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Steps to Confident Parenting: An integrated service–research model

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Introduction

Parents with an intellectual disability (ID) or cognitive delay face unique challenges in navigating parenting responsibilities, often compounded by systemic bias and inadequate support (Varcoe et al., 2021). These factors contribute to their over-representation in child protection interventions. The Steps to Confident Parenting (STCP) program in the Barwon and Western Metropolitan regions of Victoria addresses this gap through a strengths-based, tailored approach that combines intensive parenting support with family services and a rigorous research component.

Program development

The program originated in 2017, when Meli (then Barwon Child Youth & Family) and Gateways Support Services identified high rates of child protection involvement among parents with ID in the Barwon region. They launched Supporting Parents with an Intellectual Disability (SPID), integrating family services with home-based parenting support.

Key milestones include:

- *2018:* Tweddle Child and Family Health Service joined, focusing on families with children under four years. Deakin University began developing an evaluation framework.
- *2021:* Adoption under the Victorian Department of Families, Fairness and Housing disability support strategy; cohealth joined, expanding delivery to Western Melbourne. Deakin secured research funding, including a dedicated research role at Meli.
- *2022–2023:* Formation of a research governance group; program renamed Steps to Confident Parenting.
- *2025:* Gateways concluded involvement; Meli and cohealth introduced internal Parenting Coach roles.

Steps to Confident Parenting Program

The STCP program is designed to support parents in safely caring for their children while addressing their developmental needs. It focuses on building sustainable care arrangements during critical life transitions and facilitating access to long-term supports to minimise future reliance on services. The program also assists parents in navigating the National Disability Insurance Scheme (NDIS) and advocating for parenting-related supports. A key objective is to maintain strong parent–child relationships, even when care services are involved. Additionally, STCP seeks to identify effective interventions and service gaps to inform future practices and enhance outcomes. Strengthening referral pathways for parents with suspected cognitive impairment and fostering cross-agency collaboration to support these parents are also central to STCP.

Integrated service model

Under the current model, each family is supported by a Family Services practitioner (Meli or cohealth), who provides flexible support and uses the North Carolina Family Assessment Scale (NCFAS) to assess family functioning, and an STCP practitioner (Meli or cohealth Parenting Coach for families with children over 4 years of age, or a Tweddle practitioner for families with children under 4 years of age), delivering an intensive, 8–12 week home-based parenting support tailored to cognitive needs.

Research component

Deakin University leads a Prospective Cohort Study targeting 100 parents over 3 years. Assessments independent of the care team occur at intake, 6 months and 12 months, measuring: family functioning; parental self-regulation; parental self-efficacy; and child mood and behaviour. Data are collected using an ecological systems approach (Bronfenbrenner, 1992), obtaining data from the parent, clinician and child protection services. The primary outcome variable of the study is statutory child removal at 12-months post intervention.

To date, the study has recruited 52 parents into the STCP evaluation, with 24 having completed their 6-month follow up, and two completing all study elements. Preliminary findings suggest that STCP leads to improvements in self-reported parenting ability, parenting confidence and perceived social support, and small reductions in child behavioural difficulties. In addition, clinician-reported outcomes suggest meaningful improvements in the coached behaviour, and data obtained from Child Protection Services suggest that engaging in SCTP may lead to reductions in statutory child removal.

Governance and collaboration

The collaboration is sustained through interagency operational meetings focused on program delivery and research governance meetings, ensuring the integrity of the evaluation. This structure supports transparency, rapid problem-solving and alignment with client and practitioner needs. Referral pathways have been refined to integrate research into service delivery and the research design has similarly been developed to ensure it aligns with clinical realities.

Benefits beyond the study

In addition to the primary evaluation, the established partnership between organisations has led to a number of additional benefits. Of note, the partnership has provided fertile soil for two doctoral-level investigations into the provision of care to parents with additional cognitive needs: one exploring the impact of parent mental health on the provision of family service interventions; and the other exploring the impact of intergenerational disability on parents. In addition, the development of the partnership model has increased the organisational capacity for research by upskilling staff and developing feedback mechanisms to ensure research learnings are shared with practitioners. When taken together, these benefits work to provide opportunities for inter-agency training and greater sector-wide adoption of evidence-based approaches.

Looking forward

It is our goal to use the basis of this collaborative partnership to expand both up and out. We will continue to recruit and develop the STCP evaluation cohort, including the establishment of a comparison cohort, and plan to provide greater access to the STCP program by altering referral pathways and through developing sector-wide training in the STCP model. In parallel, we will use the partnership to expand the evidence-based practice approach to clinical care and begin to evaluate other intervention programs to ensure that we are providing the highest quality care. It is our goal to advocate for sustainable access to STCP and to develop a scalable model for the evaluation and implementation of evidence-based interventions.

Conclusion

Steps to Confident Parenting demonstrates the potential of integrated service and research models to address systemic gaps, improve outcomes for vulnerable families and build a robust evidence base for future practice. By combining practical support with rigorous evaluation, this collaboration is leading the way toward more effective approaches to supporting parents with intellectual disability and their children.

References

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