

Targeted Earlier Intervention Program - Parenting Programs

Parenting Programs is a service type delivered under Targeted Earlier Intervention (TEI) Program Activity 3 - Wellbeing and Safety.

The TEI program is working towards an evidence-informed approach to service delivery. This means that wherever possible TEI funded service providers should select programs, or models, based on evidence demonstrating positive outcomes for clients.

To assist service providers in selecting a suitable parenting program, the TEI program has identified a list of evidence-informed parenting programs. This list was sourced from evidence reviews conducted for the [DCJ Evidence Portal](#) and previous parenting programs evidence reviews. TEI has also separately identified a number of other parenting programs where some research evidence has been found to support the program.

The list of evidence-informed parenting program has been developed to assist service providers in selecting suitable parenting programs. For providers in the Wellbeing and Safety program activity who are delivering the parenting programs, it is expected they will use the evidence and select from the list of evidence informed programs, unless you are an ACCO delivering parenting programs to Aboriginal clients or you are a non-ACCO, with Aboriginal staff delivering parenting programs to Aboriginal clients. ACCOs and non-ACCOs with Aboriginal staff working with Aboriginal communities are encouraged to design programs suitable for their local context. Service providers should refer to the [Aboriginal-led Early Support Programs Evidence Review](#) (2023) which has identified eight common themes among the highly-rated evidence about Aboriginal-led early support programs designed for Aboriginal children, young people, families and communities and have regard to local community and practitioner expertise.

As with all TEI services, parenting programs should be offered free of charge, with no additional cost being passed on to families.

The list below consists of the following:

- a) Evidence-informed parenting programs
- b) Additional parenting programs identified (with some available research evidence)
- c) Aboriginal-specific parenting programs (evidence-informed)
- d) Aboriginal-specific parenting programs (with some available research evidence)

The list includes basic information about the target group, program duration and approach as well as links to further information on the program (for example, available at the Evidence Portal, California Evidence-Based Clearinghouse for Child Welfare (CEBC) program registry and/or program website).

For further information about this list, please contact your DCJ contract manager or email TEI@dcj.nsw.gov.au.

a) Evidence-Informed Parenting Programs

Evidence-informed Parenting Program	Target group	Duration of program	Program approach	Evidence Portal Program Summary link	CEBC link/Other information
Adolescent-Focused Family Behavior Therapy (FBT)	Youth aged 11 – 17 years with drug abuse, and coexisting problems such as conduct problems and depression	<p>Recommended Intensity: Starts with 1- to 2-hour initial outpatient once or twice in the first week then it varies depending on multiple factors that are determined between the client, client's family, and treatment provider (e.g., population, setting, intensity of treatment plan, effort).</p> <p>Recommended Duration: Typically 6 months to 1 year. It varies depending on multiple factors that are determined between the client, client's family, and treatment provider (e.g., population, setting, intensity of treatment plan, effort)."</p>	<p>Adolescent FBT includes more than a dozen treatments including treatment planning, behavioural goals, contingency contracting/Level System, communication skills training, job-getting skills training, self-control, stimulus control, and tele-therapy to improve session attendance. Therapies are consumer-driven and culturally sensitive. Adolescent FBT's goal is to result in positive outcomes in such areas as alcohol and drug use, depression, conduct problems, family dysfunction, and days absent from work/school. Adolescent FBT is designed to be used with youth, multiple ethnicities, differing types of substance abuse (alcohol, marijuana, and hard drugs), and across genders. Drafts of standardized client record keeping forms and quality assurance may be customized to fit agency needs</p>	N/A	<p>https://www.cebc4cw.org/program/adolescent-focused-family-behavior-therapy/</p>
Adult-Focused Family Behavior Therapy	Adults with drug abuse and dependence, and other problems including family dysfunction, depression, child maltreatment and trauma	<p>Recommended Intensity: Starts with 1 to 2-hour initial outpatient or home-based sessions once or twice in the first week then fades in frequency depending on multiple factors that are determined between the client, client's family, and treatment provider (e.g., population, setting, intensity of treatment plan, effort).</p> <p>Recommended Duration: Typically 6 months to 1 year. It varies depending on multiple factors (e.g., population, setting, intensity of treatment plan, effort) that are determined by the client, client's family, and treatment provider.</p>	<p>Adult-Focused FBT includes more than a dozen treatments including management of emergencies, treatment planning, home safety tours, behavioural goals and rewards, contingency management skills training, communication skills training, child management skills training, job-getting skills training, financial management, self-control, environmental control, home safety and aesthetics tours, and tele-therapy to improve session attendance.</p> <p>Therapies are consumer-driven and culturally sensitive. Adult-Focused FBT is designed to be used with adults, multiple ethnicities, differing types of substance abuse (alcohol, marijuana, and hard drugs), and across genders. Drafts of standardized client record keeping forms and quality assurance may be customized to fit agency needs.</p>	N/A	<p>https://www.cebc4cw.org/program/adult-focused-family-behavior-therapy/</p> <p>https://familybehaviorther.wixsite.com/familytherapy</p>

Evidence-informed Parenting Program	Target group	Duration of program	Program approach	Evidence Portal Program Summary link	CEBC link/Other information
All Babies Cry	First time parents aged 18 and over	An introductory video for parents to view in hospital; A 55 minute video with skill based modules; A booklet with checklists and activities.	All Babies Cry (ABC) is a video-based program designed to prevent abusive head trauma during the first year of a child's life. It empowers new parents with practical demonstrations of infant soothing and clear strategies for managing normal stress in parenting.	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/preventing-child-maltreatment/evidence-informed-programs/all-babies-cry.html	N/A
Attachment and Biobehavioral Catch-up (ABC)	Caregivers of infants 6 months to 2 years old who have experienced early adversity	Intervention delivery is weekly one-hour sessions for 10 sessions.	ABC targets several key issues that have been identified as problematic among children who have experienced early maltreatment and/or disruptions in care. These young children often behave in ways that push caregivers away. The first intervention component helps caregivers to re-interpret children's behavioural signals so that they provide nurture even when it is not elicited. Nurture does not come naturally to many caregivers, but children who have experienced early adversity especially need nurturing care. Thus, the intervention helps caregivers provide nurturing care even if it does not come naturally. Second, many children who have experienced early adversity are dysregulated behaviourally and biologically. The second intervention component helps caregivers provide a responsive, predictable, warm environment that enhances young children's behavioural and regulatory capabilities. The intervention helps caregivers follow their children's lead with delight. The third intervention component helps caregivers decrease behaviours that could be overwhelming or frightening to a young child.	N/A	https://www.cebc4cw.org/program/attachment-and-biobehavioral-catch-up/ https://www.abcintervention.org/

Evidence-informed Parenting Program	Target group	Duration of program	Program approach	Evidence Portal Program Summary link	CEBC link/Other information
Australian Nurse-Family Partnership	Families experiencing vulnerability, for example, young mothers, single mothers, and families of low socioeconomic status	No information was given on the number or duration of home visits, nor over what period they occurred.	Culturally safe adaptation of the Nurse-Family Partnership program for Aboriginal families. Implemented in central Australia where it was delivered by an Aboriginal community-controlled health organisation. It involves a program of nurse home visits for mothers. The nurses promote three aspects of maternal functioning: health-related behaviours during pregnancy and the early years of the child's life, the care parents provide to their children, and maternal life-course development (such as family planning, educational achievement, and participation in the workforce). The goals of the program are to improve pregnancy outcomes, to promote children's health and development, and to strengthen families' economic self-sufficiency.	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/reducing-child-harm-and-maltreatment-evidence-review/reducing-child-harm-and-maltreatment--evidence-informed-programs/australian-nurse-family-partnership.html	N/A

Evidence-informed Parenting Program	Target group	Duration of program	Program approach	Evidence Portal Program Summary link	CEBC link/Other information
AVANCE Parent-Child Education Program (PCEP)	Parents with children aged 0 – 3 years or pregnant women. Vulnerable due to issues such as teenage parenting or low education levels	<p>Recommended Intensity: Parent/primary caregiver contacts: Once per week for three hours - Child contacts: Once per week for three hours (early childhood education provided while parents are in class) - Parent-Child contacts: Once per month for 30-45 minutes (minimum) in the home.</p> <p>Recommended Duration: Families participate in the voluntary program for nine months. Upon completion of a minimum of 75% of classes, parents/primary caregivers graduate and participate in the commencement ceremony with their children, Parents/primary caregivers are encouraged to return for a second year in which they are assisted with adult education and job training.</p>	<p>AVANCE’s philosophy is based on the premise that education must begin in the home and that the parent is the child’s first and most important teacher. The PCEP fosters parenting knowledge and skills through a nine-month, intensive bilingual parenting curriculum that aims to have a direct impact on a young child’s physical, emotional, social, and cognitive development. Parents/primary caregivers are taught how to make toys out of common household materials and how to use them as tools to teach their children school readiness skills and concepts. Monthly home visits are also conducted to observe parent-child interactions and provide guidance in the home on learning through play.</p> <p>Along with parenting education, “parents/primary caregivers are supported in meeting their personal growth, developmental and educational goals to foster economic stability. While parents/primary caregivers attend classes, their children under the age of three are provided with early childhood enrichment in a developmentally appropriate classroom setting which aims to build the academic, social, and physical foundation necessary for school readiness</p>	N/A	<p>https://www.cebc4cw.org/program/avance-parent-child-education-program/</p> <p>https://www.avance.org/programs/parent-child-education-program-pcep/</p>
Brief Strategic Family Therapy (BSFT)	Youth aged 12 – 18 years with substance abuse problems and co-occurring behaviour problems such as conduct problems, risky sexual behaviour and aggressive and violent behaviour	BSFT is typically delivered in 12-16 family sessions but may be delivered in as few as 8 or as many as 24 sessions, depending on the severity of the communication and management problems within the family	BSFT is based on three basic principles: First, BSFT is a family systems approach. Second, patterns of interaction in the family influence the behaviour of each family member. The role of the BSFT counsellor is to identify the patterns of family interaction that are associated with the adolescent's behaviour problems. Third, plan interventions that carefully target and provide practical ways to change those patterns of interaction that are directly linked to the adolescent's drug use and other problem behaviours.	N/A	<p>https://www.cebc4cw.org/program/brief-strategic-family-therapy/</p> <p>https://brief-strategic-family-therapy.com/what-we-do/</p>

Evidence-informed Parenting Program	Target group	Duration of program	Program approach	Evidence Portal Program Summary link	CEBC link/Other information
Building Confidence	Typically developing school-aged children diagnosed with childhood anxiety disorders (6-11 years old) and their families	<p>Recommended Intensity: Weekly 1.5-hour session</p> <p>Recommended Duration: 16 weeks</p>	<p>Building Confidence is a cognitive-behavioural therapy (CBT) that is provided to school-aged children who demonstrate clinically significant symptoms of a range of anxiety disorders (e.g., separation anxiety disorder). The format consists of individual child therapy combined with parent-training and involvement. Both children and their parents are taught fundamental CBT principles and techniques as well as integrating ways to build confidence through graduated learning and practice of age-appropriate, self-independence skills. In-session exposures are extended into the home where parents assist children complete home-based exposures in the community by providing coaching in CBT strategies and naturalistic opportunities to practice and maintain treatment goals and effects. In line with these overarching treatment goals, the intervention program also works closely with the children's schools and teachers to promote the practice and generalization of treatment goals in the school (e.g., social anxiety).</p> <p>This program is typically conducted in a(n): -Community Daily Living Settings -Outpatient Clinic -School</p>	N/A	https://www.cebc4cw.org/program/building-confidence/
Child FIRST	<p>Families with children, prenatal to 6 years of age, demonstrating emotional/behavioural or developmental/learning problems.</p> <p>Families experiencing significant psychosocial risk</p>	<p>On average, families participate in the Child FIRST program for 22 weeks.</p> <p>Sessions occur weekly.</p>	<p>The program aims to:</p> <ul style="list-style-type: none"> - Prevent or diminish serious emotional disturbance, development and learning disabilities, and abuse and neglect. - Strengthen parent-child relationships - Build a network of supportive relationships that could continue to sustain the primary parent over the long term. <p>Child FIRST has two core components:</p> <ul style="list-style-type: none"> - A system care approach to provide comprehensive, integrated services and supports (e.g., early education, housing, substance abuse treatment) to the child and family. - A relationship-based approach to enhance nurturing, responsive parent-child interactions and promote positive social-emotional and cognitive development. 	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/preventing-child-maltreatment/evidence-informed-programs/child-first.html#How3	https://www.cebc4cw.org/program/child-first/

Evidence-informed Parenting Program	Target group	Duration of program	Program approach	Evidence Portal Program Summary link	CEBC link/Other information
Child-Adult Relationship Enhancements in Primary Care (PriCARE)	Children with behavioural concerns who might be at risk for maltreatment. In one RCT children were aged between 2 and 6 years	6 weekly one and a half hour sessions	Trauma-informed group training program to teach caregivers techniques to support the social and emotional growth of children. The theoretical foundation is derived from attachment and social learning theory. The program is designed as a prevention model for children with behavioural concerns who might be at risk for maltreatment.	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/reducing-child-harm-and-maltreatment-evidence-review/reducing-child-harm-and-maltreatment--evidence-informed-programs/child-adult-relationship-enhancements-in-primary-care--pricare.html	
Colorado Adolescent Maternity Program	Adolescent mothers at risk of maltreating their children.	<p>Clinic appointments are conducted monthly for the first 6 months, every other month for 6 months, then at 3 month intervals until the child is 2 years old.</p> <p>Home visits are conducted weekly for the first 16 postpartum weeks. The visits typically last 1-2 hours. After the first 16 weeks, the frequency of these visits is reduced depending on the needs of the family. However, they are never more than 6 weeks apart. Visits are also supplemented with telephone calls to ensure families are contacted at least twice a month.</p>	<p>The Colorado Adolescent Maternity Program (CAMP) is a prenatal, delivery and postnatal care program.</p> <p>It combines clinic appointments and home visits. It integrates the support of various health care providers, including obstetrician, paediatrician, social worker, and dietician.</p> <p>The program aims to:</p> <ul style="list-style-type: none"> - prevent adverse maternal and child outcomes directly by simplifying access to preventative health care and social services - support teenage parents to graduate high school and pursue careers - Enhance family support - Promote links between community service agencies - address the specific behaviours and attitudes that put teenage parents at increased risk for maltreating their children - Promote maternal competency and nurturing parenting behaviour 	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/preventing-child-maltreatment/evidence-informed-programs/colorado-adolescent-maternity-program.html	

Evidence-informed Parenting Program	Target group	Duration of program	Program approach	Evidence Portal Program Summary link	CEBC link/Other information
Coping Power	Children aged 5 – 11 years at risk of substance misuse	16 month program delivered during the 5th and 6th grade school years. Children attend 22 group sessions in 5th grade and 12 group sessions in 6th grade. Children also receive half hour individual sessions once every two months. Parents attend 11 group sessions during their children's 5th grade year and 5 sessions during the 6th grade year.	Preventive group intervention delivered in a workshop format. Two components (Parent Focus and Child Focus) designed to impact four variables that have been identified as predicting substance abuse (lack of social competence, poor self-regulation and self-control, poor bonding with school, and poor caregiver involvement with child).	N/A	https://www.cebc4cw.org/program/coping-power-program/detailed
DARE to be You	High risk families with children aged 2 – 5 years at risk of future substance misuse	Sessions are ideally given in 2½-hour increments over 10–12 weeks and include a 10- to 30-minute joint activity for parents and children to practice skills learned in the session. After completing the program, parents are welcome to attend annual reinforcement workshops. These boosters are given with a minimum of two series of four 2-hour sessions and are designed to enhance skills learned without duplicating previous activities. The boosters are intended to foster supportive networks and to consolidate the skills gained from DTBY.	DARE to be You (DTBY) is a multilevel prevention program aimed at high-risk families with children ages 2–5. The program is designed to lower children’s risk of future substance abuse and other high-risk activities by improving aspects of parenting that contribute to children’s resiliency. DTBY combines three supporting aspects— educational activities for children, strategies for the parents or teachers, and environmental structures—to enable program participants to learn and practice the desired skills.	N/A	
Early Risers “Skills for Success”	6- to 12-year-old elementary school students who are at high risk for early development of conduct problems, including substance use	(not stated)	Developmentally focused, competency-enhancement program that targets 6- to 12-year-old elementary school students who are at high risk for early development of conduct problems, including substance use (who display early aggressive, disruptive, or nonconformist behaviours). The program uses integrated child-, school-, and family-focused interventions, coordinated by a family advocate, to move high-risk children onto a more adaptive developmental pathway.	N/A	https://www.cebc4cw.org/program/early-risers-skills-for-success/

Evidence-informed Parenting Program	Target group	Duration of program	Program approach	Evidence Portal Program Summary link	CEBC link/Other information
New Zealand Early Start Program	Families of children who are preschool aged children and who have been identified as at risk, for example because of the age of parents, parental social support, unplanned pregnancy, parental substance use, the family financial situation, family violence, or where there were serious concerns about the ability of the family to care for the child.	36 months	<p>The program involves home visits by family support workers with nursing or social work qualifications who have also attended a five-week training program specific to Early Start. Each family support worker supports 10 to 20 families.</p> <p>The program of home visitation is tailored to meet individual family needs. An initial needs assessment is conducted through four weekly visits, to determine the subsequent level of intervention. The study did not provide information on the contents of each level of intervention.</p>	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/reducing-child-harm-and-maltreatment-evidence-review/reducing-child-harm-and-maltreatment--evidence-informed-programs/early-start.html#How5	https://www.cebc4cw.org/program/early-start/
e-PALS Baby Net	Mothers of low-income families with young children. In a randomised control trial, children were 3.5-7.5 months old.	11 sessions delivered online	<p>Web-based parenting intervention for mothers of infants at risk of maltreatment. It is an online adaption of the Play and Learning Strategies (PALS) program</p> <p>Broadly, the program aims to protect against child maltreatment and improve social-emotional behaviour and developmental outcomes. In addition, the online version of the program, e-PALS, seeks to address financial and geographical barriers to accessing the intervention.</p>	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/preventing-child-maltreatment/evidence-informed-programs/e-pals-baby-net.html	
e-Parenting program	Families who are at risk for child maltreatment, including those with substance abuse problems, prior maltreatment reports, or intimate partner violence	8 modules implemented soon after birth until a child is 6 months old	<p>A multicomponent computer-based program combined with home visiting. It adopts elements of 3 evidence-based interventions to prevent child maltreatment: motivational interviewing, cognitive retraining and SafeCare.</p> <p>Home visitors seek to promote positive outcomes by enhancing family functioning, promoting parent-child relationships, and supporting healthy child growth and development.</p>	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/preventing-child-maltreatment/evidence-informed-programs/e-parenting-program.html	

Evidence-informed Parenting Program	Target group	Duration of program	Program approach	Evidence Portal Program Summary link	CEBC link/Other information
Families Facing the Future	Parents who are receiving methadone treatment and their children aged 5 – 14 years	One five-hour family retreat and 32 hour-and-a-half parent training sessions. Sessions are conducted twice a week over a 16-week period. Children attend 12 of these sessions to practice the skills with their parents.	Intensive family program providing parenting skills training. The parent training format combines a peer support and skill training model. The training curriculum teaches skills using the guided participant modelling. Skills are modelled by trainers and other group members, then discussed by participants. Skills steps are reviewed and then parents practice the steps. Videos are frequently used in modelling the skills or during practice of the skills. The training focuses on affective and cognitive as well as behavioural aspects of performance.	N/A	https://www.cebc4cw.org/program/families-facing-the-future/detailed
Family Check Up (FCU)	Caregivers of children 2-17 years old in the middle class or lower socioeconomic level	Recommended Intensity: One-hour session every 1-2 weeks. Recommended Duration: 1-4 months depending on the individual needs of the family.	The FCU model is a family-centred intervention that promotes positive family management and addresses child and adolescent adjustment problems. The intervention does this through reductions in coercive and negative parenting and increases in positive parenting. The FCU has two phases: 1) An initial assessment and feedback; 2) Parent management training (Everyday Parenting) which focuses on positive behaviour support, healthy limit setting, and relationship building. The intervention is tailored to address the specific needs of each child and family and can be integrated into many service settings including public schools; the Women, Infants, and Children (WIC) program; home visiting; primary health care; and community mental health.	N/A	https://www.cebc4cw.org/program/family-check-up/ https://www.nwpreventionscience.org/
Family Connections	Children aged 5 – 11 years exposed to maltreatment, domestic violence, parental mental illness or parental substance misuse	Up to 40 sessions that last one-and-a-half hours each.	Community-based program that works with families in their homes to help them meet the basic needs of their children	N/A	https://www.cebc4cw.org/program/family-connections/
Family Focused Treatment for Adolescents	Youth aged 9-17 with bipolar disorder	Recommended Intensity: 21 one-hour sessions: 12 weekly, 6 biweekly, and 3 monthly Recommended Duration: 9 months	FFT-A is a psychosocial treatment for youth with bipolar disorder, consisting of family psychoeducation, communication enhancement training, and problem-solving skills training. It is given alongside of medications in the period just after an episode of bipolar disorder. The clients are the adolescent, parents or carers, and where possible, siblings and extended relatives.	N/A	https://www.cebc4cw.org/program/family-focused-treatment-for-adolescents/

Evidence-informed Parenting Program	Target group	Duration of program	Program approach	Evidence Portal Program Summary link	CEBC link/Other information
Family Support Program	Children aged between 3 and 5 years, where the child shows signs of social behavioural problems; has difficulties with socio-emotional or cognitive development; or the parents lack parenting skills.	For the parents the program consists of 20 individualised sessions in the home every two weeks, each lasting 30 - 90 minutes; 15 individual or group sessions in preschool at least once per month; video-modelling; and written resources developed by the intervention team. For the children there are 52 sessions - two per week for half an hour each time.	Based on the Comprehensive Child Development Program and follows the principles of cognitive and behavioural parenting interventions based on social learning models. The intervention component has two different parts: for parents and for children. The program is flexible and can be adapted to meet the individual needs of each family. The program goals are to provide parenting education in child development, health care, nutrition, and parent-child interaction activities; and to improve the cognitive, social and personal development of children.	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/reducing-child-harm-and-maltreatment-evidence-review/reducing-child-harm-and-maltreatment--evidence-informed-programs/family-support-program.html	
First Steps	The First Steps program is designed for mothers who have just given birth (within 2 days).	The First Steps program consists of an in-person hospital room visit, and optional additional telephone contact. On average, visits are 18 minutes.	<p>The First Steps program is a primary prevention strategy that aims to promote child health and development by improving the quality of parenting behaviour. It achieves this by building parenting capacity and supports, specifically the protective factors of parenting knowledge and social support.</p> <p>The program model has two main components:</p> <ul style="list-style-type: none"> - a required in-person initial visit with the mother in their hospital room - optional telephone or mail follow-up contacts. 	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/preventing-child-maltreatment/evidence-informed-programs/first-steps.html#Who1	
Group Attachment-Based Intervention (GABI)	Mothers at risk of maltreating their children because of a heavy trauma burden, mental health challenges, or prior removal of a child. In one RCT, children were aged 0-36 months.	Delivered in a multifamily group setting. Consists of 120-minute sessions, three times weekly over 26 weeks.	Program aims to improve the mother-child relationship and prevent abuse for mothers at risk of maltreating their children because of a heavy trauma burden, mental health challenges, or prior removal of a child. The program is based on attachment theory.	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/reducing-child-harm-and-maltreatment-evidence-review/reducing-child-harm-and-maltreatment--evidence-informed-programs/group-attachment-based-intervention--gabi-.html	
Hassle Free Shopping	Parents of children aged 2-6	1 session of 2 hours duration	Aims to prevent behaviour problems during shopping trips and in other settings.	N/A	
Hawaii Healthy Start Program	Mothers and fathers, where possible, who are at risk of child abuse and neglect. Families are deemed eligible for home visiting if they demonstrate certain risk factors (e.g. substance abuse, mental health) and are not already involved with child protection services for the target child.	<p>Frequency of visits depends on the level a family is assessed as:</p> <ul style="list-style-type: none"> - Level one is a weekly visitation - Level two is a biweekly visitation - Level three is a monthly visitation - Level four is a quarterly visitation 	<p>Home visitation program designed to improve family functioning, prevent child abuse and promote child health development. It has two parts:</p> <ul style="list-style-type: none"> - population-based screening and assessment to identify families at-risk of child abuse and neglect; - home visiting of identified at-risk families. 	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/preventing-child-maltreatment/evidence-informed-programs/hawaii-healthy-start-program.html	
Hawaii Healthy Start Program - Enhanced with Cognitive Appraisal	All families expecting the birth of a child (or having recently given birth to a child) who are	Visits last for one year, with about 17-20 visits in total.	Home visitation program designed to promote the well-being of children by providing services to parents and parents-to-be at risk	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/preventing-child-	

Evidence-informed Parenting Program	Target group	Duration of program	Program approach	Evidence Portal Program Summary link	CEBC link/Other information
	identified as at moderate risk to become abusive.		<p>of child abuse. The program is an enhanced version of the original Hawaii Healthy Start program, which is designed to improve family functioning, prevent child abuse and promote child health development.</p> <p>HSP-Enhanced includes the original HSP components plus an additional cognitive appraisal component.</p>	maltreatment/evidence-informed-programs/hawaii-healthy-start-program-cognitive-appraisal.html	
HeadStart	HeadStart is targeted at low-income children and children with disabilities, two groups at high risk for maltreatment.	Up to 2 years	<p>It is a primary prevention program offering services to an at-risk population of low-income families including pregnant women and families with children up to 3 years of age. It offers childcare, home visiting or a mix of the two.</p> <p>The goals of the program are to improve parenting, reduce maltreatment (including the use of abusive discipline or neglectful behaviours), and promote parental involvement and parent education. Delivery and implementation of the program varies widely from site to site due to differences in implementation quality, curriculum choices, staffing structure, community characteristics and other factors.</p>	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/reducing-child-harm-and-maltreatment-evidence-review/reducing-child-harm-and-maltreatment--evidence-informed-programs/headstart.html	
Healthy Families America	Families assessed as high risk for child abuse and neglect.	Home visiting services begin prenatally or within three months after the birth of a baby and can last from three to five years, depending on the needs of the family.	Long-term home visiting program for families assessed as high risk for child abuse and neglect. Specially trained paraprofessionals provide the home visiting services to parents.	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/preventing-child-maltreatment/evidence-informed-programs/healthy-families-america-program.html	https://www.cebc4cw.org/program/healthy-families-america/
Healthy Steps for Young Children	Designed for children aged from newborn to 3 years old.	Various. For the home visits component, up to six home visits in the first 3 years	<p>Healthy Steps for Young Children is a universal, practice-based intervention that enhances the delivery of behavioural and developmental services and relies on partnerships between developmental specialists and families.</p> <p>The core program components include contact with developmental specialists and seven services:</p> <ul style="list-style-type: none"> -Enhanced well-childcare -Up to six home visits in the first 3 years -A telephone line for non-emergency developmental concerns -Developmental assessments -Written materials -Parent groups -Linkages to community resources 	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/reducing-child-harm-and-maltreatment-evidence-review/reducing-child-harm-and-maltreatment--evidence-informed-programs/healthy-steps-for-young-children.html	

Evidence-informed Parenting Program	Target group	Duration of program	Program approach	Evidence Portal Program Summary link	CEBC link/Other information
Hitkashrut	Families with children who are showing early signs of conduct problem development	14 group sessions facilitated by psychologists that include psychoeducational instruction, group discussions, role plays, and homework assignments.	“Hitkashrut, which means "attachment" in Hebrew, is a theory-based, common elements co-parent training program. Using a family systems approach, this program aims to motivate children to shift from antisocial to prosocial attitudes by reshaping the parent-child relationship and improving collaboration among parents and between parents and teachers. This program targets callous/unemotional traits and low effortful control, which are indicators of a developmental trajectory toward antisocial or disruptive behaviours.	N/A	https://www.cebc4cw.org/program/hitkashrut/
Home Instruction for Parents of Preschool Youngsters (HIPPY)	Parents with children aged up to 5 years, who have little resources or education or who are adolescent parents	A minimum of 30 weeks of interaction with the home visitor; curriculum available for up to three years of home visiting services	HIPPY is a home-based and parent-involved school readiness program that helps parents prepare their children ages three to five years old for success in school and beyond. The parent is provided with a set of carefully developed curriculum, books, and materials designed to strengthen their child’s cognitive and early literacy skills, as well as their social, emotional, and physical development.	N/A	https://www.cebc4cw.org/program/home-instruction-for-parents-of-preschool-youngsters/ https://www.hippyus.org/
Home Visiting Program	Families of newly born infants who reported one or more risk factors identified in the program.	Home visits of 20-60mins in length. Child health nurses undertook the home visits. Visits were weekly until infants are 6 weeks old, fortnightly until infants are 3 months old, then monthly until the age of 12 months. The minimum number of home-visits expected per family is 18 and can be exceeded where negotiated between families and nurses.	The Home Visiting program is a home-based prevention and early intervention program. It aims to mediate the risk for child abuse and neglect by enhancing family adjustment to the parenting role.	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/preventing-child-maltreatment/evidence-informed-programs/home-visiting-program.html	

Incredible Years Parenting Training Program	Parents with children aged 12 years and younger, and particularly for families already in contact with child welfare services.	12-20 weekly group sessions, 2-3 hours in length.	A group-based intervention designed to strengthen parenting skills and reduce child problem behaviours. The program teaches: <ul style="list-style-type: none"> - child-directed play skills - positive discipline strategies - effective parenting skills - strategies for coping with stress - ways to strengthen children's prosocial and social skills. 	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/preventing-child-maltreatment/evidence-informed-programs/incredible-years-parenting-training-program.html	https://www.cebc4cw.org/program/the-incredible-years/
Incredible Years Preschool BASIC Parenting Program Enhanced with Home Visits	It is intended for children aged between 2 and 8 years with disruptive behavioural problems.	The Incredible Years Preschool BASIC Parenting Program Enhanced with Home Visits is an adaptation involving extra meetings and home visits, including 19–20 weekly parent group meetings, each 2 hours in duration, plus four additional home visits, monthly, with weekly phone calls. Face-to-face groups consist of 10-12 parents. The estimated duration of the program is 6 months. Dosage in this study included extra sessions and home visits added to the usual intervention for this population.	The Incredible Years Preschool BASIC Parenting Program Enhanced with Home Visits is an adaptation of the universal Incredible Years program involving additional sessions and home visits (Karjalainen, et al. 2019). The Incredible Years is premised on social learning theory and a relational framework. It aims to address child behavioural issues by modifying parenting practices. Specifically, parents are supported to improve their parenting skills through practice with their child, paralleled by role play; watching video-recorded program information; and collaborative and interactive group discussion. These activities collectively aim to increase positive parenting strategies (e.g., child-directed play, praise, and incentives; consistent strategies for managing child misbehaviour), and decrease negative parenting strategies (e.g., being critical and inconsistent).	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/reducing-child-harm-and-maltreatment-evidence-review/reducing-child-harm-and-maltreatment--evidence-informed-programs/the-incredible-years-preschool-basic-parenting-program-enhanced-.html#About0	
Incredible Years Shortened Basic Version	Children aged between 2 and 8 years with disruptive behavioural problems	Reduces the number of sessions from 12 in the full version, to the first six sessions. The six 2-hour sessions run weekly.	Shortened version of the original Incredible Years program. Premised on social learning theory and a relational framework. It aims to address child behavioural issues by modifying parenting practices. Specifically, parents are supported to improve their parenting skills through practice with their child, paralleled by role play; watching video-recorded program information; and collaborative and interactive group discussion.	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/reducing-child-harm-and-maltreatment-evidence-review/reducing-child-harm-and-maltreatment--evidence-informed-programs/the-incredible-years-shortened-basic-version.html	
Johns Hopkins Children and Youth Program	Low-income mothers aged 18-33, with children aged 3 to 13 months	The program is implemented through fortnightly home visits, for 40-60 minutes each. The duration of the program is up to 24 months.	The Johns Hopkins Children and Youth program is a community-based home visiting program for mothers and their infants. It aims to provide mothers with health and parenting education in the home. The program employs paediatricians, nurses, parent education specialists, social workers and support staff. Emphasis is placed on prevention by training health and parenting education specialists and by employing social workers.	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/reducing-child-harm-and-maltreatment-evidence-review/reducing-child-harm-and-maltreatment--evidence-informed-programs/johns-hopkins-children-and-youth-program.html	

Multidimensional Family Therapy (MDFT)	Adolescents aged 11 — 18 years with substance use, delinquency, and related behavioural and emotional problems	3-4 months for at-risk and early intervention youth and families. 5-6 months for youth with a substance abuse and/or conduct disorder diagnosis. For at-risk and early intervention, therapists typically provide 1-2 sessions per week, with sessions lasting between 45 and 90 minutes. More severe cases will require sessions 1- 3 times per week (average of 2) with each session lasting 45-90 minutes. For all cases, the dose tapers down as the treatment progresses.	Family-based treatment system for adolescent substance use, delinquency, and related behavioural and emotional problems. Therapists work simultaneously in four interdependent domains: the adolescent, parent, family, and community. Once a therapeutic alliance is established and youth and parent motivation is enhanced, the MDFT therapist focuses on facilitating behavioural and interactional change. The final stage of MDFT works to solidify behavioural and relational changes and launch the family successfully so that treatment gains are maintained.	N/A	https://www.cebc4cw.org/program/multidimensional-family-therapy/
Multi-Family Psychoeducational Psychotherapy (MF-PEP)	Children aged 8-12 with major mood disorders (depressive and bipolar spectrum) and their parents	Recommended Intensity: Weekly 90-minute sessions Recommended Duration: 8 weeks	MF-PEP is a manual-based group treatment for children aged 8-12 with mood disorders (depressive and bipolar spectrum disorders). MF-PEP is based on a biopsychosocial framework and utilizes cognitive-behavioural and family-systems based interventions. MF-PEP is an 8-session, 90-minutes-per-session group treatment that begins and ends with children and parents together; the bulk of each session is run separately for parents and children.	N/A	https://www.cebc4cw.org/program/multi-family-psychoeducational-psychotherapy/
My Baby & Me	Mothers aged 15 years and older, from low-income households, during pregnancy and postpartum.	55 sessions. It is conducted from 3rd trimester of pregnancy until the child reaches 30 months in age. Sessions follow a schedule of weekly or biweekly visits. Each visit lasts approximately 1.5 hours. When children are 24–30 months of age, the last six sessions occur at monthly intervals as part of the program completion and graduation process.	My Baby & Me focuses on changing specific aspects of mothers' responsive behaviours with their children across the infant and toddler developmental periods. The Play and Learning Strategies (PALS) curriculum is used as a base for the program. PALS was originally designed for parents of particularly vulnerable children (infants and toddlers from low-socioeconomic-status backgrounds). It includes both infant and toddler modules that teach mothers interaction skills and responsive parenting styles.	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/preventing-child-maltreatment/evidence-informed-programs/my-baby-and-me.html	

Nurse-Family Partnerships	Socially disadvantaged young mothers with a first-time pregnancy through to child's second birthday	Pregnancy up until a child is two years old. Visitation frequency is based on the needs of the mothers and families.	<p>Home-based visitation program designed to prevent a wide range of childhood health and developmental problems, including abuse and neglect.</p> <p>The program aims to:</p> <ul style="list-style-type: none"> Improve pregnancy outcomes by helping women engage in good preventive health practices, including prenatal care, improving their diets and reducing use of cigarettes, alcohol and illegal substances. Improve child health and development by helping parents provide responsible and competent care. Improve the economic self-sufficiency of the family by helping parents develop a vision for their own future, plan future pregnancies, continue their education and find work. <p>Nurse-Family Partnership works by having specially trained nurses regularly visit young, first-time mums to-be starting early in the pregnancy, and continuing through to the child's second birthday.</p>	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/preventing-child-maltreatment/evidence-informed-programs/nurse-family-partnership-program.html	
Oregon Model Parent Management Training (PMTO)	Parents of children aged 2 – 18 years with disruptive behaviours. Versions adapted for children with substance abuse, delinquency, conduct disorder, and child neglect and abuse	14 group sessions and 20-25 individual/family sessions, depending on severity; individual family treatment is not typically provided together with group treatment. The time frame can be 5-6 months or longer, depending on circumstances	A set of parent training interventions developed over forty years. PMTO can be used in family contexts including two biological parents, single-parent, re-partnered, grandparent led, and foster families. PMTO can be used as a preventative program and a treatment program. It can be delivered in many formats, including parent groups, individual family treatment, books, audiotapes and video recordings. PMTO interventions have been tailored for specific clinical problems, such as antisocial behaviour, conduct problems, theft, delinquency, substance abuse, and child neglect and abuse.	N/A	

Parent Aide Services and Case Management	Families with at least one child 12 years of age or younger deemed high risk of abuse or neglect.	<p>At-home intervention, which averages 1 year in length.</p> <p>A case manager conducts an initial needs assessment. The parent aide then visits up to 2 times per week, depending upon assessed risk, need, and parents' assigned level of service.</p> <p>Frequency of visits can range from a more intensive engagement phase focusing on immediate concerns, to a phase emphasising work on parent-child discipline and family communication, and later to a phase focusing on maintenance of gains and termination of the parent aide.</p>	<p>Aims to reduce the risk of physical abuse and/or neglect. It targets parenting behaviour and environmental challenges linked with child maltreatment risk.</p> <p>Families must have at least one child 12 years of age or younger living in the home and be deemed at high risk of abuse and/or neglect. This is determined by a referral from child protective services or an initial case assessment that examines imminent risk of harm to the child, parental capacity and resources to cope with stress in the parenting role.</p> <p>The program has two components: parental aide and case management.</p>	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/preventing-child-maltreatment/evidence-informed-programs/parent-aide-services-and-case-management.html	
Parent Education and Behavior Management (PEBM)	Parents with preschool children recently diagnosed with autistic disorder	<p>Total duration of program – 20 weeks</p> <p>Groups of families: Number of sessions –10 Duration of sessions – 90 minutes Frequency of sessions – fortnightly</p> <p>Individual families: Number of sessions – 10 Duration of sessions – 60 minutes Frequency of sessions – fortnightly</p>	Aims improve the mental health and adjustment of parents with preschool children recently diagnosed with autistic disorder.	N/A	

Parent Support Outreach (PSO)	The PSO program is designed for families with children aged 10 years and younger and have been deemed high-risk for child maltreatment. To be eligible, families must have two or more risk factors associated with child maltreatment and/or parenting struggles.	Based on need.	<p>The Parent Support Outreach (PSO) program is for families at high risk of child maltreatment. It aims to provide families with needed supports to promote safety and wellbeing of children and families, and to prevent further escalation and referrals to higher-end / higher-cost programs.</p> <p>The program provides a wide range of services:</p> <ul style="list-style-type: none"> -financial (e.g. helping pay for basic necessities, connecting to emergency food banks, welfare assistance, employment and job training services), -therapeutic (e.g. mental health, substance abuse) -help with parenting and childcare others (e.g., legal, child developmental services or recreational activities). -Caregivers are given support to increase their parental capacity. This includes meeting their children's and family's needs, removing barriers impacting family functioning, and gaining access to community-based resources. 	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/preventing-child-maltreatment/evidence-informed-programs/parent-support-outreach-program.html#How5	https://www.cebc4cw.org/program/parent-support-outreach-program/
Parent Training Program	Children about to transition to primary school	Program commences approximately 1 month before the start of primary school. Runs for 4 consecutive weeks, with one 2-hour session per week.	<p>Aims to improve the parent–child relationship and decrease parental stress by reducing harsh parenting at the time of transition to primary school. Two trained social workers run the program with groups of 8 to 12 parents in each group. Parents are taught to use more active listening skills, engage less in harsh parenting practices, use more praise and encouragement and set reasonable expectations in the rearing of their children. The program builds on Lazarus and Folkman’s framework of cognitive appraisal, stress and coping. It is also guided by the Health Action Process Approach (HAPA) which explains the psychological mechanisms involved in the gap between intention and actual change in health behaviour.</p>	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/reducing-child-harm-and-maltreatment-evidence-review/reducing-child-harm-and-maltreatment--evidence-informed-programs/parent-training-program.html	

Parental Daily Diary	The Parental Daily Diary is aimed at parents with children aged 18 months to 4 years old, who use physical discipline and have anger towards their children. The program is particularly effective for parents on a low income who receive some form of government assistance.	Small groups of parents meeting weekly for 16 weeks	<p>The Parental Daily Diary is a program designed to promote gentle disciplinary strategies and discourage physical punishment. It seeks to encourage positive parenting behaviours. It is aimed at parents who feel anger towards their children when they perceive an event requires discipline.</p> <p>The program involves:</p> <ul style="list-style-type: none"> - small groups of parents meeting weekly for 16 weeks - a daily diary that is used to record disciplinary events <p>The diary encourages parents to record events that they feel require discipline and what discipline they use. The group meetings give the parents a chance to learn about and role-play using gentler disciplinary measures. They also provide information about the dangers associated with using physical discipline.</p>	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/preventing-child-maltreatment/evidence-informed-programs/parental-daily-diary.html	
Parent-Child Interaction Therapy (PCIT)	PCIT was developed for children aged between 3 and 7 years displaying disruptive, oppositional and defiant behaviour, and their parents.	One-hour long weekly treatment sessions are delivered over a period of 12 weeks	An individualised, evidence-based treatment program for preschool children displaying disruptive, oppositional and defiant behaviour. Delivered in social service and clinical centres by Masters and Doctoral-level psychologists or social workers trained in PCIT. The intervention is founded in social learning, attachment and behavioural theory, and incorporating play therapy. The goal is for parents to strengthen the parent-child bond and increase the prosocial behaviour of the child. It also aims to decrease child externalising and internalising symptoms, caregiver stress, depression, abuse potential and negative communication, and to increase observed maternal sensitivity and positive communication.	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/reducing-child-harm-and-maltreatment-evidence-review/reducing-child-harm-and-maltreatment--evidence-informed-programs/parent-child-interaction-therapy.html	https://www.cebc4cw.org/program/parent-child-interaction-therapy/

ParentCorps	For parents of children aged 0-5, and concurrent sessions for children held at the school.	Run over 13 weeks, with a 2 hour session each week for parents of children aged 0-5, and concurrent sessions for children held at the school.	ParentCorps is a program from the USA which involves school personnel (mental health professionals and teachers) facilitating a parenting intervention with parents, and a concurrent group with children. ParentCorps takes a behavioural change approach. The program includes core behavioural change strategies that are found in other parenting interventions (e.g. The Incredible Years, Triple P), combined with a culturally-informed approach. The intervention aims to strengthen the following three key domains of parenting: positive behaviour support (e.g., reinforcement, proactive strategies), behaviour management (e.g., consistent consequences), and parent involvement in early learning (e.g., reading to children, communicating with teachers).	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/reducing-child-harm-and-maltreatment-evidence-review/reducing-child-harm-and-maltreatment--evidence-informed-programs/parentcorps.html	https://www.cebc4cw.org/program/parentcorps/
Parenting with Love and Limits (PLL)	Youth aged 10 – 18 years with severe emotional and behavioural problems and co-occurring problems including domestic violence, alcohol or drug use, depression, suicidal ideation, destruction of property, or chronic truancy.	6 weeks for group sessions, and 4 to 20 sessions for family sessions. 2 hour weekly group sessions with 1 hour of parents and teens meeting together and 1 hour of the parents and teens meeting separately, and 1-2 hour weekly family sessions, as needed.	Combines group therapy and family therapy to treat children and adolescents aged 10-18 who have severe emotional and behavioural problems (e.g., conduct disorder, oppositional defiant disorder, attention deficit/hyperactivity disorder) and frequently co-occurring problems such as depression, alcohol or drug use, chronic truancy, destruction of property, domestic violence, or suicidal ideation. The program also has been used with teenagers with less extreme behaviours. PLL is also used to serve as an alternative to a residential placement for youth as well as with youth returning back from residential placement such as commitment programs, halfway houses, group homes, or foster homes. PLL teaches families how to reestablish adult authority through consistent limits while reclaiming a loving relationship	N/A	https://www.cebc4cw.org/program/parenting-with-love-and-limits/

Parents as Teachers	Families with children from the prenatal period to kindergarten.	The program runs for up to three years if a child is enrolled at birth.	<p>The Parents as Teachers program a comprehensive home-visiting, parent education model. It is delivered by parents trained as Teachers Affiliates to families with children from the prenatal period to kindergarten. The model has four dynamic components: personal visits, group connections, resource network and child screening.</p> <p>The program has four primary goals:</p> <ol style="list-style-type: none"> 1. Increase parent knowledge of early childhood development and improve parent practices. 2. Provide early detection of developmental delays and health issues. 3. Prevent child abuse and neglect. 4. Increase children's school readiness and success. 	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/reducing-child-harm-and-maltreatment-evidence-review/reducing-child-harm-and-maltreatment--evidence-informed-programs/parents-as-teachers.html#Who1	https://www.cebc4cw.org/program/parents-as-teachers/
Parents Under Pressure (PUP)	Parents who are on methadone maintenance and have children aged between 2 and 8 years old.	12 modules, although using up to 10 has been shown to be effective. Sessions generally last 1-2 hours.	Intensive, home-based intervention designed to reduce potential for child-abuse among methadone-maintained parents. It combines methods for improving parental mood and parenting skills.	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/preventing-child-maltreatment/evidence-informed-programs/parents-under-pressure.html	https://www.cebc4cw.org/program/parents-under-pressure/
Period of PURPLE Crying Program (POPC)	The POPC program is designed for parents of newborn infants.	Implemented using an 11-page booklet, DVD and/or app. These are explained to new parents by a healthcare professional at a one-off discussion before their infants are two weeks of age.	The Period of PURPLE Crying program is designed to increase knowledge and change behaviours related to crying and the dangers of shaking infants. It is used to educate parents about normal infant crying, strategies to use when infants cry and the dangers of shaking in an effort to decrease abusive head trauma.	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/preventing-child-maltreatment/evidence-informed-programs/period-of-purple-crying-program.html	https://www.cebc4cw.org/program/period-of-purple-crying/
Period of PURPLE Crying program – modified educational video	Parents of newborn infants	The extra modified educational video is an 11 minute video that is shown at either an antenatal class, during home visits by midwives/public health nurses, or during home visits by trained volunteers for all newborns in addition to the original program.	Builds on the original POPC program. The program aims to prevent shaken baby syndrome and enact significant parent behavioural change associated with shaken baby syndrome by distributing educational materials to parents. Parents receive a booklet and DVD and/or app as part of a one-off intervention to parents with newborns younger than two weeks old. The modified video focuses on infant crying, dangers of shaking, a simulation of shaken baby syndrome, dangers of smothering, and how to respond to crying.	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/preventing-child-maltreatment/evidence-informed-programs/period-of-purple-crying-program-modified.html	

Play Nicely program	The Play Nicely program is aimed at caregivers of children aged 10 years and younger. It has been tested with populations of multiple cultural backgrounds.	Multimedia program is 50 minutes long, but can be effective when used for only 5-10 minutes.	<p>The Play Nicely program is a brief, population-based intervention. It is designed to prevent violence and mitigate toxic stress. It aims to teach parents discipline strategies on how to respond to an aggressive child. Inappropriate discipline and childhood aggression are two of the strongest risk factors for violence later in life. Inappropriate discipline can also lead to greater physical and mental health problems in children. The program can be delivered as a multimedia intervention only or accompany a discussion with a physician.</p> <p>The program is an interactive video that offers 20 different options on how to respond to an aggressive child. It also comes with a handbook.</p>	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/preventing-child-maltreatment/evidence-informed-programs/play-nicely-program.html	
Pride in Parenting	African American mothers who have not accessed adequate prenatal care.	Participants receive visits from the home visitor for one year. Visits occur weekly from birth to 4 months, and biweekly from 5 to 12 months. In addition, mothers are offered biweekly parent-infant playgroups and parent discussion groups beginning at 5 months and continuing until the infant is 12 months old. The group session format is a 45-minute parent/infant playgroup focused on developmental issues, followed by a 45-minute parent group discussion.	Community-based intervention targeting African American mothers who have not accessed adequate prenatal care. Combines home visiting and group-based interventions in the form of playgroups. The main objectives are to improve mothers' use of maternal and child health and social services resources, identify and maintain existing community systems, develop effective coping strategies, establish family routines and personal goals, and improve responsiveness to the child's needs.	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/reducing-child-harm-and-maltreatment-evidence-review/reducing-child-harm-and-maltreatment--evidence-informed-programs/pride-in-parenting.html	
Project Support	Children aged 3–8 years who are at risk of or exposed to child abuse, neglect or domestic/family violence	Sessions are between one and one-and-a-half hours and last for up to eight months.	Project Support targets children aged 3–8 years who are at risk of or exposed to child abuse, neglect or domestic/family violence. It aims to reduce child conduct problems among families departing from domestic violence shelters.	N/A	
Promoting First Relationships (PFR)	Families reported to child protection services with allegations of child maltreatment. Children aged 10-24 months.	Weekly home visits for ten weeks.	Relationship and strengths-based home visiting program that aims to help families facing adversity. PFR service providers are trained to focus on the relationship between the parent and child. Providers employ observational skills using video-based feedback with parents. PFR seeks to increase caregivers' awareness of their children's social and emotional needs, including their need for a sense of safety and security, and to enhance caregivers' understanding of their own needs as parents.	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/reducing-child-harm-and-maltreatment-evidence-review/reducing-child-harm-and-maltreatment--evidence-informed-programs/promoting-first-relationships.html	https://www.cebc4cw.org/program/promoting-first-relationships/

Relief Nursery Program	Economically vulnerable families with children aged between 18 months and 4 years identified as at risk of child maltreatment.	Face-to-face, individual and group settings, over a period of 36 months.	Comprehensive, integrated array of prevention services designed to support families considered "at risk" for child abuse and neglect. The core components of the program are: (a) The Therapeutic Early Childhood Classroom Program (TECP) (b) home visiting (c) group-based parent education and support services.	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/preventing-child-maltreatment/evidence-informed-programs/relief-nursery-program.html https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/reducing-child-harm-and-maltreatment-evidence-review/reducing-child-harm-and-maltreatment--evidence-informed-programs/relief-nursery-program.html	https://www.cebc4cw.org/program/relief-nursery/
Right@Home	Families of infants who have been identified as at risk, based on a broad range of psychosocial and socioeconomic risk factors, identified by an assessment.	The program comprises 25 nurse home visits, from pregnancy through to when the child is 2 years old. Visits become less frequent over time.	The Right@Home program aims to improve parent care and responsivity, and the home learning environment. The program is structured around the core MECOSH framework and training (Kemp et al. 2011), bolstered by five evidence-based strategies for content (sleep, safety, nutrition, regulation, and bonding and/or relationship) and two evidence-based strategies for the delivery process (video feedback and motivational interviewing strategies).	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/reducing-child-harm-and-maltreatment-evidence-review/reducing-child-harm-and-maltreatment--evidence-informed-programs/right-home.html	
Safe Environment for Every Kid (SEEK)	Parents with children 5 years or younger who receive paediatric care.	(Not stated)	An intervention to enhance paediatric primary care and better address major risk factors for child maltreatment in order to significantly reduce child maltreatment rates. The SEEK model includes: - training residents to address targeted risk factors - resources for doctors and parents the Parenting Screening Questionnaire (PSQ) completed by parents - a resident-social worker team to address concerns	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/preventing-child-maltreatment/evidence-informed-programs/safe-environment-for-every-kid.html https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/reducing-child-harm-and-maltreatment-evidence-review/reducing-child-harm-and-maltreatment--evidence-informed-programs/safe-environment-for-every-kid.html	https://www.cebc4cw.org/program/safe-environment-for-every-kid-see-model/

SafeCare	SafeCare is a structured training program for parents of children aged 0 to 5 years, reported for child abuse and/or neglect.	SafeCare involves an 18 to 24-week program comprised of three modules: health training, safety training, and parenting skills. Although each module is typically offered in parents' homes over six sessions, this can vary to reflect a parent's preferred location and their progress. A parent's progress is assessed via direct observation in role-play situations.	SafeCare is premised on an eco-behavioural model to address the causes of physical abuse and neglect. This model recognises the need for interventions of differing levels to address maltreatment, and the need to target skills and behaviours in ways that serve to sustain change. This can involve ongoing measurement of observable behaviours, skills modelling, practice and feedback, and training parents to criterion in observable skills.	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/reducing-child-harm-and-maltreatment-evidence-review/reducing-child-harm-and-maltreatment--evidence-informed-programs/safecare.html	https://www.cebc4cw.org/program/safecare/
SafeCare Dad to Kids Program (Dad2K)	Fathers of children aged 0 to 5 years, reported for child abuse and/or neglect.	18 to 24-week program comprised of three modules: health training, safety training, and parenting skills. Each module is typically offered in parents' homes over six sessions, this can vary to reflect a parent's preferred location and their progress. In Safe Care Dad2K, interactive technology is used to deliver multimodal learning and modelling of SafeCare target skills through dynamic software-based activities, and there is an additional co-parenting component guided by the "Talking with Mom" workbook	The SafeCare Dad to Kids Program (Dad2K) is an adaptation of the standard SafeCare structured training program designed specifically for fathers of children aged 0 to 5 years, reported for child abuse and/or neglect. The main adaptations in Dad2K are the introduction of interactive technology via a tablet computer that delivers multimodal learning and modelling of SafeCare target skills through dynamic software-based activities, and the addition (to session 4) of a co-parenting component guided by the "Talking with Mom" workbook created by the National Fatherhood Initiative.	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/reducing-child-harm-and-maltreatment-evidence-review/reducing-child-harm-and-maltreatment--evidence-informed-programs/safecare-dad-to-kids-program-dad2k.html	
SafeCare+	Multi-problem at-risk families with young children aged 0-5 in rural communities	SafeCare+ is typically conducted in weekly home visits lasting from 60-90 minutes each. The program typically lasts 18-20 weeks for each family.	SafeCare+ is an adaption of SafeCare® for high-risk families in rural populations. SafeCare+ consists of the original SafeCare® program with the addition of motivational interviewing and training home visitors to identify and respond to imminent child maltreatment and risk factors of substance abuse, depression, and intimate partner violence. The original program: SafeCare® is a behavioural parent training program delivered through home visiting. It targets parental risk factors for child physical abuse and neglect. SafeCare® was designed to be implemented with families at risk for maltreatment. The program is designed for parents of children ages 0–5 years and teaches a variety of skills focused on positive parenting, home safety, and child health.	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/preventing-child-maltreatment/evidence-informed-programs/safecare-plus.html https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/reducing-child-harm-and-maltreatment-evidence-review/reducing-child-harm-and-maltreatment--evidence-informed-programs/safecare-.html	

Stepping Stones Triple P	Parents of children aged 2–12 years with a disability and behavioural problems. Has been implemented with Aboriginal families in Australia.	Group Stepping Stones – 6 weekly 2.5 hour sessions Standard Stepping Stones – 10 weekly 1 hour sessions Primary Care Stepping Stones – 4 weekly 15-30 minute sessions Seminar Series Stepping Stones – 3 seminars, each 90 minutes	Designed for parents who have a child with a disability to promote children’s competence and development, parent’s management of misbehaviour and generalisation and maintenance of parenting skills. To treat specific problems of children with ASD, aiming to improve social behaviour and increase language, as well as to decrease inappropriate behaviours.	N/A	
Supporting Father Involvement (SFI)	Fathers or co-parenting couples in low-income families.	The SFI program is held over a 16-week period, with weekly 2-hour sessions. It consists of either just groups of fathers or co-parenting couples. There are generally 8-10 fathers to a group, and 4-6 couples to a group.	<p>Group intervention designed to:</p> <ul style="list-style-type: none"> - increase the quantity and quality of fathers’ involvement with their children - strengthen the relationship between fathers and their co-parenting partners <p>It is based on the theory that conflict between parents is strongly associated with negative parent–child relationships and problematic behaviour in children and adolescents. Central to the design of the program is the understanding that father involvement and co-parenting is central to child well-being.</p> <p>The SFI program focuses on child outcomes associated with risk and protective factors in five aspects of family life:</p> <ul style="list-style-type: none"> - individual - couple - parenting - three-generational - external stress and support domains <p>These factors make up the program's structure and content. The SFI approach emphasises the role of fathers as positive contributors in the family. The SFI group approach simultaneously draws on group leaders’ expertise and creates a supportive community through participants sharing their experiences.</p>	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/preventing-child-maltreatment/evidence-informed-programs/supporting-father-involvement.html	https://www.cebc4cw.org/program/supporting-father-involvement/

The Linkages for Prevention Project	Parents with children under the age of 2 and is particularly designed for low-income families.	Community and practice level interventions - duration not specified. The family-level intervention included intensive home-visiting to pregnant women and their infants. Home visiting began when the mother presented for prenatal care. It involved 2 to 4 visits per month through the infant's first year of life.	Community-wide intervention, with a specific emphasis on health outcomes for low-income mothers and infants. The program aims to improve the way preventive health care services are organised and delivered by adopting a three-tiered approach: community, practice and family-level. The primary objective of the project is to achieve process change that would lead to clinically relevant changes in client outcomes. It seeks to improve health outcomes by addressing specific care delivery processes at the level of clinical interaction between care providers and patients.	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/preventing-child-maltreatment/evidence-informed-programs/the-linkages-for-prevention-project.html	
Trauma-Focused Cognitive Behavioral Therapy (TF-CBT)	Children, and their parents, who are experiencing significant emotional and behavioural problems related to trauma, including maltreatment or vulnerable family circumstances.	Recommended Intensity: Sessions are conducted once a week. Recommended Duration: For each session: 30-45 minutes for child; 30-45 minutes for parent. The program model also includes conjoint child-parent sessions toward the end of treatment that last approximately 30-45 minutes. Treatment lasts 12-18 sessions.	TF-CBT is a conjoint child and parent psychotherapy model for children who are experiencing significant emotional and behavioural difficulties related to traumatic life events. It is a hybrid treatment model that incorporates trauma-sensitive interventions with cognitive behavioural, family, and humanistic principles.	N/A	https://tfcbt.org/

Triple P System (all five levels)	For parents and caregivers of children from birth to age 16	Recommended duration 9 months; Recommended Intensity: 21 one-hour sessions: 12 weekly, 6 biweekly, and 3 monthly	<p>Overall Triple P program is a population-level system of parenting and family support. It includes five intervention levels of increasing intensity and narrowing population reach:</p> <p>Level 1: Universal Triple P; Level 2: Selected Triple P; Level 3: Primary Care Triple P; Level 4: Standard and Group Triple P; Level 5: Enhanced Triple P.</p> <p>The program is designed to enhance parental competence and prevent or alter dysfunctional parenting practices. It aims to reduce risk factors both for child maltreatment and for children's behavioural and emotional problems. All levels of Triple P have intervention manuals that have been carefully developed, systematic training regimens for providers/ practitioners, and coordinated resource materials for parents (videos, workbooks, and tip sheets).</p>	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/preventing-child-maltreatment/evidence-informed-programs/triple-p.html	https://www.cebc4cw.org/program/triple-p-positive-parenting-program-system/
Triple P Positive Parenting Programs – Standard and Enhanced Group Behavioural Family Interventions	Parenting intervention for children with behavioural problems, adapted for use with maltreatment populations and parents with mental illness.	Standard - average of 10 weekly sessions. Enhanced - average of 12 weekly sessions.	Triple P is a well-researched Australian-developed program that was originally designed for parents of children with behavioural problems and has since been adapted for other groups of parents. See below for description of Enhanced Group version.	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/preventing-child-maltreatment/evidence-informed-programs/triple-p-enhanced.html	

Triple P - Enhanced group behavioural family intervention (Australian program)	Parents: -experiencing significant difficulties in managing their own anger when interacting with their preschool-aged children; -at risk of child maltreatment who are concerned about their anger or that they might harm their own child.	Builds on the standard program by delivering an additional 4 group sessions that address risk factors for child abuse and neglect. Four 2hr group sessions of parent training; Four 2h group sessions targeting the additional risk factors; Four 15-30min individual telephone consultations.	Enhanced version of Triple P. It is a group program that incorporates attributional retraining and anger management. Aims to reduce risk factors for child maltreatment.	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/preventing-child-maltreatment/evidence-informed-programs/triple-p-enhanced.html	
Triple P - Positive Parenting Program - Level 4 (Level 4 Triple P)	For parents and caregivers of children and adolescents from birth to 12 years old with moderate to severe behavioural and/or emotional difficulties or for parents that are motivated to gain a more in-depth understanding of positive parenting.	Program interventions typically take place over 2-3 months.	One of the five levels of the Triple P system. Level 4 Triple P helps parents learn strategies that promote social competence and self-regulation in children as well as decrease problem behaviour. Parents are encouraged to develop a parenting plan that makes use of a variety of Level 4 Triple P strategies and tools. Parents are then asked to practice their parenting plan with their children. During the course of the program, parents are encouraged to keep track of their children's behaviour, as well as their own behaviour, and to reflect on what is working with their parenting plan and what is not working so well. They then work with their practitioner to fine tune their plan.	N/A	https://www.cebc4cw.org/program/triple-p-positive-parenting-program-level-4-level-4-triple-p/

Teen Triple P	Parents of teenagers up to 16 years old who have concerns about their teenagers level of behavioural problems or who wish to prevent behavioural problems from developing	8 sessions delivered over 8 weeks. This is broken down to: Four 2-hour group sessions with up to 12 parents; Three 15-30-minute individual telephone sessions; One final group session.	A version of the Triple P program specifically for parents of teenagers up to 16 years old. Throughout the program, parents: - Learn about the influences of adolescent behaviour; - Set specific goals; - Use strategies to promote teenagers' skills development; - Manage inappropriate behaviour; - Teach emotional self-regulation; - Learn how to plan around risk-taking behaviour and risky situations; and - Promote their teenager's development and potential The program places a strong emphasis on the importance of parents acknowledging and encouraging the growing independence of their teen. Recognition is given to the likelihood of teenagers engaging in risky behaviour and providing parents with ways to assist their teen to manage these challenges effectively.	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/preventing-child-maltreatment/evidence-informed-programs/group-teen-triple-p.html	
Self-Directed Triple P (Positive Parenting Program)	Parents of children at risk of developing conduct problems	Ten-unit self-directed program over ten weeks	Self-Directed Triple P for mothers with children at-risk of developing conduct problems is a behavioural family intervention program derived from the Triple P program, which is widely used in Australian states and territories for children at risk of developing conduct problems. Self-Directed Triple P is based on social learning principles and its purpose is to promote positive caring relationships between parents and children. Self-Directed Triple P targets coercive family interactions known to contribute to the development and maintenance of children's disruptive behaviour problems.	https://evidenceportal.dcj.nsw.gov.au/evidence-portal-home/our-evidence-reviews/reducing-child-harm-and-maltreatment-evidence-review/reducing-child-harm-and-maltreatment--evidence-informed-programs/self-directed-triple-p--positive-parenting-program-.html	
Tuning in to Kids	Parents and caregivers of children with disruptive behaviour between 18 months and 18 years of age	For a community group (lower need) 6 sessions are required to deliver the program. For higher need/clinical participants, 8 sessions are recommended. 1-2 booster sessions are also recommended for all groups at bimonthly intervals.	Parenting program that focuses on emotions and is designed to assist parents to establish better relationships with their children. The program teaches parents simple emotion coaching skills - that is how to recognise, understand, and manage their own and their children's emotions.	N/A	https://www.cebc4cw.org/program/tuning-in-to-kids-tik/

Tuning in to Teens (TINT)	Parents of children and adolescents aged 10-18 years of age	Delivery options range from a 6-session program in the community through to a 10-session program for clinical/high-need participants	Parenting program that focuses on emotions and is designed to assist parents to establish better relationships with their adolescents. TINT is based on the Tuning in to Kids parenting program. TINT teaches parents emotion coaching skills as well as ways of responding to their young person in a way that helps maintain a connected relationship. The program aims to prevent problems developing in adolescents, promote emotional competence (in parents and youth), and when present, reduce and treat problems with adolescent's emotional and behavioural functioning. Delivery options range from a 6-session program in the community through to a 10-session program for clinical/high-need participants.	N/A	https://www.cebc4cw.org/program/tuning-in-to-teens-tint/
---------------------------	---	--	--	-----	---

b) Additional Parenting Programs identified with some available research evidence

Parenting Program	Target group	Duration of program	Program approach	CEBC link/Other information
123 Magic & Emotion Coaching and Talk Less Listen More (the online version of 123 Magic)	For parents/caregivers of children ages 2-12	One to two sessions per week; 1.5 hours per session for 4-8 weeks.	1-2-3 Magic is a group format discipline program for parents of children approximately 2-12 years of age. The program aims to help parents and carers manage difficult child behaviour with a focus on strategies and techniques that promote positive behaviour; encouragement in developing the child's ability to manage their emotional reactions; and relationship-building. 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 behaviour, encouraging good behaviour, and strengthening the child-parent relationship. The program seeks to encourage gentle, but firm, discipline without arguing, yelling, or spanking.	https://www.cebc4cw.org/program/1-2-3-magic-effective-discipline-for-children-2-12/ https://www.123magic.com/

Parenting Program	Target group	Duration of program	Program approach	CEBC link/Other information
3a Abecedarian Approach	Parents to use with children from birth to five.	Not stated	<p>The program is a combination of teaching and learning strategies for use in early childhood settings and parenting programs designed to enhance children's cognitive, emotional and communication outcomes and readiness for school.</p> <p>The program consists of four related elements, which are: language priority, learning games, conversational reading and enriched caregiving.</p>	https://education.unimelb.edu.au/3a https://aifs.gov.au/research_programs/evidence-and-evaluation-support/cfc-program-profiles/abecedarian-approach-australia-3a
Anxiety Coach (formerly No Scaredy Cats)	Parents of 4-12 year olds suffering from anxiety	various	<p>The Anxiety Coach course is a parenting course that helps to reduce anxiety and build resilience in children.</p> <p>The course is based on three underlying perspectives: 1. By having an understanding of how anxiety develops, community and family support workers can assist parents to counter its progress in children. 2. Community and family support workers can assist parents to take a preventative role in the development of anxiety problems in 4-12 year-olds. 3. There are practical steps parents can take to develop resilience thinking skills in 4-12 year-olds.</p>	https://www.parentshop.com.au/professionals/anxiety-coach-family-specialists
Black Box Parenting	Children and families who have experienced domestic and family violence	Five 2.5 hour fortnightly group sessions; Individual phone calls or catch up sections in the alternate weeks.	<p>Black Box Parenting is a program developed specifically for the challenges of parenting after violence. Developed by The Peregrine Centre, the program focuses on how a parent can support the healing of their children while managing their own recovery. Combines five fortnightly group sessions with individual phone calls and play coaching in the alternate weeks. Topics covered include trauma, attachment disruption and how these experiences can affect our present interactions. The group concentrates on the effects of these experiences, rather than asking participants to share the details of their own traumatic events.</p>	https://theperegrinecentre.com.au/projects/black-box-parenting/
Bringing Baby Home (BBH)	Expecting parents- universal	Two days	<p>Bringing Baby Home (BBH) is a community-based, universal prevention program, designed to teach new parents how to strengthen their relationships with each other and with their newborn through positive interactions and constructive conflict management.</p>	https://www.gottman.com/product/bringing-baby-home-parents/

Parenting Program	Target group	Duration of program	Program approach	CEBC link/Other information
Bringing up Great Kids (including Bringing up Great Kids - Adolescents, Bringing up Great Kids – First 1000 Days, Bringing up Great Kids – Aboriginal, Bringing up Great Kids – Parenting after Violence)	The program is for parents and carers looking to enhance their parenting skills. Carers are encouraged to attend together, or individually if separated.	Six sessions over six weeks, 2 hours per session	<p>Bringing up Great Kids (BUGK) focuses on building positive and nurturing relationships between parents and their children. The program aims to support parents to review and enhance their patterns of communication with their children, to promote more respectful interactions and encourage the development of children’s positive self-identity.</p> <p>BUGK is constantly evolving and now has developed into new variations that meet the needs of parents from different backgrounds and with different experiences. It is currently being rolled out in over 600 diverse organisations nationally.</p>	https://professionals.childhood.org.au/bringing-up-great-kids/
Caring Dads	Fathers (of children aged 0-17) who have used domestic and family violence or who are deemed to be at high risk for these behaviours.	17 weeks one 2 hr session per week	<p>Caring Dads is a groupwork program for fathers who have used domestic and family violence (DFV) or who are deemed to be at high risk for these behaviours. The Caring Dads program combines elements of parenting, fathering, and child protection practice to address the needs of maltreating fathers. Program principles emphasise the need to:</p> <ul style="list-style-type: none"> • Enhance men's motivation • Promote child-centred fathering • Address men's ability to engage in respectful, non-abusive co-parenting with children's mothers • Recognise that children's experience of trauma will impact the rate of possible change • Work collaboratively with other service providers to ensure that children benefit (and are not unintentionally harmed) as a result of father's participation in intervention. 	<p>https://www.cebc4cw.org/program/caring-dads-helping-fathers-value-their-children/</p> <p>https://caringdads.org/</p>

Parenting Program	Target group	Duration of program	Program approach	CEBC link/Other information
Circle of Security Parenting (COSP)	Groups of caregivers (parents, foster/adoptive parents, and early learning providers) of infants, toddlers, and children younger than 6 years old; can be used universally or in targeted fashion through serving high-risk populations such as Early Head Start participants, teen moms, or parents with irritable babies.	Eight 90-minute 'chapters'/ components make up the program.	<p>The Circle of Security Parenting (COSP) is a manualised, video-based program where facilitators work with caregivers on how to promote secure attachment. This program is delivered to groups in community settings, or in participants' homes.</p> <p>The overall goals of Circle of Security Parenting (COSP) are:</p> <ul style="list-style-type: none"> • Increase caregiver's capacity to identify attachment needs using the Circle of Security graphic • Increase caregiver's ability to read young children's cues • Increase empathy for the child • Increase caregiver's capacity to regulate stressful emotional states (their own and their children's) • Increase caregiver's capacity to provide comfort when their child is in distress • Increase caregiver's capacity to self-reflect • Increase caregiver's ability to read young children's miscues • Decrease negative attributions of the parent regarding the child's motivations • Increase parent's capacity to pause, reflect, and chose security-promoting caregiving behaviours • Increase caregiver's ability to recognise ruptures in the relationship and facilitate repairs. 	<p>https://www.cebc4cw.org/program/circle-of-security-parenting/</p> <p>https://www.circleofsecurityinternational.com/resources-for-parents/</p>

Parenting Program	Target group	Duration of program	Program approach	CEBC link/Other information
Confident Carers – Cooperative Kids (CCCK)	Parents and Carers with children aged 3-11 years who present with behavioural problems.	9 weeks, 1x2 hr session per week	<p>The Confident Carers – Cooperative Kids (CCCK) program is a manualised 8-week mindfulness and imagery enhanced behavioural parenting group program developed at the University of Wollongong to assist families with children aged 3-11 years who present with behavioural problems.</p> <p>CCCK helps parents and carers:</p> <ul style="list-style-type: none"> • Get back in touch with what is most important in the relationship with their child • Tune into their child’s individual temperament and needs • Strengthen the parent-child relationship • Fine-tune responses to their child’s behaviour through the use of mindful play, positive engagement and other activities • Effective praise and rewards when reinforcing appropriate behaviour • Effective instructions and household rules and routines when setting necessary limits on behaviour • Use preventative strategies (e.g. planning ahead, ignoring & managing emotions) that limit the causes of misbehaviour • Consistent responses to misbehaviour. 	<p>https://documents.uow.edu.au/content/groups/public/@web/@socs/documents/doc/uow256937.pdf</p> <p>https://markdonovanpsychology.com/parenting/</p>
Cool Kids and Cool Little Kids	Children and young people aged 7-17 with anxiety	Individual format: Eight hour-long weekly sessions followed by two hour-long biweekly sessions. Group format: Eight two-hour long sessions followed by two two-hour long sessions. Recommended duration: 12 weeks.	<p>Cool Kids is a cognitive behaviour therapy program that teaches children and their parents how to manage anxiety disorders. There are slightly different versions for children and teenagers. Variations of the program also exist for children with comorbid autism, adolescents with comorbid depression, and for delivery in school settings. The program was developed at Macquarie University.</p> <p>Focuses on teaching practical skills. The program has undergone continual scientific evaluation and development to include the latest understanding of anxiety and its treatment.</p> <p>Topics covered within the Cool Kids Anxiety Program include:</p> <ul style="list-style-type: none"> • Learning about feelings and anxiety • Learning to think more realistically • Parenting an anxious child • Fighting fear by facing fear (stepladders) • Learning other coping skills such as building social confidence or learning to solve problems. 	<p>https://www.cebc4cw.org/program/cool-kids-anxiety-program-tld/</p> <p>https://www.ceh-shop.mq.edu.au/products/cool-kids-therapist-full-kit-2nd-edition</p>

Parenting Program	Target group	Duration of program	Program approach	CEBC link/Other information
Dads Tuning into Kids	Fathers of children aged 3 to 10	6 week course with 1x2 hour session per week	The Dads Tuning into Kids program targets paternal emotion-socialisation practices. It aims to give fathers helpful ways of teaching their child the skills of emotional intelligence. This program teaches 'emotion coaching' which is to recognise, understand and respond to children's emotions in an accepting, supportive way. These are the same skills that are taught in Tuning in to Kids®, however the dad's program provides additional content particularly relevant to fathers. This approach nurtures a positive parent child relationship and helps parents support children to understand and manage their emotions.	https://tuningintokids.org.au/
Indigenous Parent Factor (IPF)	Indigenous parents/carers with children aged 0 to 8.	4 x 2 hour interactive workshops	The Indigenous Parent Factor (IPF) program helps parents/carers and families develop skills to engage effectively in their children's early learning and develop strategies that foster trust and communication between home and school. The program lays strong foundations for early learning and transition to formal schooling	https://austparents.edu.au/parent-programs-and-training/indigenous-parent-factor/#:~:text=The%20Indigenous%20Parent%20Factor%20(IPF,communication%20between%20home%20and%20school.
Indigenous Triple P	Indigenous parents and caregivers or parents and caregivers of Indigenous children, interested in promoting their child's development and potential, or have concerns about their child's mild to moderate level of behavioural problems, or simply wish to prevent behaviour problems from developing.	6 x 2 hour sessions.	Culturally sensitive adaptation of the mainstream Group Triple P program. It uses an active skills training process to help parents promote children's competence and development and manage their behaviour. Parents actively participate in a range of exercises to learn about the causes of child behaviour problems, setting specific goals, and using strategies to promote child development, manage misbehaviour, and plan for high-risk situations. Then there are two brief individual consultations to assist parents with independent problem solving while they are practising the skills at home.	https://www.triplep.net/files/6215/6352/6154/ENG_Group_Triple_P_Indigenous_Focus_A4.pdf

Parenting Program	Target group	Duration of program	Program approach	CEBC link/Other information
Keeping Kids in Mind	Parents of children birth-18 years of age who are engaged in chronic medium to high conflict post-separation	One 2.5-hour group session weekly over five weeks	<p>Keeping Kids in Mind (KKIM) is a five-week psycho-educational group work program for separated parents in high-conflict situations. The program helps parents see through their children's eyes the impact of parental separation and how best to support them.</p> <p>The KKIM course runs across 5 sessions looking at:</p> <ul style="list-style-type: none"> • Loss and Grief After Separation • The Hidden World of Children • Rebuilding Resilience • Bridging the Gap • Looking Back, Moving Forward. 	https://www.cebc4cw.org/program/keeping-kids-in-mind-kkim/
Parent Effectiveness Training (PET)	Parents of children ages 0 to 18 with communication and behaviour problems.	8 x 3hour sessions	Parent Effectiveness Training (PET) is an educational program that aims to improve family life by changing parental child-rearing attitudes and practices, and changing children's behaviour. Based on a philosophy of respect for everyone's feelings and needs in family relationships. Meeting children's emotional needs is vital for raising happy, resilient, secure kids and our needs as parents are important too! The skills taught in PET give parents highly practical tools for building warm loving relationships with their children and gaining co-operation from their kids without using coercion and rewards.	https://www.cebc4cw.org/program/parent-effectiveness-training-p-e-t/
Resourceful Adolescent Program – For Adolescents (RAP A) and Resourceful Adolescent Program – For Parents (RAP P)	Parents of adolescents	11 sessions - RAP-A 3 sessions - RAP-P	The Resourceful Adolescent Program (RAP) was developed to build resilience and promote positive mental health in teenagers. The program specifically aims to prevent teenage depression and related difficulties. The RAP Parent program (RAP-P) was developed to help parents promote the optimal family environment for healthy adolescent development. RAP-A is a strengths-based, resilience-building program for teenagers, which can be implemented in a school setting. The program aims to support young people to increase their resilience to depression risk factors, identify strengths, develop new strategies to increase their coping ability, regulate their emotions and sense of self in stressful situations. RAP-A was initially designed as a universal intervention but has now been adapted for targeted populations, e.g. indigenous adolescents, young caregivers, adolescents on the autism spectrum (RAP-A-ASD). RAP-A is complemented by a parent program, RAP-P, which aims to help families promote the environment for healthy adolescent development.	https://www.rap.qut.edu.au/programs/rap-p-for-parents https://www.cebc4cw.org/program/resourceful-adolescent-program-adolescent-rap-a/

Parenting Program	Target group	Duration of program	Program approach	CEBC link/Other information
Volunteer Family Connect	Parents and carers with babies or young children (0-5 years)	The volunteer visits regularly to offer support and information usually for 2 hours each week for up to a year	<p>Volunteer Family Connect is a structured home visiting program for families with young children (0 to 5 years old). Volunteer Family Connect (VFC) is a community-based early intervention program providing one-on-one emotional support to parents and carers in their home. The program aims to:</p> <ul style="list-style-type: none"> • Improve and/or strengthen parents' experiences, capacity, knowledge, and confidence • Improve parent and family support networks, and community connections • Support parents to be future orientated and aspirational for themselves, their children, and their family. 	https://volunteerfamilyconnect.org.au/
Yarning Group	Aboriginal children and families	Not one program	A number of Yarning groups were located.	N/A
Young Parents Program	Young parents (specific ages depend on org)	Residential program, time dependent on clients	<p>The Young Parents Program works with parents aged 13 to 25 with complex needs. The program provides safe and nurturing residential accommodation and outreach for young parents.</p> <p>Provides:</p> <ul style="list-style-type: none"> • Professional individual support and case management in a safe environment • Access to parenting programs tailored for young parents • An opportunity to meet other young parents in a weekly playgroup. 	https://www.redcross.org.au/services/young-parents-program-nsw/

c) Aboriginal-specific parenting programs (evidence-informed)

Evidence-informed Parenting Program	Target group	Duration of program	Program approach	EP Program Summary link	CEBC link/Other information
Stepping Stones Triple P	Parents of children aged 2–12 years with a disability and behavioural problems. Has been implemented with Aboriginal families in Australia	Group Stepping Stones – 6 weekly 2.5 hour sessions Standard Stepping Stones – 10 weekly 1 hour sessions Primary Care Stepping Stones – 4 weekly 15-30 minute sessions Seminar Series Stepping Stones – 3 seminars, each 90 minutes	Designed for parents who have a child with a disability to promote children’s competence and development, parents’ management of misbehaviour and generalisation and maintenance of parenting skills. To treat specific problems of children with ASD, aiming to improve social behaviour and increase language, as well as to decrease inappropriate behaviours.	N/A	https://www.triplep-parenting.net.au/au/free-parenting-courses/which-course-is-right-for-me/stepping-stones-for-parents-of-a-child-with-a-disability/?cidsid=160v77v4tak1b2afnr71auclmk

d) Aboriginal-specific parenting programs (with some research evidence available)

Parenting Program	Target group	Duration of program	Program approach	CEBC link/Other information
Indigenous Parent Factor (IPF)	Indigenous parents/carers with children aged 0 to 8.	4 x 2 hour interactive workshops	The Indigenous Parent Factor (IPF) program helps parents/carers and families develop skills to engage effectively in their children’s early learning and develop strategies that foster trust and communication between home and school. The program lays strong foundations for early learning and transition to formal schooling.	https://austparents.edu.au/parent-programs-and-training/indigenous-parent-factor/#:~:text=The%20Indigenous%20Parent%20Factor%20(IPF,communication%20between%20home%20and%20school.

Parenting Program	Target group	Duration of program	Program approach	CEBC link/Other information
Indigenous Triple P	Indigenous parents and caregivers or parents and caregivers of Indigenous children, interested in promoting their child's development and potential, or have concerns about their child's mild to moderate level of behavioural problems, or simply wish to prevent behaviour problems from developing.	6 x 2 hour sessions.	Culturally sensitive adaptation of the mainstream Group Triple P program. It uses an active skills training process to help parents promote children's competence and development and manage their behaviour. Parents actively participate in a range of exercises to learn about the causes of child behaviour problems, setting specific goals, and using strategies to promote child development, manage misbehaviour, and plan for high-risk situations. Then there are two brief individual consultations to assist parents with independent problem solving while they are practising the skills at home.	https://www.triplep.net/files/6215/6352/6154/ENG_Group_Triple_P_Indigenous_Focus_A4.pdf
Yarning Group	Aboriginal children and families	Not one program	A number of Yarning groups were located.	N/A