enhance the data collection. In addition, using a cloud-based system may improve accountability of administrative data and follow up processes for impact measurement.
- **Incomplete administrative data.** The evaluation team found the administrative data on socio-demographic profiles, locations and ethnicity of families with children on the autism spectrum was either not available or incomplete for analysis.

4.5. Updated IYA programme model and assumptions

Based on the process evaluation findings, the IYA programme model was updated (see Figure 9, over page). The updated model now includes two entry pathways into IYA programmes – through teachers and parents.

The following key assumptions underpinning the updated model were also noted.

Incredible Years Autism – Parents programme:

- Sufficient/enough parents/child who can commit to 14-weeks programme.
- Trained group leaders (have had IYA experience).
- Mentor/coach per group leader (2 sessions).
- Make up sessions outside scheduled time (3 max).
- Links in networks cover region to support inclusion equity.

Incredible Years Autism – Teachers programme:

- Enough trained group leaders.
- Sufficient teachers keen (6 sessions).
- Links are active between IYAP and IYAT providers in each region (transparency).
- Teachers identify children/approach ministry of education regional.
- Sufficient coordination between regions and providers (national).

Prerequisites and requirements – includes prior knowledge and experience for parents and teachers before entering programmes.

- Child 2-5 years on spectrum.
- 1-2 caregivers/parents per child.
- Support can be provided (travel, child care).
- Sufficient number in courses.
- Can attend 11/14 sessions at location (retention).
- Three make ups to follow up (completion).

Incredible Years Autism Model and Theories of Change

Updated September 2018 (under development)

Key: Green - focus for process evaluation

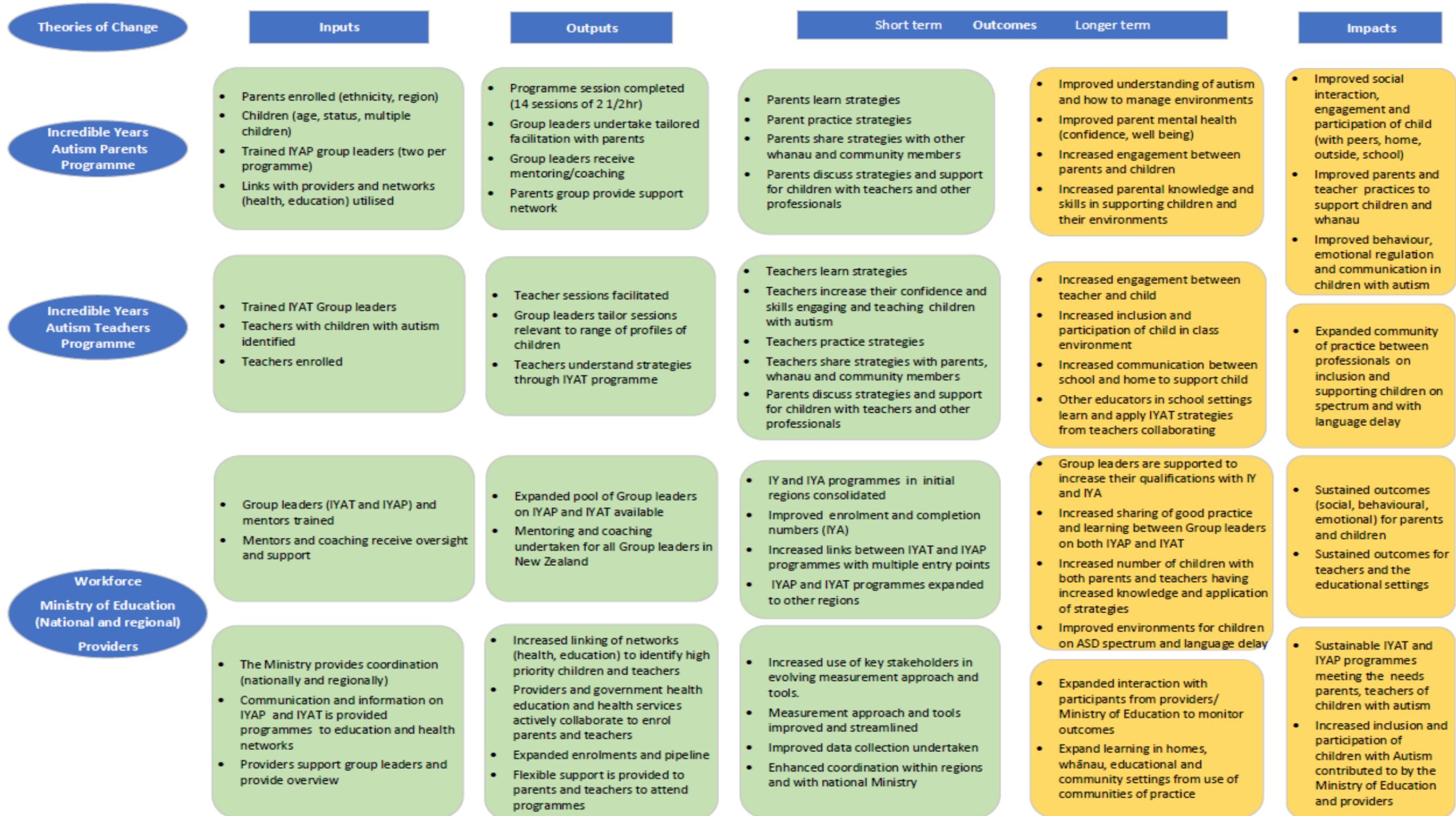


Figure 9: Updated Incredible Years Autism Programme model

5. Recommendations

The following recommendations for consideration are documented by the evaluation team.

5.1. Demand, access and reach

1. Consider for regional Ministry offices to take a greater role in bringing together stakeholders from both Education and Health in support of a cross-sector approach with the aim to systematically identify and record identified children on the autism spectrum (including those children eligible for IYA) and their families.
2. Advise providers to utilise more inclusive systematic approach for reaching families and teachers to ensure equity and inclusion.

5.2. Programme implementation and fidelity

3. Expand IYAT programmes to provide increased teacher professional development opportunities and aligning with IYAP programmes in regions.
4. Consider examining further whether having half- or full-day sessions is an appropriate delivery modality option for IYAT programme fidelity.
5. Link teacher professional development to professional learning development (PLD) spiral action research focus to embed and expand learning within education settings.
6. Keep national oversight with Ministry coordinating IYA programmes to allow regions more time to establish networks and consider transitioning coordination to regions from late 2019.
7. Continue collaborating with providers (including IYA group leaders) and consider they have a more active role in the governance of IYA (e.g. through integrating them in the development of common IYA terms of reference and representatives on the Steering Group). (This may also support Recommendation 7. in view of the transitioning to coordination within regions.)
8. Consider the usefulness of having caregivers to complete basic IYP programme before enrolling onto IYAP to ensure participants have similar knowledge levels or, alternatively, the feasibility of providing a crash course on IY basic concepts prior to IYA programme start for participants without IY experiences.
9. Consider further tailoring of IYA programmes to New Zealand context, including New Zealand vignettes – while increasing vignettes with non-verbal children – and development of IYA specific resource book. (However, developing an IYA specific resource book raises copyright issues that would need to be addressed with the American programme developer.)
10. Providers need to continue building networks, including among themselves and regional offices and health services.

5.3. Feasibility

11. Consider how to ensure sufficient group leaders are trained in all regions, and are supported to become accredited IYA group leaders, peer coaches and mentors. (Workforce sustainability and value for money are two areas to be looked at in the course of the impact evaluation.)

5.4. Impact evaluation

12. Consider streamlining data collection for 2019; consolidating administrative (including socio-demographic information), waiting lists, reporting and impact data (ideally) in digital form in support of an improved and systematic database for IYA.

13. Consider including user representatives (e.g. provider) to the Programme Steering Group overseeing and supporting the identification and confirmation of impact measuring approach and tools in order to make considered decision of what is useful and feasible.
14. Ensure purpose of assessments is clearly communicated to group leaders so they know what to consider and can answer questions when collecting data.

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Appendix A: Assessment Tools

Pre-enrolment questionnaire

This form should be completed by individuals registering an interest in the programme, and will be used by the Ministry of Education for reporting statistics for the IY programme and assessing demand for IYAT/IYAP service. Any analysis will be about groups rather than any one individual, and your answers will be aggregated and kept anonymous.

1. Today's date: / / (dd/mm/yyyy)_

2. What is the main reason the participant is accessing the programme? __

To access support for myself or family \ I have to \ There is nothing else available to me

Other: _____

3. How did the participant hear about the programme? (please circle):

*Ministry of Education Early Intervention team \ Health-care professional \ ASD
Coordinator \ CDS \ Kindergarten*

Other: _____

4. City currently residing in: _____

5. Ethnicity (please circle all that apply):

European/Pākehā \ Māori \ Pasifika \ MELAA \ Asian \ Other

6. Relationship to the child (please circle):

Parent | Relative | Teacher | Other

7. Date of planned enrolment (if known): _____

Parents or relatives (Questions 8-10)

8. Has your child been diagnosed with autism?

Yes | No

9. If "No" (Question 8): Has your child going through the autism screening process now?

Yes | No

10. How old is your child? ___ years old

Teachers (Questions 11-12)

11. Have you had any other professional development to support children with autism?

Yes | No

12. Have you been invited to the IYAT programme to support a specific child?

Yes | No

Page Break

Privacy statement

We are collecting information for the purposes of reporting statistics for the Incredible Years Autism programme and assessing demand for IYAT/IYAP service as part of the formal evaluation.

Any analysis will be about groups of individuals rather than any one individual and your answers will remain anonymous. We will publish the findings of our evaluation, but the published findings will not identify any individual who participated in the evaluation process.

We will not disclose any personal information collected to third parties unless we are required to do so by law.

The collection, storage and use of personal information will be in accordance with the Privacy Act 1993. Under that Act, you have the right to access, and request correction, of any personal information that we hold about you or your child.

QUESTIONS FOR IYP INTERVIEWS

How did you hear about the course?

How old are your children? What is the age of the child you want specific support for?

Is this child in your full-time care? (If not, how often do you have him/her with you?)

The challenges and successes you are having?

This course is going to be on Mondays from 10.00am. – 12.30pm. Will this time suit you?

This course is an adult learning zone, have you got some plans/ideas for your children's childcare on a Monday morning?

Yes No

(If applicable ask the relevant childcare questions.)

A requirement of this course is to attend all 14 sessions. What might make it difficult for you to participate and how can we support you to overcome these barriers?

Do you have your partner's support to attend the course? How well do you work as a team in your parenting?

How comfortable are you in groups? What will help you to feel comfortable? *(Small group)*

There will be reading and writing within the course: How comfortable do you feel about that? What help would you need?

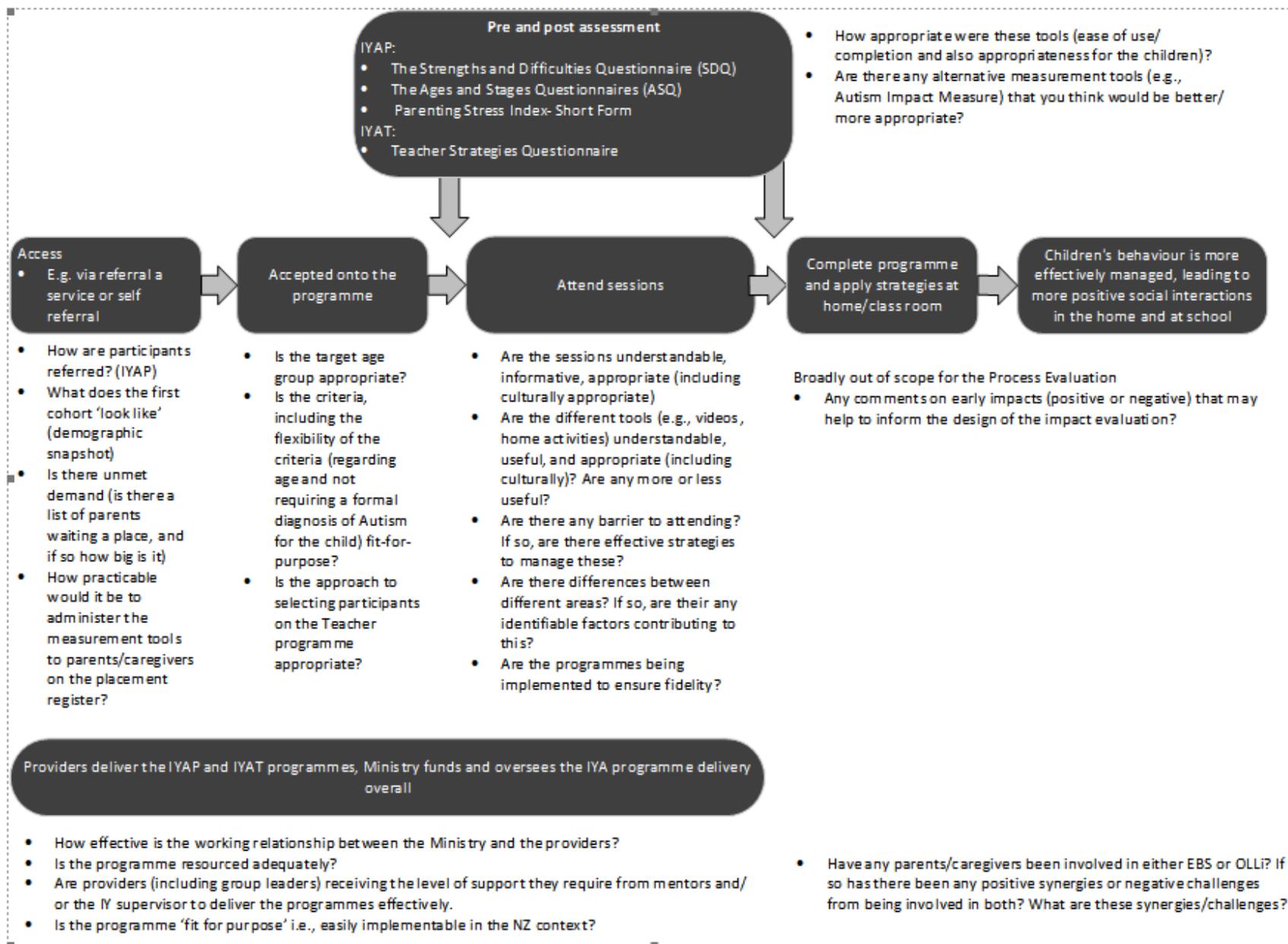
Would you require help with transport: Yes/No

We provide morning tea, is there any food you cannot eat?

Do you have any allergies we need to be aware of?

We aim to be respectful and inclusive of everyone, are there any cultural needs we need to be aware of for you to feel comfortable in a group setting?

Do you have any questions?



Rectangular Snip

Instrument Title: Autism Parenting Stress Index (APSI)
Instrument Author: Silva, L. M. T., & Schalock, M.
Cite instrument as: Silva, L. M. T., & Schalock, M. . (2012) . Autism Parenting Stress Index (APSI) . Measurement Instrument Database for the Social Science. Retrieved from www.midss.ie



Date: _____ Name of child: _____ Person completing checklist: _____

Autism Parenting Stress Index

Please rate the following aspects of your child's <u>health according to how much stress it causes you and/or your family</u> by placing an X in the box that best describes your situation.	Stress Ratings				
	Not stressful	Sometimes creates stress	Often creates stress	Very stressful on a daily basis	So stressful sometimes we feel we can't cope
Your child's social development	0	1	2	3	5
Your child's ability to communicate	0	1	2	3	5
Tantrums/meltdowns	0	1	2	3	5
Aggressive behavior (siblings, peers)	0	1	2	3	5
Self-injurious behavior	0	1	2	3	5
Difficulty making transitions from one activity to another	0	1	2	3	5
Sleep problems	0	1	2	3	5
Your child's diet	0	1	2	3	5
Bowel problems (diarrhea, constipation)	0	1	2	3	5
Potty training	0	1	2	3	5
Not feeling close to your child	0	1	2	3	5
Concern for the future of your child being accepted by others	0	1	2	3	5
Concern for the future of your child living independently	0	1	2	3	5
<i>Subtotal</i>					
Total					



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Qigong Sensory Training Institute, www.qsti.org

Parenting Sense of Competence Scale

(Gibaud-Wallston & Wandersman, 1978)

Please rate the extent to which you agree or disagree with each of the following statements.

	Strongly Disagree	Somewhat Disagree	Disagree	Agree	Somewhat Agree	Strongly Agree
	1	2	3	4	5	6
1. The problems of taking care of a child are easy to solve once you know how your actions affect your child, an understanding I have acquired.	1	2	3	4	5	6
2. Even though being a parent could be rewarding, I am frustrated now while my child is at his / her present age.	1	2	3	4	5	6
3. I go to bed the same way I wake up in the morning, feeling I have not accomplished a whole lot.	1	2	3	4	5	6
4. I do not know why it is, but sometimes when I'm supposed to be in control, I feel more like the one being manipulated.	1	2	3	4	5	6
5. My mother was better prepared to be a good mother than I am.	1	2	3	4	5	6
6. I would make a fine model for a new mother to follow in order to learn what she would need to know in order to be a good parent.	1	2	3	4	5	6
7. Being a parent is manageable, and any problems are easily solved.	1	2	3	4	5	6
8. A difficult problem in being a parent is not knowing whether you're doing a good job or a bad one.	1	2	3	4	5	6
9. Sometimes I feel like I'm not getting anything done.	1	2	3	4	5	
10. I meet by own personal expectations for expertise in caring for my child.	1	2	3	4	5	6
11. If anyone can find the answer to what is troubling my child, I am the one.	1	2	3	4	5	6
12. My talents and interests are in other areas, not being a parent.	1	2	3	4	5	6
13. Considering how long I've been a mother, I feel thoroughly familiar with this role.	1	2	3	4	5	6
14. If being a mother of a child were only more interesting, I would be motivated to do a better job as a parent.	1	2	3	4	5	6
15. I honestly believe I have all the skills necessary to be a good mother to my child.	1	2	3	4	5	6
16. Being a parent makes me tense and anxious.	1	2	3	4	5	6
17. Being a good mother is a reward in itself.	1	2	3	4	5	6

Parent Sense of Competency Scale (PSOC)

Scoring Instructions

The Parenting Sense of Competency Scale (PSOC) was developed by Gibaud-Wallston as part of her PhD dissertation and presented at the American Psychological Association by Gibaud-Wallston and Wandersman in 1978. The PSOC is a 17 item scale, with 2 subscales. Each item is rated on a 6 point Likert scale anchored by 1 = "Strongly Disagree" and 6 = "Strongly Agree". Nine (9) items (#s 2, 3, 4, 5, 8, 9, 12, 14, and 16) on the PSOC are reverse coded.

Nine items on the PSOC are reverse coded, this is important for accurate scoring. Reverse coded means that a high score on the individual item is not indicative of having a sense of competency; essentially, the item is worded negatively.

Scoring Instructions:

To aid scoring, the score / number for each item can be written in the in the right hand margin of the questionnaire once completed.

For items 1, 6, 7, 10, 11, 13, 15, and 17 simply write the number the participant indicated as their choice.

Reverse coding: For items 2, 3, 4, 5, 8, 9, 12, 14, and 16 substitute the following numbers and write in right hand margin for totaling:

Answer	Score
6	1
5	2
4	3
3	4
2	5
1	6

Total all numbers you have written in the right hand margin; this is participants PSOC score.

A higher score indicates a higher parenting sense of competency. There are no average scores or 'cut-off's' for this tool.

Teacher self-efficacy and practice scales

Within this document is a collection of measures that will likely be relevant to measuring change over time. The collection should be completed at the beginning and at the end of the IYAT programme. You only have to include your name once, on the first instrument, as long as you complete this as a pack.



*The Incredible Years®
Teacher and Child Care Provider
Self-Reflection Inventory*

Emotion Coaching & self-Regulation

Date: _____ Name: _____

Teachers learn extensively from self-reflection regarding their classroom management and the teaching strategies they are using that are working or not working. From these reflections teachers determine personal goals for making changes in their approaches to bring about the most positive learning climate they can. Use this Inventory to think about your strengths and limitations and determine your goals.

1 – Never 3 – Occasionally 5 - Consistently

<i>Social Coaching</i>	
1. I use emotion coaching language with all the children when I interact with them.	1 2 3 4 5
2. When I coach a child's uncomfortable emotions (e.g., anger, frustration, fears) I qualify the negative emotion with recognition of the positive coping or calming behavior the child is using (e.g., continues to try, keeps hands to self, works hard).	1 2 3 4 5
3. I give more attention to and name more positive emotions in children than uncomfortable emotions.	1 2 3 4 5
4. I model my own positive emotions for how I feel during the day, including how I calm down when frustrated.	1 2 3 4 5
5. I provide physical affection to help children calm down and self-regulate.	1 2 3 4 5
6. I teach preschool children self-regulation techniques such as breathing, counting, positive visualization methods and positive self-talk.	1 2 3 4 5
7. I teach preschool children the calm down thermometer and help them practice this when they are angry, sad, fearful or lonely.	1 2 3 4 5
8. I use puppets with children to model emotion language, help children understand the perspective of another and to set up practices of emotion sharing.	1 2 3 4 5
9. I teach children Tiny Turtle's anger management steps.	1 2 3 4 5

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10. I read books to children in interactive ways to promote modeling and sharing of different feelings.	1 2 3 4 5
11. For children with developmental or language delays I use visual pictures to enhance their ability to tell someone how they are feeling.	1 2 3 4 5
12. I use visual feeling prompts to encourage communication of different feelings.	1 2 3 4 5
13. I identify "positive opposite" emotions to the negative emotions to pay attention to (e.g., for angry child I focus on times when s/he is calm, patient).	1 2 3 4 5
14. I praise children for sharing their feelings with other children or with me.	1 2 3 4 5
15. I work with parents so they know how to use emotion coaching at home with their children to enhance their emotional vocabulary.	1 2 3 4 5
16. I work with parents to teach them how to use emotional self-regulation strategies at home with their children. (E.g., breathing, counting, use of Calm Down Thermometer.)	1 2 3 4 5



*The Incredible Years®
Teacher and Child Care Provider
Self-Reflection Inventory*

Positive Behavior Management (Part One)

Date: _____ Teacher Name: _____

Teachers learn extensively from self-reflection regarding their classroom management and the teaching strategies they are using that are working or not working. From these reflections teachers determine personal goals for making changes in their approaches to bring about the most positive learning climate they can. Use this Inventory to think about your strengths and limitations and determine your goals.

1 – Never 3 – Occasionally 5 – Consistently

<i>Setting Limits & Rules</i>	
1. Rules in my classroom are stated positively and clearly and are posted on the wall. I review and practice them as needed.	1 2 3 4 5
2. I use nonverbal cues and signals to communicate rules as well as words (e.g., pictures of rules such as raise quiet hands, quiet voice, five on the floor, ears open).	1 2 3 4 5
3. I have taught children the "show me five" signal and use it.	1 2 3 4 5
4. I state requests or give directions to children respectively using brief descriptions of positive behaviors desired (e.g., "please keep your hands to your own body").	1 2 3 4 5
5. I use "when-then" or "first-then" commands.	1 2 3 4 5
6. I give children choices and redirections when possible.	1 2 3 4 5
7. I avoid negative commands, corrections, demands, and yelling at children. Instead, I use "do" and "start" positive commands.	1 2 3 4 5
8. I get children's attention before giving instructions (e.g., eye contact).	1 2 3 4 5
9. I redirect disengaged children by calling out their name with a question, standing next to them, making up interesting games, and nonverbal signals.	1 2 3 4 5
10. I give frequent attention, praise and social/emotional coaching to children who are engaged and compliant following my directions.	1 2 3 4 5
11. I communicate with parents about classroom rules and help parents know how they can support similar rules at home. (E.g., walking feet, inside voice, listening ears, hands to self, etc.)	1 2 3 4 5

<i>Differential Attention, Ignoring and Redirecting</i>	
1. I give more attention, coaching and praise to positive behaviors than to inappropriate child behaviors.	1 2 3 4 5
2. I have identified negative behaviors in children I want to decrease and the "positive opposite" of each negative behavior that I will praise, reward and coach.	1 2 3 4 5
3. I have identified those behaviors I can ignore while keeping the children safe.	1 2 3 4 5
4. I have worked hard teaching children in circle time to ignore their peers when they are laughed at, poked or made fun of.	1 2 3 4 5
5. My ignoring is strategically planned and is done by avoiding eye contact, verbal comments, and physical touch and by keeping a neutral affect.	1 2 3 4 5
6. I use proximal praise strategically (e.g., praise nearby child for behavior I want to encourage) while ignoring the child who is inappropriate.	1 2 3 4 5
7. I use positive self-talk as an approach to staying calm when children misbehave. (write example)	1 2 3 4 5
8. I start with using the least intrusive discipline strategy when children misbehave. I review my hierarchy of discipline.	1 2 3 4 5
9. When a child is behaving appropriately again and calmed down after losing control, I immediately return my attention and encouragement to the child.	1 2 3 4 5
10. I have developed behavior plans that include identifying those inappropriate behaviors to ignore and the positive opposite behaviors to praise and reward.	1 2 3 4 5
11. I help children learn how to self-regulate through specific techniques (e.g., deep breathing, positive self-talk, positive imagery, anger or relaxation thermometer, Tiny Turtle puppet).	1 2 3 4 5
12. I use "positive forecasting" statements to predict a child's success in earning his prize.	1 2 3 4 5
13. I work hard to redirect children to other activities when they are frustrated.	1 2 3 4 5

14. I have shared the classroom or home child care discipline hierarchy with the parents of the children.	1 2 3 4 5
15. I work with parents so they know behaviors to ignore and those to praise or reward.	1 2 3 4 5
16. I call parents to share successes their children are having learning new behaviors.	1 2 3 4 5
17. I teach parents some of the self-regulation strategies I am using with their children so they can use them at home. (E.g., Tiny Turtle's secret, Calm Down Thermometer, breathing strategies)	1 2 3 4 5
Future Goals Regarding Ignoring and Redirecting Strategies	



*The Incredible Years®
Teacher and Child Care Provider
Self-Reflection Inventory*

Positive Behavior Management (Part Two – Preschool)

Date: _____ Teacher Name: _____

Teachers learn extensively from self-reflection regarding their classroom management and the teaching strategies they are using that are working or not working. From these reflections teachers determine personal goals for making changes in their approaches to bring about the most positive learning climate they can. Use this Inventory to think about your strengths and limitations and determine your goals.

1 – Not Helpful 3 – Neutral 5 – Very Helpful

<i>Time Out to Calm Down and Other Consequences</i>	
1. I have taught children what Time Out is used for and we have practiced how to go to Time Out to calm down.	1 2 3 4 5
2. I only use Time Out for aggressive or destructive behavior.	1 2 3 4 5
3. When I use Time Out I am calm, clear, patient, give very little attention to child in Time Out and set a timer until 2 minutes of calm is achieved.	1 2 3 4 5
4. When the child is calm and Time Out is over, I immediately re-engage them with another activity.	1 2 3 4 5
5. I assist other children to learn how to ignore a child in Time Out and to give him or her privacy to calm down.	1 2 3 4 5
6. I have identified a safe place for Time Out to calm down that is away from other children and relatively boring.	1 2 3 4 5
7. I help children to practice the words they will use to help themselves calm down in Time Out. (e.g., "I can do it, I can calm down")	1 2 3 4 5
8. I use emotion coaching to focus on times when children are staying calm, trying again, and being patient even though it is frustrating.	1 2 3 4 5
9. After Time Out is over I re-engage the child by coaching and giving praise and attention for positive behavior. I do not remind the child of why the child was in Time Out or force an apology.	1 2 3 4 5
10. I understand that the most effective consequences are immediate, quick, and followed with a new learning trial as soon as possible to help children be successful.	1 2 3 4 5

11. I am firm, respectful and control my negative emotions when engaged in a discipline strategy.	1 2 3 4 5
12. I have explained the hierarchy of discipline plan to parents of children in my setting.	1 2 3 4 5
13. I have developed behavior plans, which include behaviors to coach, praise and reward and those to ignore or use a consequence. These are reviewed regularly by staff and parents.	1 2 3 4 5
14. I have a few logical consequences that I use appropriately. (describe here)	1 2 3 4 5
15. I send home only positive notes and if I want to discuss a behavior issue I set up an appointment time to discuss in person with the parent.	1 2 3 4 5
16. I use the Teacher-to-Parent Communication Home Activities letter to help parents understand how they can help their children learn some self-calming strategies.	1 2 3 4 5
Future Goals Regarding My Discipline Strategies	

Teachers' Sense of Efficacy Scale¹ (short form)

Teacher Beliefs		How much can you do?								
Directions: This questionnaire is designed to help us gain a better understanding of the kinds of things that create difficulties for teachers in their school activities. Please indicate your opinion about each of the statements below. Your answers are confidential.		Nothing		Very Little		Some Influence		Quite A Bit		A Great Deal
1.	How much can you do to control disruptive behavior in the classroom?	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
2.	How much can you do to motivate students who show low interest in school work?	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
3.	How much can you do to get students to believe they can do well in school work?	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
4.	How much can you do to help your students value learning?	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
5.	To what extent can you craft good questions for your students?	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
6.	How much can you do to get children to follow classroom rules?	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
7.	How much can you do to calm a student who is disruptive or noisy?	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
8.	How well can you establish a classroom management system with each group of students?	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
9.	How much can you use a variety of assessment strategies?	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
10.	To what extent can you provide an alternative explanation or example when students are confused?	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
11.	How much can you assist families in helping their children do well in school?	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
12.	How well can you implement alternative strategies in your classroom?	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)

Appendix B: Information Sheet and Informed Consent

Information Sheet – Incredible Years Autism Process Evaluation

This information sheet provides details about the purpose and scope of the evaluation, and important information about how your feedback and comments provided to the evaluator/evaluation team will be gathered and used, if you agree to participate in the evaluation.

What is the background and purpose of the Evaluation?

The Incredible Years Autism programme

Incredible Years Autism (IYA) is one of three Ministry social investment initiatives that are focused on delivering early, targeted support for children aged 0-8. Part of the new learning support approach, they deliver support to more children, at younger ages than we have been able to in the past.

As a result of these initiatives, we expect to see children with improved overall learning, social competence and wellbeing. We also expect to see Kaiako with not only improved capability, but also greater confidence in their skills. Parents, caregivers and whānau will also feel more supported and confident

Incredible Years Autism Parent is a 2.5-hour, 14 session programme for parents and caregivers delivered weekly. The Teacher programme is a separate 2.5-hour, six session programme for Kaiako usually delivered fortnightly.

Children on the autism spectrum are more likely than their peers to have ongoing behaviour issues and their parents are more likely to experience high levels of stress and mental health issues.

There is strong evidence to suggest that early intervention has the greatest potential to improve future outcomes for children on the autism spectrum and their families.

By supporting the skills and confidence of the key adults in the lives of children on the autism spectrum, these programmes aim to promote children's emotional regulation, positive social interactions, and communication skills.

Evaluating the IYA programme

The overall evaluation approach for the Incredible Years Autism programme comprises a process evaluation (which this information sheet relates too) to provide insights into the implementation of the programmes (Incredible Years Autism Parents and Incredible Years Autism Teacher), and an impact evaluation to determine if the programmes are achieving the intended outcomes.

The purpose of this process evaluation is to provide insights into the implementation of the IYAP and IYAT programmes, with a view to these insights informing both the impact evaluation, but also any further refinements to the programme.

The evaluation has four key focus areas (evaluation objectives). Each of these focus areas/objectives will be examined by seeking answers to a number of evaluation questions, detailed over page.

Focus areas	Evaluation questions
Demand, access and reach	<ol style="list-style-type: none"> 1. What is the demand for services, and who is accessing the programme (e.g., socio-demographic profile, location, ethnicity etc.)? 2. How are people accessing services differently, and is this access pathway working effectively? 3. How well is the programme in reaching the right children (i.e., do those who need the programme access it and do those who access the programme need it)? 4. Is the programme equitable in reaching Māori and Pasifika children? 5. What, if any, are the barriers to parents and teachers accessing the programmes?
Programme implementation	<ol style="list-style-type: none"> 6. Is the programme being implemented as intended and in a way that maintains its fidelity? 7. What aspects of the programme are working well/not well (for example, participation and delivery, communications between relevant health/education stakeholders, such as DHBs, local ASD coordinator and/or sector groups)? 8. What aspects of the programme could be improved – for parents and for teachers? 9. Does the programme appear to work better in some areas than others? Why? 10. Are all of the aspects of the programme required to achieve the intended outputs and outcomes, or are some aspects more fundamental than others? 11. What changes (if any) are being made to the programme to ensure delivery is culturally appropriate for Māori and Pasifika, and why? 12. How well are the Ministry's processes around communication and implementation of the programme supporting best-practice delivery of the programme?
Feasibility	<ol style="list-style-type: none"> 13. How adequate are our inputs and capacity (such as the workforce, the training requirements) in the Ministry of Education and the Incredible Years model to achieve the intended outcomes of the programme, now and in future? What are key considerations (if any) that would affect the longer-term sustainability of the model in New Zealand?
Learning to inform the impact study	<ol style="list-style-type: none"> 14. How appropriate are the measures for the different groups in this initiative for the longer-term impact evaluation? 15. How well does the demand for services enable a more robust evaluation approach through delayed enrolment or other mechanism (such as maintaining a register of interested participants in other locations)? To what extent could a list of interested participants (maintained as a register by providers) be used as a quasi-control group for the impact evaluation?

Your involvement

You have been identified as someone who is either actively involved in either the Incredible Years Autism Parent or Teacher programme, or, is a key stakeholder.

The evaluation team would like to arrange an interview with you, preferably face-to-face where possible, or otherwise over the phone.

The interview will seek to cover in broad terms the areas outlined in the evaluative questions above. Depending on your depth of knowledge and experience, the interview may spend more or less time in particular areas. Please treat these questions as a guide to support your thinking, and as a general frame for the interview. We also invite you to review the intervention logic that was developed as part of the design of the programme, and, and the participant journey map, which may also help to prompt your thinking.

The interview/group discussion will last approximately 1 hour.

What will happen to the information I provide?

Information you provide in interviews will be kept confidential and no respondents will be individually identified in reporting. Where the information may be identifiable, this will be checked with the participants before the information is used in reports.

Interviews may be digitally recorded, and notes taken to aid recall. This information will be kept and used only by the evaluation team. We will not be providing verbatim transcriptions of the interviews themselves.

The information collected for this evaluation will be held in a secure data management system in New Zealand that is only accessed by the evaluation team.

The raw information obtained through interviews will only be used for this evaluation.

Will I know the outcome of the evaluation?

Ministry of Education will disseminate the evaluation findings following the submission of the final evaluation report.

Who can I contact?

If you have any questions, concerns, further contributions regarding the interview or evaluation please feel free to contact:

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EvalStars
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+ 64 (21) 878 550

Akari Maiyamoto/Julia Tindall
IYA Programme Team leads
Ministry of Education
Akari.Miyamoto@education.govt.nz or
Julia.Tindall@education.govt.nz
+64 4 463 7065

Incredible Years Autism Process Evaluation Interview Consent Form

Please read the statements below and circle 'YES' or 'NO'. If submitting electronically please delete, underline, or strikethrough accordingly.

1. I have read and understood the Information Sheet and have had the details of the process evaluation explained to me if/where required. My questions have been answered to my satisfaction, and I understand that I may ask further questions at any time. **YES / NO**
2. I understand that my participation is voluntary, that I may decline to answer any or all of the questions and that I may withdraw from participating at any stage. **YES / NO**
3. I agree to the interview being digitally voice recorded. **YES / NO**

Signature: _____ Date: _____

Name: _____

Email: _____

Appendix C: Information Sheet Evaluation Team

Introducing the Process Evaluation –July 2018

As part of the Ministry of Education’s implementation of the Incredible Years Autism programme, we will be undertaking both a ‘**process**’ and an ‘**impact**’ evaluation to see how it’s going and what difference is being made.

EvalStars has been contracted to carry out the **process** evaluation which will be conducted over the next few months. During this time, you may meet or be contacted by some or all of the three key team members from EvalStars that will be working on the project.

They may contact you via email, or ask you questions in person or over the phone about your experience or impression of how the project is going. Someone from the team will also be visiting your site. During these visits, they hope to conduct interviews with stakeholders such as yourselves, and also hold a group discussion with the parents and/or teachers that have taken part in the IYA programme (who have agreed to be involved in the evaluation).



Kate Averill is Director and a Senior Evaluator at EvalStars. She will be completing most of the fieldwork visits and overseeing the evaluation overall. Kate is highly experienced in research, monitoring, and evaluation in New Zealand and internationally. Kate has experience in education as a teacher, manager, and facilitator of organisational self-assessment.



Shaun Akroyd is contracted to EvalStars as a Senior Evaluator. He will be working with Kara, including joining some of the fieldwork visits. Shaun is passionate about education and health, particularly for Māori.

What are we asking of you?

As mentioned above, the team will be conducting visits to all locations where the IYA programme has run as part of the first cohort. We hope to meet with a range of stakeholders (including with you). They will also be contacting you and requesting support on a few logistical and practical matters.

They may ask you about thoughts on where, when, and how a group discussion with parents and/or teachers would work well for your groups. In addition, we would be grateful for any other insight you can provide into your groups, or any advice you may have to help the evaluation process run smoothly for you and your groups.

As a provider of the IYA programme, you know your IYA groups best. The team therefore thanks you in advance and appreciates your input to ensure we can get the best possible engagement from parents and/or teachers to help us with the evaluation. If you have any questions please feel free to contact either Kate, or Julia.

Kate Averill

Evaluation Lead

EvalStars

Julia Tindall

IYA Programme Work Lead

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Appendix D: Methodology

Information and data collection methods included:

Document review and literature scan

Document review of relevant background documents provided by the Ministry of Education, and online literature scan.

The evaluation plan included the review of a small number of reference documents.

- The Incredible Years Autism Evaluation Plan
- Supplementary Guidelines for Incredible Years
- Incredible Years Pilot Study Evaluation Report (MSD, 2013)
- Incredible Years follow-up study (MSD 2014)

A second document scan was completed as part of the evaluation. This focused on reviewing any additional background documents developed by the Ministry for the programme (such as the original Treasury Funding Application), and also a review of previous studies and evaluations referenced in the Evaluation Plan.

A targeted online literature review was also undertaken, looking to find any additional academic publications (to those already listed in the evaluation plan) examining the Incredible Years Autism programme specifically, or that examined the adaptation of the Incredible Years programme for children with autism spectrum disorders or developmental delays²⁹. This literature review was used to support the interpretation of the findings, and look to see if there are any comment themes emerging in the literature regarding the efficacy of the IYA programme in different contexts.

Analysis of programme data

A review and analysis of programme administrative data was completed, where consent process permitted the use of this as part of the process evaluation (see assumptions regarding access to programme data).

Group discussions

Up to two group discussions (one for each programme) will be held in each location with all participants (teachers/kaiaiko for the IYAT and parents/caregivers for the IYAP)³⁰ framed around the four focus areas and guided by the evaluation questions.

Semi-structure stakeholder interviews

Semi-structured interviews framed around the four focus areas and guided by the evaluation questions were undertaken with a range of stakeholders listed below. These interviews were undertaken face-to-face wherever possible. Otherwise they were completed via phone or Skype.

- Providers (manager/administrator of the programme) for the IYAP and IYAT
- Group leaders who have delivered a programme in the first cohort of the IYAP and IYAT, including Ministry group leaders

²⁹ e.g. McIntyre, L., (2008) Adapting Webster-Stratton's Incredible Years Parent Training for Children with Developmental Delay: Findings from a Treatment Group Only Study. *Journal of Intellectual Disability Research*. 52, issue 10, pp 1176-1192; Roberts, D and Pickering, N., (2010) Parenting training programme for autism spectrum disorders: an evaluation. *Community Practitioner*, vol. 83, no. 10, pp27+

³⁰ Feedback from the Ministry of Education programme team suggests that some parent of the children are themselves on the Autism spectrum. For this reason, the parents/caregivers will be provided with a choice of their preferred feedback method when they are initially invited to participate in the evaluation; either in a group setting, or one-on-one.

- Participants (teachers/Kaiako for the IYAT and parents/caregivers for the IYAP) who indicate this is their preferred method of feedback. Where there is more than one parent/caregiver for a child indicating a preference for this method, then semi-structured interviews were undertaken
- Ministry of Health (Child Development Services and ASD Coordinators)
- National Autism sector group (e.g. Autism New Zealand)
- Other relevant programme stakeholders (e.g. Ministry of Education learning support managers, PB4L regional managers, Raukura/Chief Advisor Te Ao Māori and/or Group Manager Te Reo Māori for Early Learning and Student Achievement) were included where available
- An overview of how these information collection methods are expected to inform the evaluation questions is presented in Table 1 (over page). A tick ✓ denotes an information source that expected to provide primary information to answer the question. A tick in brackets (✓) denotes a supporting information source.

Analysis

Data analysis (quantitative and qualitative) was undertaken concurrently during the fieldwork to support the iterative data collection process (fieldwork occurred over several weeks, timed around the conclusion of each programme identifying emergent themes and enabling effective sense-making of the emergent findings). This was supported by debriefing and collaborative analysis sessions held with the Ministry’s project team and relevant representative from the Evidence, Data, Knowledge (EDK) on completion of field visits. A refined thematic coding framework (for qualitative data) based on evaluation questions emerged following the early field visits. This allowed for efficient processing of data in subsequent field visits, to track convergent and divergent findings.

The analysis stage focused on ensuring all evaluation questions are answered allowing for overall assessments of the programme against the evaluation objectives. All data streams (primary and secondary, qualitative and quantitative) will be analysed by the evaluator(s) to identify substantiated findings against the four focus areas. Triangulation of data will provide robust evidence of what is working well, what isn’t (and for whom), and what can be improved.

An updated programme model was developed for use by the impact evaluation, updating any relevant findings regarding change to the programme to fit the New Zealand context.

Ethical considerations

The IY programme had a robust consent process, requiring all teachers/kaiako and parents/caregivers to give consent to key administrative data to be collected, and on participation in the evaluation (see the supplementary guidelines for full details³¹). However, the consent giving process for participants outlined in the supplementary guidelines pertains only to the collection and use of the data collected by the evaluation tools for the impact evaluation.

Additional consent forms were developed and approved for use by the process evaluation team for the additional data collection (via face-to-face and group interviews).

The Evaluator(s) will be members of a relevant professional organisation (such as the Aotearoa New Zealand Evaluation Association, or the Australian Evaluation Society) and meet their professional guidelines and standards for ethical conduct.

³¹ This includes details on matters such as when data needs to be collected, using which tools/measures, and how the data needs to be provided to the Ministry.

Evaluation Focus Areas (Objectives)	Evaluation Questions	Data sources				
		Document and literature review	Programme data review	Interviews with providers	Interviews /group discussion with participants	Other stakeholder interviews
Demand, access and reach	1. What is the demand for services, and who is accessing the programme (e.g., socio-demographic profile, location, ethnicity etc.)?	(✓)	✓	(✓)	(✓)	(✓)
	2. How are people accessing services differently, and is this access pathway working effectively?	(✓)	(✓)	✓	✓	✓
	3. How well is the programme in reaching the right children (i.e., do those who need the programme access it and do those who access the programme need it)? a) Is the programme equitable in reaching Māori and Pasifika children?		(✓)	✓	✓	✓
	4. What, if any, are the barriers to parents and teachers accessing the programmes?			✓	✓	✓
Programme implementation	5. Is the programme being implemented as intended and in a way that maintains its fidelity?		(✓)	✓	✓	✓
	6. What aspects of the programme are working well/not well (for example, participation and delivery, communications between relevant health/education stakeholders, such as DHBs, local ASD coordinator and/or sector groups)? a) What aspects of the programme could be improved – for parents and for teachers? b) Does the programme appear to work better in some areas than others? Why?		(✓)	✓	✓	✓
	7. Are all of the aspects of the programme required to achieve the intended outputs and outcomes, or are some aspects more fundamental than others?	(✓)		✓	✓	(✓)
	8. What changes (if any) are being made to the programme to ensure delivery is culturally appropriate for Māori and Pasifika, and why?	(✓)		✓	✓	(✓)
	9. How well are the Ministry's processes around communication and implementation of the programme supporting best-practice delivery of the programme?			✓	✓	✓
Feasibility	10. How adequate are our inputs and capacity (such as the workforce, the training requirements) in the Ministry of Education and the Incredible Years model to achieve the intended outcomes of the programme, now and in future? What are key considerations (if any) that would affect the longer-term sustainability of the model in New Zealand?	(✓)		✓	(✓)	✓
Learnings to inform the impact evaluation	11. How appropriate are the measures for the different groups in this initiative for the longer-term impact evaluation?	(✓)	(✓)	✓	(✓)	✓
	12. How well does the demand for services enable a more robust evaluation approach through delayed enrolment or other mechanism (such as maintaining a register of interested participants in other locations)? To what extent could a list of interested participants (maintained as a register by providers) be used as a quasi-control group for the impact evaluation?	(✓)	(✓)	(✓)		✓

Appendix E: Literature Review

Author (by year)	Participants	Method	Findings	Barriers	Assistance to participate
<p>McIntyre (2008)</p> <p>Intervention:</p> <p>Incredible Years Parent Training</p>	Parents of 25 children (2-5 years) with Autism or development delays.	<ul style="list-style-type: none"> Developed and used a slightly modified IYP training for children with developmental delays (IYPT-DD). Observed child and parent behavior pre- and post-intervention. Administered pre- and post- questionnaires 	<ul style="list-style-type: none"> Results suggest preliminary evidence of efficacy in reducing negative parent and child behaviour and increasing parental perceptions of child positive impact. Parents rated sessions as helpful. Parent reported stress did not decrease. 		<ul style="list-style-type: none"> Evening sessions Free childcare & dinner provided. Locations selected based on accessibility for majority of participants. If transportation presented a hardship to any participant, complimentary bus tokens were provided or taxis arranged. All assessments (with the exception of the initial phone screen) were conducted in the family's home at a convenient time for the family.
<p>Roberts & Pickering (2010)</p> <p>Intervention:</p> <p>Incredible Years Basic Programme</p>	8 parents of 7 children with ASD – all boys. 3 children had ASD and anxiety, 1 ASD and ADHD, 2 presented with significant anxiety symptoms and social communication difficulties (a diagnosis had not yet been reached), and 1 had ADHD.	<ul style="list-style-type: none"> Four formal measures were used pre- and post-test. 	<ul style="list-style-type: none"> General health questionnaire showed improvements for parents – except one who had other stressful events. Parents reported positive changes to child behavior. Parents feedback was positive, strong emphasis on feeling less isolated. 		<ul style="list-style-type: none"> The venue was a community building in the local area and appeared to suit the group's needs really well. It provided a relaxed atmosphere, away from the clinic, with good parking facilities and it was central for the families who attended. This may have contributed to the good up-take for the group.
<p>Dababnah & Parish (2016a)</p> <p>Intervention:</p> <p>Incredible Years (original) tailored to parents of children with autism.</p>	17 parents of preschool children with autism. Split into two groups. 14 completed the programme (one moved away, two were dissatisfied). All 17 completed some parts of the research e.g. exit interviews. Only one parent from each family was allowed to attend the programme.	<ul style="list-style-type: none"> Data were collected at baseline, posttest, and on a weekly basis. Three types of quantitative and qualitative measures were collected. Quantitative data included a pretest/posttest parent stress survey and a weekly acceptability questionnaire. A comprehensive acceptability survey was administered. Qualitative one-on-one interviews after program completion. 	<ul style="list-style-type: none"> Parent stress decreased significantly after program completion. Participants reportedly enjoyed the play-based approach of the program, as well as opportunities for social support and peer learning. Nearly all of the parents who completed the program felt it improved their relationship with their children. 	<ul style="list-style-type: none"> Two parents were dissatisfied with the program. Reasons for dissatisfaction included disruption in children's nighttime schedules, distance to class, need for more one-on-one support, and inability to bring partner to group. Parents highlighted several barriers to their success in the program, including difficulty applying some program content (e.g., time-out for noncompliance) to children with sensory or self-regulation challenges. The two parents that withdrew were significant on child baseline age only. The foundation of the program, child-directed play, was not straightforward for some children. Parents reported it was sometimes difficult to engage with their children during play, or their children's play was rigid or stereotypical. Incentives (e.g., stickers) were not motivating for some children, and many did not respond to time-out strategies. 	
<p>Dababnah & Parish (2016b)</p> <p>Intervention:</p> <p>The Incredible Years (original) tailored to parents of children with autism.</p>	17 parents of preschool children with autism. Split into two groups. 14 completed the programme (one moved away, two were dissatisfied). All 17 completed some parts of the research e.g. exit interviews. Only one parent from each family was allowed to attend the programme.	Focus on qualitative measure of fidelity	<ul style="list-style-type: none"> Parents benefited most from child emotion regulation, strategies, play-based child behavior skills, parent stress management, social support, and visual resources. More work needed to address parent self-care, partner relationships, and the diverse behavioral and communication challenges of children across the autism spectrum. 	<ul style="list-style-type: none"> Disruption to children's nighttime routines was cited as the reason one parent declined to join and by another who withdrew.) 	<ul style="list-style-type: none"> 8/14 parents regularly or occasionally used the childcare supports - All participants who used childcare reported they would not have been able to attend without it. Parent access and retention could potentially be increased by providing in-home childcare vouchers and a range of times and locations in which to offer the program.
<p>Hutchings, Pearson-Blunt, Pasteur, Healy, & Williams (2016)</p> <p>Intervention:</p> <p>Incredible Years Autism</p>	Parents of children aged between 2 - 5 with or awaiting autism diagnosis. Nine parents enrolled for the course, eight mothers and one father who attended the sessions with his partner. Nine children were represented, seven individual children and one pair of twins. Eight of the nine parents completed the programme and one parent (the parent of twins) withdrew after attending three sessions.	<ul style="list-style-type: none"> Brief evaluation at the end of each session Fuller evaluation at the end of the programme. Plus semi-structured interview Plus four standardized questionnaires. 	<ul style="list-style-type: none"> Parents rated the programme highly. All eight parents who completed the programme found it helpful. Most helpful were discussions about the homework activities, learning how to ignore unwanted behaviour and meeting other parents. All parents reported that it had an impact on their parenting as it helped them to see things from their child's point of view. 	<ul style="list-style-type: none"> 3/8 parents felt the two hour sessions needed to be longer to fit all of the content in. Course location was a barrier for parents – several travelled considerable distances. One parent described how the cost of creche, buses, and time made it hard to attend. 	
<p>Zamora, Harley, & Hudson (2016)</p> <p>Intervention:</p> <p>Incredible Years (original) tailored to parents of children with autism – and for the cultural group.</p>	Seven families consented and participated in a modified Incredible Years® parent training intervention. All parents were monolingual Spanish speakers. The mean age of the seven children was 7 years, 10 months. All seven children were clinically diagnosed by a mental health provider as being on the autism spectrum with a co-occurring mental health diagnosis, ie Disruptive Behaviour Disorder Not Otherwise specified (NOS) and Oppositional Defiant Disorder.	<ul style="list-style-type: none"> The parent Incredible Years Programme Satisfaction Questionnaire, Basic Parent Programme was completed by each parent at the end of the parent training intervention. An exit interview was conducted with each individual family by one of the co-facilitators at the end of the parent training intervention to gather qualitative information and facilitate treatment planning. 	<ul style="list-style-type: none"> Overall, parents reported that they felt "greatly satisfied" to "satisfied" with the curriculum, as well as the delivery and implementation of the modifications, which likely links to the outcome that participation of the families was high. Parents reported that they felt they learned a lot from the group. They especially enjoyed the exercises, activities, and role plays used to help reinforce the competencies learned. 		<ul style="list-style-type: none"> Free childcare and a light snack were provided at each session. The intervention location was accessible to all families by car, bus or train. One novel element which was included was the introduction of the children into role play sessions. These practice interactions took place for 20 minutes at the end of each group session and were designed to enhance and reinforce the concepts learned as part of the parent curriculum. The programme was tailored to the individual and cultural needs of the group.

Williams, Hastings, Charles, Evans, Hutchings (2017)	<ul style="list-style-type: none"> • This article describes the protocol for pilot randomized controlled trial of IY - Autism. • The trial will provide the first rigorous evidence for the effectiveness of IYA for parents of children with autism spectrum disorder, including initial cost-effectiveness.
McIntyre (2008)	<ul style="list-style-type: none"> • 21 families received Incredible Years Parent (regular); 12 had autism diagnosis. • Families of a child with autism did not respond differently to the experimental treatment than did families with a child who had other developmental disabilities. • There was a trend approaching significance in baseline assessments of parent-child interactions in the autism group versus the developmental disabilities group. That is, 57.5% of intervals contained an inappropriate/negative behavior in the autism group, whereas only 44.5% of intervals contained an inappropriate/negative behavior in the developmental disabilities group. • There were no differences between the autism and developmental disabilities groups in terms of their behavior problems as reported on the CBCL.
Webster-Stratton & Reid (2008)	<ul style="list-style-type: none"> • Provides general guidelines for how to work with children with autism directly (using the IY Dinosaur programme)

Appendix F: IYAP programme 2018 – regional data

	Dates		Participant numbers		Attended final session	Estimated children families at	Note	Number of participants each scheduled session																Participants who received at least one make up session	Drop outs			Percentage completion (Includes make ups) - excludes non starters					
	Start	End	Enrolled Caregivers	Attended session 1				1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16		#	Note	%	less than 10%	11-20%	21- 40%	41- 60%	71-80%	81- 100%
Bay of Plenty	27-Mar	26-Jun	12	11	9	8		11	11	10	8	10	9	9	8	7	9	10	10	9	9	N/A	N/A	9	2*	7	17%	2	0	0	0	1	9
Bay of Plenty	28-Mar	27-Jun	12	7	2	5*	1	7	7	7	4	6	5	6	7	5	6	7	7	2	N/A	N/A	N/A	3	4*	8	33%	0	0	0	0	2	5
Hawkes Bay	6-Apr	10-Aug	12	9	4	9*	2	9	8	8	6	8	3	6	4	6	4	5	3	3	N/A	N/A	N/A	3	5*	9	42%	2	3	6	0	0	1
Invercargill	2-May	15-Aug	7	7	4	7*	3	7	5	5	4	4	4	4	4	2	2	4	2	4	N/A	N/A	N/A	2	3	43%	1	1	1	0	1	3	
Wellington	17-May	13-Sep	11	9	11	8		9	11	11	10	10	7	8	7	8	10	5	8	8	9	11	11	6	0	0%	0	0	0	0	0	11	
Nelson	28-May	24-Sep	8	7	8	6		7	7	8	6	6	7	8	8	8	4	8	7	8	8	N/A	N/A	5	0	0%	0	0	0	0	1	7	
Hawkes Bay	18-Jun	1-Oct	8	7		7		7	6	6	5	5	7	4																			
Christchurch	19-Jun	28-Sep	8	5	5	6*	4	6	5	4	6	3	4	5	4	5	5	4	5	5	N/A	N/A	N/A	1	3	38%	1	1	0	0	1	4	
Auckland	7-Aug	6-Nov	9	6		6*	5	6	6	6	5	4																					
Auckland	8-Aug	6-Nov	11	11		10		11	11	10	11	11	11																				
Auckland	9-Aug	22-Nov	11	11		9*	6	11	9	7	7	8	8	5	9																		
Bay of Plenty	2-Aug	13-Nov	11	9		9		9	9	8	8	7	8	7																			
Bay of Plenty	3-Aug	14-Nov	8	8		7		8	8	8		7	6	7																			
Wellington	15-Aug	21-Nov	9	5		7		5	9	8																							
Wellington	24-Aug	7-Dec	6	5		5		5	5	5																							
Totals			143	117	43	109		118	117	111	88	89	79	69	51	41	40	43	42	39	26			29	17		6	5	7	0	6	40	

Notes:

1. But four participants enrolled did not start so the three children are excluded from this total.
2. Note that 4 families/children dropped out. Includes 1 family where both parents dropped out after session 1; and one parent who attended session 2 only. So reach is only 5
3. But 1 parent/family dropped out after session one and another 2 dropped out at session 2 and 3 so reach is really 4.
4. 7 families enrolled but one dropped but one never started
5. 1 didn't start and one dropped out after session 1; another attended 1 and 3 and dropped out.
6. 10 families but 1 family dropped out after first session
7. both from same family
8. Did not actually start. Represents 3 children/families
9. Represents 4 families/4 children

Appendix G: IYAT programme 2018 – regional data

	Dates		Participation			How many ECEs/ Schools			Number of participants for each scheduled session						Participants who received at least one make up session		100% Attendance
	Start	End	Enrolled teachers	Attended session 1	Attended final session	ECE	Schools	Drop outs	1	2	3	4	5	6			
Taranaki	18-May	15-Jul	12	11	8	7	0	0	11	10	8	8	7	8	8	12	
Christchurch	21-May	26-Jun	12	12	12	8	0	0	12	12	12	12	12	12	0	12	
Hawkes Bay	18-Jun	23-Jul	11	10	10	9	1	1	10	11	10	10	10	10	0	9	
Nelson	5-Jul	20-Sep	10	10	10	10	0	0	10	10	10	10	10	10	0	10	
Bay of Plenty	24-Jul	2-Oct															
Hawkes Bay	30-Jul	3-Sep	11	11	11	11	0	0	11	11	11	11	11	11	0	11	
Taranaki	13-Aug	24-Sep	12	12	12	12	0	0	12	12	12	10	11	12	3	12	
Hawkes Bay	13-Aug	29-Oct															
Christchurch	13-Aug	24-Sep															
Hawkes Bay	1-Oct	5-Nov															
Christchurch	15-Oct	19-Nov															
Bay of Plenty	24-Oct	28-Nov															
Totals			68	66	63	57	1	1	66	66	63	61	61	63	11	66	

Appendix H: Implementation Review Day

Incredible Years Autism Implementation Review Day | Summary 27 August 2018

Participation and Retention: key themes and summary

External pressures – health, finance, children’s needs	Reaching and engaging families	Access and criteria
<p>There is often a demand for evening courses but that presents challenges in getting carers for young children and there are often attachment issues that make it difficult.</p> <p>Money is an issue but group leaders make use of disbursements for petrol vouchers, and paid childcare.</p> <p>There are particular regional issues – for example, Hawkes Bay’s high number of seasonal workers impacts on participants’ attendance.</p> <p>The client base experiences more stress and exhaustion than our other families – they often have a number of professionals involved in their lives, and more issues to deal with. It doesn’t take much to throw them off track.</p>	<p>Parents are not recognising their child may be on the autism spectrum but teachers are. However, teachers (who have not participated in the IYAT course) are not confident to have a conversation with parents about their child when they think the child may be on the autism spectrum.</p> <p>Parents are not necessarily dropping out but attendance is sometimes sporadic.</p> <p>Group support is highly valued as parents of children in the younger age range are likely to have started to move away from other parenting support such as ante natal groups.</p> <p>The IY Parent programme is successful and has been built up through word of mouth – The same reputation is not there for IYA yet but it will build.</p> <p>Group leaders need more time upfront to build relationships with parents.</p> <p>The paperwork is onerous and is made harder by literacy and language issues.</p>	<p>There is a mixed experience around medical diagnosis.</p> <p>Some providers’ participants are mainly drawn from children with a diagnosis of autism.</p> <p>Where there is no diagnosis, the parents are more likely to be going through a grieving process as they acknowledge what is happening. The programme needs to give those parents space to grieve.</p> <p>In some areas, there are significant waiting lists for getting a diagnosis.</p> <p>In some areas, some clinical psychologists are not keen to refer non diagnosed children to the programme as they think it may affect the diagnosis later.</p> <p>For the IYA Teacher programme there is a real benefit in prioritising participants who have completed the IY Teacher programme previousl.</p>

Challenges and learnings: key themes and summary

Participants brainstormed answers and ideas around five questions based on the discussion on participation and retention.

- T How might we improve transition for parents whose children are starting school? [Transitions]
- C How might we adjust the criteria for both programmes to increase participation? [Criteria]
- R How might we improve retention and regular attendance? What supports can we provide? [Retention]
- M How might we ensure pre and post measures are appropriate for our families? [Measures]
- A How might we improve links between the IYAP and IYAT programmes? [Alignment]

Integration with other services, process and approaches	Stepping into our families’ world – their perspective, needs and challenges	Education, publicity, promotion and buy-in
<ul style="list-style-type: none"> R Offer IYA as part of a suite of services and not a standalone programme. R Sign post parents as to what support or groups are available and how IYA fits in with them. A Support local/regional planning between IYP and IYT providers. A Identify teacher or school and have meetings to ensure successful transitions. A Encourage and empower regional offices to champion the IYAP/T relationship. T Extend The parent programme to include the role of IYP programme lead acting as advocates for parents when transitioning to primary school. T Include Special Education Needs Coordinator, Resource Teacher Learning Behaviour and Teacher Aides to support transition. C Upper age limit should be increased to 7-8 to align diagnosis timeframe. C For IYTA we might consider working with the home based ECE sector as registered visiting teachers can and do work intensely with children, educators, teacher and parents. C Rather than widen the acceptance criteria we need to use pathways more effectively. 	<ul style="list-style-type: none"> R Ensure there is enough lead in time before the programme starts so that parents have enough time to arrange their lives. R Keep supporting parents with fuel vouchers, paid child care and offer catch ups when needed. R Note that these families are not mainstream families. We need to acknowledge we are working in a disability space. R In the initial interview seek to understand the support relationships that are in place (or need to be in place). R Have parents from the previous programme address the group. R Need to build relationships with parents before programme starts. R Offer four home visits each programme. T Help parents choose schools that will be supportive. M Celebrate successes/milestones achieved. M Forms are time-consuming – have a separate home visit to fill in forms after the initial relationship building session. 	<ul style="list-style-type: none"> R Hold briefing sessions with parents/groups prior to enrolment. R Identify all agencies and stakeholders in regions that work with our families – eg Autism NZ, GPs, paediatricians. R Find linkages with other community groups in the areas where our families live – give presentations to them. A Educate schools and teachers about IYA – help them be champions for IYA even if they cannot be trained. A Encourage and empower regional offices to champion the IYAP/T relationship. A Run seminars for teachers explaining the programmes. A ‘Sell’ IYA to Principals so they support it. T Educate schools about IYA. C For IYAT, we need to consolidate and build slowly.

