REFERENCES FOR EVIDENCE-BASED PROGRAMS FOR YOUNG CHILDREN

General References


This article discusses the growing complexity in children and adolescent mental health treatment and research. With many treatment options in literature, guidelines, and definitions, it is often difficult to determine the best form of treatment. The authors have proposed an effective way of analyzing these findings.


This article outlines a study that examined the success of 3 different models for treating oppositional-defiant disorder in young children: a 12-session parent training program led by a primary care professional, the same program taught by a mental health professional, and minimal intervention treatment using bibliotherapy. The results showed that an adequate dose of evidence-based practice is necessary. While each approach led to overall improvement, there was no significant difference among the 3 models.


This article provides a summary of select parenting programs for children aged 2 to 8 years to inform primary care clinicians about options for families of children with behavior problems. It discusses key parenting principles for incorporation into developmental surveillance and anticipatory guidance during periodic well-child visits to prevent disruptive behavior problems, address parenting concerns, and nurture the optimal development of children’s social-emotional competency.


This publication summarizes and analyzes the research literature on parent training programs. It provides practitioners who work with parents and families guidance in making evidence-based program decisions to improve parenting skills and prevent child maltreatment.


This brief explores the importance of healthy relationships between young children and their parents. It discusses attachment theory and research, including guidelines and programs.


This handbook provides treatment guidelines to address the behavioral and mental health problems of young children whose most intimate relationships are disrupted by the experience of violence. This resource provides information on the effect of violence and intervention strategies to address the consequences of this experience for young children.
Specific Programs

The Incredible Years (www.incredibleyears.com)

- Targets children aged 3 to 12 years at risk for conduct problems.
- Includes 3 sets of comprehensive developmentally based curriculums for parents, teachers, and children to promote emotional and social competence.
- Strengthens parents’ and teachers’ competence in communication, child-directed play, clear limit setting, and nonviolent discipline.
- Outcomes include reduced conduct problems, increased in effective parenting, decreased parental depression, and increased esteem.
- Developed by Webster-Stratton.

References for More Information


Triple P Positive Parenting Program (www.triplep.net)

- Draws on social learning, cognitive-behavioral, and developmental theory, as well as research into risk and protective factors associated with the development of social and behavioral problems in children.
- Uses a multilevel framework that aims to tailor information, advice, and professional support to the needs of individual families.
- Includes information resources such as media messages on positive parenting, tip sheets, and videos.
- Uses brief targeted interventions (for specific behavior problems) offered by primary care practitioners as well as more intensive parent training targeting broader family issues such as relationship conflict and parental depression, anger, and stress.

References for More Information


Parent-Child Interaction Therapy

- Targets children aged 2 to 8 years at risk of or presenting conduct problems and their parents.
- Twelve-session clinic or home-based family therapy aimed at improving parent-child interaction.
- Outcomes include improved parenting skills; decreased child behavior problems; improved quality of parent-child relationship; and improved parental affect and personal distress.
- Generalizes to untreated siblings; generalizes between home and school.
- Approximately 12 sessions; 6 devoted to relationship enhancement and 6 to disciplinary practices.
- Parent and child are given a series of tasks, eg, child-directed play session, parent leads play, child cleans up without help.
- Developed by Eyberg.

References for More Information


**Helping the Noncompliant Child Parent Training Program**
- Targets children 3 to 8 years old with problems of noncompliance.
- Individual family sessions 60 to 90 minutes.
- Average 10 sessions.
- Teaches parenting skills to break coercive cycle of interaction by increasing positive attention, ignoring minor inappropriate behaviors, and providing clear instructions and appropriate consequences.
- Includes instruction, role-plays, and practice.
- Improves compliance at 11- to 14-year follow-up.
- Developed by Forehand & McMahon based on work of Hanf.

**References for More Information**

**Nurse-Family Partnership** ([www.nursefamilypartnership.org](http://www.nursefamilypartnership.org))
- Nurse-Family Partnership is an evidence-based community health program that assists first-time mothers and their infants. Registered nurses make home visits to low-income families to improve health, education, and self-sufficiency.

**Infant Caregiver Project** ([http://icp.psych.udel.edu/index.htm](http://icp.psych.udel.edu/index.htm))
- Addresses children who experience disruptions in care at an early age.
- Intervention is provided in the homes of foster parents, birth parents, and relative caregivers.
- Training consists of 10 separate weekly home visits, lasting approximately 1 hour.
- Helps foster parents to provide nurturance even when children do not appear to need it; helps parents provide nurturance even when it does not come naturally; and provides a very predictable environment so the children can learn to regulate their behavior and emotions.

**Circle of Security** ([www.circleofsecurity.org](http://www.circleofsecurity.org))
- Based on object relations theory, attachment theory, and family systems theory.
- Includes a video-based intervention to strengthen parents’ ability to observe and improve their caregiving capacity.
- Published articles on the intervention can be found at [www.circleofsecurity.net/publications.html](http://www.circleofsecurity.net/publications.html)

**Partners in Parenting Education** ([www.howtoreadyourbaby.org/pipe.html](http://www.howtoreadyourbaby.org/pipe.html))
- Designed to increase the emotional availability and relationship-building skills of parents with their babies and toddlers.
- Uses supervised parent-child activities to focus the parent on the child’s needs and emotional communications.
- Addresses communication, emotional development, relationship building, positive interaction, and behavior regulation.
- Outcomes included increased parent participant skills in reading the baby’s cues and meeting the needs.

**Promoting First Relationships** ([www.pfprprogram.org](http://www.pfprprogram.org))
- Targets service providers in the use of practical, effective strategies for promoting secure and healthy relationships between caregivers and young children (birth to 3 years).
- Initially began as a program to provide early intervention to homeless families.
- Training components include videotaping caregiver-child interactions to provide insight into real-life situations, giving positive feedback that builds caregivers’ competence with and commitment to their children, and focusing on the deeper emotional needs underlying children’s challenging behaviors.
- Shown to be effective for promoting secure and nurturing parent-child relationships and child care provider—child relationships and is currently being used in a variety of early childhood settings.
Parents as Teachers (www.parentsasteachers.org)

- Goals are to increase parent knowledge of early childhood development and improve parenting practices, provide early detection of developmental delays and health issues, prevent child abuse and neglect, and increase children’s school readiness and success.
- Program components consist of Born to Learn, professional development, Meld, and advocacy.
- The Born to Learn program incorporates a home visiting component that uses a research-based curriculum for promoting optimal child development and positive parent-child relationships; and developmental, hearing, and vision screenings for early identification of delays or health issues.
- The Meld program has been in existence for more than 30 years. Its aim is to nurture crucial connections between parents and children by building skills, knowledge, support systems, and confidence. The program offers training for professionals who work with families and uses field-tested publications on child development, child guidance, health, family management, and personal growth.

doi:10.1542/peds.2010-0788M
### Appendix S7: References for Evidence-Based Programs for Young Children

*Pediatrics* 2010;125;S155
DOI: 10.1542/peds.2010-0788M

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