

Appendix: Methodology

Overview of the evidence

This review adopted a rapid evidence assessment methodology¹ which assesses what is already known about a policy or practice issue. This methodology uses a more structured and rigorous search of available evidence than a simple literature review but is not as exhaustive and resource intensive as a systematic review. Rapid reviews draw on systematic approaches and are transparent in detailing the search, appraisal, synthesis and analysis methods of the review, but are pragmatic for applied policy research by constraining the process (such as the types of literature, search terms and quality appraisal) and not conducting exhaustive searches. In this case, priority was given to identifying existing reviews or meta-analyses to provide a rapid overview of relevant literature.

Scoping and search strategy

In consultation with the Department for Work and Pensions and local areas, EIF identified parents with mental health difficulties as a particular group of interest to explore how negative parental relationships in this population can impact child outcomes, and the role of risk factors. Additionally, 41.67 per cent of local areas that responded to our stakeholder survey in June 2021 (n=10) identified parental conflict among parents with poor mental health as a priority group in relation to their RPC work.

Thus, the review focused on six areas of interest:

1. The prevalence of parental mental health difficulties and parental conflict, as well as the prevalence of parental conflict among parents with mental health difficulties.
2. The relationship between parental mental health difficulties and parental conflict.
3. The prevalence and impact of financial pressure among parents with mental health difficulties.
4. The impact of additional risk factors, such as isolation, separation, caregiving, or substance use on the parental relationship in parents with mental health difficulties.
5. The impact of specific transition points, such as diagnosis of a mental health problem, that impact relationships among parents with mental health difficulties.
6. The impact on children of parental conflict among parents with mental health difficulties.

Academic literature was searched using Google Scholar as the primary database (up to page 15, to reach theoretical saturation). Six separate searches were conducted for each of the topic areas noted above. Search terms utilised, including truncated words and * for wildcard searches, were as follows:

¹ Grant, M. & Booth, A. (2009) A typology of reviews: an analysis of 14 review types and associated methodologies. *Health Information and Libraries Journal*, 26(2), 91–108

1. Anxiety OR mood OR depress* OR self-harm OR suicid* OR “mental health” OR mental AND Father* OR Mother* OR Carer* AND “Parental conflict” OR “Marital conflict” AND UK OR “United Kingdom”
2. Anxiety OR mood OR depress* OR self-harm* OR suicid* OR “mental health” OR mental AND Father* OR Mother* OR Carer* AND “Parental conflict” OR “Marital conflict” AND impact OR cause AND UK OR “United Kingdom”
3. Anxiety OR mood OR depress* OR self-harm* OR suicid* OR “mental health” OR mental AND “Parental conflict” OR “Marital conflict” AND financ* OR income OR unemployment OR poverty OR “economic pressure” OR debt AND UK OR “United Kingdom”
4. Anxiety OR mood OR depress* OR self-harm* OR suicid* OR “mental health” OR mental AND Father* OR Mother* OR Carer* AND “Parental conflict” OR “Marital conflict” AND “risk factors” OR social isolat* OR stress OR pressure OR blame OR stigma
5. Anxiety OR mood OR depress* OR self-harm* OR suicid* OR “mental health” OR mental AND Father* OR Mother* OR Carer* AND “Parental conflict” OR “Marital conflict” AND diagnosis OR transition OR timing
6. Anxiety OR mood OR depress* OR self-harm* OR suicid* OR “mental health” OR mental AND Father* OR Mother* OR Carer* AND “Parental conflict” OR “Marital conflict” AND UK OR United Kingdom AND outcomes OR impact AND child*

Grey literature was also sourced from a range of websites relevant to the topic area, including national and local government, the voluntary sector, and research organisations. A list of references from the above sources/searches was retrieved. Duplicates were removed and the titles, abstracts and tags were screened first. Where it was unclear from abstracts/titles if they should be included in the review, full texts were screened. The inclusion and exclusion criteria were as follows:

- **Types of literature:** Priority was given to systematic reviews, literature reviews and meta-analyses that provide an overview of synthesis of the evidence. Primary studies were included if relevant. Grey literature documents (e.g., policy papers, and government/VCS reports from reliable sources) were included.
- **Date:** only papers published since 1 January 2011 were included.
- **Full-text:** only papers with full text available were included.
- **Country of publication:** international papers were included, although UK (or UK comparison) studies were considered a priority.
- **Language:** only papers written in English were included.

In total, 71 articles of relevance were identified across the review categories and included in this rapid review. It is worth mentioning that we found no evidence that examined parental mental health and parental conflict in LGBTQ+ parents, although we did not explicitly search for evidence on this population.

Evidence assessment and extraction

The 71 identified articles included in this review were quality appraised (QA) by one research officer to provide an indication of the methodological quality of the study. The Mixed Methods Appraisal Tool² (MMAT, 2018) was utilised for primary studies, systematic reviews. Meta-analysis articles were appraised through the Quality Assessment Tool for Review Articles³; narrative review articles were

2 Hong, Q. N., Fàbregues, S., Bartlett, G., Boardman, F., Cargo, M., Dagenais, P. & Pluye, P. (2018). The Mixed Methods Appraisal Tool (MMAT) version 2018 for information professionals and researchers. *Education for information*, 34(4), 285–291.

3 Health Evidence TM (2005). Quality Assessment Tool – Review Articles: <https://www.healthevidence.org/documents/our-appraisal-tools/quality-assessment-tool-dictionary-en.pdf>

appraised through the SANRA tool.⁴ Evidence from each study was extracted and grouped according to the outcome domains measured, and in-line with the outcomes of interest discussed in the introduction.

Light-touch programme assessment

One intervention has been assessed for this guide: Behavioural Couple Therapy for Depression (BCT-D). This intervention has been selected because it is designed to support couples with depression and preliminary evaluation studies underpinning their evidence were identified. To conduct the light-touch assessment, we used the following approach:

1. We searched for impact evaluations of the selected interventions using the following search string on Google Scholar: impact OR evaluate OR evaluation OR intervention OR result OR affect OR effective OR efficacy OR efficacious OR trial OR study “intervention name”.
2. At least the first five result pages were screened for relevance of title and abstract, and where applicable full-text level. Where there were relevant hits on pages four or five, three further pages were searched. Only papers with a full text available in English were included. We did not include time restrictions, and both peer-reviewed articles and grey literature were included.
3. We only assessed the most robust study. To select the most robust study, priority was given to impact evaluations which:
 - » a). Reported parent/interparental outcomes and measured child outcomes or reported only child outcomes.
 - » b). Were conducted in the most robust way. For instance, we prioritised randomised controlled trials (RCTs) over quasi-experimental designs (QEDs), or selected studies with the larger sample or those reporting information on attrition or baseline equivalence.

After having selected the most robust study underpinning each intervention, we conducted a preliminary assessment, examining the quality of the study design, sample, measurement, analysis and impact. The results of our assessment are described in the ‘Evidence’ column in the [table below](#).

Please note that the other intervention included in the intervention table presented in the ‘BUILD’ section of the guide has been assessed as part of the [EIF Guidebook](#). You can find out more about the evidence underpinning such interventions on the corresponding Guidebook page, in the ‘About the evidence’ section.

⁴ Baethge, C., Goldbeck-Wood, S., & Mertens, S. (2019). SANRA—a scale for the quality assessment of narrative review articles. *Research integrity and peer review*, *4*(1), 1–7.

Intervention	Description	Evidence	References
<p>Behavioural Couple Therapy for Depression (BCT-D)</p>	<p>Behavioural Couple Therapy for Depression (BCT-D) is a psychoanalytic intervention targeting couples where at least one partner is depressed (as per clinical diagnosis).</p> <p>BCT-D seeks to equip couples with the knowledge to address depressive symptoms directly and manage partners' depression together.</p> <p>The intervention utilises a cognitive behavioural therapy (CBT) perspective, seeking to improve both relationship functioning and the partner's depression symptoms.</p>	<p>The intervention has evidence on parent outcomes, but not on child outcomes, from one pre-post study conducted in England. The conclusions drawn from this study are limited by the lack of demographic information provided which limits the generalisability of the findings. This study also had no control group which makes it hard to draw conclusions about causation.</p>	<p>Baucom, D. H., Fischer, M. S., Worrell, M., Corrie, S., Belus, J. M., Molyva, E., & Boeding, S. E. (2017). Couple-based Intervention for Depression: An Effectiveness Study in the National Health Service in England. <i>Family Process, 57</i>(2), 275–292. doi:10.1111/famp.12332</p>