

PARENTING SKILLS

Can Changing Parental Knowledge, Dysfunctional Expectations and Attributions, and Emotion Regulation Improve Outcomes for Children?

Matthew R Sanders, PhD, Alina Morawska, PhD

University of Queensland, Australia

December 2014, 3e éd.

Introduction

The broader parent training literature has increasingly incorporated explicit consideration of cognitive and affective elements of the parenting role in explanations of parenting difficulties and in descriptions of how to intervene successfully with parents.^{1,2} To some extent, the notion that parents need to understand what is age-appropriate to develop reasonable expectations of children has been assumed. However, the evidence supporting the idea that early childhood parenting programs that explicitly target cognitive and affective changes result in better outcomes than more behaviourally skills-based programs is less clear. The present paper

examines the conceptual and empirical basis for strategies such as increasing parents' knowledge of development norms, reducing age- inappropriate expectations or dysfunctional attributions, and increasing parents' capacity to regulate their own emotions.

Subject

The strongest potentially modifiable risk factor contributing to the development of behavioural and emotional problems in children is the quality of parenting a child receives. Evidence from behaviour genetics research and epidemiological, correlational, and experimental studies shows that parenting practices have a major influence on children's development.³

Problems

While the research has examined parental knowledge as a risk factor for poorer child development across a range of domains, a clear understanding of the mechanisms by which parental knowledge impacts on children's development and behaviour is lacking. Furthermore, studies that have specifically assessed for changes in parenting knowledge have been limited methodologically and have not delineated the processes by which parental knowledge changes, and whether in fact the change in knowledge is associated with changes in child development and behaviour or whether other factors mediate the effect.

Similarly, there is currently no clear explication of the link between parental knowledge, parenting behaviour, parental mood and parenting efficacy, and especially how these change as a function of intervention. While the literature supports the idea that parenting knowledge, competence and efficacy are not necessarily related,⁴ the processes that underpin the development of discrepancies between the cognitive, affective and skills domains are unclear. For example, how do parents feel or believe they are competent in their role as a parent, when objective evidence suggests poor parenting skills and low knowledge about children's development?

The emphasis in the literature, and particularly in relation to parenting behaviours, has been on children's externalizing behaviour, non-compliance and psychopathology, and several models of coercive family processes leading to child externalizing behaviour have been delineated and supported.⁵ There is a paucity of research examining child competencies, both in terms of behaviour and developmental competencies (social, cognitive, emotional) and how parenting behaviours, parental knowledge, mood and self-efficacy interact with and impact on these competencies. As a result, while a number of interventions have been demonstrated to change

parenting skills and child behaviour,¹ in general these studies have not focused on outcomes in terms of parental knowledge of children's development.

Research Context

A number of intra-organismic factors influence child development; however, many of the skills children acquire are fundamentally dependent on their interactions with their care-givers and the broader social environment. In addition to intrinsic factors, such as low birth weight, prematurity, and fetal alcohol exposure, a range of environmental risk factors have been identified as contributing to poor child developmental outcomes. For example, poverty has been identified as a risk factor for lower child cognitive test scores and more child behaviour problems.⁶ The effects of poverty are mediated and moderated through poor neighbourhoods, poor schools, poor basic services, greater environmental health risks, and via the stress these cause for the parent, impacting on the parent-child relationship.^{7,8} In general, risk factors in the care-giving environment are transmitted through the child's experiences in their primary care-giving relationship.⁹

Key Research Questions

1. What are the mechanisms by which parental knowledge impacts on children's development and behaviour?
2. Is a change in parent knowledge associated with changes in children's development or do other factors mediate the effect?
3. What is the link among parental knowledge, parenting behaviour, parental mood and parenting efficacy, and how do these change as a function of intervention?
4. How do parenting interventions impact on children's developmental competencies?
5. How can the impact of parenting interventions be strengthened?

Recent Research Results

The family environment is one of the most important potential contributors to children's development. Bradley¹⁰ concluded that in general, correlations between Home Observation for Measurement of the Environment (HOME) Inventory scores, which include the provision of learning materials, language and learning stimulation, variety in experience and active stimulation, and measures of children's developmental status and intelligence, are low to moderate (.2 to .6) during the first two years and moderate (.3 to .6) from three to five years of age. Similarly, Jackson

and Schemes¹¹ found that preschool children whose mothers were more warm and supportive and provided cognitive stimulation at home had better language abilities as rated by their school teachers. More specifically, when parents are more supportive and less authoritarian, their children's verbal and intelligence scores are higher, when examined prospectively.^{12,13} Similarly, small to medium effect sizes have been found through meta-analysis for the relationship between mother-child attachment and children's peer relations,¹⁴ and there is evidence that attachment style predicts differing trajectories in terms of the child's emotion regulation.¹⁵

Parental knowledge of child development has often been mentioned as a factor related to child development outcomes. It can be defined as understanding of "developmental norms and milestones, processes of child development, and familiarity with caregiving skills."¹⁶ Parental knowledge is thought to provide a global cognitive organization for adapting to or anticipating developmental changes in children.¹⁷ Mothers who are knowledgeable respond more sensitively to their child's initiations,¹⁸ while mothers with inaccurate expectations about their child's development tend to be more harsh.^{19,20,21} Studies have indicated that when mothers have higher knowledge of infant and child development, they show higher levels of parenting skills,^{16,22,23} their children have higher cognitive skills,^{16,24} and there are fewer child behaviour problems.¹⁶ Furthermore, a positive association has been found between parental self-efficacy and parenting competence when knowledge of child development is high. However, mothers who report high parental self-efficacy but low knowledge are least sensitive in their interactions with their infants.⁴

In general, there is scant research on parents' knowledge and particularly on the link between parental knowledge and other skills, such as behaviour management skills, parenting efficacy, parental mood and parenting conflict. In addition, the majority of research has focused on high-risk samples, specifically adolescent mothers and/or low birth weight and premature infants. A number of studies have examined whether parenting and family interventions increase parental knowledge, and there is evidence that this is the case.^{25,26,27,28} However, in general these studies have been uncontrolled, with small sample sizes, examining very high risk samples, and with no examination of the mechanism of action between increased knowledge and potential child outcomes.

Parents' beliefs about child development and the nature and causes of their child's behaviour have also been examined as factors related to child developmental outcomes. There is evidence that parents' inaccurate beliefs or overestimation of their child's performance actually undermine the child's performance,^{29,30,31} and that expectations have an effect on parenting behaviours.³² For

example, adolescent mothers who reported more positive, more realistic and more mature expectations about parenting, children and the parent-child relationship had children with better coping skills, as rated through observation.¹⁷ Realistic expectations about child abilities have been related to greater child socio-emotional and cognitive competencies.³³ However, this association may work indirectly through parenting behaviours,³⁴ such that the mother's expectations affect her own behaviour, which in turn impacts on the child's developmental competencies.

Specific parenting behaviours and skills have been examined, particularly in relation to the development of aggressive and disruptive behaviour. Parents of aggressive children are characterized as highly punitive and critical of their children^{35,36} and more likely to attribute their children's misbehaviour to more dispositional, intentional and stable causes compared to parents of non-problem children.^{37,38,39} These attributional processes tend to become more pronounced over time.⁴⁰

Parent-child interactions affect many different domains of development.^{41,42,43} Child- focused, responsive and moderately controlling parenting attitudes have been positively associated with self-esteem, academic achievement, cognitive development and fewer behaviour problems.^{44,45} Furthermore, high warmth and contingent responsiveness promote a wide range of positive developmental outcomes.^{46,47,48,49} Parental management style and affective involvement may be especially salient for children's prosocial development, self-control and internalization of behaviour standards.⁴¹ The quality of parenting has been found to be important for child socialization,^{50,51} and parenting variables show direct links with child adjustment.⁵²

The research on parental mood indicates that maternal mood disturbance and stress are associated with more child behaviour and emotional problems,^{53,54,55} and this finding has also been demonstrated for fathers.⁵⁶ In general, however, the link is higher for maternal than paternal psychopathology.⁵⁷ Higher depressive symptoms in the postpartum period have also been related to less accurate knowledge of infant development.⁵⁸ The link between parental mood and stress and children's behaviour is somewhat unclear, as a number of studies have failed to find a mediation effect of parenting behaviour between stress and child outcomes.^{53,59}

There is less evidence to support a link between parental mood disturbance and children's cognitive development. For example, Kurstjens and Wolke⁶⁰ concluded that maternal depression has negligible effects on the child's cognitive development (at six years), but may be more relevant long-term if depression is chronic, the child is a boy and there are neonatal risk or social

risks in family. Nevertheless, parenting stress in the preschool years has been related to preschool teacher ratings of social competence, as well as internalizing behaviour and externalizing problems.⁵⁹ In addition, Schmidt, Demulder, and Denham⁶¹ found that more family stress during the preschool years was associated with greater child aggression, and anxiety and lower social competence in kindergarten.

The value of parenting interventions in improving parenting practices

Parent Management Training (PMT) interventions, derived from social-learning, functional analysis, and cognitive-behavioural principles, are considered the interventions of choice for conduct problems in young children.^{62,63,64} PMT programs have also been proven efficacious in prevention studies.^{65,66} Positive effects for PMT interventions have been replicated many times across different studies, investigators and countries, and with a diverse range of client populations.¹ In PMT programs, parents are typically taught to increase positive interactions with children and to reduce coercive and inconsistent parenting practices. Studies demonstrating the *efficacy* of PMT interventions show improvements in parental perceptions and parenting skills, improvements in children's social skills and school adjustment, and reductions in behaviour and attention problems.^{66,67} PMT interventions are associated with large effect sizes,⁶⁸ the effects often generalize to a variety of home and community settings,^{69,70} they are maintained over time,⁷¹ and are associated with high levels of consumer satisfaction.⁷² PMT has been successfully used with two-biological-parent families, step-parents and single parents. There is mounting evidence that a variety of delivery modalities can produce positive outcomes for children,¹ including individually administered face-to-face programs,⁷³ group programs^{74,75,76} telephone-assisted programs^{77,78} and self-directed programs.^{79,80} In addition, a number of *effectiveness* trials of PMT interventions have demonstrated meaningful effects for children with conduct problems.^{81,82}

Conclusions

Although parenting programs based on social learning models have been remarkably successful in assisting parents to change their children's behaviour and improve their relationships with their children, there is still a great deal to learn about how to promote concurrent change across the cognitive, affective and behavioural domains of parenting. Greater understanding of the cognitive and affective mechanisms that may underpin parents becoming more positive and less negative with their children is needed.

Implications

Strengthening the impact of parenting interventions

Despite the strength of the evidence for PMT cited above, there are several potentially important future directions that might further strengthen the population reach and impact of parenting interventions.

The use of modelling and demonstration of core parenting skills is likely to be a core feature of any effective intervention on parenting. Research on the value of observation learning and video-based modelling^{83,84,85} validates the importance of this approach. But key elements from attitude and behaviour change models (cognitive social learning theory, social influence theory and acceptance-based models) are still underutilized. Bandura's^{83,84} cognitive social learning theory is a useful conceptual framework for the development of media interventions, as it highlights the importance of both external and internal factors, including associated cognitive mechanisms that influence human behaviour. This theory points to the importance of using strategies that increase parental self-efficacy and that create favourable outcome expectancies, which in turn increase parents' behavioural intentions, their setting of personal performance standards and their self-evaluation of their performance. The social influence model⁸⁶ is also a useful conceptual framework to guide development of media interventions, as it highlights the core principles that promote successful persuasion and influence; for example, to the extent that interventions make use of the power of social validation by similar or liked others (i.e. "others like me are doing it") and of humans' tendency to act in accordance with prior commitments to others and to deep-seated values, they are likely to have more influence on viewers' attitudes, intents and behaviours. Finally, acceptance-based models of behaviour change⁸⁷ emphasize the importance of managing distressing thoughts and feelings in such a way that they do not interfere with taking effective action.

To strengthen the impact of a parenting skills intervention, various elements from cognitive social learning theory, social influence theory and acceptance theory could be used to enhance changes in parental behaviour, affect and cognition. Parents are more likely to learn the skills, increase their intentions to implement them and actually implement and maintain them when targeted parenting skills are modelled and demonstrated, *and also* (a) dysfunctional attributions or beliefs about the reasons for children's behaviour are changed; (b) positive expectancies and parenting self-efficacy are increased; (c) social supports are activated; and (d) parents learn to manage

distressing affect that interferes with effective parenting.

References

1. Sanders MR. Triple P-Positive Parenting Program: Towards an empirically validated multilevel parenting and family support strategy for the prevention of behavior and emotional problems in children. *Clinical Child and Family Psychology Review* 1999;2(2):71-90.
2. Webster-Stratton C, Hancock L. Training for parents of young children with conduct problems: Content, methods, and therapeutic processes In: Briesmeister JM, Schaefer CE, eds. *Handbook of parent training: Parents as co-therapists for children's behavior problems*. 2nd ed. Hoboken, NJ: John Wiley and Sons; 1998:98-152.
3. Collins WA, Maccoby EE, Steinberg L, Hetherington EM, Bornstein MH. Contemporary research on parenting: The case for nature and nurture. *American Psychologist* 2000;55(2):218-232.
4. Hess CR, Teti DM, Hussey-Gardner B. Self-efficacy and parenting of high-risk infants: The moderating role of parent knowledge of infant development. *Journal of Applied Developmental Psychology* 2004;25(4):423-437.
5. Patterson GR. *Coercive family process*. Eugene, Ore: Castalia Publishing Co; 1982.
6. NICHD Early Child Care Research Network. Duration and developmental timing of poverty and children's cognitive and social development from birth through third grade. *Child Development* 2005;76(4):795-810.
7. Aber JL, Jones S, Cohen J. The impact of poverty on the mental health and development of very young children. In: Zeanah CH Jr, ed. *Handbook of infant mental health*. 2nd ed. New York, NY: Guilford Press; 2000:113-128.
8. Sameroff AJ, Fiese BH. Models of development and developmental risk. In: Zeanah CH Jr, ed. *Handbook of infant mental health*. 2nd ed. New York, NY: Guilford Press; 2000:3-19.
9. Zeanah CH Jr, Larrieu JA, Heller SS, Valliere J. Infant-parent relationship assessment. In: Zeanah CH Jr, ed. *Handbook of infant mental health*. 2nd ed. New York, NY: Guilford Press; 2000:222-235.
10. Bradley RH. The HOME Inventory: Review and reflections. In: Reese HW, ed. *Advances in child development and behavior*. Vol 25. San Diego, Calif: Academic Press; 1994:241-288.
11. Jackson AP, Schemes R. Single mothers' self-efficacy, parenting in the home environment, and children's development in a two-wave study. *Social Work Research* 2005;29(1):7-20.
12. Shears J, Robinson J. Fathering attitudes and practices: Influences on children's development. *Child Care in Practice* 2005;11(1):63-79.
13. Tamis-LeMonda CS, Shannon JD, Cabrera NJ, Lamb ME. Fathers and mothers at play with their 2- and 3-year-olds: Contributions to language and cognitive development. *Child Development* 2004;75(6):1806-1820.
14. Schneider BH, Atkinson L, Tardif C. Child-parent attachment and children's peer relations: A quantitative review. *Developmental Psychology* 2001;37(1):86-100.
15. Kochanska G. Emotional development in children with different attachment histories: The first three years. *Child Development* 2001;72(2):474-490.
16. Benasich AA, Brooks-Gunn J. Maternal attitudes and knowledge of child-rearing: Associations with family and child outcomes. *Child Development* 1996;67(3):1186-1205.
17. Stoiber KC, Houghton TG. The relationship of adolescent mothers' expectations, knowledge, and beliefs to their young children's coping behavior. *Infant Mental Health Journal* 1993;14(1):61-79.
18. Damast AM, Tamis-LeMonda CS, Bornstein MH. Mother-child play: Sequential interactions and the relation between maternal beliefs and behaviors. *Child Development* 1996;67(4):1752-1766.

19. Azar ST, Robinson DR, Hekimian E, Twentyman CT. Unrealistic expectations and problem solving ability in maltreating and comparison mothers. *Journal of Consulting and Clinical Psychology* 1984;52(4):687-691.
20. Fry PS. Relations between teenagers' age, knowledge, expectations and maternal behaviour. *British Journal of Developmental Psychology* 1985;3(1):47-55.
21. Twentyman CT, Plotkin RC. Unrealistic expectations of parents who maltreat their children: An educational deficit that pertains to child development. *Journal of Clinical Psychology* 1982;38(3):497-503.
22. Huang KY, Caughy MOB, Genevro JL, Miller TL. Maternal knowledge of child development and quality of parenting among White, African-American and Hispanic mothers. *Journal of Applied Developmental Psychology* 2005;26(2):149-170.
23. Stevens JH. Child development knowledge and parenting skills. *Family Relations* 1984;33(2):237-244.
24. Dichtelmiller M, Meisels SJ, Plunkett JW, Bozynski MEA, Claflin C, Mangelsdorf SC. The relationship of parental knowledge to the development of extremely low birth weight infants. *Journal of Early Intervention* 1992;16(3):210-220.
25. Culp AM, Culp RE, Blankemeyer M, Passmark L. Parent education home visitation program: Adolescent and nonadolescent mother comparison after six months of intervention. *Infant Mental Health Journal* 1998;19(2):111-123.
26. Fulton AM, Murphy KR, Anderson SL. Increasing adolescent mothers' knowledge of child development: An intervention program. *Adolescence* 1991;26(101):73-81.
27. Hammond-Ratzlaff A, Fulton A. Knowledge gained by mothers enrolled in a home visitation program. *Adolescence* 2001;36(143):435-442.
28. Velez ML, Jansson LM, Montoya ID, Schweitzer W, Golden A, Svikis D. Parenting knowledge among substance abusing women in treatment. *Journal of Substance Abuse Treatment* 2004;27(3):215-222.
29. Miller SA. Parents' beliefs about children's cognitive development. *Child Development* 1988;59(2):259-285.
30. Miller SA, Manhal M, Mee LL. Parental beliefs, parental accuracy, and children's cognitive performance: A search for causal relations. *Developmental Psychology* 1991;27(2):267-276.
31. Stoiber KC. Parents' beliefs about their children's cognitive, social, and motor functioning. *Early Education and Development* 1992;3(3):244-257.
32. Donahue ML, Pearl R, Herzog A. Mothers' referential communication with preschoolers: Effects of children's syntax and mothers' beliefs. *Journal of Applied Developmental Psychology* 1997;18(1):133-147.
33. McGillicuddy-DeLisi AV. Parental beliefs and developmental processes. *Human Development* 1982;25(3):192-200.
34. Miller-Loncar CL, Landry SH, Smith KE, Swank PR. The influence of complexity of maternal thoughts on sensitive parenting and children's social responsiveness. *Journal of Applied Developmental Psychology* 2000;21(3):335-356.
35. Dishion TJ. The family ecology of boys' peer relations in middle childhood. *Child Development* 1990;61(3):874-892.
36. Rubin KH. Parents of aggressive and withdrawn children. In: Bornstein MH, ed. *Children and parenting*. Hillsdale, NJ: Lawrence Erlbaum Associates; 1995:255-284. *Handbook of parenting*; vol 1.
37. Baden AD, Howe GW. Mothers' attributions and expectancies regarding their conduct-disordered children. *Journal of Abnormal Child Psychology* 1992;20(5):467-485.
38. Barkley RA, Guevremont DC, Anastopoulos AD, Fletcher KE. A comparison of three family therapy programs for treating family conflicts in adolescents with attention-deficit hyperactivity disorder. *Journal of Consulting and Clinical Psychology* 1992;60(3):450-462.
39. Dix T, Lochman JE. Social cognition and negative reactions to children: A comparison of mothers of aggressive and nonaggressive boys. *Journal of Social and Clinical Psychology* 1990;9(4):418-438.

40. Hastings PD, Rubin KH. Predicting mothers' beliefs about preschool-aged children's social behavior: Evidence for maternal attitudes moderating child effects. *Child Development* 1999;70(3):722-741.
41. Campbell SB. Behavior problems in preschool children: Developmental and family issues. *Advances in Clinical Child Psychology* 1997;19:1-26.
42. Ramey CT, Ramey SL. Early intervention and early experience. *American Psychologist* 1998;53(2):109-120.
43. Yoshikawa H. Prevention as cumulative protection: Effects of early family support and education on chronic delinquency and its risks. *Psychological Bulletin* 1994;115(1):28-54.
44. Kendziora KT, O'Leary SG. Dysfunctional parenting as a focus for prevention and treatment of child behavior problems. *Advances in Clinical Child Psychology* 1993;15:175-206.
45. Stein MT, Robinson JR. Feeding problems, sleep disturbances, and negative behaviors in a toddler. *Journal of Developmental and Behavioral Pediatrics* 2001;22(2 Suppl):S81-S85.
46. Bornstein MH, Tamis-LeMonda CS. Maternal responsiveness and cognitive development in children. In: Bornstein MH, ed. *Maternal responsiveness: Characteristics and consequences*. San Francisco, Calif: Jossey-Bass/Pfeiffer; 1989:49-61.
47. Parpal M, Maccoby EE. Maternal responsiveness and subsequent child compliance. *Child Development* 1985;56(5):1326-1334.
48. Rocissano L, Slade A, Lynch V. Dyadic synchrony and toddler compliance. *Developmental Psychology* 1987;23(5):698-704.
49. Smith KE, Landry SH, Swank PR. The influence of early patterns of positive parenting on children's preschool outcomes. *Early Education and Development* 2000;11(2):147-169.
50. Dunn JF. Relations among relationships. In: Duck S, Hay DF, Hobfoll SE, Ickes W, Montgomery BM, eds. *Handbook of personal relationships: Theory, research and interventions*. Oxford, England: John Wiley & Sons; 1988:193-209.
51. Kochanska G. Socialization and temperament in the development of guilt and conscience. *Child Development* 1991;62(6):1379-1392.
52. Rothbaum F, Weisz JR. Parental caregiving and child externalizing behavior in nonclinical samples: A meta-analysis. *Psychological Bulletin* 1994;116(1):55-74.
53. Crnic KA, Gaze C, Hoffman C. Cumulative parenting stress across the preschool period: Relations to maternal parenting and child behaviour at age 5. *Infant and Child Development* 2005;14(2):117-132.
54. Leinonen JA, Solantaus TS, Punamaki R-L. Parental mental health and children's adjustment: The quality of marital interaction and parenting as mediating factors. *Journal of Child Psychology and Psychiatry* 2003;44(2):227-241.
55. Luoma I, Koivisto A-M, Tamminen T. Fathers' and mothers' perceptions of their child and maternal depressive symptoms. *Nordic Journal of Psychiatry* 2004;58(3):205-211.
56. Ramchandani P, Stein A, Evans J, O'Connor TG, ALSPAC study team. Paternal depression in the postnatal period and child development: a prospective population study. *Lancet* 2005;365(9478):2201-2205.
57. Connell AM, Goodman SH. The association between psychopathology in fathers versus mothers and children's internalizing and externalizing behavior problems: a meta-analysis. *Psychological Bulletin* 2002;128(5):746-773.
58. Veddovi M, Kenny DT, Gibson F, Bowen J, Starte D. The relationship between depressive symptoms following premature birth, mothers' coping style, and knowledge of infant development. *Journal of Reproductive and Infant Psychology* 2001;19(4):313-323.
59. Anthony LG, Anthony BJ, Glanville DN, Naiman DQ, Waanders C, Shaffer S. The relationships between parenting stress, parenting behaviour and preschoolers' social competence and behaviour problems in the classroom. *Infant and Child Development* 2005;14(2):133-154.

60. Kurstjens S, Wolke D. Effects of maternal depression on cognitive development of children over the first 7 years of life. *Journal of Child Psychology and Psychiatry* 2001;42(5):623-636.
61. Schmidt ME, Demulder EK, Denham S. Kindergarten social-emotional competence: Developmental predictors and psychosocial implications. *Early Child Development and Care* 2002;172(5):451-462.
62. Prinz RJ, Jones TL. Family-based interventions. In: Essau CA, ed. *Conduct and oppositional defiant disorders: Epidemiology, risk factors, and treatment*. Mahwah, NJ: Lawrence Erlbaum Associates; 2003:279-298.
63. Sanders MR, Ralph A. Towards a multi-level model of parenting intervention. In: Hoghugh M, Long N, eds. *Handbook of parenting: theory and research for practice*. London, England: Sage Publications; 2004:352-368.
64. Taylor TK, Biglan A. Behavioral family interventions for improving child-rearing: A review of literature for clinicians and policy makers. *Clinical Child and Family Psychology Review* 1998;1(1):41-60.
65. Sanders MR, Markie-Dadds C, Turner KMT, Ralph A. Using the Triple P system of intervention to prevent behavioural problems in children and adolescents. In: Barrett PM, Ollendick TH, eds. *Handbook of interventions that work with children and adolescents: Prevention and treatment*. Chichester, England: John Wiley; 2004:489-516.
66. Webster-Stratton C. Preventing conduct problems in Head Start children: Strengthening parenting competencies. *Journal of Consulting and Clinical Psychology* 1998;66(5):715-730.
67. Barlow J, Stewart-Brown S. Behavior problems and group-based parent education programs. *Journal of Developmental and Behavioral Pediatrics* 2000;21(5):356-370.
68. Serketich WJ, Dumas JE. The effectiveness of behavioral parent training to modify antisocial behavior in children: A meta-analysis. *Behavior Therapy* 1996;27(2):171-186.
69. McNeil CB, Eyberg S, Eisenstadt TH, Newcomb K, Funderburk B. Parent-child interaction therapy with behavior problem children: Generalization of treatment effects to the school setting. *Journal of Clinical Child Psychology* 1991;20(2):140-151.
70. Sanders MR, Dadds MR. The effects of planned activities and child management procedures in parent training: An analysis of setting generality. *Behavior Therapy* 1982;13(4):452-461.
71. Long P, Forehand R, Wierson M, Morgan A. Does parent training with young noncompliant children have long-term effects? *Behaviour Research and Therapy* 1994;32(1):101-107.
72. Webster-Stratton C. Systematic comparison of consumer satisfaction of three cost-effective parent training programs for conduct problem children. *Behavior Therapy* 1989;20(1):103-115.
73. Forehand RL, McMahon RJ. *Helping the noncompliant child: a clinician's guide to parent training*. New York, NY: Guilford Press; 1981.
74. Ralph A, Sanders MR. Preliminary evaluation of the Group Teen Triple P program for parents of teenagers making the transition to high school. *Australian e-Journal for the Advancement of Mental Health* 2003;2(3).
75. Sanders MR, Markie-Dadds C, Tully LA, Bor W. The Triple P - Positive Parenting Program: a comparison of enhanced, standard, and self-directed behavioral family intervention for parents of children with early onset conduct problems. *Journal of Consulting and Clinical Psychology* 2000;68(4):624-640.
76. Webster-Stratton C. Long-term follow-up of families with young conduct problem children: From preschool to grade school. *Journal of Clinical Child Psychology* 1990;19(2):144-149.
77. Connell S, Sanders MR, Markie-Dadds C. Self-directed behavioral family intervention for parents of oppositional children in rural and remote areas. *Behavior Modification* 1997;21(4):379-408.
78. Morawska A, Sanders MR. Self-administered behavioural family intervention for parents of toddlers: Part I - Efficacy. *Journal of Consulting and Clinical Psychology*. In press.

79. Gordon DA. Parent training via CD-ROM: Using technology to disseminate effective prevention practices. *Journal of Primary Prevention* 2000;21(2):227-251.
80. Webster-Stratton C, Hollinsworth T, Kolpacoff M. The long-term effectiveness and clinical significance of three cost-effective training programs for families with conduct-problem children. *Journal of Consulting and Clinical Psychology* 1989;57(4):550-553.
81. Scott S, Spender Q, Doolan M, Jacobs B, Aspland H. Multicenter controlled trial of parenting groups for childhood antisocial behaviour in clinical practice. *British Medical Journal* 2001;323(7306):194-198.
82. Taylor TK, Schmidt F, Pepler D, Hodgins C. A comparison of eclectic treatment with Webster-Stratton's parents and children series in a children's mental health center: A randomized controlled trial. *Behavior Therapy* 1998;29(2):221-240.
83. Bandura A. Self-efficacy: Toward a unifying theory of behavioral change. *Psychological Review* 1977;84(2):191-215.
84. Bandura A. *Social foundations of thought and action: a social cognitive theory*. Englewood Cliffs, NJ: Prentice-Hall; 1986.
85. Harwood RL, Weissberg RP. The potential of video in the promotion of social competence in children and adolescents. *Journal of Early Adolescence* 1987;7(3):345-363.
86. Cialdini RB. *Influence: science and practice*. 4th ed. Boston, Mass: Allyn and Bacon; 2001.
87. Hayes SC, Strosahl KD, eds. *A practical guide to acceptance and commitment therapy*. New York, NY: Springer Science; 2005.