Family Check-up for Children


The Family Check-up (FCU) for Children is a strengths-based, family-centred intervention that motivates parents to use parenting practices to support child competence, mental health and risk reduction.

The intervention has two phases. The first is a brief, three-session programme that involves three one-hour sessions: interview, assessment and feedback.

The second phase is ‘Everyday Parenting’, a family-management training programme that builds parents’ skills in positive behaviour support, healthy limit-setting and relationship-building. As a health-promotion and prevention strategy, phase two of the FCU can be limited to one to three Everyday Parenting sessions. As a treatment approach, phase two can range from three to 15 Everyday Parenting sessions. The first phase may be followed by additional community referral services as indicated.

The intervention model is tailored to address the specific needs of each family and can be integrated into a variety of service settings, including schools, primary care and community clinics. Although providers implementing the intervention are typically Masters-level therapists or social workers, bachelor and paraprofessional/non-bachelor-level providers, with the appropriate consultation and supervisory support, may also implement the FCU.

A component of Family Check-up for Children seeks to improve children’s outcomes by improving the quality of interparental relationships (IPR).
EIF Programme Assessment

Family Check-up for Children has evidence of a **short-term positive impact** on child outcomes from at least one rigorous evaluation.

**What does the evidence rating mean?**

**Level 3** indicates **evidence of efficacy**. This means the programme can be described as evidence-based: it has evidence from at least one rigorously conducted RCT or QED demonstrating a statistically significant positive impact on at least one child outcome.

This programme does not receive a rating of 4 as it has not yet replicated its results in another rigorously conducted study, where at least one study indicates long-term impacts, and at least one uses measures independent of study participants.

**What does the plus mean?**

The plus rating indicates that this programme has evidence from at least one level 3 study, along with evidence from other studies rated 2 or better.

**Cost rating**

A rating of 2 indicates that a programme has a medium-low cost to set up and deliver, compared with other interventions reviewed by EIF. This is equivalent to an estimated unit cost of £100–£499.
Child outcomes

According to the best available evidence for this programme’s impact, it can achieve the following positive outcomes for children:

**Preventing crime, violence and antisocial behaviour**

- Reduced disruptive behaviour (boys only) - based on study 1

- Improved behaviour - based on study 1, study 2

- Reduced defiant behaviour - based on study 2

*This programme also has evidence of supporting positive outcomes for couples, parents or families that may be relevant to a commissioning decision. Please see the ‘About the evidence’ section for more detail.*
Key programme characteristics

Who is it for?
The best available evidence for this programme relates to the following age-groups:

- Toddlers

How is it delivered?
The best available evidence for this programme relates to implementation through these delivery models:

- Individual

Where is it delivered?
The best available evidence for this programme relates to its implementation in these settings:

- Home
- Secondary school
- Community centre
- In-patient health setting
- Out-patient health setting

How is it targeted?
The best available evidence for this programme relates to its implementation as:

- Targeted selective
Where has it been implemented?

Canada, Spain, Sweden, United States

UK provision

This programme has not been implemented in the UK.

UK evaluation

This programme’s best evidence does not include evaluation conducted in the UK.
About the programme

What happens during delivery?

How is it delivered?

- FCU is delivered over nine sessions of 50-60 minutes' duration each by one FCU provider (often a therapist or social worker).

What happens during the intervention?

The FCU is delivered in two phases. The first is a brief, three session intervention based on motivational interviewing. The three meetings are conducted by a professional therapist in the home. The sessions consist of a one-hour assessment session, an interview session, and a feedback session.

- The first session involves a practitioner who reviews and discusses concerns with the caregiver, focusing on family issues that are most critical to the child's wellbeing. Specifically, the interview covers the parent's goals and concerns within the family.

- The assessment engages family in a variety of in-home videotaped tasks of parent-child interactions, while caregivers complete questionnaires about their own, their child's and their family's functioning. During this session, the practitioner completes ratings of parent involvement and supervision.

- The third meeting is a feedback session where the parent consultant can summarise results of the assessment and work with the parent to assess his/her motivation and willingness to change problematic behaviour. This final session also includes an overview of the behaviours and/or practices that need additional attention. At that time, parents are offered a maximum of six follow-up sessions to continue improving their parenting practices and family management skills. Two annual follow-ups are conducted to assess progress over the long-term.

- The second phase involves the delivery of Everyday Parenting, a family management training program that builds parents' skills in positive behaviour support, healthy limit-setting and relationship-building. As a health-promotion and prevention strategy, phase two of the FCU can be limited to one to three Everyday Parenting sessions. As a treatment approach, phase two can range from 3 to 15 Everyday Parenting sessions. The first phase may be followed by additional community referral services as indicated.
What are the implementation requirements?

Who can deliver it?

- It is delivered by one therapist or social worker who is qualified to QCF-7/8 level and has received 35 hours of programme training. With the appropriate consultation and supervisory support, a paraprofessional/non-bachelor-level practitioner also may implement the programme.

What are the training requirements?

- The practitioners have 35 hours of training. Booster training of practitioners is recommended.

How are the practitioners supervised?

- It is recommended that programme practitioners are supervised by one host-agency supervisor with QCF-7/8 level qualifications (who receives standard practitioner programme training, with an additional 28 to 45 hours of additional training support) and one programme developer supervisor also qualified to QCF.

What are the systems for maintaining fidelity?

- Training manual
- Other printed material
- Other online material
- Video or DVD training
- Face-to-face training
- Supervision
- Accreditation or certification process
- Booster training
- Fidelity monitoring
Is there a licensing requirement?
There is no licence required to run this programme.

How does it work? (Theory of Change)

How does it work?

- Family Check-up is based on social learning principles that assume that some parenting behaviours inadvertently encourage non-compliant behaviours in toddlerhood.
- Parents learn positive behaviour support strategies to help parents proactively structure family situations to promote children’s self-regulatory development and minimise problem behaviour.
- In the short term, parents learn positive strategies for engaging with their child.
- In the longer term, children are less likely to engage in antisocial and risky behaviour.

Contact details

thefamilycheckup@asu.edu

https://reachinstitute.asu.edu/family-check-up
About the evidence

- FCU’s most rigorous evidence comes from two RCTs, both of which were conducted in the USA.

### Study 1

**Citation:** Shaw et al (2006) | **Design:** RCT

**Country:** United States

**Sample:** 120 mother-son dyads in Pittsburgh, Pennsylvania

**Child outcomes:**
- Reduced disruptive behaviour (boys only)
- Improved behaviour

**Other outcomes:**
- Increased maternal involvement


Available at
http://www.pitt.edu/~ppcl/Publication/early%20steps/JCCP%20paper%20feb%202006%20ES%2020to%204%20intervention.pdf

### Study 2

**Citation:** Dishion et al (2008), Shaw et al (2009), Lunkenheimer et al (2008), Dishion et al (2014) | **Design:** RCT

**Country:** United States

**Sample:** 731 mother-child dyads
Child outcomes:
Improved behaviour
Reduced defiant behaviour

Other outcomes:
Improved parent-child interaction
Reduced maternal depression
Improved parent-child interaction


Available at https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2683384/
https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3952033/
The EIF Guidebook provides information about early intervention programmes that have at least preliminary evidence of achieving positive outcomes for children. It provides information based on EIF’s assessment of the strength of evidence for a programme’s effectiveness, and on detail about programmes shared with us by those who design, run and deliver them.

The Guidebook serves an important starting point for commissioners to find out more about effective early interventions, and for programme providers to find out more about what good evidence of impact looks like and how it can be captured. As just one of our key resources for commissioners and practitioners, the Guidebook is an essential part of EIF’s work to support the development of and investment in effective early intervention programmes.

Our assessment of the evidence for a programme’s effectiveness can inform and support certain parts of a commissioning decision, but it is not a substitute for professional judgment. Evidence about what has worked in the past offers no guarantee that an approach will work in all circumstances. Crucially, the Guidebook is not a market comparison website: ratings and other information should not be interpreted as a specific recommendation, kite mark or endorsement for any programme.

How to read the Guidebook

EIF evidence standards

About the EIF Guidebook
EIF

The Early Intervention Foundation (EIF) is an independent charity and a member of the What Works network. We support the use of effective early intervention for children, young people and their families: identifying signals of risk, and responding with effective interventions to improve outcomes, reduce hardship and save the public money in the long term.

We work by generating evidence and knowledge of what works in our field, putting this information in the hands of commissioners, practitioners and policymakers, and supporting the adoption of the evidence in local areas and relevant sectors.

www.EIF.org.uk | @TheEIFoundation

10 Salamanca Place, London SE1 7HB | +44 (0)20 3542 2481
Disclaimer

The EIF Guidebook is designed for the purposes of making available general information in relation to the matters discussed in the documents. Use of this document signifies acceptance of our legal disclaimers which set out the extent of our liability and which are incorporated herein by reference. To access our legal disclaimers regarding our website, documents and their contents, please visit eif.org.uk/terms-conditions/. You can request a copy of the legal disclaimers by emailing info@eif.org.uk or writing to us at Early Intervention Foundation, 10 Salamanca Place, London SE1 7HB.