



Parents Make the Difference: Liberia

Since I entered the training, today, my children and I are best of friends, we play together, have quality time with them and I always listen to them when they need my attention which never used to happen before. I didn't have the patience to sit and talk with them, but now I can't do without them

(Parent from Doe Community)

Liberia is recovering from 20 years of civil war and an Ebola crisis where families lost their way and children became the parent. The Parents Make the Difference program allows parents/caregivers to learn skills in order to retake control of their children's wellbeing. The Parents Make the Difference program focuses on promoting the wellbeing of young children by increasing the knowledge of their parents/caregivers in positive parenting and thus reduce the traditional (often harsh) parenting practices, improve child development, and promote hygiene prevention.

The Parents Make the Difference (PMD) program is an evidence based training program using a discussion-centered curriculum adapted from various evidence-based parenting interventions while using behavioral skills training to teach content. Session topics include: becoming a positive parent, communicating and connecting with children, child development, discipline with dignity, protecting your child from diseases: hand-washing that works, and other sessions that deal with education among other topics. The facilitators regularly undertake home visits in order to provide the caregivers an opportunity to refresh on lessons learned. PMD organized Parent Support Groups provide an opportunity for the caregivers to have a safe support space and also to remind them of the key program concepts.

The program also exposes parents/caregivers to the effects of negative parenting practices and provides them with alternatives to harsh punishment through positive parenting skills; how to promote children's numeracy, vocabulary, and communication skills; and hygiene prevention. Intervention fidelity (i.e., facilitators' adherence to program delivery and curriculum) is monitored by IRC technical and program staff. The parenting program is being evaluated by the Duke University and with support from the IRC technical team from both Liberia and Headquarters.

The program also focuses on the theory of Re- Parenting¹ with emphasis on three major focal issues:

- **Positive Parenting**: where the parents/caregivers show empathy and care for their children and respond to their basic needs on a daily and timely basis. The parents/caregivers are fully aware of their responsibilities as parents responding with positive communication, building strong attachment/bond.
- **Hygiene Promotion**; where the parents/caregivers protect their children from diseases/sicknesses; this component has an emphasis on **hand-washing**.
- **Education**; the parents/caregivers are taught to fully support the children in acquiring quality education from nursery through university so that the child becomes a reliable and productive adult to serve his family, community and the society.



¹ Re-Parenting in this context means the process of changing through training/education from the traditional concept of raising children (corporal punishment) to a more dignified (positive) one.

Parenting Makes the Difference was first launched in Liberia by the International Rescue Committee (IRC) 2012, focusing in Lofa County, Voinjama District in five local communities, focusing on 270 parents and caregivers of young children age 3 to 5 and was a combination of research (in collaboration with Duke University) and program implementation. Based on the Lofa County research findings, IRC was asked to scale-up into Monrovia in five urban slum communities, with 1,020 participants which is on-going.



During the six year implementation period (2012-2018) the IRC found that the parenting intervention was feasible and acceptable in this low-resourced, post-conflict setting. Participant's attendance was extremely high over the course of the program, in Lofa with 98% of participants in the treatment group very satisfied with the program. The intervention significantly reduced the use of harsh physical and psychological punishment. Caregivers who participated in the program reported an average decrease of 56% in the use of harsh punishment. In particular, the percentage of caregivers who reported beating, whipping, or spanking their children in the last four weeks decreased by 64%, 62%, and 56% respectively. The use of psychological punishment (e.g., yelling) also decreased by 29%. When asked what they did the last time their children misbehaved, only 9% of caregivers in the treatment group reported beating their children compared to 45% in the control group. Also the intervention significantly increased caregivers' use of positive behavior management practices and improved the quality of caregiver-child interactions.

My problem was my anger. I didn't know how to be patient with children. I was always angry with them for every mistake they made, either I beat or shout at them. But attending the PMD training, I learned that anger is a choice, you can choose to and not to get angry. Since then, I am careful what gets me angry. I learned the skills just in case somebody gets me angry, I either walk away, or take my deep breath or find my safe place among others.

(Parent from New Kru Town)

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