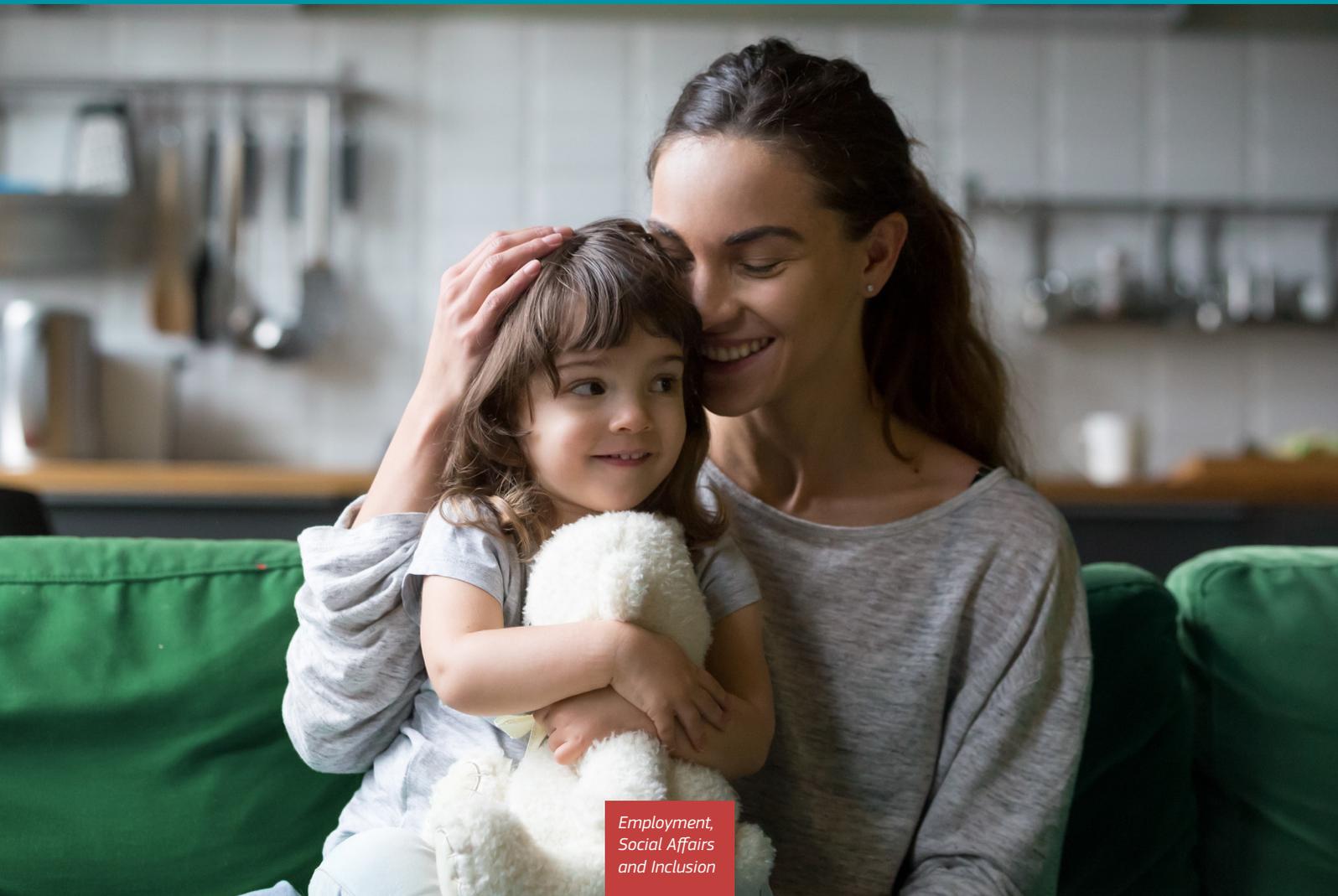




Positive Parenting Interventions

Empowering parents with positive parenting techniques for lifelong health and well-being



Employment,
Social Affairs
and Inclusion

Overview

This memo provides a brief introduction to parenting interventions, including what they are, why they are important, and how they can be used to promote lifelong health and resilience in children. This memo also provides guidance on the types of parenting interventions that are available, how they could be accessed, as well as the factors that must be considered in deciding when, where and for whom specific parenting interventions should be implemented. The target audience of this memo are organisations providing support and / or guidance to parents.

Parenting interventions aim to improve children's health, behaviour and well-being

Parenting interventions refer to any parent or family-based education programme that aims to impact children's emotional, cognitive, behavioural and health-related outcomes through the improvement of parenting skill and the parent-child relationship.¹ Alongside childcare provision, prenatal care, postnatal home visiting and family support policies (e.g. welfare benefits, parental leave and other workplace policies), parenting interventions constitute one of several ways in which EU member states can promote the welfare of children and families. The support offered by parenting interventions is largely practical and psychological in nature,² and is generally deployed to improve children's cognitive and language development,³ to prevent or reduce child problem behaviours and mental health problems,⁴ and to combat harsh parenting and child maltreatment.⁵

BOX 1: HOW CAN PARENTS ACCESS PARENTING INTERVENTIONS?

There are several ways parents can access parenting programmes. For instance, parents can be referred to take part in a specific intervention by their family worker, a staff member from the nursery or school that their child attends, or a social services worker. Parents can also self-refer to get access to parenting programmes, for instance through the family centres delivering services in the local community, sign up to online programmes, or participate in programmes run in educational settings.

Some parenting interventions are intended for universal rollout to all families; however, evidence suggests that they are most effective in improving child outcomes either when targeted at families with some level of need or vulnerability, or when used to address identified behavioural problems in children. The combination of the targeted approach for high-risk children and their parents, and integrated and multiagency working seems to be the most effective delivery method to reach out to those families who are most in need.⁶

Parenting interventions empower parents to be better parents

Policy interest in the quality of the parent-child relationship has intensified since the 1990s, largely due to research findings that identified early childhood as a critical window in human development.⁷ Studies surveying thousands of adults on their current health status and past exposure to such experiences as poverty, the incarceration or death of a parent, and substance abuse or violence at home, identified strong correlations between childhood adversity and many of the leading causes of death and illness in adulthood.⁸ Harsh and abusive parenting are now recognised to leave children vulnerable to a wide array of negative outcomes in adulthood (see Box 2), and studies have further underlined that the absence of a nurturing caregiver can be just as harmful as the presence of a harsh or abusive one.⁹

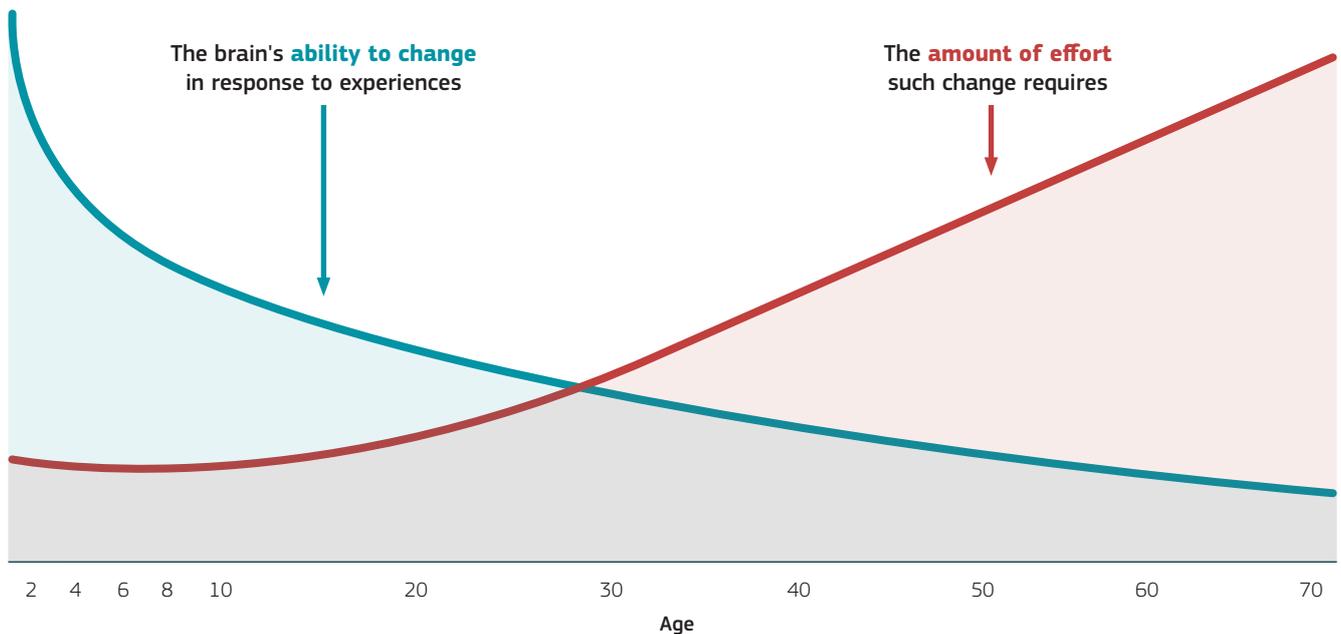
Although cases of extreme child abuse and neglect are relatively rare, lower-level exposure to childhood adversity is fairly common in the general population, and can still be detrimental to child well-being. Additionally, parenting strategies that are neither harsh nor abusive may nevertheless contribute to negative child outcomes. Parenting styles classed as excessively permissive or controlling, for example, have been linked to the development of child and adolescent behaviour problems.¹⁰ Conduct disorder, a prevalent mental health problem that encompasses rule-breaking, defiance, poor impulse control and aggression, is also recognised to stem at least partly from deficits in parenting strategies.¹¹ The consequences of leaving affected children untreated are costly and include delinquency, criminality, school failure, substance abuse, early pregnancy and various physical and mental illnesses.¹² As a consequence, the range of families who can benefit from parent training and support is remarkably broad.

Most of the studies highlight the relative ease of behavioural change and effectiveness of preventive measures when applied in the early years (see Figure 1). However, as recent evidence suggests, intervention beyond the childhood age can also be cost-effective and efficient (see Box 3).

The benefits of positive parenting are wide-ranging

Studies clearly indicate that parenting is the single strongest determinant of a child's future development. Positive parenting, defined as a warm and supportive parent-child relationship, is an essential element of children's emotional well-being¹³ and resilience, and can limit the harm caused by bullying,¹⁴ family poverty,¹⁵ intimate partner violence¹⁶ and even sexual abuse.¹⁷ The use of positive disciplinary techniques by parents has also been linked to a range of positive child outcomes. In contrast to aggressive punishment strategies like hitting and shouting, non-aggressive punishment strategies such as ignoring, removing privileges, or the use of 'time-out' are

FIGURE 1: THE BRAIN'S ABILITY TO CHANGE VERSUS AMOUNT OF EFFORT REQUIRED



Source: Harvard University Center on the Developing Child (2018)¹⁸

linked to long-term reductions in both conduct disorder and emotional problems.¹⁹ Parental monitoring and involvement can limit rates of adolescent substance abuse,²⁰ while parental monitoring of children's screen time in particular can benefit children's sleep, social functioning and academic outcomes.²¹ Furthermore, authoritative parenting practices such as limit-setting, non-coercive rule reinforcement and the structured promotion of children's autonomy, are associated with increased physical activity, healthier diets²² and better academic engagement²³ and performance.²⁴ As parenting interventions aim to support parents in adopting these specific skills and strategies,²⁵ and have been shown to do so across a range of cultural contexts,²⁶ they have the potential to increase the number of children who can reap the many benefits of positive parenting.

Types of parenting interventions

The full extent of the relationship between parenting and children's long-term physical and emotional outcomes has been uncovered relatively recently. However, formal and rigorously tested programmes that use parenting as a modifier of child behaviour date back to the 1970s.²⁷ These pioneer interventions laid the foundation for many contemporary parenting interventions, for instance Incredible Years,²⁸ Parent-management training Oregon²⁹ and a range of other programmes incorporating emergent research findings and additional theoretical perspectives.

The parenting interventions that have since been developed are varied and numerous; however, they share the broad aim of improving children's health, well-being and behaviour by

BOX 2: THE CONSEQUENCES OF HARSH, NEGLIGENT OR ABUSIVE PARENTING

Child physical, emotional and sexual abuse and neglect have been implicated in the development of a vast array of negative long-term outcomes, including:

- **chronic physical illnesses** such as arthritis, ulcers, migraine, obesity and heart disease;
- **psychological issues** such as depression, anxiety, self-injury, suicidal ideation, eating disorders and dissociative disorders;
- **child conduct disorder** and problem behaviour;
- **health risk behaviours** such as smoking, early or excessive alcohol consumption, illicit substance abuse, sexual risk-taking, early pregnancy and the contraction of sexually transmitted diseases.

Negative child outcomes have also long been linked to parenting styles that fall short of meeting the criteria for abuse but can be characterised as **'harsh'** and **'inconsistent'**. These include:

- child aggression and callous-unemotional traits;
- conduct disorder and behaviour problems;
- delinquency.

Source: Manquillo (2009);³⁰ Meier et al. (2009);³¹ Hoeve et al. (2009);³² Norman et al. (2012);³³ Waller, Gardner & Hyde (2013)³⁴

BOX 3: PRACTITIONER CHECKLIST: WHAT ORGANISATIONS PROVIDING SUPPORT OR GUIDANCE TO PARENTS NEED TO CONSIDER WHEN CHOOSING A PARENTING INTERVENTION

1. What are the target outcomes of the intervention? Is a parenting intervention the most effective way to achieve the target outcome?

- Possible **parent-specific** outcomes include:
 - increased parenting consistency, efficacy and warmth;
 - increased use of positive parenting techniques;
 - reductions in parenting stress, harsh discipline or child abuse and neglect.
- Possible **child-specific** outcomes include:
 - improved cognitive or language skills, mental health or well-being;
 - reduced antisocial behaviour, conduct disorder, truancy or delinquency;
 - prevention or reduction of alcohol, tobacco or illicit substance abuse.
- In cases of extreme child maltreatment, neglect or poverty, parenting interventions may be insufficient to achieve the target outcomes on their own. **Child protection system responses** aimed at supporting struggling families, which also include appropriate evidence-based parenting programmes, may be more effective ways to meet these families' most urgent needs.

2. What is the target age range of the children?

- Some interventions can be tailored to children across a wide age range (e.g. 2–9), while others are only appropriate for a specific age group.
- Possible age ranges include infancy (age 0–1), toddlerhood (ages 1–3), pre-school age (ages 3–5), middle childhood (5–9), pre-adolescence (10–12) and adolescence (13–18).

3. How much will it cost to implement the intervention? Is the intervention the most cost-effective to achieve the target outcome?

- The cost of the intervention will vary depending on a range of factors, including:
 - **mode of delivery** – face-to-face by professionals, or remotely through podcasts, television or online courses;
 - **method of delivery** – home interventions with individual families, or interventions at centres delivered either to a group of parents or to individual families;
 - **intervention materials** – licensed or freely available;
 - **costs of training, ongoing supervision and support for professionals** – both are vital to achieve and sustain good outcomes;
 - **other aspects**, such as intervention duration, intensity, dosage, etc.

4. How likely is the intervention to achieve its target outcomes?

- Parenting interventions are much more likely to achieve their target outcomes, if they have been shown to work in rigorous trials. Trial evidence suggests that some parenting interventions appear to 'transport' well across Europe – even to very different contexts and ethnic groups.³⁵
- However, it is important to note that older, more established programmes may have stronger evidence partly due to their longer research histories. On the other hand, there are also programmes that run over a long period in multiple locations that do not have strong evidence of effectiveness.
- Newly emergent programmes may still be worth considering, as long as:
 - they have a clear theory of change;
 - they feature methods of working that are innovative;
 - **some** initial trial evaluations of the programme show **positive intervention effects**; **significantly fewer** trials show that the intervention is **ineffective**, and **no** trials show that the intervention is **harmful**.

enhancing the quality of the parenting they receive. This is achieved through parent education and training, and usually involves providing parents with examples of techniques of how to communicate effectively, reduce harsh discipline, set boundaries, model and reinforce good behaviour, and respond consistently and non-coercively to bad behaviour. Many programmes also focus on cultivating warm parent-child relationships in parallel, primarily through the use of praise, affection and responsiveness to children's needs.³⁶

Some parenting interventions bring positive effects...

Systematic reviews of parenting interventions have demonstrated that they effect a strong, consistent and lasting impact upon children's conduct disorder and behavioural problems, both in their country of origin and when transported across countries.³⁷ Parenting interventions have also demonstrated measurable reductions in known risk factors for child maltreatment (e.g. parent depression or parent stress),³⁸ as well as harsh parenting and hard markers of child physical abuse.^{39,40} Economic analyses show that these programmes are effective in improving child outcomes, and cost saving as long-term preventive interventions are typically more cost-effective than corrective programmes.⁴¹

...but questions still remain about the effectiveness of parenting interventions across different settings and populations

The strong evidence in favour of parenting interventions has prompted a range of governments and international bodies to encourage their rollout worldwide, including the World Health Organization,^{42,43} the European Commission,⁴⁴ UNICEF⁴⁵ and the United Nations Office on Drugs and Crime.⁴⁶ However, there are still gaps in evidence on the effectiveness of different branded programmes, and critical engagement with supporting evidence is essential when determining which parenting intervention to implement. For example, Triple P, Incredible Years, Parent-Child Interaction Therapy and Parent Management Training-Oregon are parenting interventions that have been found to be effective over many years of evaluations, both in their countries of origin and when transferred abroad.⁴⁷ In contrast, the Strengthening Families Program yielded positive effects among families in the United States,⁴⁸ but failed to replicate these effects when it was implemented in Sweden⁴⁹ and Poland.⁵⁰ Furthermore, a recent review of reviews judged that Functional Family Therapy (FFT) did not have a strong enough evidence base to merit its further use, in spite of being in operation since 1969 and wielding a reputation as one of the 'oldest and best known' of the family-based interventions.⁵¹

Even among interventions that have proven to be effective in numerous evaluations across a range of countries, there are important differences to consider. For example, the group-

based, face-to-face, and highly collaborative Incredible Years programme is one of the few interventions shown to work for families from a range of socioeconomic and cultural backgrounds in Europe.^{52,53} Most recently, a meta-analysis of individual participant data from 13 European trials discovered that the Incredible Years programme is equally effective in both early and middle childhood.⁵⁴ The programme therefore challenges the 'earlier is better' wisdom widely promoted in early childhood intervention,⁵⁵ and can improve outcomes for a broad range of families.

Of similar significance, the Triple P – Positive Parenting Program has achieved intervention effects even when delivered to families without the face-to-face involvement of a helping professional, initially through the use of televised episodes,⁵⁶ and more recently through radio podcasts⁵⁷ and interactive online courses.⁵⁸ This shows the potential of new and innovative approaches to reduce per-capita cost of delivering the programme to families. However, there is also some criticism of the Triple P programme related to the mixed evidence on its effectiveness. For instance, independent evaluations conducted in the UK reported null effects on child and parent behaviours, small sample sizes, lack of follow-up due to wait-list designs and lack of trial pre-registration, as well as low disclosure of the conflict of interests among study authors.⁵⁹

Box 4: 'The Earlier the Better' or 'Never Too Early, Never Too Late'?

The mantra 'The Earlier the Better' is common wisdom in child welfare policy and intervention, due both to awareness of sensitive periods for development in early childhood and to effectiveness and cost-effectiveness analyses that claim interventions to be more impactful and cost-efficient when children are younger.

However, a recent meta-analysis on the effects of parenting interventions for child behavioural problems has discovered the following:

- **No differences in the efficacy** of interventions for different age groups.
- **No differences in effectiveness** between interventions targeting narrower age groups and those targeting children more broadly.

Furthermore, their data on a subset of trials suggested that the Incredible Years programme is more likely to be cost-effective for children aged five and older than for children under five.

Source: Gardner et al. (2017);⁶⁰ Gardner et al. (2018)⁶¹

Further resources

The European Platform for Investing in Children (EPIC) lists evidence-based parenting interventions implemented in EU member states, and provides information on their key characteristics as well as appraisals of the evidence in support of their effectiveness. The descriptions of interventions listed below were collected between 2016 and 2018.

Practices are categorised as ‘best’, ‘promising’ and ‘emerging’ against the EPIC practice review criteria, in light of the extent of evidence of their effectiveness, the sustainability of impact, and the transferability of the impact to different groups. Full review criteria can be found at <http://europa.eu/epic/>

FURTHER RESOURCES TABLE – EPIC EVIDENCE-BASED PRACTICES

Effectiveness	Target outcomes	Target age groups	Mode of delivery	Availability of materials	Countries where the programme has been implemented (EU 28)
Incredible Years⁶²					
 Best practice	<ul style="list-style-type: none"> • Positive parenting promotion • Treating child behavioural problems • Reducing or preventing harsh or abusive parenting 	<ul style="list-style-type: none"> • Early childhood (0–5) • Middle childhood (5–9) • Preadolescence (10–12) 	<ul style="list-style-type: none"> • Groups of parents 	<ul style="list-style-type: none"> • Licensed 	Czech Republic, Denmark, Estonia, Finland, Ireland, Malta, the Netherlands, Norway, Portugal, Slovenia, Sweden and the UK
Parent-management training Oregon⁶³					
 Best practice	<ul style="list-style-type: none"> • Positive parenting promotion • Treating child behavioural problems 	<ul style="list-style-type: none"> • Early childhood (0–5) • Middle childhood (6–9) • Preadolescence (10–12) • Adolescence (13–18) 	<ul style="list-style-type: none"> • Individual parents, home-based 	<ul style="list-style-type: none"> • Licensed 	Denmark, Iceland, the Netherlands and Norway
Triple P – Positive Parenting Programme⁶⁴					
 Best Practice	<ul style="list-style-type: none"> • Positive parenting promotion • Treating child behavioural problems • Reducing or preventing harsh or abusive parenting 	<ul style="list-style-type: none"> • Early childhood (0–5) • Middle childhood (6–9) • Preadolescence (10–12) • Adolescence (13–18) 	<ul style="list-style-type: none"> • Groups of parents • Individual parents, media-based (online) 	<ul style="list-style-type: none"> • Licensed 	Belgium, Germany, the Netherlands, Switzerland and the UK

Effectiveness	Target outcomes	Target age groups	Mode of delivery	Availability of materials	Countries where the programme has been implemented (EU 28)
New Forest Parenting Programme⁶⁵					
 Promising	<ul style="list-style-type: none"> • Treating child behavioural problems • Supporting children with special needs 	<ul style="list-style-type: none"> • Early childhood (0–5) 	<ul style="list-style-type: none"> • Individual parents, home-based • Children also involved 	<ul style="list-style-type: none"> • Freely available 	The UK
Parenting for Lifelong Health^{66,67}					
 Promising	<ul style="list-style-type: none"> • Reducing or preventing harsh or abusive parenting • Positive parenting promotion • Reducing child behavioural problems 	<ul style="list-style-type: none"> • Early childhood (0–5) • Middle childhood (6–9) • Preadolescence (10–12) • Adolescence (13–18) 	<ul style="list-style-type: none"> • Groups of parents 	<ul style="list-style-type: none"> • Freely available (WHO, UNICEF programme) 	Czech Republic, Macedonia, Moldova, Montenegro, Romania, the UK
Parents Plus Early Years Programme⁶⁸					
 Promising	<ul style="list-style-type: none"> • Positive parenting promotion • Supporting children with special education needs • Treating child behaviour problems 	<ul style="list-style-type: none"> • Early childhood (0–5) 	<ul style="list-style-type: none"> • Individual parents • Groups of parents • Children also involved 	<ul style="list-style-type: none"> • Freely available 	Ireland
Community Mothers⁶⁹					
 Promising	<ul style="list-style-type: none"> • Positive parenting promotion 	<ul style="list-style-type: none"> • Early childhood (0–5) 	<ul style="list-style-type: none"> • Individual parents, home-based 	<ul style="list-style-type: none"> • Unavailable 	Ireland

Effectiveness	Target outcomes	Target age groups	Mode of delivery	Availability of materials	Countries where the programme has been implemented (EU 28)
Strengthening Families Programme⁷⁰					
 Promising	<ul style="list-style-type: none"> • Positive parenting promotion • Treating child behavioural problems • Reducing or preventing adolescent delinquency • Reducing or preventing adolescent substance abuse 	<ul style="list-style-type: none"> • Preadolescence (10–12) • Adolescence (13–18) 	<ul style="list-style-type: none"> • Individual parents, home-based • Children also involved 	<ul style="list-style-type: none"> • Licensed 	Poland, Sweden, the UK
Lifestart⁷¹					
 Emergent	<ul style="list-style-type: none"> • Positive parenting promotion 	<ul style="list-style-type: none"> • Early childhood (0–5) 	<ul style="list-style-type: none"> • Individual parents, home-based • Groups of parents 	<ul style="list-style-type: none"> • Licensed 	Ireland, the UK
Aprender em Parceria (Learn in Partnership)⁷²					
 Emergent	<ul style="list-style-type: none"> • Positive parenting promotion 	<ul style="list-style-type: none"> • Early childhood (0–5) 	<ul style="list-style-type: none"> • Groups of parents • Children also involved 	<ul style="list-style-type: none"> • Licensed 	Portugal
Educar en positivo (Online Parenting Support: Positive Parents)⁷³					
 Emergent	<ul style="list-style-type: none"> • Positive parenting promotion • Supporting children with special needs 	<ul style="list-style-type: none"> • Early childhood (0–5) 	<ul style="list-style-type: none"> • Individual parents, media-based (online) 	<ul style="list-style-type: none"> • Freely available 	Spain
Parents Plus Children's Programme⁷⁴					
 Emergent	<ul style="list-style-type: none"> • Positive parenting promotion • Treating child behavioural problems • Supporting children with special needs 	<ul style="list-style-type: none"> • Middle childhood (5–9) • Preadolescence (10–12) 	<ul style="list-style-type: none"> • Groups of parents 	<ul style="list-style-type: none"> • Licensed 	Ireland

Effectiveness	Target outcomes	Target age groups	Mode of delivery	Availability of materials	Countries where the programme has been implemented (EU 28)
Comet/Komet⁷⁵					
 Emergent	<ul style="list-style-type: none"> • Treating child behavioural problems • Supporting children with special needs 	<ul style="list-style-type: none"> • Early childhood (0–5) • Middle childhood (6–9) • Preadolescence (10–12) 	<ul style="list-style-type: none"> • Groups of parents 	<ul style="list-style-type: none"> • Licensed 	Sweden
Programa de Desenvolupament d'habilitats parentals per a famílies (Parenting Skills Program)⁷⁶					
 Emergent	<ul style="list-style-type: none"> • Positive parenting promotion 	<ul style="list-style-type: none"> • Early childhood (0–5) • Middle childhood (5–9) • Preadolescence (10–12) 	<ul style="list-style-type: none"> • Groups of parents 	<ul style="list-style-type: none"> • Unavailable 	Spain
Community Parent Education Programme (COPE)⁷⁷					
 Emergent	<ul style="list-style-type: none"> • Treating child behavioural problems • Positive parenting promotion 	<ul style="list-style-type: none"> • Early childhood (0–5) • Middle Childhood (6–9) • Preadolescence (10–12) • Adolescence (13–18) 	<ul style="list-style-type: none"> • Groups of parents 	<ul style="list-style-type: none"> • Licensed 	Sweden
Connect⁷⁸					
 Emergent	<ul style="list-style-type: none"> • Positive parenting promotion • Treating child behavioural problems • Treating child mental health problems • Reducing or preventing adolescent delinquency 	<ul style="list-style-type: none"> • Pre-adolescence (10–12) • Adolescence (13–18) 	<ul style="list-style-type: none"> • Groups of parents 	<ul style="list-style-type: none"> • Licensed 	Italy, Sweden
Örebro Prevention Program⁷⁹					
 Emergent	<ul style="list-style-type: none"> • Reducing or preventing adolescent substance abuse 	<ul style="list-style-type: none"> • Adolescence (13–18) 	<ul style="list-style-type: none"> • Groups of parents 	<ul style="list-style-type: none"> • Unavailable 	The Netherlands, Sweden

Endnotes

- 1 Gardner, F., & Leijten, P., 'Incredible Years Parenting Interventions: Current Effectiveness Research and Future Directions', *Current Opinion in Psychology*, Vol 15, 2017, pp. 99-104.
- 2 Janta, B., *Parenting Support Policy Brief*. Retrieved 10 January 2019, from RAND Europe website: https://www.rand.org/pubs/research_reports/RR187.html, 2013.
- 3 Miller, S. Maguire, L.K. & Macdonald, G., 'Home-based Child Development Interventions for Preschool Children from Socially Disadvantaged Families', *Cochrane Database of Systematic Reviews*, No 12. Art. No.: CD008131, 2011.
- 4 van Aar, J., Leijten, P., Orobio de Castro, B. & Overbeek, G., 'Sustained, Fade-out or Sleeper Effects?' A Systematic Review and Meta-analysis of Parenting Interventions for Disruptive Child Behavior', *Clinical Psychology Review*, No 51, 2017, pp. 153-163.
- 5 Knerr, W., Gardner, F., & Cluver, L., 'Improving Positive Parenting and Reducing Harsh and Abusive Parenting in Low- and Middle-income Countries: A Systematic Review', *Prevention Science*, Vol 14, 2013, pp. 352-363.
- 6 Leijten, P., Gardner, F., Melendez-Torres, G.J., van Aar, J., Hutchings, J., Schulz, S., Knerr, W. & Overbeek, G., 'What to Teach Parents to Reduce Disruptive Child Behavior: Two Meta-analyses of Parenting Program Components', *Journal of the American Academy of Child and Adolescent Psychiatry*, 2018, in press.
- 7 For a review see: Janta, B. 2013. *Parenting Support Policy Brief*. Retrieved 10 January 2019, from RAND Europe website: https://www.rand.org/pubs/research_reports/RR187.html; Karoly, L.A., Greenwood, P.W., Everingham, S.S., Houbé, J., Kilburn, M.R., Rydell, C.P. & Chiesa, J., *Investing in our Children: What We Know and Don't Know About the Costs and Benefits of Early Childhood Interventions* (Rep. No. 0-8330-2530-9), 1998. Retrieved 10 January 2019, from RAND Corporation website: https://www.rand.org/content/dam/rand/pubs/monograph_reports/1998/MR898.pdf
- 8 Felitti, V. J., Anda, R.F., Nordenberg, D., Williamson, D.F., Spitz, A.M., Edwards, V., Koss M.P. & Marks, J.S., 'Relationship of Childhood Abuse and Household Dysfunction to Many of the Leading Causes of Death in Adults: The Adverse Childhood Experiences Study', *American Journal of Preventive Medicine*, Vol 14, No 4, 1998, pp. 245-258.
- 9 O'Connor, T., Rutter, M., Beckett, C., Keaveney, L. & Kreppner, J.M., 'The English and Romanian Adoptees (ERA) Study Team. 2000. The Effects of Global Severe Privation on Cognitive Competence: Extension and Longitudinal Follow-up', *Child Development*, Vol 71, pp. 376-390; Beckett, C., Maughan, B., Rutter, M., et al., 'Do the Effects of Early Severe Deprivation on Cognition Persist into Early Adolescence? Findings From the English and Romanian Adoptees Study', *Child Development*, Vol 77, 2006, pp. 696-711.
- 10 Chapman, D.P., Whitfield, C.L., Felitti, V.J., Dube, S.R., Edwards, V.J., & Anda, R.F., 'Adverse Childhood Experiences and Risk of Depressive Disorders in Adulthood', *Journal of Affective Disorders*, Vol 82, 2004, pp. 217-225; Pinquart, M., 'Associations of Parenting Dimensions and Styles with Externalizing Problems of Children and Adolescents: An Updated Meta-analysis', *Developmental Psychology*, Vol 53, No 5, 2017, pp. 873-932.
- 11 Hoeve, M., Dubas, J., Eichelsheim, V., van der Laan, P., Smeenk, W. & Gerris, J., 'The Relationship Between Parenting and Delinquency: A Meta-analysis', *Journal of Abnormal Child Psychology*, Vol 37, 2009, pp. 749-775.
- 12 Erskine H.E., Norman, R.E., Ferrari, A.J., Chan, G.C., Copeland, W.E., Whiteford H.A., & Scott, J.G., 'Long-term Outcomes of Attention Deficit/Hyperactivity Disorder and Conduct Disorder: A Systematic Review', 2016, and Hickman, M., Doerner, A. Emond, A., Lewis, G., Macleod, J., Maughan, B., Munafo M.R. & Heron, J., 'Outcomes of Childhood Conduct Problem Trajectories in Early Adulthood: Findings from the ALSPAC Study', *European Child & Adolescent Psychiatry*, Vol 23, 2014, pp. 539-549.
- 13 Davidov, M. & Grusec, J.E., 'Untangling the Links of Parental Responsiveness to Distress and Warmth to Child Outcomes', *Child Development*, Vol 77, No 1, 2006, pp. 44-58.
- 14 Bowes, L., Maughan, B., Caspi, A., Moffitt, T.E. & Arseneault, L., 'Families Promote Emotional and Behavioural Resilience to Bullying: Evidence of an Environmental Effect', *Childhood Psychology and Psychiatry*, Vol 51, No 7, 2010, pp. 809-817.
- 15 Flouri, E., Midouhas, E., Joshi, H. & Tzavidis, N., 'Emotional and Behavioural Resilience to Multiple Risk Exposure in Early Life: The Role of Parenting', *European Child & Adolescent Psychiatry*, Vol 24, No 7, 2015, pp. 745-755.
- 16 Miller-Graff, L.E., Cater, Å.K., Howell, K.H. & Graham-Bermann, S.A., 'Parent-Child Warmth as a Potential Mediator of Childhood Exposure to Intimate Partner Violence and Positive Adulthood Functioning', *Anxiety, Stress, & Coping*, Vol 29, No 3, 2016, pp. 259-273.
- 17 Lind, M.J., Brown, R.C., Sheerin, C.M., York, T.P., Myers, J.M., Kendler, K.S. & Amstadter, A.B., 'Does Parenting Influence the Enduring Impact of Severe Childhood Sexual Abuse on Psychiatric Resilience in Adulthood?', *Child Psychiatry & Human Development*, Vol 49, No 1, 2018, pp. 33-41.
- 18 *Key Concepts: Brain Architecture*. Retrieved 10 January 2019, from: <https://developingchild.harvard.edu/science/key-concepts/brain-architecture/>
- 19 Rajyaguru, P., Moran, P., Cordero, M. & Pearson, R., 'Disciplinary Parenting Practice and Child Mental Health: Evidence from the UK Millennium Cohort Study', *Journal of the American Academy of Child & Adolescent Psychiatry*, <https://doi.org/10.1016/j.jaac.2018.06.033>, 2018.

- 20 Criss, M.M., Lee, T.K., Morris, A.S., Cui, L., Bosler, C.D., Shreffler, K.M. & Silk, J.S., 'Link Between Monitoring Behavior and Adolescent Adjustment: An Analysis of Direct and Indirect Effects', *Journal of Child and Family Studies*, Vol 24, No 3, 2015, pp. 668-678.
- 21 Gentile, D.A., Reimer, R.A., Nathanson, A.I., et al., 'Protective Effects of Parental Monitoring of Children's Media Use: A Prospective Study', *JAMA Pediatrics*, Vol 168, No 5, 2014, pp. 479-484.
- 22 Lloyd, A.B., Lubans, D.R., Plotnikoff, R.C., Collins, C.E. & Morgan, P.J., 'Maternal and Paternal Parenting Practices and their Influence on Children's Adiposity, Screen-time, Diet and Physical Activity', *Appetite*, Vol 79, 2014, pp. 149-157.
- 23 Doctoroff, G.L. & Arnold, D.H., 'Doing Homework Together: The Relation Between Parenting Strategies, Child Engagement, and Achievement', *Journal of Applied Developmental Psychology*, Vol 48, 2017, pp. 103-113.
- 24 Pinquart, M., 'Associations of Parenting Styles and Dimensions with Academic Achievement in Children and Adolescents: A Meta-analysis', *Educational Psychology Review*, Vol 28, No 3, 2016, pp. 475-493.
- 25 Leijten, P., Gardner, F., Melendez-Torres, G.J., van Aar, J., Hutchings, J., Schulz, S., Knerr, W. & Overbeek, G., 'What to Teach Parents to Reduce Disruptive Child Behavior: Two Meta-analyses of Parenting Program Components', *Journal of the American Academy of Child and Adolescent Psychiatry*, 2018, in press.
- 26 Gardner, F., *Parenting Interventions: How Well Do They Transport From One Country to Another?* Florence: UNICEF Innocenti Research Brief. https://www.unicef-irc.org/publications/pdf/IRB_2017_10.pdf, 2017.
- 27 Wiltz, N.A. & Patterson, G.R., 'An Evaluation of Parent Training Procedures Designed to Alter Inappropriate Aggressive Behavior of Boys', *Behaviour Therapy*, Vol 5, 1974, pp. 215-221; Forehand, R.L. & McMahon, R.J., *Helping the Noncompliant Child: A Clinician's Guide to Parent Training*. Guilford Press, 1981.
- 28 *Evidence Based Practices: Incredible Years*. Retrieved 10 January 2019, from: <http://ec.europa.eu/social/main.jsp?catId=1251&langId=en&reviewId=204>
- 29 <https://www.generationpmto.org/>
- 30 Manquilo, R., 'The Impact of Child Sexual Abuse on Health: A Systematic Review of Reviews', *Clinical Psychology Review*, Vol 29, No 7, 2009, pp. 647-657.
- 31 Meier, M.H., Slutske, W.S., Heath A.C. & Martin, N.G., 'The Role of Harsh Discipline in Explaining Sex Differences in Conduct Disorder: A Study of Opposite-sex Twin Pairs', *Journal of Abnormal Child Psychology*, Vol 37, No 5, 2009, pp. 653-664.
- 32 Hoeve, M., Dubas, J., Eichelsheim, V., van der Laan, P., Smeenk, W. & Gerris, J., 'The Relationship Between Parenting and Delinquency: A Meta-analysis', *Journal of Abnormal Child Psychology*, Vol 37, 2009, pp. 749-775.
- 33 Norman, R.E., Byambaa, M., De, R., Butchart, A., Scott, J. et al., 'The Long-term Health Consequences of Child Physical Abuse, Emotional Abuse, and Neglect: A Systematic Review and Meta-analysis', *PLoS Medicine*, Vol 9, No 11, 2012.; e1001349. doi:10.1371/journal.pmed.1001349.
- 34 Waller, R., Gardner, F. & Hyde, L.W., 'What Are the Associations Between Parenting, Callous-unemotional Traits, and Antisocial Behaviour in Youth? A Systematic Review of Evidence', *Clinical Psychology Review*, Vol 33, No 4, 2013, pp. 593-608.
- 35 Gardner, F., *Parenting Interventions: How Well Do They Transport From One Country to Another?* Florence: UNICEF Innocenti Research Brief. https://www.unicef-irc.org/publications/pdf/IRB_2017_10.pdf, 2017.
- 36 Gardner, F. & Leijten, P., 'Incredible Years Parenting Interventions: Current Effectiveness Research and Future Directions', *Current Opinion in Psychology*, Vol 15, 2017, pp. 99-104.
- 37 van Aar, J., Leijten, P., Orobio de Castro, B. & Overbeek, G., 'Sustained, Fade-out or Sleeper Effects? A Systematic Review and Meta-analysis of Parenting Interventions for Disruptive Child Behavior', *Clinical Psychology Review*, Vol 51, 2017, pp. 153-163; Leijten, P., Gardner, F., Melendez-Torres, G.J., van Aar, J., Hutchings, J., Schulz, S., Knerr, W. & Overbeek, G., 'What to Teach Parents to Reduce Disruptive Child Behavior: Two Meta-analyses of Parenting Program Components', *Journal of the American Academy of Child and Adolescent Psychiatry*, in press, 2018; Leijten, P., Melendez-Torres, G.J., Knerr, W. & Gardner, F., 'Transported Versus Homegrown Parenting Interventions for Reducing Disruptive Child Behavior: A Multilevel Meta-regression Study', *Journal of the American Academy of Child and Adolescent Psychiatry*, Vol 55, 2016, pp. 610-617. doi:10.1016/j.jaac.2016.05.003.
- 38 Barlow, J., Smailagic, N., Huband, N., Roloff, V. & Bennett, C., 'Group-based Parent Training Programmes for Improving Parental Psychosocial Health', *Campbell Systematic Reviews*, Vol 15, 2012.
- 39 Euser, S., Alink, L.R.A., Stoltenborgh, M., Bakermans-Kranenburg, M.J. & van Ijzendoorn, M.H., 'A Gloomy Picture: A Meta-analysis of Randomized Controlled Trials Reveals Disappointing Effectiveness of Programs Aiming at Preventing Child Maltreatment', *BMC Public Health*, Vol 15, No 1068, 2014.
- 40 Knerr, W., Gardner, F. & Cluver, L., 'Improving Positive Parenting and Reducing Harsh and Abusive Parenting in Low- and Middle-income Countries: A Systematic Review', *Prevention Science*, Vol 14, 2013, pp. 352-363.
- 41 Gardner, F., Leijten, P., Mann, J., Landau, S. Harris, V., Beecham, J., Bonin, E., Hutchings, J. & Scott, S., 'Could Scale-up of Parenting Programmes Improve Child Disruptive Behaviour and Reduce Social Inequalities? Using Individual Participant Data Meta-analysis to Establish for Whom Programmes are Effective and Cost-effective', *Public Health Research*, Vol 5, No 10, 2017.
- 42 World Health Organization, *Violence Prevention: The Evidence*. Geneva, Switzerland: WHO, 2010.

- 43 Wessels, I., Mikton, C., Ward, C., Kilbane, T., Alves, R., Campello, G. & Madrid, B., *Preventing Violence: Evaluating Outcomes of Parenting Programmes*. Geneva, Switzerland: WHO, 2013.
- 44 Freitag et al., 'Focused Issue on Conduct Disorder and Aggressive Behaviour', *European Child & Adolescent Psychiatry*, Vol 27, 2018, pp. 1231-1234.
- 45 WHO/UNICEF, *INSPIRE: Seven Strategies for Preventing Violence Against Children*. Geneva, Switzerland: WHO, 2016. Available at https://www.who.int/violence_injury_prevention/violence/inspire/en/.
- 46 United Nations Office on Drugs and Crime, *Guide to Implementing Family Skills Training Programmes for Drug Abuse Prevention*. New York, NY: United Nations, 2009.
- 47 Gardner, F., Montgomery, P. & Knerr, W., 'Transporting Evidence-based Parenting Programs for Child Problem Behaviour (age 3–10) Between Countries: Systematic Review and Meta-analysis', *Journal of Clinical Child & Adolescent Psychology*, Vol 45, No 6, 2015, pp. 749-762.
- 48 Kumpfer, K., Magalhães, C. & Xie, J., 'Cultural Adaptation and Implementation of Family Evidence-based Interventions with Diverse Populations', *Prevention Science*, Vol 18, No 6, 2016, pp. 649-659.
- 49 Skärstrand, E., Larsson, J. & Andreasson, S., 'Cultural Adaptation of the Strengthening Families Programme to a Swedish Setting', *Health Education*, Vol 108, 2008, pp. 287-300.
- 50 Foxcroft, D.R., Callen, H., Davies, E.L. & Okulicz-Kozaryn, K., 'Effectiveness of the Strengthening Families Programme 10-14 in Poland: Cluster Randomized Controlled Trial', *European Journal of Public Health*, Vol 27, No 3, 2017, pp. 494-500.
- 51 Weisman, C.B. & Montgomery, P., 'Functional Family Therapy (FFT) for Behaviour Disordered Youth Aged 10-18: An Overview of Reviews', *Research on Social Work Practice*, 2018, in press, p. 2.
- 52 Gardner, F., Leijten, P., Mann, J., Landau, S., Harris, V., Beecham, J., Bonin, E., Hutchins, J. & Scott, S., 'Could Scale-up of Parenting Programmes Improve Child Disruptive Behaviour and Reduce Social Inequalities? Using Individual Participant Data Meta-analysis to Establish for Whom Programmes are Effective and Cost-effective', *Public Health Research*, Vol 5, No 10, 2017.
- 53 Gardner, F. & Leijten, P., 'Incredible Years Parenting Interventions: Current Effectiveness Research and Future Directions', *Current Opinion in Psychology*, Vol 15, 2017, pp. 99-104.
- 54 Gardner, F., Melendez-Torres, G.J., Mann, J., Hutchings, J., Leijten, P., Landau, S., Harris, V., Beecham, J. & Scott, S., 'The Earlier the Better? Individual Participant Data and Traditional Meta-analysis of Age Effects of parenting interventions', *Child Development*, 00(0):1-13, 2018, in press. doi.org.10.1111/cdev.13138.
- 55 Heckman, J., 'Schools, Skills, and Synapses', *Economic Inquiry*, Vol 46, No 3, 2008, pp.289-324.
- 56 Sanders, M.R., Montgomery, D.T. & Brechman-Toussaint, M.L., 'The Mass Media and the Prevention of Child Behavior Problems: The Evaluation of a Television Series to Promote Positive Outcomes for Parents and their Children', *Journal of Child Psychology and Psychiatry*, Vol 41, No 7, 2000, pp. 939-948.
- 57 Morawksa, A., Tometzki, H. & Sanders, M.R., 'An Evaluation of the Efficacy of a Triple P-Positive Parenting Program Podcast Series', *Journal of Developmental and Behavioral Pediatrics*, Vol 35, 2014, pp. 128-137.
- 58 Sanders, M.R., Baker, S. & Turner, K.M.T., 'A Randomized Controlled Trial Evaluating the Efficacy of Triple P Online with Parents of Children with Early Onset Conduct Problems', *Behavior Research and Therapy*, Vol 50, 2012, pp. 675-684.
- 59 Coyne, J.C. & Kwakkenbos, L., 'Triple-P-Positive Parenting Programs: The Folly of Basing Social Policy on Underpowered Flawed Studies', *BMC medicine*, Vol 11, No 1, 2013, p. 11; Eisner, M., Humphreys, D.K., Wilson, P. & Gardner, F., 'Disclosure of Financial Conflicts of Interests in Interventions to Improve Child Psychosocial Health: A Cross-sectional Study', *PLoS One*, Vol 10, No 11, 2015, e0142803; Little, M., Berry, V.L., Morpeth, L., Blower, S., Axford, N., Taylor, R., Bywater, T., Lehtonen, M. & Tobin, K., 'The Impact of Three Evidence-based Programmes Delivered in Public Systems in Birmingham, UK', *International Journal of Conflict and Violence*, Vol 6, No 2, 2012, pp. 260-272; Marryat, L., Thompson, L. & Wilson, P., 'No Evidence of Whole Population Mental Health Impact of the Triple-P Parenting Programme: Findings from a Routine Dataset', *BMC Pediatrics*, Vol 17, No 1, 2017, p. 40; Wilson, P., Rush, R., Hussey, S., Puckering, C., Sim, F., Allely, C.S., Doku, P., McConnachie, A. & Gillberg, C., 'How Evidence-based is an "Evidence-based Parenting Program"? A PRISMA Systematic Review and Meta-analysis of Triple-P', *BMC Medicine*, Vol 10, No 1, 2012, p. 130.
- 60 Gardner, F., Leijten, P., Mann, J., Landau, S., Harris, V., Beecham, J., Bonin, E.M., Hutchings, J. & Scott, S., *Could Scale-up of Parenting Programmes Improve Child Disruptive Behaviour and Reduce Social Inequalities? Using Individual Participant Data Meta-analysis to Establish for Whom Programmes are Effective and Cost-effective*. Southampton (UK): NIHR Journals Library; 2017 Dec. (Public Health Research, No. 5.10.) Available from: <https://www.ncbi.nlm.nih.gov/books/NBK469806/doi:10.3310/phr05100>.
- 61 Gardner, F., Melendez-Torres, G.J., Mann, J., Hutchings, J., Leijten, P., Landau, S., Harris, V., Beecham, J. & Scott, S., 'The Earlier the Better? Individual Participant Data and Traditional Meta-analysis of Age Effects of parenting interventions', *Child Development*, 00(0):1-13, 2018, in press. doi.org.10.1111/cdev.13138.
- 62 *Evidence Based Practices: Incredible Years*. Retrieved 10 January 2019, from: <http://ec.europa.eu/social/main.jsp?catId=1251&langId=en&reviewId=204>
- 63 <https://www.generationpmto.org/>

- 64 *Evidence Based Practices: Triple P-Positive Parenting Programme*. Retrieved 10 January 2019, from: <http://ec.europa.eu/social/main.jsp?catId=1251&langId=en&reviewId=239>
- 65 *Evidence Based Practices: New Forest Parenting Programme*. Retrieved 10 January 2019, from: <http://ec.europa.eu/social/main.jsp?catId=1251&langId=en&reviewId=208>
- 66 Ward, C.L, Mikton, C., Cluver, L., Cooper, P., Gardner, F., Hutchings, J., Lachman, J., Murray, L., Tomlinson, M. & Wessels, I., 'Parenting for Lifelong Health: From South Africa to Other Low-and Middle-income Countries'. *Early Childhood Matters*, Vol 212, 2014, pp. 49-54.
- 67 Lachman, J.M., Cluver, L., Ward, C.L., Hutchings, J., Mlotshwa, S., Wessels, I. & Gardner, F., 'Randomized Controlled Trial of a Parenting Program to Reduce the Risk of Child Maltreatment in South Africa', *Child Abuse & Neglect*, Vol 72, 2017, pp. 338-351.
- 68 *Evidence Based Practices: Parents Plus Early Years Programme*. Retrieved 10 January 2019, from: <http://ec.europa.eu/social/main.jsp?catId=1251&langId=en&reviewId=216>
- 69 *Evidence Based Practices: Community Mothers*. Retrieved 10 January 2019, from: <http://ec.europa.eu/social/main.jsp?catId=1251&langId=en&reviewId=193>
- 70 <https://www.strengtheningfamiliesprogram.org/>
- 71 *Evidence Based Practices: Lifestart*. Retrieved 10 January 2019, 2018, from: <http://ec.europa.eu/social/main.jsp?catId=1251&langId=en&reviewId=206>
- 72 *Evidence Based Practices: Aprender em Parceria*. Retrieved 10 January 2019, from: <http://ec.europa.eu/social/main.jsp?catId=1251&langId=en&reviewId=187>
- 73 *Evidence Based Practices: Educar en Positivo*. Retrieved 10 January 2019, from: <http://ec.europa.eu/social/main.jsp?catId=1251&langId=en&reviewId=253>
- 74 *Evidence Based Practices: Parents Plus Children's Programme*. Retrieved 10 January 2019, from: <http://ec.europa.eu/social/main.jsp?catId=1251&langId=en&reviewId=213>
- 75 *Evidence Based Practices: Comet/Komet*. Retrieved 10 January 2019, from: <http://ec.europa.eu/social/main.jsp?catId=1251&langId=en&reviewId=192>
- 76 *Evidence Based Practices: Parenting Skills Program*. Retrieved 10 January 2019, from: <http://ec.europa.eu/social/main.jsp?catId=1251&langId=en&reviewId=267>
- 77 *Evidence Based Practices: Community Parent Education Programme*. Retrieved 10 January 2019, from: <http://ec.europa.eu/social/main.jsp?catId=1251&langId=en&reviewId=237>
- 78 *Evidence Based Practices: Connect*. Retrieved 10 January 2019, from: <http://ec.europa.eu/social/main.jsp?catId=1251&langId=en&reviewId=194>
- 79 *Evidence Based Practices: The Örebro Prevention Program*. Retrieved 10 January 2019, from: <http://ec.europa.eu/social/main.jsp?catId=1251&langId=en&reviewId=199>

Produced for the European Platform for Investing in Children (EPIC), March 2019.

Authors: Lynn M. Davies, Barbara Janta, Frances Gardner

Correspondence: epic@rand.org



Publications Office

Luxembourg: Publications Office of the European Union, 2019

© European Union, 2019

Cover image: © Adobe Stock

Reuse is authorised provided the source is acknowledged. The reuse policy of European Commission documents is regulated by Decision 2011/833/EU (OJ L 330, 14.12.2011, p. 39). For any use or reproduction of photos or other material that is not under the EU copyright, permission must be sought directly from the copyright holders.

PDF ISBN: 978-92-79-99865-2 doi: 10.2767/784009 Catalogue number: KE-02-19-122-EN-N