

Valued outcomes across stakeholders of parenting programs in Sweden

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Abstract

Adaptations to evidence-based interventions often involve trade-offs between competing outcomes, yet little is known about how different stakeholders value these outcomes in specific intervention contexts. While implementation frameworks commonly assume inherent tensions between stakeholder priorities, these assumptions lack empirical validation for most settings and interventions. This study explores how stakeholders value outcomes in Swedish parenting programs to better understand what influences practitioners' management of fidelity-adaptation dilemmas. Through focus groups and individual interviews with parenting group leaders (n = 28), service managers (n = 16), and parents (n = 12), we examined valued outcomes using Kirkpatrick's training evaluation framework. The analysis revealed substantial alignment across stakeholders in valuing immediate outcomes (group support, engagement), learning outcomes (self-reflection, empowerment), behavioral outcomes (improved relationships, reduced conflicts), and long-term outcomes (child well-being, prevention). Stakeholders emphasized system-level outcomes (reach, trust) that operate at a broader organizational/community level. These findings nuance implementation science assumptions about stakeholder value conflicts and suggest that implementation strategies that address system-level constraints that prevent the achievement of largely aligned stakeholder goals may be called for.

2 Contributions to the literature

The study furthers understanding of what outcomes different stakeholders value in parenting programs. It highlights the fidelity-adaptation dilemma in real-world settings and offers insights into the overlap and potentially divergent priorities of group leaders, managers, and service users. This research informs the development of more effective and contextually relevant strategies to reconcile fidelity-adaptation dilemmas in practice. By exploring assumed stakeholder conflicts in a specific intervention context, this study suggests that system-level factors, rather than stakeholder conflicts, may sometimes drive adaptation decisions.

3 Background

Parenting programs are structured interventions designed to support parents in their roles. They typically focus on strengthening parent-child relationships, managing challenging behavior, and improving overall family well-being (1). While there is a substantial amount of research on the effectiveness of parenting programs in achieving these outcomes (2–4), the same results are not always achieved in practice (5, 6). This gap between research and practice is often attributed to varying levels of intervention fidelity - the extent to which intervention delivery adheres to the original intervention protocol (7, 8).

Modifications to evidence-based interventions can stem from various sources. Some represent unintentional drift from planned interventions (9), while others are deliberate strategies to address implementation challenges. For example, as the Triple P parenting program was implemented in Sweden, the time-out technique was modified to de-emphasize discipline to conform to local parenting values, as

this was deemed necessary for achieving acceptance by communities (10). Such deliberate modifications are termed *adaptations*, representing a specific subset of modifications made thoughtfully to enhance intervention fit while preserving core components (11, 12).

The situation where professionals choose between maintaining fidelity and making adaptations is often called the fidelity-adaptation dilemma, as it creates forced choices between multiple, sometimes conflicting outcomes (13). Such dilemmas are not purely technical; they are intrinsically linked to values, requiring professionals to consider the ethical implications of their decisions and their broader impact on service delivery systems (12, 14, 15). Values, which in this context refer to the relative importance stakeholders place on different outcomes when making implementation decisions, are traditionally defined as enduring beliefs or standards that influence behavior and decision-making across contexts (16, 17).

Implementation science literature commonly assumes that different stakeholders emphasize different outcomes. This is reflected in multiple implementation frameworks and reviews. Practitioners often prioritize feasibility, flexibility, and client engagement (18), while managers focus on efficiency, reach, and protocol adherence (19, 20). Service users are typically characterized as prioritizing relevance, accessibility, and immediate benefits (21, 22). These assumptions about divergent stakeholder priorities are embedded in influential implementation frameworks (23, 24) and guide many implementation strategies (25). Recent implementation research has highlighted how such competing priorities are inherent in evidence-based intervention delivery (13, 26). However, few studies have empirically examined whether and how these assumed priority differences manifest in specific intervention contexts (27) or how they influence adaptation decisions in practice (12).

Research explicitly examining parenting programs provides some support for these assumptions about stakeholder differences. Studies of practitioners have found that they particularly value program flexibility and adaptability to meet diverse family needs (28, 29). Managers overseeing these programs tend to emphasize broader implementation outcomes such as reach, sustainability, and cost-effectiveness (30). Parents participating in these programs often prioritize immediate practical benefits, accessibility, and cultural appropriateness (31, 32). However, despite pointing to stakeholders' diverse perspectives, none of the studies directly explored differences in stakeholder views.

While these studies provide valuable insights into different stakeholder perspectives, they have not directly compared views across stakeholder groups despite that differing priorities can create implementation challenges, such as when organizational factors constitute competing objectives (33). These potential differences in stakeholder prioritization could have significant implications for program implementation and adaptation decisions. Understanding how service users value different outcomes is critical, as their perspectives can influence program engagement, retention, and, ultimately, the successful implementation of evidence-based practices. It is also valuable to understand the role of outcome prioritization, given the frequent need to adapt evidence-based parenting programs for different populations and settings (34, 35). While previous research has examined stakeholder perspectives

separately, no studies have systematically compared how stakeholders value outcomes in parenting programs within the same implementation context. This comparison is crucial for understanding how varying perspectives might influence adaptation decisions in practice. This study aims to explore what kind of outcomes providers and recipients of parenting training value by addressing the following research questions: (1) What type of outcomes are valued by practitioners providing parenting interventions? (2) How do these values align or conflict with those of parents and managers?

4 Methods

4.1 Study design

A series of interviews (focus groups and individual interviews) was performed with leaders of parenting group training, managers of these services, and service users who had participated in such programs. We included group leaders, managers, and parents as key stakeholders to capture a comprehensive view of valued outcomes. Data were analyzed using a directed content analysis approach (36), aided by the Kirkpatrick model for training outcomes (37) to facilitate the categorization of outcomes identified to be of value by the participants.

4.2 Participants and recruitment

Parenting programs are offered across Sweden, primarily at the municipality level. Some of the most widely disseminated parenting programs are *All Children in Focus* (38), *Comet* (39), *COPE* (40), *Connect* (41), *Triple P* (42), and *Circle of Security* (43). For this reason, we approached services on the municipal level that offered any of these or equivalent evidence-based parenting programs.

4.2.1 Group leaders

Group leaders were recruited using stratified purposeful sampling (44) to ensure the representation of small, medium, and large municipalities. Public records were used to select 30 of Sweden's 290 municipalities. Eight small municipalities were excluded because they offered no evidence-based parenting program. Twenty-two municipalities were contacted, 17 responded and attended an initial meeting to discuss the study. Following this, eight municipalities agreed to participate in the study, with 28 group leaders agreeing to participate in focus groups.

Group leaders had an average age of 50 years (SD=11.4, range= 31–68), and they represented the following parenting programs: All Children in Focus (n=8), Comet (n=7), Triple P (n=6), Connect (n=4), and COPE (n=3). Their average experience working with parenting programs was 6 years (SD=4.17, range=1–18), and they had led an average of 12 parenting groups (SD = 9.28, range = 2–35).

4.2.2 Managers

Manager recruitment was done in two rounds. First, in conjunction with recruiting group leaders, five managers from the initially contacted organizations agreed to participate. After this, another 30 agencies were contacted using the same strategy used to recruit group leaders, which yielded another 11 managers, bringing the total to 16 participating managers responsible for leading teams of group leaders providing parenting support across Sweden. Team sizes ranged between four members in small teams and up to 40 in the largest team, with an average of 16 (SD=9.7) group leaders in each team. The managers were 50 years old on average (SD=8.10, range=33-60), with an average of 6 years of experience in their current capacity (SD=4.73, range=3-17). Professions represented were social workers (n=13), teachers (n=2), and psychologists (n=1).

4.2.3 Parents

Because of confidentiality regulations, it was not feasible to contact former participants in parenting programs directly. Instead, we asked group leaders participating in the study to distribute information about the study at the final session of one of their groups. Furthermore, a variant of snowball sampling (45) was used, and group leaders helped us establish contact with a few selected parents, who were then asked to spread information about the study to others who had participated in the program. Twelve parents, with an average age of 41 (SD=3.34, range=36-48), agreed to participate in the study. Most had participated in a universal parenting program (All Children in Focus), while three service users reported having attended an indicated program (Comet) as part of other contacts with social services.

4.3 Data collection

Eight focus groups were conducted, five with group leaders and three with managers. A semi-structured interview format was used, with open-ended questions to stimulate discussion on outcomes valued by participants. Sample questions: "What motivates you in your work with parenting programs?" "What are you hoping these interventions will result in?" and "Think back on a situation where you made some kind of adaptation to the program. What were your thought processes, and what did you try to accomplish?". At the start of each interview, the fidelity-adaptation dilemma was thoroughly introduced, and the interviewer repeatedly reminded participants that outcomes were related to this issue.

Service users were interviewed individually, and a similar interview guide was used for focus groups. However, the fidelity-adaptation dilemma was not emphasized to the same extent as in focus groups. Instead, questions were directed at service users' own experiences participating in the program, their expectations when starting and how well they were met, what they think the program will accomplish for them precisely, and, in general, their impression of what seemed to be crucial aspects of the program, and their reasoning for why.

All interviews were conducted in Swedish by the first author and, for two focus groups, by the second author as well. The meetings took place on Zoom online, and the video was recorded locally using third-

party software (VideoSolo). Each focus group lasted 90 minutes, and individual interviews averaged 25 minutes, ranging from 20 to 32 minutes.

4.4 Analysis

Interviews were transcribed verbatim by the first author (K.P.) and analyzed using a directed content analysis approach (36), using Kirkpatrick's model of training outcomes as a framework to organize and interpret the findings (37). Kirkpatrick's model is widely used to evaluate the effectiveness of training programs, and it is outlined as four levels of evaluation: reaction, learning, behavior, and results. These levels provide a structured approach to assessing the outcomes of various interventions.

Level 1: Reaction - Values assessing initial responses to the parental program, focusing on satisfaction, engagement, and delivery context from all stakeholder perspectives, particularly whether program content and delivery methods meet expectations and needs.

Level 2: Learning - Knowledge and skills parents acquire during the program and how much they have understood and absorbed the material presented.

Level 3: Behavior - Application of acquired knowledge and skills in real-world settings, such as changes in parents' behavior and practices following the program.

Level 4: Results - This level evaluates the broader impacts of the program. It considers the long-term benefits and the overall effectiveness of the training in achieving its goals.

Kirkpatrick's model was chosen as our analytical framework for several reasons. First, its temporal structure - progressing from immediate reactions to long-term results - is particularly relevant for understanding fidelity-adaptation decisions, which often involve trading off immediate versus long-term benefits. Second, while the model was initially developed for training evaluation, its hierarchical structure of outcomes matches the multi-level nature of parenting program implementation, where success depends on achieving proximal outcomes (like participant engagement) and distal outcomes (like improved child behavior). Third, the model's clear distinction between different outcome levels helps disentangle how various stakeholders might prioritize different outcomes, making it particularly suitable for our research questions.

The units of analysis were defined as phrases or sentences that captured participants' inclination to prefer, prioritize, or value specific parenting program outcomes. Following Hsieh & Shannon's (36) approach to directed content analysis, we used Kirkpatrick's model as an analytical framework to guide initial coding while remaining open to emerging categories that might not fit the model. This approach allowed us to benefit from existing theoretical concepts while preserving the ability to identify novel aspects of how stakeholders value outcomes in parenting program implementation. Thus, we began coding with an open approach to capture the full range of valued outcomes. This resulted in a preliminary set of codes such as "empowerment," "group support," "self-reflection/awareness," and

“relationship quality.” All authors then elaborated on these codes, and disagreement was resolved through discussion until a consensus was reached (46).

The identified categories were subsequently mapped to Kirkpatrick’s four levels, conceptualized along a temporal dimension: Immediate outcomes (Reaction), Short-term outcomes (Learning), Intermediate outcomes (Behavior), and Long-term outcomes (Results). Categories reflecting immediately available outcomes were classified as Reactions, those reflecting initial responses to program content were classified as learning, and outcomes related to the eventual application of program contents were classified as Behavior or Results based on their temporal occurrence. This approach allowed us to utilize the structure of Kirkpatrick’s model while remaining open to outcomes that might not fit within its framework.

4.5 Ethical considerations

The research received approval from the Swedish Ethical Review Authority (Dnr 2021–00832). Before the interviews commenced, participants were provided verbal and written explanations about the study’s purpose and involvement. They were assured that no personally identifying details would be disclosed and that they could withdraw their consent without providing a reason. Before the interviews, all participants provided written consent after being fully informed.

5 Results

The analysis revealed a range of diverse yet complementary perspectives across the four levels of training outcomes (47) (Figure 1). However, the analysis also identified an additional category of system-level outcomes operating at broader organizational and community levels that could not be mapped to Kirkpatrick’s individual-focused framework. These system-level outcomes reflect organizational and community conditions influencing program implementation and effectiveness. Stakeholders’ perspectives are summarized below, with system-level outcomes presented after the training outcomes.

[Figure 1]

5.1 Immediate Outcomes (Reaction)

Discussions on valued outcomes realized in the immediate delivery setting reflect participants’ initial reactions, perceptions, and responses to the service delivered.

5.1.1 Group Support and Shared Experience

Group leaders, managers, and parents all emphasize the importance of the communal aspect of the programs. A group leader expressed this sentiment: “It is still so valuable and essential to come

together, both for us professionals and other parents.” This highlights how shared experiences and mutual support among parents are valued. Managers note that parents often find strength in realizing they are not alone. As one manager states, “It is a matter of recognition. That there are several of us, I am not alone in struggling with this. That becomes a strength in itself.” Parents, too, express relief in the realization of shared struggles, with one parent reflecting, “I personally feel that it was so liberating to sit and talk and share, to hear others, to feel that many are going through the same thing.”

5.1.2 Engagement and Satisfaction

The level of engagement and satisfaction with programs service users experience is closely tied to their positive or negative experiences and feelings of connection with the program’s content and delivery. Parents also appreciate a personal approach from group leaders. A parent highlights this by suggesting that group leaders could benefit from sharing more personal stories: “Maybe one would like a slightly more human side from the leaders, that they could share some examples from their own lives.” In contrast, managers do not discuss this aspect explicitly, except for one saying: “Parents appreciating us. That motivates me.” While managers acknowledged the importance of parent satisfaction, they tended to discuss engagement more in terms of program reach and sustainability rather than individual participant experiences. Group leaders stress the importance of reaching parents in the moment, gauging from parents’ immediate reactions whether the material is resonating with them. One of the group leaders remarks, “The most important thing is that the parents understand what we are talking about, and you can actually see it in their eyes, their gaze, you see it in their body, you see if the parents have truly understood it or not.”

5.2 Short-Term Outcomes (Learning)

These outcomes reflect the immediate application and learning resulting from the intervention.

5.2.1 Self-reflection and awareness

Group leaders broadly agree that one of the most critical outcomes of parenting programs is to stimulate parents to reflect on and understand their parenting behaviors. One group leader illustrates this by saying, “That parents start reflecting on what they do, it makes a difference in how many conflicts there are.” Managers echo this sentiment and add that this reflection can lead to a broader understanding of child development. One manager says, “I think it is also a matter of knowledge, that you learn something new.” Parents also value increased awareness, but describe this outcome more in terms of an ability to actively choose what to do. For instance, a parent shares, “To become more aware of one’s actions. That sometimes, when you are aware, you can choose differently than when you just do.”

5.2.2 Empowerment and parental well-being

All stakeholders recognize the importance of empowering and supporting parents' well-being. Group leaders strive to boost parents' confidence and capability in handling parenting challenges, as one group leader emphasized: "That parents should really make life easier for themselves and their children." Managers agree that parenting programs should empower parents to believe in their abilities, as one manager stated: "That parents have the courage to be secure and trust themselves as parents." In contrast, parents emphasized that they primarily value the practical aspects of the intervention, which help them manage their stress and improve their parenting efficacy. A parent mentions, "I guess I was hoping to get good tools to create a good structure at home." Stakeholders framed these gains in confidence and security as a learning-level outcome that precedes and enables behavioral change: parents who come to trust their own capacity are then better positioned to act differently in their parenting, which in turn supports children's well-being.

5.3 Intermediate Outcomes (Behavior)

These outcomes reflect changes in behavior resulting from the application of learning.

5.3.1 Improved Relationship Quality

Improving the parent-child relationship quality is a primary goal for all stakeholders. Group leaders and managers emphasize fostering positive interactions between parents and children. A group leader remarks, "To see parents say that they reach their children, that they have more positive moments." Managers note that spending quality time together enhances these relationships, with one manager describing, "Spend more time with your child, and enjoy being together." Parents also desire to strengthen their relationships with their children, aiming for long-term benefits. One parent reflects this by saying, "Our relationship with our children should be long-term."

5.3.2 Reduced Conflicts

Group leaders emphasize that reducing conflicts is a key aspect of improving relationships, pointing to the importance of improving parenting practices. A group leader notes, "If I were to answer what parents themselves say when you evaluate and ask them, I think they would say fewer arguments." Parents highlight the value of finding ways to manage and reduce conflicts at home, with one parent stating, "I believe that the greatest benefit is finding ways to avoid unnecessary conflicts." Managers do not mention this outcome in their discussions.

5.4 Long-Term Outcomes (Results)

These outcomes reflect the sustained impact and broader societal benefits of the intervention.

5.4.1 Children's Well-being and Healthy Development

Ensuring the long-term healthy development of children is valued by all stakeholders. Group leaders emphasize preventive measures to support children's development, believing early interventions could have lasting positive effects. A group leader states, "It's about health, both mental and physical. Mental well-being, that everyone feels good." Managers are in broad agreement, with one manager mentioning, "Fundamentally, my driving force is that the children should be able to grow up in a safe environment." Parents recognize the long-term benefits for their children's development and societal well-being, with a parent noting, "You build self-esteem in the child that makes them feel worthy and secure."

5.4.2 Prevention of Social Problems

Group leaders discuss the preventative aspect of addressing potential issues through effective parenting. As one group leader states, "Crime prevention, that one does not need to choose other alternatives to seek belonging or feel validated." Managers emphasize reducing social issues through early intervention, with one manager noting, "For me, it is the preventive work. That is where we can work and change the future." Parents also reflect on the broader societal benefits, with one parent saying, "That in itself is good for society to raise secure individuals. So that one doesn't go astray. I believe that if you are a secure individual in a society, there is also a greater chance that you contribute to a secure and good society."

5.5 System-level Outcomes

The analysis revealed perspectives from group leaders, managers, and parents transcending Kirkpatrick's individual-focused training framework. These system-level outcomes - reach and trust - operate at broader organizational and community levels, influencing program implementation and effectiveness across all training outcome levels. While not directly part of the training delivery process, these outcomes emerged as crucial factors shaping how parenting programs function within their broader implementation context.

5.5.1 Reach and Accessibility

Ensuring program reach and accessibility to a broad audience is valued by all stakeholders, underscoring the importance of extending the program's benefits to as many parents as possible, particularly those who might not easily access such resources. Group leaders desire to see the program spread widely and reach those most in need. For instance, a group leader highlights this goal: "I want to reach all parents and all those parents who have difficulty coming to us. They are often the ones we need to reach, who

need these extra tools, who need support in their family life.” This sentiment is echoed by managers who stress the importance of broad outreach to ensure early and widespread intervention, as expressed by one manager: “The most important thing is to reach out.” Parents also recognize the need for these programs to reach a broader audience, with one parent reflecting, “It is still me as an active parent who goes there and chooses, and I am already an active parent, so I think that there might be another clientele who might need this more.”

5.5.2 Trust

Building and achieving trust in the broader community and in the context of starting a new group are discussed as necessary preconditions for accomplishing other things of value. Group leaders emphasize the importance of building trust within the community and promoting the benefits of the programs. This frequently trumps the faithful delivery of program content, as an example from one of the group leaders implies, “It feels like a win just that we get to be seen in such a context.” Managers mainly discuss the broader community aspects of trust, such as reducing the stigma of seeking help and promoting other preventive services, with one manager stating, “We are not dangerous but are for everyone, it is preventive. You will not have your children taken away because you accept help. You are not a bad parent because you want to attend a training.” In contrast, parents emphasize the credibility of group leaders and the content, expressing trust that the information is based on established evidence. One parent even emphasized this directly, “Since they claim that this is evidence-based, then one should follow what they have set in the program.”

6 Discussion

While implementation frameworks often posit inherent tensions between stakeholders’ goals (48, 49), our exploration of valued outcomes in parenting programs revealed both alignments and differences across stakeholders. The shared emphasis on group support, self-reflection, and children’s well-being suggests that core intervention outcomes can unite stakeholder perspectives, even when their organizational roles and responsibilities differ. This alignment contrasts with implementation literature assumptions about conflicts between service quality, organizational efficiency, and user needs (14, 50). Reach and trust, identified as crucial by all stakeholders, operate at broader organizational and community levels than traditional training outcomes do. This finding aligns with implementation frameworks that emphasize the importance of considering multiple levels of context in implementation (23, 51).

6.1 Congruencies Across Stakeholders

One notable area of congruence among stakeholders was the emphasis on immediate outcomes related to group support and shared experiences. All stakeholder groups emphasized the value of communal learning environments, which aligns with previous research indicating that group-based interventions

can foster social support and shared learning (52), and that mutual support improves parents' engagement and satisfaction with programs (53).

Another notable area of congruence was the stakeholders' predominant focus on parents as the primary agents of change. Whether discussing immediate outcomes such as engagement, learning outcomes such as self-reflection, or behavioral outcomes such as improved relationships, stakeholders consistently emphasized parents' roles, experiences, and development. Even when discussing children's well-being as a long-term outcome, stakeholders typically framed this in terms of enhanced parental capabilities and behaviors. This parent-centric perspective aligns with the fundamental premise of parenting programs - that supporting and strengthening parents' capacities is the key mechanism for improving child outcomes (42, 53).

Short-term outcomes, particularly self-reflection and increased awareness, were also valued across stakeholders. The emphasis on empowering and supporting service users' well-being was consistent across groups, with group leaders and managers emphasizing parents' confidence and capability. This aligns with literature suggesting that empowerment is crucial in effective parenting programs (3, 54).

Another point of agreement was the long-term goal of promoting children's well-being and healthy development. Both group leaders and managers stressed the importance of early interventions for long-term benefits, echoing findings highlighting the preventive potential of early parenting programs (4, 55). When stakeholders' perspectives align, as seen in the shared emphasis on group support and children's well-being, it may create a favorable environment for program implementation and adaptation (56). Group leaders can make adaptations that resonate with service users' needs while aligning with organizational goals.

While Kirkpatrick's model effectively captures individual-level outcomes, our results demonstrate that stakeholders also emphasize outcomes operating at organizational and community levels. This emphasis on making an impact in communities is well-recognized in the field of implementation science (14, 51). Similarly, promotion and widespread reach have been a target for parenting programs (57-59). However, Kirkpatrick's model does not explicitly address system-level outcomes, which is also noted by critics of the model (60). This shortcoming has given rise to alternative frameworks in the training evaluation literature that incorporate ideas on the importance of preconditions for practical training. One relevant framework is the Context, Input, Process, and Product (CIPP) model (61), which emphasizes the need to consider the context and input factors that can affect the success of a program before evaluating processes and outcomes. This model inherently acknowledges the importance of contextual factors in achieving desired outcomes.

6.2 Divergent Perspectives

While stakeholders were generally aligned on most outcomes, notable differences emerged in how certain aspects were conceptualized and prioritized. Managers tended to emphasize organizational

sustainability and broad reach, while practitioners focused more on the quality of immediate engagement with parents. Although expanding program reach and maintaining high engagement quality are not inherently conflicting goals, resource limitations often force practical trade-offs. Recent studies of parenting program implementation have documented how limited time, staff, and funding create tensions between reach and quality (59, 62). For example, van Leuven et al. (2023) found that during a nationwide scaling of a parenting program in Sweden, services had to balance between reaching more families and maintaining program quality. In contrast, some parents in our study, somewhat unexpectedly, emphasized evidence-based credibility and expressed concern about program fidelity.

6.3 System-Level Considerations

The emergence of reach and trust as system-level outcomes highlights organizational and community factors in the implementation of parenting programs. While Kirkpatrick's model focuses on direct training outcomes, these system-level outcomes operate at broader organizational and community levels. This complexity creates potential tensions between system-level priorities and intervention-level delivery. For instance, group leaders' efforts to build community trust may require modifications that could compromise program fidelity, a tension well documented in the cultural adaptation literature (63, 64). Similarly, expanding reach to underserved populations often necessitates adaptations that affect program delivery (8, 51).

The relative alignment among stakeholders raises questions about common assumptions in implementation science regarding the need for extensive stakeholder engagement processes to reconcile competing priorities (25). While such processes remain valuable, our findings suggest that, sometimes, addressing system-level constraints that prevent stakeholders from achieving their largely aligned outcome goals is also a viable option.

6.4 Implications

Research has primarily focused on the effectiveness of parenting programs in improving child behavior and parent-child relationships (2, 4). However, there has been limited exploration of how different stakeholders perceive and prioritize these outcomes, particularly in the context of the fidelity-adaptation dilemma. For this dilemma, the broad alignment we observed has a double-edged implication. On one hand, it suggests that when practitioners adapt programs, they are not necessarily trading off against what parents or managers value at the level of individual outcomes, since stakeholders largely converge on supporting the parent-child relationship and children's well-being. On the other hand, the prominence of system-level outcomes such as reach and trust introduces a distinct pressure: adaptations made to satisfy organizational demands for broader reach or continued credibility may erode the program elements that parents in a given group value most, even when no conflict exists at the level of stated goals. The fidelity-adaptation dilemma may therefore play out less as a clash between stakeholder priorities and more as a tension between individual-level outcomes valued within the group and system-

level outcomes that the program must also serve. Rather than focusing primarily on managing stakeholder priorities and potential conflicts, implementation strategies that address system-level constraints preventing the achievement of largely aligned stakeholder goals may be warranted. This could involve (1) developing adaptive program designs that maintain core components while accommodating system-level requirements for reach and trust, (2) creating implementation support structures that help practitioners navigate resource constraints without compromising key outcomes, and (3) focusing stakeholder engagement efforts on identifying and addressing system-level barriers rather than resolving presumed value conflicts.

6.5 Methodological Considerations

The various factors relevant to understanding fidelity and adaptation are notoriously challenging to study, often requiring qualitative approaches to penetrate research questions fully (65, 66). Using a qualitative approach for the present study, we managed to identify a range of valued outcomes across stakeholders. However, our study did not explore how these differences influence real-world decisions. This limitation reflects a broader challenge in capturing adaptation processes (65). Furthermore, our focus on the Swedish context may limit the applicability of our findings to other cultural or organizational settings. Cross-cultural comparisons could provide valuable insights into how valued outcomes in parenting programs may vary across different contexts.

Despite these limitations, our study provides a helpful starting point for exploring stakeholder views on valued outcomes in parenting programs, particularly in the context of the fidelity-adaptation dilemma. Future research could benefit from observational studies or decision-making analyses that explicitly examine how varying outcome priorities affect adaptation decisions in practice, thereby adding to the budding literature on fidelity-adaptation decisions (12, 67-70).

Conclusions

This study contributes to implementation science by offering additional perspectives on stakeholder priorities in implementation processes. Our exploration of Swedish parenting programs found substantial alignment in valued outcomes across different stakeholder groups, suggesting the value of examining assumed stakeholder conflicts within specific implementation contexts. The study also highlights the importance of system-level outcomes complementing traditional individual-focused evaluation frameworks, indicating potential benefits in considering individual and system-level factors in implementation models. Our findings suggest that when professionals adapt programs, they take into account not only the people in the room but also system-level demands such as reach and trust; some implementation challenges may therefore reflect these broader system-level considerations rather than conflicts in what stakeholders value, pointing to the potential value of implementation strategies that address structural barriers alongside stakeholder needs. Future research could productively examine how system-level factors influence the achievement of both individual and organizational outcomes in

various settings, and how implementation strategies might be designed to address these broader contextual challenges while maintaining program effectiveness. These insights add to our understanding of implementation processes and suggest promising directions for future investigation of how different outcome levels interact in implementation work.

Declarations

Ethics approval and consent to participate

This study was conducted in accordance with the Declaration of Helsinki. Ethical approval for the study, including all data collection, was granted by the Swedish Ethical Review Authority (reference no. 2021-00832). All study participants provided informed consent.

Consent for publication

Not applicable

Availability of data and materials

The datasets used will be available from the corresponding author upon reasonable request.

Competing interests

The authors declare that they have no competing interests.

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Authors' contributions

The study was jointly conceptualized by all authors. K.P. conducted data collection, performed the primary analysis, and drafted the manuscript. P.L. contributed to the data collection and analysis verification. F.G. contributed to critical revision of the manuscript. U.v.T.S. secured funding for the study and supervised it, contributed to the analytic framework, and critically revised the manuscript. All authors read and approved the final manuscript.

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Figures

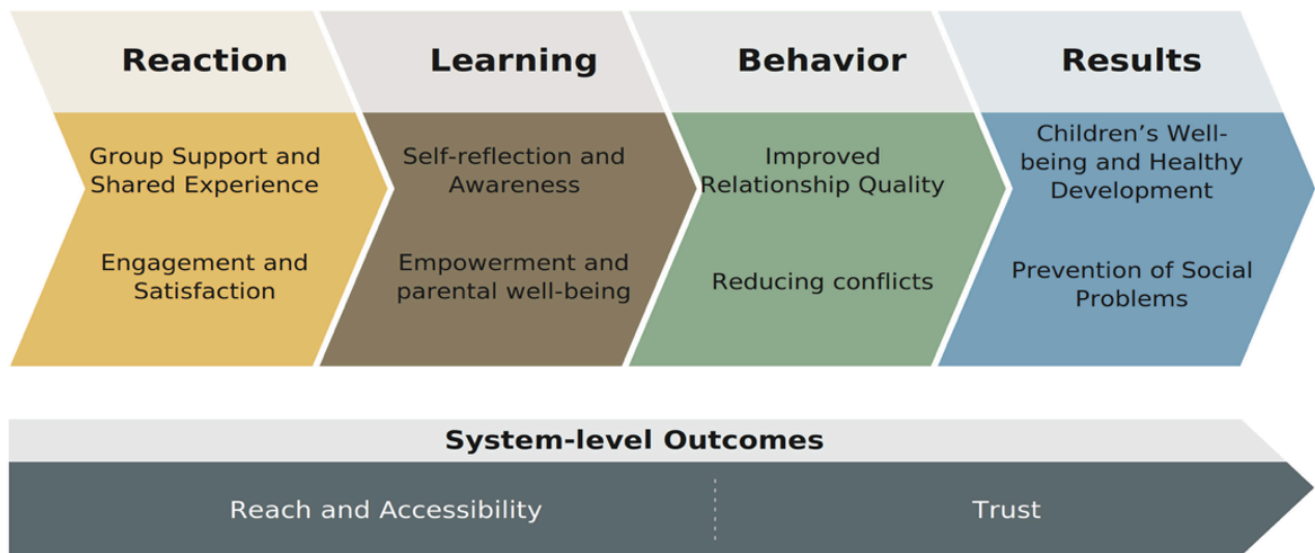


Figure 1

Identified categories of valued outcomes mapped to Kirkpatrick's four levels of training outcomes. The additional category of system-level outcomes (reach and trust), which operate at broader organizational and community levels and cannot be mapped onto Kirkpatrick's individual-focused framework, is shown as a separate band spanning all four training outcome levels.