

Evidence Based Parenting Programs in Wisconsin

This information is from the California Evidence-Based Clearinghouse for Child Welfare www.cebc4cw.org/

1-2-3 Magic: Effective Discipline for Children 2-12	ACT Raising Safe Kids	Healthy Families America (Home Visiting for Child Well-Being)	Healthy Families America (Home Visiting for Prevention of Child Abuse and Neglect)	Nurturing Parenting Program for Parents and their Infants, Toddlers, and Preschoolers	Nurturing Parenting Program for Parents and their School-age Children 5 to 12 Years	Parents as Teachers	Triple P - Positive Parenting Program® System
Scientific Rating	Scientific Rating	Scientific Rating	Scientific Rating	Scientific Rating	Scientific Rating	Scientific Rating	Scientific Rating
2 — Supported by Research Evidence	3 (<i>provisional</i>) — Promising Research Evidence	1 — Well-Supported by Research Evidence	4 — Evidence Fails to Demonstrate Effect	NR (<i>provisional</i>) — Not able to be Rated	3 (<i>provisional</i>) — Promising Research Evidence	3 (<i>provisional</i>) — Promising Research Evidence	2 (<i>provisional</i>) — Supported by Research Evidence
Child Welfare System Relevance	Child Welfare System Relevance	Child Welfare System Relevance	Child Welfare System Relevance	Child Welfare System Relevance	Child Welfare System Relevance	Child Welfare System Relevance	Child Welfare System Relevance
2 — Medium	2 (<i>provisional</i>) — Medium	2 — Medium	2 — Medium	1 (<i>provisional</i>) — High	1 (<i>provisional</i>) — High	2 (<i>provisional</i>) — Medium	2 (<i>provisional</i>) — Medium
Child Welfare Outcomes	Child Welfare Outcomes	Child Welfare Outcomes	Child Welfare Outcomes	Child Welfare Outcomes	Child Welfare Outcomes	Child Welfare Outcomes	Child Welfare Outcomes
Child/Family Well-Being	Safety and Child/Family Well-Being	Child/Family Well-Being	Child/Family Well-Being	<i>Not Specified</i>	Safety and Child/Family Well-Being	Safety and Child/Family Well-Being	Safety, Permanency and Child/Family Well-Being
Topic Area(s)	Topic Area(s)	Topic Area(s)	Topic Area(s)	Topic Area(s)	Topic Area(s)	Topic Area(s)	Topic Area(s)
Parent Training Programs	Prevention of Child Abuse and Neglect (Primary) Programs	Home Visiting Programs for Child Well-Being	Home Visiting Programs for Prevention of Child Abuse and Neglect	Parent Training Programs, Prevention of Child Abuse and Neglect (Secondary) Programs and Interventions for Abusive Behavior	Parent Training Programs, Prevention of Child Abuse and Neglect (Secondary) Programs and Interventions for Abusive Behavior	Home Visiting Programs for Child Well-Being and Prevention of Child Abuse and Neglect (Primary) Programs	Parent Training Programs and Prevention of Child Abuse and Neglect (Primary) Programs
Brief Description	Brief Description	Brief Description	Brief Description	Brief Description	Brief Description	Brief Description	Brief Description
1-2-3 Magic is a group format discipline program for parents of children approximately 2-12 years of age. The program can be used with average or special needs children. 1-2-3 Magic divides the parenting responsibilities into three straightforward tasks: controlling negative behavior, encouraging good behavior, and strengthening the child-parent relationship. The program seeks to encourage gentle, but firm, discipline without arguing, yelling, or spanking.	ACT Raising Safe Kids Program is a universal parenting program designed to promote positive parenting and prevent child maltreatment by fostering knowledge and skills that change or improve parenting practices. The program is delivered by trained and certified ACT Facilitators in 9 sessions of 2-hour each on average. The ACT program has a universal public health approach and aims to reach to all parents of young children in a given community. The ACT program addresses parents' use of effective, nonviolent discipline and nurturing behaviors. It addresses parental knowledge of child development, discipline methods, and media literacy. It also addresses parents' anger management, social problem solving skills and their ability to teach/model these skills to children. By promoting effective parenting practices, the program also addresses children's aggression and behavior problems. ACT also provides a supportive community of parents who help and support each other during and after the program: it builds community.	HFA is a home visiting program model designed to work with overburdened families who are at-risk for child abuse and neglect and other adverse childhood experiences. It is designed to work with families who may have histories of trauma, intimate partner violence, mental health issues, and/or substance abuse issues. HFA services are offered voluntarily, intensively, and over the long-term (3 to 5 years after the birth of the baby). The HFA model is based upon 12 Critical Elements. These Critical Elements are operationalized through a series of standards that provide a solid structure for quality, yet offer programs the flexibility to design services specifically to meet the unique needs of families and communities.	HFA is a home visiting program model designed to work with overburdened families who are at risk for child abuse and neglect and other adverse childhood experiences. It is designed to work with families who may have histories of trauma, intimate partner violence, mental health issues, and/or substance abuse issues. HFA services are offered voluntarily, intensively, and over the long-term (3 to 5 years after the birth of the baby). The HFA model is based upon 12 Critical Elements. These Critical Elements are operationalized through a series of standards that provide a solid structure for quality, yet offer programs the flexibility to design services specifically to meet the unique needs of families and communities.	The Nurturing Parenting Program for Parents and their Infants, Toddlers and Preschoolers is a family-centered program designed for the prevention and treatment of child abuse and neglect. Both parents and their children birth to five years participate in home-based, group-based, or combination group-based and home-based program models. Lessons are competency-based ensuring parental learning and mastery of skills. The program lessons focus on remediating five parenting patterns known to form the basis of maltreatment: •Having inappropriate developmental expectations of children •Demonstrating a consistent lack of empathy towards meeting children's needs •Expressing a strong belief in the use of corporal punishment and utilizing spanking as their principle means of discipline •Reversing the role responsibilities of parents and children so that children learn to become the caregivers to their parents •Oppressing the power and independence of children by demanding strict obedience to their commands Built in assessments (pre, process, and post) allow the practitioner and the parents to track the acquisition of new knowledge, beliefs and skills.	The Nurturing Parenting Program for Parents and their School Age Children 5 to 12 Years is a 15-session program that is group-based, and family-centered. Parents and their children attend separate groups that meet concurrently. Each session is scheduled for 2.5 hours with a 20-minute break in which parents and children get together and have fun. The lessons in the program are based on the known parenting behaviors that contribute to child maltreatment: •Inappropriate parental expectations •Parental lack of empathy in meeting the needs of their children •Strong belief in the use of corporal punishment •Reversing parent-child family roles •Oppressing children's power and independence Assessment (pre, process, and post) of parent's parenting and child rearing beliefs, knowledge, and skills allows the program facilitators to measure the attainment of lesson competencies.	Parents as Teachers is an early childhood parent education, family support, and school readiness home visiting model based on the premise that "all children will learn, grow, and develop to realize their full potential." Based on theories of human ecology, empowerment, self-efficacy, attribution, and developmental parenting. Parents as Teachers involves the training and certification of parent educators who work with families using a comprehensive curriculum. Parent educators work with parents to strengthen protective factors and ensure that young children are healthy, safe, and ready to learn.	The overall Triple P program is a multi-tiered system of 5 levels of education and support for parents and caregivers of children and adolescents. Although Triple P can be used in parts (e.g., using only one level of the five or a group version versus standard), this entry on the CEBC reviews System Triple P as a whole (i.e., using all 5 levels) in its standard version and only reviewed research evidence that evaluated the whole system. The CEBC also evaluated Level 4 Triple P as a separate program and it is rated a "1 - Well-Supported Research Evidence" on the Scientific Rating Scale in the areas of Parent Training and Disruptive Behavior Treatment (Child & Adolescent).
Program Goals	Program Goals	Program Goals	Program Goals	Program Goals	Program Goals	Program Goals	Program Goals
The overall goals of 1-2-3 Magic: Effective Discipline for Children 2-12 include: •Parents will be able to use one simple tactic to manage obnoxious behavior without arguing, yelling or spanking. •Parents will use six different tactics for encouraging routines for positive behavior.	The primary goals of the ACT Raising Safe Kids Program are: •Educate parents and caregivers of young children to create safe, stable, nurturing relationships and environments that prevent child maltreatment; protect children and youth from long-term consequences of maltreatment •Provide research-based knowledge, tools, and skills for effective parenting practices •Provide a supportive, nonjudgmental, interactive, and fun environment for learning and sharing to occur; to nurture and promote the development of social support networks among participants	The goals of Healthy Families America (HFA) are to: •Build and sustain community partnerships to systematically engage overburdened families in home visiting services prenatally or at birth. •Cultivate and strengthen nurturing parent-child relationships. •Promote healthy childhood growth and development. •Enhance family functioning by reducing risk and building protective factors.	The goals of Healthy Families America (HFA) are to: •Build and sustain community partnerships to systematically engage overburdened families in home visiting services prenatally or at birth. •Cultivate and strengthen nurturing parent-child relationships. •Promote healthy childhood growth and development. •Enhance family functioning by reducing risk and building protective factors.	The overall goals of Nurturing Parenting Program for Parents and their Infants, Toddlers and Preschoolers are: •Measurable gains in the individual self-worth of parents and children •Measurable gains in parental empathy and meeting their own adult needs in healthy ways •Measurable gains in parental empathy towards meeting the needs of their children	The overall goals of Nurturing Parenting Program for Parents and their School-age Children 5 to 12 Years are: •Measurable gains in the individual self-worth of parents and children •Measurable gains in parental empathy and meeting their own adult needs in healthy ways •Measurable gains in parental empathy towards meeting the needs of their children •Utilization of dignified, non-violent disciplinary strategies and practices		The overall goal of System Triple P is to: Prevent development, or worsening, of severe behavioral, emotional and developmental problems in children and adolescents by enhancing the knowledge, skills, and confidence of parents. Practitioners are trained to create a supportive learning environment for parents to receive and discuss practical information about parenting skills that they can incorporate into everyday interactions with their children. Specific expected outcomes include:

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Program Goals	Program Goals	Program Goals	Program Goals	Program Goals	Program Goals	Program Goals	Program Goals
<ul style="list-style-type: none"> •Parents will master four strategies for strengthening relationships with their children. •Parents will understand how to recognize and manage the six kinds of testing and manipulation. •Parents will learn appropriate expectations for children's behavior. 	<ul style="list-style-type: none"> •Educate parents and caregivers on how to act as supportive teachers, advocates, and protectors of their children The primary objectives for parents/caregivers are: <ul style="list-style-type: none"> •Use child development knowledge (i.e., what we can expect a child to do/feel/understand at different ages and stages?) to guide their parenting practices •Build and maintain safe, nurturing nonviolent environment for their children •Identify the different emotions for different situations and use positive strategies to recognize and control their own and their children's anger •Control and monitor their children's exposure to electronic media •Shift their approach to discipline: teach, model, and reinforce positive child desired behaviors •Identify the negative consequences of using physical punishment when their children misbehave •Identify and use positive nonviolent discipline options to teach desirable behaviors •List concrete ways (actions) to become their children's advocates and protectors in the community 			<ul style="list-style-type: none"> •Utilization of dignified, non-violent disciplinary strategies and practices •Measurable gains in empowerment of the parents and their children •Measurable gains in nurturing parenting beliefs, knowledge and utilization of skills and strategies as measured by program assessment inventories •Reunification of parents and their children who are in foster care •High rate of attendance and completion of their program •Low rates of recidivism of program graduates 	<ul style="list-style-type: none"> •Measurable gains in empowerment of the parents and their children •Measurable gains in nurturing parenting beliefs, knowledge, and utilization of skills and strategies as measured by program assessment inventories •Reunification of parents and their children who are in foster care •High rate of attendance and completion of their program •Reduction in rates of recidivism of program graduates 	<p>The four goals of <i>Parents as Teachers</i> are:</p> <ul style="list-style-type: none"> •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 •Increase children's school readiness and school success 	<ul style="list-style-type: none"> • Increase parents' competence in promoting healthy development and managing common behavior problems and developmental issues. •Reduce parents' use of coercive and punitive methods of disciplining children. •Increase parents' use of positive parenting strategies in managing their children's behavior. •Increase parental confidence in raising their children. •Decrease child behavior problems (for families experiencing difficult child behavior). •Improve parenting partners' communication about parenting issues. •Reduce parenting stress associated with raising children.
Target Population	Target Population	Target Population	Target Population	Target Population	Target Population	Target Population	Target Population
Overburdened families who are expecting a child or have a baby younger than 3 months old and are at risk for child abuse and neglect and other adverse childhood experiences	Families who had been reported to the child welfare system for child maltreatment including physical and emotional maltreatment in addition to child neglect; may be used as a court-ordered parenting program	Families who have been reported to the child welfare system for child maltreatment including physical and emotional maltreatment in addition to child neglect; may be used as a court-ordered parenting program	Families with an expectant mother or parents of children up to kindergarten entry (usually 5 years)	For parents and caregivers of children from birth to age 16.	Overburdened families who are expecting a child or have a baby younger than 3 months old and are at risk for child abuse and neglect and other adverse childhood experiences	Families who had been reported to the child welfare system for child maltreatment including physical and emotional maltreatment in addition to child neglect; may be used as a court-ordered parenting program	Families who have been reported to the child welfare system for child maltreatment including physical and emotional maltreatment in addition to child neglect; may be used as a court-ordered parenting program
Age Range	Age Range	Age Range	Age Range	Age Range	Age Range	Age Range	Age Range
2 – 12 years old	0 – 10 years old	0 – 5 years old	0 – 5 years old	0 – 5 years old	5 – 12 years old	0 – 5 years old	0 – 16 years old
Child/Adolescent Services	Child/Adolescent Services	Child/Adolescent Services	Child/Adolescent Services	Child/Adolescent Services	Child/Adolescent Services	Child/Adolescent Services	Child/Adolescent Services
Arguing, whining, sibling rivalry, disrespect, bedtime issues, homework compliance, etc.				Oppressed affect, low self-worth, lack of empowerment, bully-like or victim-like behaviors, overly clingy or withdrawn behavior, separation anxieties, attachment disorders, low empathy, difficulty managing and appropriately expressing their feelings	Oppressed affect, low self-worth, lack of empowerment, bully-like or victim-like behaviors, overly clingy or withdrawn behavior, and separation anxiety		
Parent/Caregiver Services	Parent/Caregiver Services	Parent/Caregiver Services	Parent/Caregiver Services	Parent/Caregiver Services	Parent/Caregiver Services	Parent/Caregiver Services	Parent/Caregiver Services
Parents with children with behavior problems involving compliance and oppositional issues. By effectively addressing behavior problems, the program also attempts to improve the adult/child relationship.	Parents or caregivers of children birth to 10-years old	Expectant or new parents screened and/or assessed as moderate to high risk for child maltreatment and/or poor early childhood outcomes (e.g., mental health issues, domestic violence, substance abuse, poverty, housing, lack of education, lack of social support, etc.).	Expectant or new parents screened and/or assessed as moderate to high risk for child maltreatment and/or poor early childhood outcomes (e.g., mental health issues, domestic violence, substance abuse, poverty, housing, lack of education, lack of social support, etc.).	Attachment issues between parent and child, abusive disciplinary practices, neglecting children's basic needs, lack of supervision, oppressing children's power and independence	Attachment issues between parent and child, abusive disciplinary practices, neglecting children's basic needs, lack of supervision, oppressing children's power and independence	Pregnant or parent of a child five years old or younger in possible high-risk environments (e.g., teen parents, low income, parental low educational attainment, single-parent household, etc.)	Management of child behavior problems, management of stress, mild-moderate depression symptoms, anxiety, anger, parenting partner conflict, and negative attributional thinking

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Intensity	Intensity	Intensity	Intensity	Intensity	Intensity	Intensity	Intensity
One or two sessions per week.	2-hour weekly sessions	Families are to be offered weekly home visits for a minimum of six months after the birth of the baby. Home visits typically run 50-60 minutes. Upon meeting the defined criteria for family functioning, visit frequency is reduced to biweekly visits, monthly visits, and quarterly visits and services are tapered off over time. Typically, during pregnancy, families receive 2-4 visits per month. During times of crisis families may be seen 2 or more times in a week.	Families are to be offered weekly home visits for a minimum of six months after the birth of the baby. Home visits typically run 50-60 minutes. Upon meeting defined criteria for family functioning, visit frequency is reduced to biweekly visits, monthly visits, and quarterly visits and services are tapered off over time. Typically, during pregnancy, families receive 2-4 visits per month. During times of crisis families may be seen 2 or more times in a week.	Home-based: 90-minute weekly sessions, Group-based: 2.5-hour weekly sessions with a 20-minute family fun time break, Combined program: One weekly 90-minute home session and one 2.5-hour weekly group session	2.5-hour weekly session	Personal visits are delivered weekly, every 2 weeks, or monthly, depending on family needs. Families with two or more high needs characteristics receive at visits at least twice monthly (24 visit/year). Families with fewer than two high needs characteristics receive at least monthly visits (12 visits/year). Visits last approximately 60 minutes with more time allocated for families with more than one child. At least 12 group connections should also be provided across the program year. Length of the group connection varies by topic but are typically between 1 and 2 hours in length.	Level 1 - Universal/Stay Positive which has variable outreach strategies (websites, parent newspaper, brochures, posters, and radio/TV spots) that are planned to reach the entire population at planned intervals. ----- Level 2 - Selected Seminars/Selected Seminars Teen which has 3 two-hour long seminars that may be offered as standalone events or together in a series and brief primary care which has 1-2 brief consultations up to 30 minutes in duration. ----- Level 3 - Primary Care/Primary Care Teen/Primary Care Stepping Stones which has 1-4 brief consultations that are approximately 30 minutes in duration and 4 two-hour long discussion groups that may be offered as standalone events or together in a series. ----- Level 4 - This level can consist of a variety of options: 1) Group/Group Teen/Group Stepping Stones which has 5 two-hour group sessions and 3 twenty-minute individual telephone consultations for each family offered over 8 consecutive weeks; 2) Triple P Online which has 8 self-paced online modules; A self-directed workbook which is self-paced; or 4) Standard/Standard Teen/Standard Stepping Stones which are 10 one-hour sessions that occur weekly. --- -- Level 5 - This level can consist of a variety of options: 1) Enhanced which has 3-10 sessions lasting 60-90 minutes each; 2) Pathways which has 4 sessions lasting 60-90 minutes each when offered individually or two hours each when offered as a group; 3) Family Transitions which has 10 two-hour group sessions with 2 individual telephone consultations for each family lasting 30 minutes; or 4) Group Lifestyle which has 10 90-minute groups with 4 individual telephone consultations for each family lasting 30 minutes.
Duration	Duration	Duration	Duration	Duration	Duration	Duration	Duration
1.5 hours per session for 4-8 weeks.	Nine weeks	Services are offered prenatally or at birth until the child is at least three years of age and can be offered until he/she is five years of age.	Services are offered prenatally or at birth until the child is at least three years of age and can be offered until he/she is five years of age.	Home-based: 7 to 55 weeks (a minimum of 7 home visits), Group-based: 16 to 27 weeks (a minimum of 16 group sessions), Combined program: 16 group-based sessions and a minimum of 7 home-based sessions	15 weeks	The program is designed so that it can be implemented with each family from the child's birth or prenatally until age 3. Services are offered to families for a minimum of two years duration. If parent educators are trained in delivering the Born to Learn Curriculum: 3 Years to Kindergarten Entry, then services ideally would continue until Kindergarten entry. Children may be enrolled at any time within those age windows. This allows siblings to be served by the program, and does not limit participation to children enrolled in infancy or prenatally.	Level 1 Universal Triple P may be planned for intermittent distribution of materials throughout the course of the Level 2-5 interventions. Stay Positive is typically planned as a three-year implementation. ----- Levels 2-3 interventions may include 1-4 encounters that take place over 1-6 weeks. ----- Level 4-5 interventions typically take place over 4-5 months. If accommodations are needed (e.g., low literacy clients), the duration may be longer.
Delivery Settings	Delivery Settings	Delivery Settings	Delivery Settings	Delivery Settings	Delivery Settings	Delivery Settings	Delivery Settings
This program is typically conducted in a(n):	This program is typically conducted in a(n):	This program is typically conducted in a(n):	This program is typically conducted in a(n):	This program is typically conducted in a(n):	This program is typically conducted in a(n):	This program is typically conducted in a(n):	This program is typically conducted in a(n):
<ul style="list-style-type: none"> •Adoptive Home •Birth Family Home •Community Agency •Foster/Kinship Care •Hospital •Outpatient Clinic •Residential Care Facility •School 	<ul style="list-style-type: none"> •Community Agency •Hospital •Outpatient Clinic •School 	•Birth Family Home	•Birth Family Home	<ul style="list-style-type: none"> •Adoptive Home •Birth Family Home •Community Agency •Foster/Kinship Care •Residential Care Facility 	•Community Agency	<ul style="list-style-type: none"> •Adoptive Home •Birth Family Home •Community Agency •Foster/Kinship Care •Hospital •Outpatient Clinic •Residential Care Facility •School 	<ul style="list-style-type: none"> •Community Agency •Hospital •Outpatient Clinic •School

