

The Parenting Role Interview (PRI):

A Fact Sheet for professionals in Children's Services

Centre for Abuse and Trauma Studies, Middlesex University www.lifespantraining.org.uk

This is a fact sheet summarising the measurement properties and key research findings of the Parenting Role Interview (PRI) to inform its use in health and social care services.

Background to the PRI

- The Centre for Abuse and Trauma Studies (CATs¹), Middlesex University provides research, both academic and applied, consultancy, practice training, media dissemination, continuing professional development, knowledge exchange and learning in a broad range of abuse and trauma-related topics across the lifespan, including with children, adolescents, adults and in older age.
- The PRI was originally developed in a large programme of research funded by the Medical Research Council (MRC) identifying vulnerability in families in relation to mental health by Professor Antonia Bifulco and her research team at the Centre for Abuse and Trauma Studies, Middlesex University. It was developed from the longer Self Evaluation and Social Support (SESS) research interview and its reliability and validity has been tested.

The Parenting Role Interview

- The PRI is a standardized interview tool which assess parents' and carers' **perception of their parenting strengths and weaknesses**. The PRI encourages the parent to talk openly about their role as parents; their **view of their children's difficulties; their day-to-day basic interactions with their children and their ability to provide good care and control**. Its focus is on the **parental role** and therefore asks about all children in the family, not only the one targeted by services. It does not directly measure neglect and abuse and other evidence-based measures are required for more 'investigative' or 'forensic' tools to establish neglect/abuse for child protection.

¹ <http://www.mdx.ac.uk/our-research/centres/cats>

- The interview lasts around 45 minutes and is audio-recorded so parents' and carers' verbatim comments can be used.
- Training in the measure for social workers and psychologists comprises of a two-day course covering the essential elements required for administering and scoring the instrument reliably.
- The questions are semi-structured, so are asked but more probing is usually required by the worker. The probes are for enough behavioural evidence of day-to day care to be described to allow the rating of the 6 PRI rating scales.
- Using 4 point scales of 1. Marked, 2. Moderate, 3. Some and 4. Little none, the PRI uses standardised thresholds for what constitutes 'good-enough' parenting, and aids practitioners to avoid the biases and 'halo effects' from clients' socially-desirable responses or misconceived ideas of what constitutes good parenting. In the PRI the assessor makes the final scoring and judgments are based on previously determined benchmarks, with semi-structured probing to determine evidence for a more in-depth picture of current parenting attitudes and behaviours, helps to counter-act such biases.
- The PRI is an evidence-based assessment tool that has gone through careful checks to show it is consistent and reliable in its use. The scores are based on a series of rules and rating procedures all outlined in the training procedure and interview packs and verified in research contexts, thus not based on practitioner opinion without evidence.
- The PRI is a current measure covering the last year of parenting. It is not a retrospective measure.

What Scales are used in the PRI?

1. **Child Difficulties & Concern about children:** The carer is questioned in detail about ongoing difficulties with the children in their care in order to determine what the challenges are in parenting, with the aim of developing a broad outline of the current child-based stressors in the family. As well as acute events, more chronic difficulties are also covered (such as health, psychological disorder, unmanageable behaviour and problems with peer interactions. The sections are:-

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| A: PHYSICAL HEALTH | B: EMOTIONAL DISORDER SYMPTOMS | C: CONDUCT PROBLEMS |
| D: PEER PROBLEMS | E: SUBSTANCE ABUSE | F: SEXUALISED BEHAVIOUR |
| G: SEPARATIONS/ CONTACT ISSUES | H: LOSS OF CHILD | I: EDUCATIONAL DIFFICULTY |
| J: ABUSE | | |

2. **Quality of interaction with children (Positive Interaction and Negative Interaction)**
 - A resilience factor in the PRI is high positive interaction with children as indicated by behavioural examples of child appropriate interaction and companionship. This is known to relate to better parent-child relationships and higher self-esteem in mothers.
 - Negative interaction involves the carer's reports of arguments, rows, quarrels and even violence with their children, as evidenced by recent examples and frequency. This is a risk factor for the child's development.

3. **Competence/Incompetence in parenting role.** Both competence and incompetence in the parenting role are reflected in the PRI.
 - In terms of carer strengths, high competence in parenting is related to higher self-esteem and better outcomes for both carer and children.
 - Incompetence in the parenting role is another risk factor associated with poorer parenting and worse outcomes for children, especially when linked to insecure attachment style.
 - As well as interviewer ratings the PRI offers parent's felt perceptions of how good they feel they currently are as parents and if they feel failures, e.g. compared to others.

4. **Insight scales.** Whilst many parents are able to given a reasonably accurate assessment of their parenting, some will *overestimate* their capacity for example, not seeing the difficulties the child is experiencing as in any way due to their behaviour and be blaming of the children, or others or circumstances. (Rates of 19% were found in community research). Others will *underestimate* their capacity through feelings of failure and self-blame despite being good at the parenting tasks. Some parents are overly self-critical and lacking in confidence with the evidence of parenting more skilled than they appraise it, these parents are often self-blaming (8% found in community research).

Key Findings using the PRI

- **Resilience in parenting capacity.** In the light of child difficulties described in the PRI assessments of the parents' positive interactions, and presence of high felt and estimated competence as parents would indicate resilience. It needs to be noted that not all child difficulties are the result of parental input (e.g. physical or learning disability, some psychological disorder, health difficulties, disability, bullying etc). Parents who cope in the light of such difficulty may be resilient, but may also need some additional support.
- **Risk in parenting capacity:** Where there are clear child difficulties and parents who report high levels of negative interaction with their children and have high estimated incompetence in their care and control in parenting, parents are clearly in need of help and support in their childcare role. Note should be paid to whether the parenting shortcomings are characterized by anger or helplessness. Also, it will be important to note whether the parent has any insight into their shortcomings in the parenting role. If the parent has such insight it may be easier to suggest courses of action to help improve their functioning as parents. If the parent lacks insight then strategies will have to be used to point out to the parent how their behaviour or attitudes may be negatively affecting the children.

Specific key findings from the PRI include:-

- The research team studied parenting in high risk London mothers for an MRC research study. They also separately interviewed their children who were older adolescents/young adults at time of the study. The PRI scale 'Estimated incompetence' in parenting from the mothers' account was associated with the young people's independent account of the mother's antipathy, neglect or physical abuse during their childhood.
- Attempts to ask the mothers directly about neglect or abuse were unsuccessful when compared with the offspring's account as very low rates of agreement were found and the study concluded that mothers under-report the extent to which they may have maltreated their children when asked directly.²

² Fisher, H., Bunn, A., Jacobs, C., Moran, P., & Bifulco, A. (2011). Concordance between mother and offspring reports of childhood adversity. *Childhood Abuse and Neglect*, 35, 117-122.

- Negative interaction with child is a vulnerability factor for maternal depression.³⁴
- The MRC research study was only about mothers, but relationship with partner and partners' behaviour was critical for both her parenting and child's neglect/abuse experience.
- The PRI can be used equally well on fathers with assessments of both parents/carers can give a more systemic account of parenting in a two-parent household.⁵

Use of the PRI in services

- The PRI can be used equally well on mothers, fathers, foster carers and kinship carers with assessments of both parents/carers can give a more systemic account of parenting in a two-parent household.⁶ It can be used in adoption or fostering services after placement to look at quality of parenting.
- Pilot work with safeguarding teams showed the PRI can be used successfully in Child in Need cases, both before and/or after direct work with parents. It has also been used as part of Core Assessments where the parent's own view of their parenting was a critical element. The PRI contributes effectively to reports on parental competence for children left with a 'safe' parent after abuse & for contact issues.
- The PRI cannot be used when the carer does not have children placed.
- The PRI is a reputable interview tool for assessing some aspects of risk or resilience in relation to parenting, however, as with all other tools, it should be used together with other tools as part of a comprehensive assessment. In Children's Social Care and Safeguarding contexts, therefore, additional assessment of other aspects of parenting capacity is essential for good practice, drawing on information from a range of sources.

³ Brown GW, Bifulco AT, Veiel HO, Andrews B. Self-esteem and depression: II. Social correlates of self-esteem. *Social Psychiatry and Psychiatric Epidemiology*. 1990;25:225-34, 3.

⁴ Brown GW, Bifulco AT, Andrews B. Self-esteem and depression: III. Aetiological issues. *Ibid.*:235-43.

⁵⁶ Bifulco A, Thomas G. *Understanding adult attachment in family relationships: Research, Assessment and Intervention*. London: Routledge; 2012.

Use in court

- The PRI is only one of many tools used to assess family strengths and difficulties and should always be used in conjunction with other assessments.
- The PRI provides an objective, evidence-based assessment tool that has gone through careful checks to show it is consistent and reliable in its use. The scores do not depend on the opinion of the professional undertaking the interview, but on a series of rules and rating procedures all outlined in a training manual and verified in research contexts. The PRI's reliability and validity has been tested in a number of sites and it is a reputable interview tool for assessing current social and psychological factors around relationships that highlight risk or resilience in relation to family life.
- Reports produced for court or panels using the PRI should give:-
 - 1) Headline description of the scales and the **client's scoring** with explanation of how they meet or diverge from the standard ratings of good enough parenting
 - 2) The crucially should also reproduce some of the **verbatim comments** to illustrate the relevant context, relationships and styles for transparency in order that the voice of the client can be represented. (This is also useful for client feedback, which is usually well received as it is based on the audio-recorded verbatim comments and scorings recorded in a standardised PRI pack with explanations of each scale and illustrative scoring examples for easy reading).
- Practitioners using the PRI for court work should be experienced users who have had previous cases checked with the CATs team for accurate scoring.
- To ensure consistency all PRI cases are required to be quality controlled with a fully trained colleague, or through the university team's low-cost checking service for more difficult cases. An electronic version of the Parenting Role Interview is available for license to agencies and individuals. For details of this, further research information or access to other practitioners who can endorse the PRI contact lifespantraining@mdx.ac.uk

Key PRI Reference: *Bifulco, A., Moran PM, Jacobs C, Bunn A. Problem partners and parenting: exploring linkages with maternal insecure attachment style and adolescent offspring internalizing disorder. Attachment & Human Development. 2009; 11(1):69-85.*