**Nurturing Parenting Programs**

Date of Review: April 2010

The Nurturing Parenting Programs (NPP) are family-based programs for the prevention and treatment of child abuse and neglect. The programs were developed to help families who have been identified by child welfare agencies for past child abuse and neglect or who are at high risk for child abuse and neglect. The goals of NPP are to:

- Increase parents’ sense of self-worth, personal empowerment, empathy, bonding, and attachment.
- Increase the use of alternative strategies to harsh and abusive disciplinary practices.
- Increase parents’ knowledge of age-appropriate developmental expectations.
- Reduce abuse and neglect rates.

NPP instruction is based on psychoeducational and cognitive-behavioral approaches to learning and focuses on "re-parenting," or helping parents learn new patterns of parenting to replace their existing, learned, abusive patterns. By completing questionnaires and participating in discussion, role-play, and audiovisual exercises, participants learn how to nurture themselves as individuals and in turn build their nurturing family and parenting skills as dads, moms, sons, and daughters. Participants develop their awareness, knowledge, and skills in five areas: (1) age-appropriate expectations; (2) empathy, bonding, and attachment; (3) nonviolent nurturing discipline; (4) self-awareness and self-worth; and (5) empowerment, autonomy, and healthy independence. Participating families attend sessions either at home or in a group format with other families. Group sessions combine concurrent separate experiences for parents and children with shared "family nurturing time." In home-based sessions, parents and children meet separately and jointly during a 90-minute lesson once per week for 15 weeks.

Two group facilitators are recommended for every seven adults participating in the program. Two additional group facilitators are recommended for every 10 children participating. NPP can be implemented by professionals or paraprofessionals in fields such as social work, education, recreation, and psychology who have undergone NPP facilitator training and have related experience.

Multiple NPPs have been developed for various age groups and family circumstances (see the Adaptations section below for more information). The studies reviewed for this summary involved the NPPs designed for (1) parents and their children 0-5 years and (2) parents and their school-age children 5-12 years.
**Descriptive Information:**

| Areas of Interest       | Mental health promotion  
<table>
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<th></th>
<th>Mental health treatment</th>
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<tbody>
<tr>
<td><strong>Outcomes</strong></td>
<td>1: Parenting attitudes, knowledge, beliefs, and behaviors</td>
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<td>3: Children’s behavior and attitudes toward parenting</td>
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<td>4: Family interaction</td>
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</tbody>
</table>
| **Outcome Categories**  | Family/relationships  
|                        | Social functioning |
|                        | Trauma/injuries |
| **Ages**                | 6-12 (Childhood)  
|                        | 26-55 (Adult) |
|                        | Data not reported/available |
| **Genders**             | Male |
|                        | Female |
| **Races/Ethnicities**   | American Indian or Alaska Native |
|                        | Black or African American |
|                        | Hispanic or Latino |
|                        | White |
|                        | Race/ethnicity unspecified |
| **Settings**            | Home |
|                        | Other community settings |
| **Geographic Locations**| Urban |
|                        | Suburban |
|                        | Rural and/or frontier |
| **Implementation History** | Initial research and development for the Nurturing Parenting Programs occurred in the early 1980s. National implementation began in 1985. Over the past 30 years, about 14,000 agencies have implemented NPP worldwide, reaching an estimated 1.1 million families. Approximately 30 studies have been published or described in evaluation reports. NPPs are currently being implemented in all 50 States plus Australia, Belgium, Bermuda, Canada, Chile, England, France, Greenland, Guam, Iceland, Ireland, Italy, Jamaica, Japan, New Zealand, Norway, the Philippines, Portugal, Scotland, Singapore, Taiwan, Thailand, the Virgin Islands, and the West Indies. |
| **NIH Funding/CER Studies** | Partially/fully funded by National Institutes of Health: Yes  
|                        | Evaluated in comparative effectiveness research studies: Yes |
| **Adaptations**         | NPP materials have been translated into Arabic, Hmong, Kreyol |
Adverse Effects | No adverse effects, concerns, or unintended consequences were identified by the applicant.
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Costs | The cost of running a high-quality NPP varies based on the program format and number of sessions provided. For a 15-week group program with 7 or 8 families (up to 12 adults and 20 children), the average cost is $800-$1,200 per family, or $400-$563 per participant; this estimate includes staff salary, training, a required site stipend of $50, assessment costs, and all program materials. For home-based programs, the average cost of a home visit is $75-$125; this estimate includes staff salary, training, mileage and cell phone reimbursement, assessment costs, and all program materials. The average caseload is 10 to 12 families per full-time staff person. Administration time is not included in these estimates, as it varies by both funding sources and region.

Staff is the single most costly item in the budget, regardless of format. Implementers should consider hiring a quality facilitator and/or a site coordinator, if there are multiple sites, in addition to 4-6 program facilitators. Staffing ratio requirements may differ by State, and some groups may require additional staff (e.g., those...
with children with special needs).

Materials costs are about $25 per participant and are included in the estimates above. Each parent receives a parent handbook and a copy of Red White and Bruises; each child receives a Nurturing Parenting coloring book to use while participating in the program. These materials also serve as vital resource tools for the family once the family has successfully completed the program. Art and craft supplies that are part of the suggested weekly activities cost about $5. Other potential costs include food and transportation for participants. Some populations such as working parents may benefit from dinner being served before class begins; many communities are able to provide this meal for about $4-$5 per participant. Since finding safe transportation can be a serious barrier to participation for some families, particularly in inner cities and rural areas, implementers also may need to consider creative ways to address this need.

<table>
<thead>
<tr>
<th>IOM Prevention Categories</th>
<th>Selective</th>
<th>Indicated</th>
</tr>
</thead>
</table>

**Outcomes**

**Outcome 1: Parenting attitudes, knowledge, beliefs, and behaviors**

**Description of Measures**

Parenting attitudes, knowledge, beliefs, and behaviors were assessed using the following self-report measures:

- Adult Adolescent Parenting Inventory (AAPI), which assesses five constructs or aspects of parenting: (1) empathy toward children’s needs, (2) belief in the use of corporal punishment, (3) parent-child role reversal (i.e., parent behaves as if helpless and needy and looks to his or her own children as though they were adults who could provide parental care and comfort), (4) expectations of children’s developmental capabilities, and (5) attitudes toward children’s power and independence (i.e., beliefs about the importance of obedience versus autonomy in children). Items in the AAPI have a 5-point Likert response category format, from strongly disagree to strongly agree.
- Personality Factor (16PF), a standardized, norm-referenced inventory that assesses 16 factors of personality.
- Nurturing Quiz, a multiple choice, criterion-referenced
inventory designed to measure a parent’s understanding of parenting techniques and strategies presented in NPP.

**Key Findings**

In one study, participating families were referred to NPP by the State child welfare agency because of allegations of child abuse and/or neglect. The study found significant positive changes in parental attitudes in the following areas, as measured by the AAPI:

- Parents developed more appropriate expectations of children’s development ($p < .00$); the effect size for this finding was small (Cohen’s $d = 0.45$).
- Parents’ empathic awareness of their children’s needs increased ($p < .00$); the effect size for this finding was medium (Cohen’s $d = 0.71$).
- Parents became less supportive of using corporal punishment ($p < .00$); the effect size for this finding was medium (Cohen’s $d = 0.67$).
- Attitudes reflecting parent-child role reversal decreased ($p < .00$); the effect size for this finding was small (Cohen’s $d = 0.20$).
- Parents’ attitudes toward children’s power and independence improved ($p < .00$); the effect size for this finding was small (Cohen’s $d = 0.29$).

In another study, participating families were referred to NPP by the State social services agency or Parents Anonymous groups because of abusive parent-child interactions. The study found significant changes from pre- to posttest in the following areas:

- Data from the AAPI showed significant positive changes in parenting and child-rearing attitudes and behaviors. Specifically, parents participating in the NPP developed more appropriate developmental expectations of children, an increased empathic awareness of children’s needs, more appropriate attitudes toward the use of corporal punishment, and a decrease in parent-child role reversal behaviors (all $p$ values < .05). The improvement in empathic attitudes toward children’s needs and differentiation of appropriate parent-child roles was maintained through 1-year follow-up. Further, attitudes toward the use of corporal punishment and inappropriate developmental expectations of children significantly improved from posttest to 1-year follow-up ($p <$...
Data from the 16PF showed significant increases in parents’ enthusiasm (p < .01), social boldness (p < .01), and self-assuredness (p < .05) and significant decreases in radicalism (p < .05), anxiety (p < .02), and tough demeanor (i.e., insensitivity to other people; p < .05).

Data from the Nurturing Quiz indicated a significant increase in acquired knowledge related to behavior management concepts and techniques (p < .05).

In a third study, participating families were referred to NPP by the State social services agency or nonprofit social services organizations because of child neglect or neglect and abuse. Some were court-ordered to attend a parenting program based on their long-standing inability to change their neglecting parenting pattern. The study found significant changes from pre- to posttest in the following areas, as measured by the AAPI:

- Parenting and child-rearing attitudes significantly improved, such that parents had more appropriate expectations of children, had more empathic awareness of children’s needs, were less supportive of using corporal punishment, and developed a more appropriate view of the role of children and parents in a family (p values < .001).
- Parents’ knowledge of parenting and child-rearing techniques improved significantly (p < .001).

No significant changes in parents’ personality, as measured by the 16PF, were seen over the course of the study.

<table>
<thead>
<tr>
<th>Studies Measuring Outcome</th>
<th>Study 1, Study 2, Study 3</th>
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<tbody>
<tr>
<td>Study Designs</td>
<td>Preexperimental</td>
</tr>
<tr>
<td>Quality of Research Rating</td>
<td>3.1 (0.0-4.0 scale)</td>
</tr>
</tbody>
</table>

**Outcome 2: Recidivism of child abuse and neglect**

Recidivism was identified by determining whether participants were involved in any abuse and neglect incidents after completing the NPP treatment program. Data on incidents were obtained from the State administrative data system used to capture information on caregivers who are or have been the subject of investigations of
alleged child abuse or neglect.

**Key Findings**

In one study, participating families were referred to NPP by the State child welfare agency because of allegations of child abuse and/or neglect. The study found that a high dosage of treatment (at least 14 sessions of NPP) reduced child abuse and neglect recidivism by 73%, a significant improvement compared with results for lower levels of attendance (p < .05).

In another study, participating families were referred to NPP by the State social services agency or Parents Anonymous groups because of abusive parent-child interactions. The recidivism rate in this study was 7.36%; only 7 of the 95 adults who completed the program were charged with additional counts of child abuse and neglect after participation in the program.

**Studies Measuring Outcome**

<table>
<thead>
<tr>
<th>Study 1</th>
<th>Study 2</th>
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</table>

**Study Designs**

Preexperimental

**Quality of Research Rating**

2.9 (0.0-4.0 scale)

### Outcome 3: Children’s behavior and attitudes toward parenting

**Description of Measures**

Children’s behavior and attitudes toward parenting were assessed using the following self-report measures:

- Children’s Parenting Inventory (CPI), an inventory based on the AAPI and designed for use with young children. Like the AAPI, the tool assesses views and attitudes toward parenting styles and behaviors. The children respond to parenting examples with "I agree," "I’m not sure," or "I disagree."

- Early School Personality Questionnaire (ESPQ) or Children’s Personality Questionnaire (CPQ), based on the 16PF personality inventory. The questionnaires are designed to assess primary personality traits in children that are useful in understanding and evaluating personal, social, and academic development, as well as creativity, emotional stability, self-concept, excitability, and apprehension.

**Key Findings**

Participating families were referred to NPP by the State social services agency or Parents Anonymous groups because of abusive parent-child interactions. Significant changes from pre- to posttest
were found in the following areas:

- Data from the CPI showed a significant increase in children’s self-awareness and an improvement in parent-child role reversal (p values < .05). Significant improvements in self-awareness were also seen from posttest to 1-year follow-up (p < .01); children also became less supportive of corporal punishment from posttest to 1-year follow-up (p < .01).
- Data from the personality questionnaire indicated significant increases in children’s assertiveness (p < .05) and enthusiasm (p < .01) and a significant decrease in tough demeanor (i.e., insensitivity to other people; p < .03).

<table>
<thead>
<tr>
<th>Studies Measuring Outcome</th>
<th>Study 2</th>
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<tbody>
<tr>
<td>Study Designs</td>
<td>Preexperimental</td>
</tr>
<tr>
<td>Quality of Research Rating</td>
<td>3.0 (0.0-4.0 scale)</td>
</tr>
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</table>

**Outcome 4: Family interaction**

**Description of Measures**

- Family Environment Scale (FES), a 90-item self-report inventory that examines the social and environmental characteristics of a family, focusing on three areas: relationships, personal growth, and system maintenance.
- Observational Data Collection Form, used to collect data during 1-year follow-up, in-home observations of family interactions. Two observers were assigned to conduct each in-home observation. One observer recorded data, and the other facilitated family activities as part of the intervention. Each observation period lasted 2 hours and entailed structured and unstructured family activities. All family members and interactions were coded. Observers were trained to identify verbal and nonverbal patterns of behavior (e.g., disinterest/coldness, interest/warmth, expression of feelings/needs).

**Key Findings**

In one study, participating families were referred to NPP by the State social services agency or Parents Anonymous groups because of abusive parent-child interactions. The combination of self-reported
data from the FES and observational data from in-home visits revealed significant pre- to posttest improvements in family cohesion (p < .03), family expressiveness (p < .03), and family independence (p < .01), while family conflict decreased significantly (p < .01). From posttest to 1-year follow-up, significant increases were found in family cohesion (p < .05), family expressiveness (p < .04), and family organization (p < .02), while family conflict decreased significantly (p < .05).

In another study, participating families were referred to NPP by the State social services agency or nonprofit social services organizations because of child neglect or neglect and abuse. Some were court-ordered to attend a parenting program based on their long-standing inability to change their neglecting parenting pattern. Self-reported data from the FES showed significant positive changes in family interaction patterns from pretest to posttest. Family cohesion, expressiveness, organization, independence, achievement, reaction, and cultural and moral interactions increased, while family conflict and control decreased (p values < .001).

<table>
<thead>
<tr>
<th>Studies Measuring Outcome</th>
<th>Study 2, Study 3</th>
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</thead>
<tbody>
<tr>
<td>Study Designs</td>
<td>Preexperimental</td>
</tr>
<tr>
<td>Quality of Research Rating</td>
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</table>

**Quality of Research**

The documents below were reviewed for Quality of Research. Other materials may be available. For more information, contact the developer(s).

**Study 1**


**Study 2**

**Study 3**


**Supplementary Materials:**


**Ratings**

**Quality of Research Ratings by Criteria (0.0–4.0 scale):**

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Reliability of Measures</th>
<th>Validity of Measures</th>
<th>Fidelity</th>
<th>Missing Data/Attrition</th>
<th>Confounding Variables</th>
<th>Data Analysis</th>
<th>Overall Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>1: Parenting attitudes, knowledge, beliefs, and behaviors</td>
<td>4.0</td>
<td>4.0</td>
<td>2.6</td>
<td>2.7</td>
<td>1.9</td>
<td>3.4</td>
<td><strong>3.1</strong></td>
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<tr>
<td>2: Recidivism</td>
<td>3.5</td>
<td>3.5</td>
<td>2.4</td>
<td>2.8</td>
<td>1.9</td>
<td>3.4</td>
<td><strong>2.9</strong></td>
</tr>
</tbody>
</table>
of child abuse and neglect

3: Children’s behavior and attitudes toward parenting

4: Family interaction

<table>
<thead>
<tr>
<th>Study</th>
<th>Age</th>
<th>Gender</th>
<th>Race/Ethnicity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Study 1</td>
<td>Data not reported/available</td>
<td>75% Female, 25% Male</td>
<td>58% White, 42% Race/ethnicity unspecified</td>
</tr>
<tr>
<td>Study 2</td>
<td>6-12 (Childhood), 26-55 (Adult)</td>
<td>54% Female, 46% Male</td>
<td>90% White, 6% Black or African American, 2% American Indian or Alaska</td>
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</tbody>
</table>
### Study 3

<table>
<thead>
<tr>
<th>26-55 (Adult)</th>
<th>73% Female</th>
<th>89% White</th>
</tr>
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<tbody>
<tr>
<td>27% Male</td>
<td></td>
<td>8% Hispanic or Latino</td>
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<table>
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<tr>
<th></th>
<th>3% American Indian or Alaska Native</th>
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<tbody>
<tr>
<td></td>
<td>1% Race/ethnicity unspecified</td>
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</table>

### Readiness for Dissemination

#### Readiness for Dissemination Materials Reviewed

The documents below were reviewed for Readiness for Dissemination. Other materials may be available. For more information, contact the developer(s).

#### Dissemination Materials:


Bavolek, S. J. (n.d.). Successful administration of the Adult-Adolescent Parenting Inventory (AAPI-2) [PowerPoint slides].

Bavolek, S. J. (n.d.). Successful implementation of the Nurturing Parenting Programs [PowerPoint slides].


Ratings

Readiness for Dissemination Ratings by Criteria (0.0-4.0 scale):

<table>
<thead>
<tr>
<th>Implementation Materials</th>
<th>Training and Support</th>
<th>Quality Assurance</th>
<th>Overall Rating</th>
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<tbody>
<tr>
<td>4.0</td>
<td>4.0</td>
<td>4.0</td>
<td>4.0</td>
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</table>

Dissemination Strengths:

Implementation is supported by a wealth of extremely well-designed, high-quality, and easy-to-understand materials and resources. The Program Implementation Manual and Resource Guide functions as a comprehensive, step-by-step roadmap to implementation. Further, treatment materials are well developed and age- and parent-appropriate. The program Web site has readily accessible information, including free information to educate interested parties about the program to assist with decisions on which elements of the program to implement. The facilitator training and Training for Trainers program provide multiple opportunities to implement the program successfully. Many training sessions are taught by the principal developer, but the Web site also includes a list of certified trainers. Training materials are very good: Easy reader editions are provided for parents in a respectful way, and materials for children are simple and meet the child’s educational and maturity level. The developer has set very high standards with a detailed collection of materials to support and maintain implementation with fidelity. The various high-quality assessment tools and inventories provide objective data for ongoing quality assessment and improvement activities.

Dissemination Weaknesses:

No weaknesses were identified by reviewers.

Replications

Selected citations are presented below. An asterisk indicates that the document was reviewed for Quality of Research.


Learn More by Visiting:

- http://nurturingparenting.com
- http://nurturingtraining.com

Contacts

For information about implementation or research:
The NREPP review of this intervention was funded by the Center for Mental Health Services.