

United Nations Department of Economic and Social Affairs (UNDESA)  
Division for Inclusive Social Development

United Nations Expert Group Meeting  
16-18 June, 2020

## **Parenting Education in Europe**

Mihaela Robila, Ph.D., CFLE  
Professor  
Human Development and Family Science  
Queens College, City University of New York

## Parenting Education in Europe

### I. Parenting Education: Introduction

Parenting education is an essential part of the broader field of family life education, which has registered developments to different degrees all around the world (Robila & Taylor, 2018). There is also a large body of evidence-based parenting education around the globe (Ponzetti, 2016). Parenting education itself includes different specific areas, such as adoptive parenting (e.g., Grotevant & Lo, 2017), shared parenting (Pruett, & DiFonzo, 2014), community-based education for stepfamilies (Adler-Baeder, & Higginbotham, 2020), parenting programs for incarcerated mothers and fathers (e.g., Booker, Novero, & Dallaire, 2019). Similarly with other family life education areas that have an impact on the well-being of the children and families, it is important to have explicit policies that support parenting and parenting education in order to increase the likelihood of financial support and implementation (e.g., Robila, 2014).

Parenting education is in line with the 2030 Sustainable Development Goals (SDGs) agenda emphasizing the role that families have in fostering progress towards achieving the goals. A 2019 global research project on Families and SDGs examined families' role in supporting progress towards several specific goals (e.g., SDG 3 -Health, SDG 4 -Education, SDG 5 -Gender equality) (Richardson et al., 2020). The study on the families and SDG 3: Ensure Healthy Lives, reviewed randomized control trials conducted with families who had members experiencing non-communicable disease or mental health problems, and indicated that family interventions improve patients' and families' understanding of the illness and their functioning, and that those for diabetes and mental health targeted youth focusing on increasing parenting quality, parental knowledge, skills, and, involvement, all achievable through parent education (Robila, 2020).

The rapid increase of technological advances has provided opportunities and challenges in development, dissemination and implementation of parenting education programs and services. A recent study on the applications of Artificial Intelligence (AI) methodologies to behavioral and social sciences, indicated that AI methodologies have been successfully applied to increase understanding of human development and functioning, and to increase the effectiveness of data management in different social and human services, many of them focused on parenting education, specifically on topics such as transition to fatherhood or different parenting challenges (Robila, & Robila, 2019). Many families and parents are using the varied available social platforms in search for advice or offering suggestions to others. The study also underlined some of the challenges registered, such as ensuring confidentiality, or data access, which should be regulated through adequate usage policies. The impact of technology has been dramatically brought forward by the recent societal disruptions due to COVID-19 pandemic. In particular in Europe, where a large number of cases has been encountered, families had to rapidly adapt to new modes of interactions and functioning.

The goal of this paper is to provide a synthetic analysis of different parenting education programs and policies in Europe. The paper continues with section two, which focuses on parenting education in Europe, followed by section three providing an examination of parenting

practices and child wellbeing. Section four presents parenting education programs and policies and it is followed by section five underling the conclusions and recommendations.

## II. Parenting Education in Europe

Progress has been registered on family life education and specifically parenting education around the globe, specifically in Europe (e.g., Baran, & Jones, 2018; O’Doherty, 2018; Shulruf, O’Loughlin, & Tolley, 2009) including more specifically in Eastern Europe (e.g., Burlaka, et. al.2018; Petrovic , et. al., 2016). Similarly, there has been an increase in the scope and number of evidence-based parent education programs, and parenting support initiatives and services in Europe. It is also important to understand the political and social context in which evidence-based parent education programs are delivered (Rodrigo, Almeida, & Reichle, 2016). While many countries have aligned their programs and services with centralized European structures, regional and cultural context continued to influence them.

Regional directives, such as the 2006 European Council’s Directive to Promote Positive Parenting, have been encouraging Governments to take direct actions through financial, legislative and programmatic investments to develop family support interventions aimed at guaranteeing children’s rights. Studies on this directive on positive parenting underlined the need to diversify initiatives for at-risk families, and to use evidence-based programs, and skilled family support professionals, and encouraging the development of a common family support framework at the European level (Jiménez, et. al. 2019).

Some directives and reports have been focused on specific areas, such as preventing and treating child maltreatment. In 2013, the World Health Organization launched the *European Report on Preventing Child Maltreatment* underlying a strong focus on education and prevention. A large body of research indicated that youth whose parents use corporal punishment were more likely to engage in antisocial behaviors (e.g., DuRivage, et. al., 2015). Antisocial behavior across different regions (e.g., Europe, Asia, North America) is higher among young adults who report experiencing corporal punishment in childhood, particularly if it came from both parents (Rebellon, & Straus, 2017). Moreover, increased immigration presents its own challenges in implementing child maltreatment policies.

Parenting education and support is not only impacting the quality of childrearing but quality of life and satisfaction with life in general. A study on the role on family policies on parenthood and life satisfaction indicated that parents report greater life satisfaction in countries that offer generous financial benefits to families, high child care provision, and high working time flexibility than parents residing in countries with low levels of support (Pollmann-Schult, 2018). Results also showed that these national contextual factors are associated with lower levels of financial strain and work–life conflicts among parents, suggesting that the mitigating effect of family benefits, child care provision, and working time flexibility on the psychosocial and financial costs of parenthood is a key mechanism in the association between national contextual factors and parental life satisfaction.

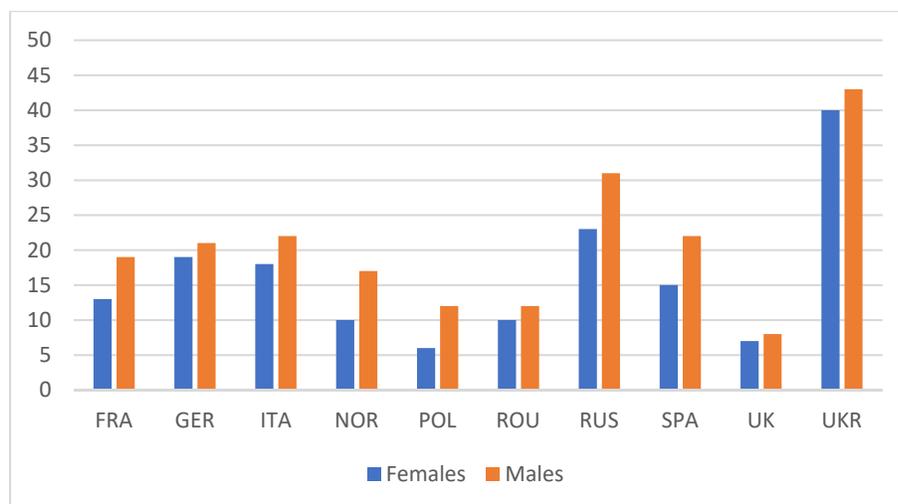
### III. Parenting Practices and Children’s Wellbeing

The data on quality of family relations and parenting in particular continue to be limited. Collecting systematic, longitudinal family-level data using multiple informants (e.g., mothers, fathers, children) is strongly recommended so that comprehensive statistical analysis could be conducted and the process of change examined.

The Council of Europe indicated that “positive parenting refers to parental behavior that respects children’s best interests and their rights, as set forth in the United Nations Convention on the Rights of the Child – a convention which also takes into account parents’ needs and resources” (2008, p.2) and that the positive parent nurtures, empowers, guides and recognizes children as individuals in their own right, without being permissive, but setting boundaries that children need for their development.

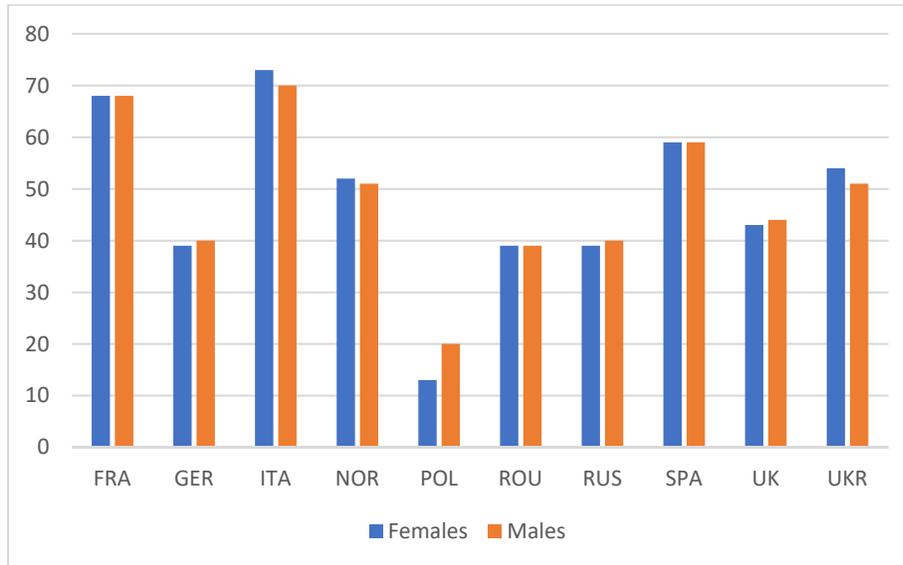
The World Health Organization (WHO) Europe - Health Behaviors in School Aged Children Data (2014) were used to examine child wellbeing and parenting. The indicators included having breakfast and meals with the family, child’s life satisfaction, family communication, talking with mothers and fathers, and family support. Parenting practices such as having morning and evenings meals together as a family have been shown to increase connectedness, opportunities to share, communicate, and support (Berge, et. al., 2010). Tables 1 and 2 present the proportion of young people who report having breakfast and dinners with their families (with at least one of their parents) on a daily basis in a selection of European countries. Variations are being noted among youth from different countries, with the highest proportions being reported, for having breakfast together by those from Ukraine, Russia and Italy, and for the evening meals by those from Italy, France and Spain.

Table 1. Proportion of Young People Who Have Breakfast with Family Every Day (15 Years Old)



Data Source: Health Behaviors in School Aged Children (WHO Europe, 2014)

Table 2. Proportion of Young People Who Have Evening Meals with Family Every Day (15 Years Old)



*Data Source: Health Behaviors in School Aged Children (WHO Europe, 2014)*

Youth across Europe report high satisfaction with life, ranging from close to 70% in Poland, France and UK to around 90% in Romania and Norway (see Table 3). Higher proportions of males report high satisfaction with life across the countries illustrated, indicating that attention needs to be paid to female youth and their reasons for lower reports.

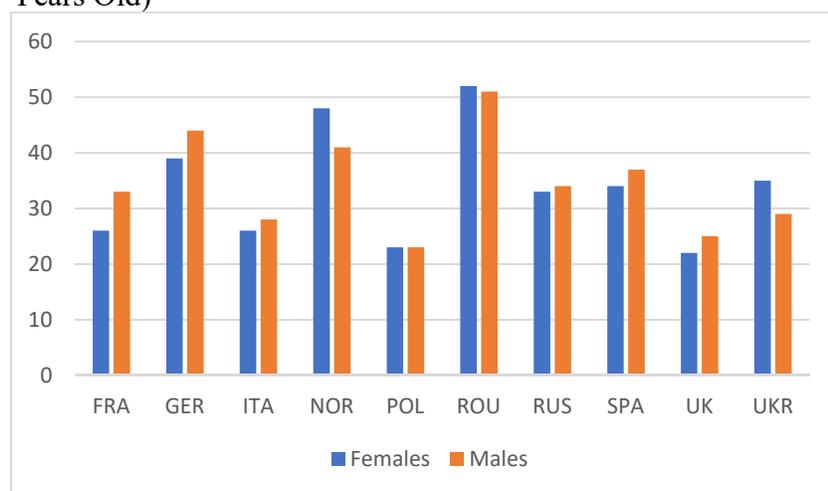
Table 3. Proportion of Young People Who Report High Life Satisfaction (15 Years Old)



*Data Source: Health Behaviors in School Aged Children (WHO Europe, 2014)*

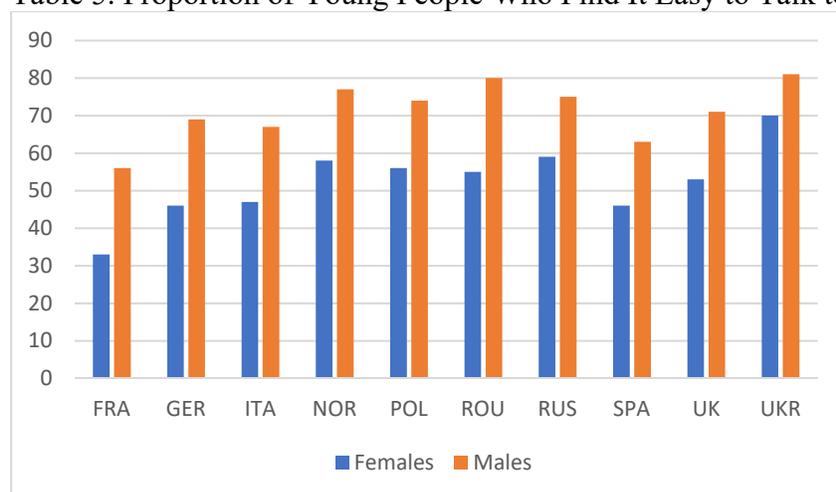
Central to parenting quality is family communication. Tables 4, 5 and 6 present proportions of youth reporting on the quality of family communication and easiness in talking to fathers and mothers about things that really bother them. Young people were asked whether important things are talked about, whether someone listens and whether misunderstandings are clarified. The data indicate large variations between young people reporting high quality family communication, from different countries, with larger proportions in Romania, Norway and Germany (see Table 4). Larger proportions of males compared to females report easiness to talk to their fathers and more variations among the countries, with France, Germany and Spain having the lowest rates (see Table 5). There are closer gender ratings for easiness to talk to the mothers across the board, from 60% in France to almost 90% in Ukraine, Romania and Norway (see Table 6). While it is known that mothers communicate more with their children, parenting education classes could include modules targeting improving the quality of communication between fathers and children, particularly daughters.

Table 4. Proportion of Young People Reporting High Quality of Family Communication (15 Years Old)



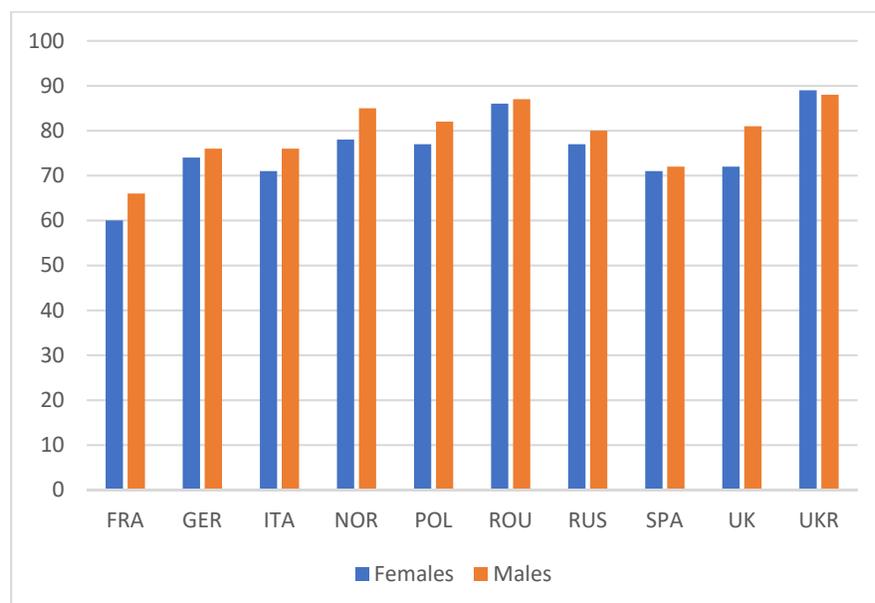
Data Source: *Health Behaviors in School Aged Children (WHO Europe, 2014)*

Table 5. Proportion of Young People Who Find It Easy to Talk to Their Fathers (15 Years Old)



Data Source: *Health Behaviors in School Aged Children (WHO Europe, 2014)*

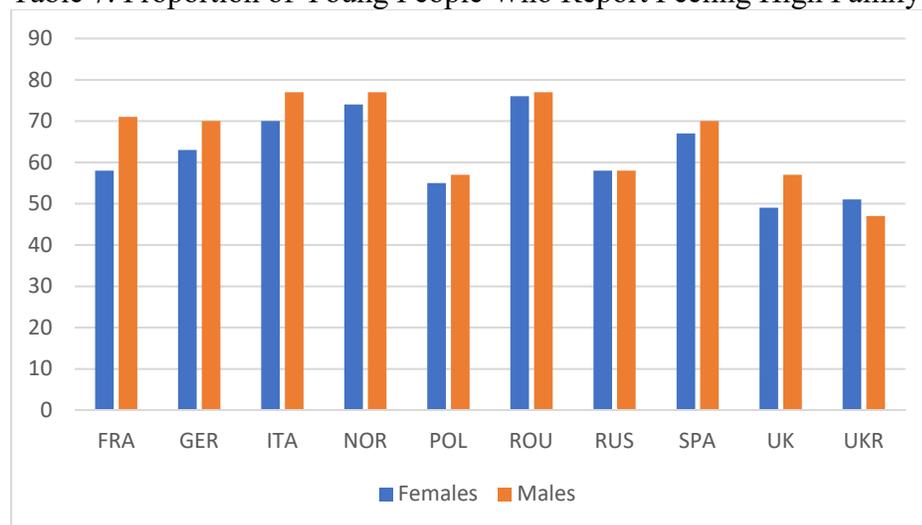
Table 6. Proportion of Young People Who Find It Easy to Talk to their Mothers (15 Years Old)



*Data Source: Health Behaviors in School Aged Children (WHO Europe, 2014)*

Family support is another key component of positive parenting fostering children wellbeing and high quality of life. Young people were asked if they feel their family really tries to help them, that they can get emotional support from them when needed, and that they can talk to their families about their problems. Table 7 indicates the proportion of young people who report feeling high family support, with lower percentage in Ukraine and UK, and higher in Romania, Norway and Italy. Parenting education programs include usually modules on different strategies to increase parental support given that it has such a pivotal role in child development and functioning.

Table 7. Proportion of Young People Who Report Feeling High Family Support (15 Years Old)



*Data Source: Health Behaviors in School Aged Children (WHO Europe, 2014)*

As illustrated in the data in the tables above, youth perceptions of parenting practices continue to vary across the continent pointing to the continuous need for evidence-based parenting programs. Parenting education programs need to continue to emphasize parent–child communication, support, quality of time spent together with meals and opportunities for sharing. Other parenting practices are equally important. Maternal and paternal autonomy granting and psychological and functional connectedness are positively associated with adolescents’ well-being (Filus, et. al. 2019). In addition, within country variation needs to be examined and addressed. For example, Petrovic et. al. (2016)’s study on positive parenting attitudes and practices in Bosnia and Herzegovina, Macedonia and Serbia indicated that while 27 % of the respondents practiced only non-violent child discipline, Roma children experienced only non-violent discipline less than half as often as their non-Roma counterparts. In addition, economic status was also an important factor, with parents from more affluent households being more likely against physical punishment of children than the ones from low-income families.

#### **IV. Parenting Education Programs and Policies in Europe**

There has been progress in developing parent education programs and policies in support of increasing quality of childrearing and quality of life in general. Parenting interventions are effective in improving parental knowledge on child development and the quality of parent-child interactions (WHO, 2016).

##### **Parenting Education Initiatives and Programs**

This section provides examples of initiatives that have been developed and implemented in different countries in Europe. *Evidence-Based Parenting Support (EBP)* programs are among the most successful interventions supporting positive parenting for promoting wellbeing of children, parents and communities (Sander, 2019). Efforts to improve outcomes have included the emergence of a population-based approach to increase the reach of interventions, developing flexible delivery modalities, including online parenting interventions, the incorporation of strategies to enhance cultural relevance and acceptability of programs, while new interventions are required for the most vulnerable parents confronted with poverty, trauma, addictions, violence, or mental health problems.

The *GenerationPMTO*, developed from the Parent Management Training –Oregon Model (PMTO) in the United States, is an effective program for child and adolescent behavior problems (e.g., noncompliance, internalizing and externalizing behaviors). GenerationPMTO is based on social learning model, in which professionals are working with parents to reduce coercive parenting behaviors (e.g., escalations, negative reinforcement) and increase positive parenting practices (e.g., encouragement, monitoring, problem solving) in a variety of formats (e.g., group, individual families served at home, in agencies, or through web-based programs) (Sigmarsdóttir et al., 2019). The program was implemented *nationwide* in Norway in 1999 with the goal to establish sustainable evidenced-based programs to serve families in need of child welfare and child mental health systems of care and it involved a combination of a top-down approach at the

government level with a bottom-up initiative from practitioners seeking effective strategies in working with youth with behavioral problems (Ogden, et. al., 2005). The nationwide GenerationPMTO implementation process showed sustained fidelity in Norway and contributed to improvements in parenting practices from pre- to post-treatment (Forgatch, & DeGarmo, 2011). The program has been successfully implemented in other countries, including Iceland, Denmark and Netherlands (Sigmarsdóttir et al., 2019).

The *Positive Parenting Program (Triple –P)* developed in Australia, is a multilevel parenting support strategy designed to reduce the prevalence of behavioral and emotional problems in children. It includes several levels of intervention of increasing strength, from population universal multimedia campaigns, to interventions targeting mild behavior problems, and intensive parent training and family intervention programs for children at risk for more severe behavioral problems (Sanders, 1999). The success of the Triple P system in Europe has also been evidenced through its positive impact in transforming the lives of children, parents and communities (Sanders, & Mazzucchelli, 2018). There has been a strong focus on positive parenting interventions supported also by the European Platform for Investing in Children (EPIC) (Davies, Janta, & Gardner, 2019). The program is focused on self-regulation of parental skills, is administered in different ways (individual face-to-face, group) and has been adopted in countries around the world, including in Europe: Belgium, Germany, Netherlands, Switzerland, and UK (WHO, 2013).

Another program widely used in Europe is *Incredible Years*, developed in the United States, which is a high quality parenting program for reducing conduct problems. It is a group-based strategy targeting children with ages up to 12 years and with behavioral issues, and focuses on the parent-child relationship and developing parenting skills (Webster-Stratton, & Hancock, 1998). Meta-analysis studies including data from randomized trials of the Incredible Years parenting interventions in Europe, indicated an overall reduction in child conduct problems, improved parental verbal communication and use of discipline techniques (Gardner et. al., 2019; Leijten, et. al., 2018). Incredible Years has been used successfully in Sweden (Axberg et.al., 2007) and in the UK (Hutchings, et. al. 2007). This program has also been implemented *nationwide* in Norway (WHO, 2013) following successful randomized control trials which showed reduced child conduct problems, reduced parental stress and use of harsh and inconsistent discipline, and increased parental use of positive parenting strategies at post-treatment (Larsson et. al., 2009).

*Systematic Training for Effective Parenting (STEP)* is based on attachment theory and emphasizes increasing mother sensitivity, examining the impact of prior experiences on maternal attachment, and increasing social support, targeting vulnerable mothers (WHO, 2013). This group-based parenting class model has been examined for its impact in different countries. For example, Jonyniene, Kern, & Gfroerer (2015) study on STEP's efficacy in Lithuania indicated that the program increased parental knowledge on parenting, and decreased authoritarian and permissive parenting styles and the negative perceptions of child's behavior.

*Parenting for Lifelong Health (PLH)* was developed initially in South Africa. Designed by experts from WHO, UNICEF and several universities, it includes well-established parenting programs to prevent violence in low resource settings. The 12-session group-based parenting intervention is using collaborative social learning behavioral change strategies to encourage

parents to reduce harsh discipline, improve positive parenting behaviors and parent-child relationship, through discussions, role-play, and home activity assignments (Lachman, et. al., 2017). It has been adapted for different regions, including Eastern Europe, where randomized trials are underway in Macedonia, Moldova, and Romania, to implement cost-effective parenting interventions for the prevention of child mental health problems (Heinrichs, Foran, & Lachman, 2020).

The widely implemented *Nurse-Family Partnership* (NFP) program developed in the United States (Olds, 2006), is a psychoeducational approach that focuses on increasing parenting skills, social support and stress management for low income first time parents in their homes (WHO, 2018). It was examined with randomized control trials in Europe showing positive results in Netherlands (Mejdoubi, et al. 2015), and Germany (Sierau et al. 2016), and no evidence of positive impact in UK (Robling, et. al. 2016), and is currently explored in Bulgaria (WHO, 2018). As an example, Mejdoubi, et al. (2015)' study on NFP implementation in Netherlands indicated improved home environments, significant lower number of child protection services, and lower internalizing behaviors of the children in the intervention group. Given that *home-visiting programs*, as routine maternal and child health services, are widely implemented in Europe, there is an opportunity to ensure that these services have strong parent education components.

An important aspect is represented by *program transfer* from other countries or regions and program development at the local level. Leijten, et.al.'s (2016) multilevel meta-regression study of randomized trials of transported versus homegrown parenting interventions showed that transported and homegrown interventions did not differ in their effectiveness to reduce disruptive child behavior suggesting that selection of interventions should be based on their evidence base. Results were robust across various intervention programs (e.g., Incredible Years and Triple P—Positive Parenting Program) and geographical regions (e.g., North America and Europe). Similarly, evaluations of a full transfer implementation outcomes of GenerationPMTO showed full transfer as an effective implementation approach with long-term sustainability and fidelity (Sigmarisdóttir, et. al. 2019). It is important that professionals implementing parenting education programs obtain corresponding certifications and that the assessment is conducted regularly to ensure the program fidelity is sustained. Kellam and Langevin (2003)'s framework for understanding evidence in prevention research and programs includes several steps: efficacy trials in controlled conditions; effectiveness trials in the community; sustainability trials over successive cohorts; going-to-scale trials; and system-wide sustainability. Although most programs conduct efficiency and effectiveness studies, the sustainability, scale implementation and system wide sustainability are less examined, but necessary (Kellam & Langevin, 2003).

### **Policies on Parenting Education and Support**

The Council of Europe encouraged positive parenting adopting a recommendation designed to encourage States to recognize the importance of parental responsibilities and the need to provide parents with enough support to help them fulfil their responsibilities (Council of Europe, 2006). The Committee of Ministers recommended that member States take various measures (e.g., legislative, administrative, financial) to develop policies that support families and positive

parenting as well as services that support all parents and particularly those at risk of social exclusion. The evidence of multiple institutional effects on family behaviors and outcomes indicates that family policy regimes supporting greater gender equality are those under which favorable outcomes are most likely to occur (Hank & Steinbach, 2018).

For policies to be effective thorough communication strategies need to be developed to ensure implementation. Educational parenting programs have been an integral part of UK government parenting policy since the late 1990s (Cullen, 2019). Studies examining the shared parental leave, a policy designed to improve gender equality in the workplace and home in UK noted the low use and identified several barriers including poor policy communication at an organizational level, perceived policy complexity and societal expectations around parental identities (Birkett, & Forbes, 2019). Daly (2013)'s article on parenting support policies in Europe compared developments in England, France, Germany and Italy. It showed variations in states' engagements with parents' childrearing strategies and competence, with England registering the most extensive services to engage with parents through standardized parenting programs, while the others having the parental support focused on education for family and social life, and interventions tailored and home-grown.

Effectiveness of the national policies needs to be preserved as they are translated to local levels, and appropriate training and resources must be provided. This starts with strong collaborations between the central and regional governments. Eklund, and Lundqvist (2018)'s study on children's rights and gender equality in Swedish parenting support policy and practice, indicated that despite national approaches to enhance and achieve gender equality among parents, gender equality is downplayed in local settings due to lack of concrete strategies and instructions on how to work with gender equality perspectives in cooperation with children's rights perspectives, but also the different interpretations of gender equality and good parenting. Engagement of multiple stakeholders is also essential. Studies in Spain illustrated the collaborative work between government agencies (e.g., Ministry of Health, Social Services, and Equality, Federation of Municipalities and Provinces), universities and NGOs to implement positive parenting policies and to adopt codes of professional best practices to improve prevention work with families (Ochaita, et al. 2018; Rodrigo, et. al., 2018). Similarly, family policy in Ireland has become a policy imperative with the creation of the statutory Child and Family Agency (Tusla), focused on preventative and support measures to strengthen families in carrying out their functions (Connolly & Devaney, 2018). This resulted in an increase of support group-based parenting programs that are provided by health, education and welfare professionals.

A parenting practice that has been widely criticized due to its detrimental impact on child wellbeing is corporal punishment. World Health Organization (WHO) (2016) in collaboration with other agencies (e.g., UNICEF, US Center for Disease Control (CDC)), developed a package of evidenced-based strategies: *Inspire: Seven Strategies for ending Violence against children* which "builds on growing evidence that violence against children is preventable, and on a growing public consensus that it will no longer be tolerated" (WHO, 2016, p.7). *Inspire* focuses on implementation and enforcement of laws, maintaining safe environments, parent and caregiver support, developing education and life skills and providing support services.

Despite the recommendation of international governing bodies for a complete ban of the practice, there is limited data available on the effects of corporal punishment on mental health and the influence of laws banning corporal punishment in Europe. Research shows that the odds of having parents who reported using occasional to frequent corporal punishment were 1.7 times higher in countries where its use is still legal and that children with parents who reported using corporal punishment had higher rates of both externalized and internalized mental health disorders (DuRivage, et.al., 2015). Findings from research in European countries and elsewhere indicate that nearly all forms of corporal punishment are used less commonly in countries with legal restrictions than in those without such bans, and that acceptance of corporal punishment was lower in countries with bans on it (WHO, 2016). Parenting education programs, such as the home visiting programs, are effective in significantly reducing child maltreatment by promoting a safe home environment, encouraging competent caregiving by parents and improving material support for families by connecting them to health and social services (WHO, 2016).

Global Initiative to End All Corporal Punishment of Children' *Global report 2019: Progress towards ending corporal punishment of children* (2020) indicated that 58 countries prohibit all corporal punishment of children (including at home, at school, day care, alternative care), making 12% of children fully protected, and 30 countries are committed to consider legislation (see Tables 8). By comparison, 132 countries ban corporal punishment at schools. Sweden was the first country to fully outlaw corporal punishment in 1979, followed by Finland (1983), and Norway (1987). In 2019, France and Kosovo also outlawed the practice. Although some countries (e.g., Russia Federation) include in their Family Code or Criminal code articles referring to the protection of children from harm and abuse, the absence of explicit prohibition might not effectively prohibit it.

Table 8. Corporal Punishment Legislation in Europe (2019) (examples)

Prohibited everywhere	Country
1979	Sweden
1983	Finland
1987	Norway
1989	Austria
1994	Cyprus
1998	Latvia
1999	Croatia
2000	Bulgaria, Germany
2003	Iceland
2004	Romania, Ukraine
2005	Hungary
2006	Greece
2007	Netherlands, Portugal, Spain
2008	Moldova, Luxembourg, Lichtenstein
2010	Albania, Poland
2013	North Macedonia
2014	Estonia, Malta, San Marino
2015	Andorra, Ireland

2016	Denmark, Montenegro
2017	Lithuania
2019	France, Kosovo

Data Source: <https://endcorporalpunishment.org/>

## I. Conclusions and Recommendations

Parenting education is an area with a great potential to improve the quality of family relations and childrearing. By increasing parents' parenting knowledge and skills there is an opportunity to foster positive relations and development and prevent child maltreatment. Developing family policies specifically targeted to regulate parenting education and behaviors (e.g., corporal punishment) would provide legislative frameworks that could guide changing practices and improving developmental and health outcomes.

Parenting education programs designed to increase parents' skills and positive practices, such as Incredible Years, Triple-P and others, have been developed (e.g., Olds, 2006; Sanders, 1999; Webster-Stratton, & Hancock, 1998), transferred and adopted successfully all over the world, including in European countries (e.g., Jonyniene, Kern, & Gfroerer, 2015; Sierau et al. 2016), and in some case on a national level scale (e.g., Larsson et. al., 2009; Ogden, et. al., 2005). Given the significant financial commitment involved in nationwide implementation of parent education programs, this should occur after careful examinations of their effectiveness established through rigorous testing such as randomized control trials in the respective countries. Moreover, evidence indicated that having long-term government financial support, having accredited professionals implementing it and inclusion of the parent education programs in official plans and strategic documents is important in ensuring their success (WHO, 2013).

Data also indicate that successful parenting education programmatic outcomes happen when there is a strong political commitment and effective collaborations between different stakeholders such as central and local levels of governments, academia, international agencies (UNICEF, WHO) and NGOs, for the development, dissemination and implementation of positive parenting initiatives (WHO, 2018). While there is significant progress in parenting education program development, there are still families that do not have access to them. Establishing collaborations among the different stakeholders will ensure that programs are known and used by families in communities.

### Recommendations

- Parenting education programs should address a variety of parenting practices, including child-parent communication (with both mothers and fathers), support, spending quality time together (such as sharing meals)
- Policies and legislations should continue to be strengthen in banning corporal punishment in all areas so that it is reduced and eliminated

- Effectiveness of the programs should guide the choice for program transfer and adoption; upon program transfer, it is important for staff to be trained and certified, and to ensure fidelity in program implementation
- Effective parenting policies and systematic communication strategies should be developed to inform the general public and thus contribute to their implementation
- National policies must be translated to local levels and without decreasing their effectiveness in the process, through collaborations between the central and local governments, and other stakeholders (e.g., academia, NGOs)
- Given the significant financial commitment involved in nationwide implementation of parent education programs, this should occur after careful examinations of their effectiveness established through rigorous testing such as randomized control trials in the respective countries
- Collection of systematic, longitudinal family-level data using multiple informants (e.g., mothers, fathers, children) is strongly recommended so that comprehensive statistical analysis could be conducted and the process of change examined

## References

- Adler-Baeder, F., & Higginbotham, B. (2020). Efforts to Design, Implement, and Evaluate Community-Based Education for Stepfamilies: Current Knowledge and Future Directions. *Family Relations*, 1-18. DOI:10.1111/fare.12427.
- Axberg U, Hansson K, & Broberg AG. (2007). Evaluation of the Incredible Years Series – an open study of its effects when first introduced in Sweden. *Nordic Journal of Psychiatry*, 61, 143–151.
- Baran, M. L., & Jones, J. E. (2018). Family and child welfare in Norway: An analysis of the welfare state’s programs and services. In M. Robila & A. Taylor (Eds.), *Global perspectives on Family Life Education* (pp. 297-310). New York, NY: Springer.
- Berge, J.M., Wall, M., Neumark-Sztainer, D., Larson, N., & Story, M. (2010). Parenting Style and Family Meals: Cross-Sectional and 5-Year Longitudinal Associations. *Journal of American Dietetics Association*, 110(7), 1036-1042.
- Booker, L., Novero, C., & Dallaire, D. (2019). Parenting Programs for Incarcerated Fathers and Mothers: Current Research and New Directions, in M. J. Eddy & J. Poehlmann-Tynan (Eds.), *Handbook on children with incarcerated parents* (2<sup>nd</sup> Ed) (pp. 183-205). Springer, NY.
- Birkett, H. & Forbes, S. (2019): Where’s dad? Exploring the low take-up of inclusive parenting policies in the UK. *Policy Studies*. DOI: 10.1080/01442872.2019.1581160
- Burlaka, V. Serdiuk, O., Nickelsen, T., Tkach, B., & Khvorova, H. (2018). Family Life Education in Ukraine. In M. Robila & A. Taylor (Eds.), *Global perspectives on Family Life Education* (pp. 329-343). New York, NY: Springer.
- Connolly, N. & Devaney, C. (2018). Parenting Support: Policy and Practice in the Irish Context. *Child Care in Practice*, 24(1), 15–28.
- Council of Europe. (2006). *Council of Europe encourages positive parenting*. Press Release Council of Europe Press Division. Strasbourg.
- Council of Europe. (2008). *Policy to support positive parenting*. Council of Europe Publishing. Strasbourg.
- Cullen, S.M. (2019). Educational parenting programmes – examining the critique of a global, regional and national policy choice. *Research papers in Education*. <https://doi.org/10.1080/02671522.2019.1678066>
- Daly, M (2013). Parenting support policies in Europe. *Families, Relationships and Society*, 2(2), 159-174.
- Davies, L. M., Janta, B., & Gardner, F. (2019). *Positive Parenting Interventions*. European Platform for Investing in Children (EPIC).
- DuRivage, N., Keyes, K. Leray, E., Pez, O., et.al. (2015). Parental Use of Corporal Punishment in Europe: Intersection between Public Health and Policy. *PLoS ONE*10(2):e0118059. doi:10.1371/journal.pone.0118059.
- Eklund, L. & Lundqvist, A. (2018): Children's rights and gender equality in Swedish parenting support: policy and practice, *Journal of Family Studies*, DOI: 10.1080/13229400.2018.1484379
- Forgatch, M. S., & DeGarmo, D.S. (2011). Sustaining Fidelity Following the Nationwide PMTO™ Implementation in Norway. *Prevention Science*, 12, 235–246.
- Filus, S., Schwarz, B., Mylonas, K., Sam, D.L., & Boski, P. (2019). Parenting and Late Adolescents’ Well-Being in Greece, Norway, Poland and Switzerland: Associations with Individuation from Parents. *Journal of Child and Family Studies*, 28, 560–576.

- Gardner, F., Leijten, P., Harris, V., Mann, J. (2019). Equity effects of parenting interventions for child conduct problems: a pan-European individual participant data meta-analysis. *Lancet Psychiatry*, 6(6):518-527. doi: 10.1016/S2215-0366(19)30162-2
- Global Initiative to End All Corporal Punishment of Children. (2020). *Global report 2019: Progress towards ending corporal punishment of children*
- Grotevant, H.D., & Lo, A. Y. (2017). Adoptive parenting. *Current Opinion in Psychology* 15,71–75
- Hank, K., & Steinbach, A. (2018). Families and Their Institutional Contexts: the Role of Family Policies and Legal Regulations. *Koln Z Soziol*, 71(1), 375-398.
- Heinrichs, N., Foran, H., & Lachman, J. (2020). *RISE: Prevention of Child Mental Health Problems in Southeastern Europe*.  
file:///C:/Users/sr10/Downloads/RISE\_Study\_Profile%20and%20first%20results.pdf
- Hutchings, J. Bywater, T, Daley, D., et. al. (2007). Parenting intervention in Sure Start services for children at risk of developing conduct disorder: pragmatic randomised controlled trial. *British Medical Journal*. doi:10.1136/bmj.39126.620799.55.
- Jiménez, L. Antolín-Suárez, L., Lorence, B., Hidalgo, V. (2019). Family education and support for families at psychosocial risk in Europe: Evidence from a survey of international experts *Health Social Care Community*, 27, 449–458.
- Jonyniene, J. Kern, R.M., & Gfroerer, K.P. (2015). Efficacy of Lithuanian Systematic Training for Effective Parenting (STEP) on Parenting Style and Perception of Child Behavior. *The Family Journal: Counseling and Therapy for Couples and Families*, 23(4) 392-406.
- Kellam, S. G. & Langevin, D. J. (2003). A framework for understanding “evidence” in prevention research and programs. *Prevention Science*, 4(3), 137–153.
- Lachman J.M., Cluver, L., Ward, C. L. , Hutchings, J., Mlotshwa, S., Wessels. I., et al. (2017). Randomized controlled trial of a parenting program to reduce the risk of child maltreatment in South Africa. *Child Abuse and Neglect*. 72, 338–351.
- Larsson B, Fossum S, Clifford G, Drugli MB, Handegard BH, & Morch, W.T. (2009). Treatment of oppositional defiant and conduct problems in young Norwegian children. *European Child Adolescent Psychiatry*, 18(1), 42–52.
- Leijten, P., Melendez-Torres, G. J., Knerr, W. & Gardner, F. (2016) Transported versus homegrown parenting interventions for reducing disruptive child behavior: a multilevel meta-regression study. *Journal of the American Academy of Child & Adolescent Psychiatry*, 55 (7), 610-617.
- Leijten, P., Gardner, F., Landau, S., Harris, V., Mann, J., Hutchings, J., et. al.. (2018). Research Review: Harnessing the power of individual participant data in a meta-analysis of the benefits and harms of the Incredible Years parenting program. *Journal of Child Psychology and Psychiatry* 59(2), 99–109.
- Mejdoubi, J., van den Heijkant SCCM., van Leerdam FJM., Heymans MW, Crijnen A, & Hirasing R. A. (2015). The effect of VoorZorg: the Dutch Nurse–Family Partnership, on child maltreatment and development: a randomized controlled trial. *PLoS One*, 10(4):e0120182.
- Ochaita, E., Espinosa, M. A., García-Llorente, I.. & Fernández-López, M., (2018). The role of NGOs in the dissemination and implementation of positive parenting in Spain. *Early Child Development and Care: Special Issue: Positive parenting in Spain*, 188(11), 1514–1527.

- O'Doherty, C. (2019). Irish family life in changing times. In M. Robila & A. Taylor (Eds.), *Global perspectives on Family Life Education* (pp. 311-328). New York, NY: Springer.
- Ogden, T., Forgatch, M.S., Askeland, E., Patterson G.R., & Bullock, B.M. (2005). Implementation of Parent Management Training at the National Level: the case of Norway. *Journal of Social Work Practice*, 19(3), 317–329.
- Olds, D. (2006). The Nurse – Family Partnership: An Evidenced-Based Preventive Intervention. *Infant Mental Health Journal*, 27(1), 5–25.
- Petrovic , M., Vasic, V., . Petrovic, O., Santric-Milicevic, M. (2016). Positive parenting attitudes and practices in three transitional Eastern European countries: Bosnia and Herzegovina, Macedonia and Serbia. *International Journal of Public Health*, 61, 621–630.
- Pollmann-Schult, M. (2018). Parenthood and Life Satisfaction in Europe: The Role of Family Policies and Working Time Flexibility. *European Journal of Population*, 34, 387–411.
- Ponzetti, J.J. Jr. (2016) (Ed). *Evidence-based Parenting Education: A Global Perspective*. Routledge, New York, NY.
- Pruett, M. K & DiFonzo, J.H. (2014). Closing the gap: Research, policy, practice and shared parenting. *Family Court Review*, 52(2), 152–174.
- Rebellon, C. & Straus, M. (2017) Corporal punishment and adult antisocial behavior: A comparison of dyadic concordance types and an evaluation of mediating mechanisms in Asia, Europe, and North America. *International Journal of Behavioral Development*, 41(4), 503-513.
- Richardson, D., Dugarova, E., Higgins, D., Hirao, K., Karamperidou, D., Mokomane, Z, and Robila, M. (2020), *Families, Family Policy and the Sustainable Development Goals*. UNICEF Office of Research, Florence, Italy.
- Robila, M. (2020). Families and Sustainable Development Goal (SDG) 3: Ensure healthy Lives and Promote Well-being for All at all Ages. In D. Richardson et. al., *Families, Family Policy and the Sustainable Development Goals* (p. 102-136).). UNICEF Office of Research, Florence, Italy.
- Robila, M. & Robila, S. A. (2019). Applications of Artificial Intelligence Methodologies to Behavioral and Social Sciences. *Journal of Child and Family Studies*.  
<https://doi.org/10.1007/s10826-019-01689-x>
- Robila, M., & Taylor, A. (2018). Global Perspectives on Family Life Education: Introduction. In M. Robila, & A. Taylor (Eds.), *Global perspectives on Family Life Education* (pp.1 17). New York, NY: Springer.
- Robila, M. (2014). Family Policies in a Global Perspective. In M. Robila (Ed.), *Handbook of Family Policies across the Globe* (pp. 3-15). New York, NY: Springer.
- Robling, M., Bekkers, M., Bell, K., Butler, CC., et. al. (2016). Effectiveness of a nurse-led intensive home-visitation programme for first-time teenage mothers (Building Blocks): a pragmatic randomised controlled trial. *The Lancet*, 387, 146–155.
- Rodrigo, M.J., Máiquez , M/L., Hidalgo, V. ,et.al. (2018). National agency–university partnership for a web-based positive parenting policy and evidence-based practices. *Early Child Development and Care: Fostering childhood development through positive parenting in Spain*, 188(11), 1620-1633.
- Rodrigo, M.J., Almeida, A., & Reichle, B. (2016). Evidence-based Parent Education Programs: A European Perspective. In J. J. Ponzetti (Ed.), *Evidence-based Parenting Education: A Global Perspective* (pp. 85-105). Routledge.

- Sander, M. R. (2019). Harnessing the Power of Positive Parenting to Promote Wellbeing of Children, Parents and Communities Over a Lifetime. *Behavior Change*, 36, 56–74.
- Sanders, M., & Mazzucchelli, T.G. (2018). (Eds.). *The power of positive parenting: Transforming the lives of children, parents and communities through the Triple P system*. Oxford University Press. Oxford, UK.
- Sanders, M.R. (1999). 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*, 2(2), 71–90.
- Shulruf, B., O’Loughlin, C., & Tolley, H. (2009). Parenting education and support policies and their consequences in selected OECD countries. *Children and Youth Services Review*, 31, 526-532.
- Sierau, S., Dahne, V., Brand, T., Kurtz, V., von Klitzing, K., & Jungmann, T. (2016). Effects of Home Visitation on Maternal Competencies, Family Environment, and Child Development: a Randomized Controlled Trial. *Prevention Science*, 17, 40-51.
- Sigmarsdóttir, M., Forgatch, M., Guðmundsdóttir, E. V., Thorlacius, et. al. (2019). Implementing an evidence-based intervention for children in Europe: Evaluating the full-transfer approach. *Journal of Clinical Child and Adolescent Psychology*, 48(Suppl 1), 312-325.
- Webster-Stratton, C. & Hancock, L. (1998). Parenting Training for young children with conduct problems. Content, methods and therapeutic process. In C. E. Schaefer & J. M. Briesmeister (Eds.), *Handbook of parent training*, (pp. 98-152). NY: John Wiley & Sons.
- World Health Organization (2018). *European Status Report on Preventing Child Maltreatment*. WHO Regional Office for Europe.
- World Health Organization (2014). *Health Behaviors in School Aged Children*. WHO Europe. <https://gateway.euro.who.int/en/datasets/hbsc/>
- World Health Organization (2016). *Inspire: Seven Strategies for ending Violence against children*.
- World Health Organization (2014). *Global Status Report on Violence Prevention*.
- World Health Organization (2013). *European Report on Preventing Child Maltreatment*. WHO Regional Office for Europe.