Great Kids, Inc., (GKI) the creators of the *Growing Great Kids™ Prenatal – 5 Years, Parenting, Attachment, Child Development, and Family Strengthening Curriculum* (GGK), partnered with the evaluation and research firm LeCroy & Milligan Associates to develop this summary of GGK’s evidence-based criteria. **This summary documents the GGK curriculum series as an effective evidence-based parenting intervention and educational tool to support parent and family level outcomes, based on the results of a research study by LeCroy and Davis (March 2016), published in *Research on Social Work Practice*.** This summary provides home visitation programs with information about this evidence-based curriculum and fidelity implementation.

**About this Curriculum**

The GGK Curriculum offers an individually tailored, uniquely enriching experience for children and their parents who have been exposed to adverse childhood experiences (ACEs) and are living in highly stressed home environments. The curriculum is designed based on trauma-informed principles that help build protective factors for children and their families. See Exhibit 1 for an at-a-glance description of the GGK Curriculum. Since 1999, GGK has been the primary parenting intervention used by many home visiting programs serving families with children pre-birth to five years, such as: Head Start, Early Head Start, Kentucky HANDS, Healthy Child Manitoba, Kids First, Saskatchewan, and Help Me Grow. Additionally, Healthy Families America has endorsed GGK as the preferred parenting intervention curriculum for 700+ affiliate programs. GGK incorporates features specifically targeted to parents and parenting partners of children pre-birth to 5 years of age:

- Relationship-Based Orientation;
- Two Generation Approach;
- Attachment/Infant Mental Health, Child Development/Health Content;
- Strength-Based, Solution-Focused;
- Protective Factors Focus;
- Emergent Design;
- Conversation Guides;
- Skill Driven Emphasis;
- Culturally Inclusive and Competent Approach;
- Use of Quarterly Reflective Assessment Framework (The GGK Tool).

**Target Population**

The GGK Curriculum is designed for parents of children pre-birth to 5 years of age: who have been exposed to ACEs and are living in stressed home environments. The series is designed to be used by home visiting-based programs. Series available include:

- GGK Prenatal-36 Months for Home Visiting Programs (English and Spanish);
- GGK for Preschoolers (ages 3 to 5) for Home Visiting Programs (English and Spanish);
- Growing Great Families (GGF) Family Strengthening and Life Skills Curriculum;
- Parent Handouts and Child Development activities (English, Spanish, and French).
## Exhibit 1. The Growing Great Kids™ Prenatal – 5 Years (GGK) At-A-Glance Table

<table>
<thead>
<tr>
<th>INTERVENTION NAME AND DESCRIPTION</th>
<th>CHILD OUTCOMES</th>
<th>PARENT/FAMILY OUTCOMES</th>
<th>CHILD AGE</th>
<th>REQUIRED INITIAL TRAINING</th>
<th>QUALIFICATIONS</th>
<th>STARTUP COSTS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Growing Great Kids™ Prenatal – 5 Years (GGK), Parenting, Attachment, Child Development, and Family Strengthening Curriculum</strong></td>
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<td></td>
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<td><strong>$$$$</strong></td>
</tr>
<tr>
<td>An individual-based parenting intervention curriculum individually tailored, uniquely enriching experience for children and their parents who have been exposed to Adverse Childhood Experiences (ACEs) and are living in highly stressed home environments.</td>
<td>√</td>
<td>√</td>
<td>√</td>
<td>√</td>
<td><strong>√</strong></td>
<td>Implemented more safety practices in the home Used more resources to meet family needs Improved parenting attitudes towards the quality of the home environment, use of regular routines, reduced chaotic household, and more reading to their child Improved mental health</td>
</tr>
</tbody>
</table>

**STARTUP COSTS:** Intervention is available free of charge; $ $499 or less; $$$ $500-$999; $$$ $1,000-$1,499; $$$$ $1,500-$1,999; $$$$$ $2,000 or more
Brief Description

Growing Great Kids™ is a user friendly and truly comprehensive strength-based approach to growing nurturing parent-child relationships and supporting healthy childhood development. GGK incorporates distinguishing features specifically targeted to parents/parenting partners of children pre-birth to 5 years of age, including:

- **Relationship-Based Orientation:** All information related to child development and parenting is presented within the context of cultivating sensitive, responsive parent-child relationships. The home visitor’s relationships with parents and parenting partners are central to motivating and supporting them to grow their attachment and parenting skills, strengthen their family, and build life skills.

- **Two Generation Approach:** The GGK and GGF Curricula create opportunities for and address the needs of both vulnerable parents and their children.

- **Attachment/Infant Mental Health Assimilation:** Strategies for promoting infant mental health are woven into the GGK and GGF conversation guides and child development activities. These strategies are rooted in (1) the parents gaining understanding of their infant’s cues, temperament, and needs while growing skills for empathic parenting; (2) fostering trust, predictability, responsiveness, and security in the parent-child relationship; and (3) reducing the child’s exposure to toxic stress.

- **Comprehensive Child Development And Health Content:** GGK offers anticipatory guidance to parents pertaining to all developmental domains, health, safety, and nutrition. Child development activities are coded by targeted child development domains to assist with identifying interventions associated with developmental delays. Activities are crafted to strengthen parent-child attachments. Activity format is designed to engage fathers and mothers.

- **Protective Factors Focus:** Research shows that certain risk factors have detrimental effects on children and families, while other “protective” factors can mitigate those effects and provide benefits. Building Protective Factors/Buffers results in greater resilience for parents and children. GGK builds parenting and family life skills that translate into Protective Factors/Buffers for their children.

- **Strength-Based, Solution-Focused Parent Partnership Model:** The framework utilized in GGK’s conversation guides with families draws the parents’ attention to their strengths and motivations to grow their knowledge and skills. Guidance is provided for continuously reinforcing the parents’ ownership and ability for solving their problems. Parents build competencies for addressing their concerns with focused attention on building their skills and confidence. Parents’ engagement with Curriculum Modules promote growth in “executive functioning,” resulting in better problem solving, stress management and other life skills.
• **Emergent Design:** Based on the family’s knowledge, skills, interests and needs, the curriculum supports home visitors to partner with parents in sequencing curriculum content and activities. The amount of time devoted to a particular curriculum component can easily be tailored to the families’ interests and needs.

• **Conversation Guides:** GGK/GGF provides conversation guides that include GKI Action Tools and other strategies for staying strength-based, solution-focused and skill-driven during home visits. For every three months of a child’s development, there are conversation guides addressing: (1) Basic Care; (2) Social and Emotional Development, (3) Cues and Communication; (4) Physical and Brain Development; and (5) Play and Stimulation. Prenatal and GGF manuals include conversation guides specific to pre-birth visits, building family foundations, growing life skills and reducing stress.

• **Skill Driven Emphasis:** Home visitors who use GGK coach program parents from “knowledge to practice to skill mastery.” Parents become their own “child development specialist,” with secure attachments at the core. Parents learn how to manage their stress in ways that help them get what they want for themselves and their children.

• **Culturally Inclusive And Competent Approach:** Specific modules are devoted to encouraging families to learn more about their cultural values and traditions, and to explore how they will use their culture to strengthen their family and their child’s sense of belonging.

• **Quarterly Reflective Assessment Framework:** The GGK Tool is a pre and post “self-appraisal” of knowledge and skills gained, and “next steps” parents want to take for building additional knowledge and skills.

GKI's **vision** is to protect children and their childhoods, while giving every parent the opportunity to feel confident and competent. We aim to have every child feel safe and secure, loved and valued, curious and capable. GKI's **mission** is to partner with parents to reduce their stress and grow the essential parenting and life skills that will empower them to provide their children with a safe, loving home, and the inner strengths to reach their highest developmental potential. We accomplish our vision by developing and delivering training, curricula and other tools focused on building the competencies of parents and the professionals who work in programs, sharing our vision, who serve parents and their pre-birth to age five children. GKI is a nonprofit organization specializing in the development of parenting intervention curricula, professional development for practitioners, and program consultation.
Essential Components
LeCroy & Milligan Associates (2015) developed and tested a series of fidelity metrics and target standards for GKI and the GGK Curriculum that fall into three categories: (1) Certification training/ongoing skill building, (2) Supervision, and (3) Curriculum implementation.

(1) Certification Training/Ongoing Skill Building
Certification training and post-training advanced practice courses focus on ongoing skill building and developing the six competencies for home visitors:

1) Establishing the caring relationships with families that result in motivation to grow;
2) Cultivating the growth of secure attachment relationships by fostering empathic and nurturing parenting practices;
3) Supporting parents to optimize their child’s developmental potential;
4) Nourishing the parent’s interest in providing competent basic care, healthy nutrition and preventative health practices;
5) Expanding the parent’s capacity to manage stress and to utilize a variety of community resources that will strengthen the individual parent as well as the family; and
6) Incorporating cultural practices into home visits aimed at solidifying the family’s identity and enriching parenting.

(2) Supervision
During each weekly supervision session, to promote reflective practice and grow Home Visitor competencies, it is recommended that for 1 or 2 families the Supervisor facilitate an in-depth discussion following this conversation guide. Because supervisory time does not allow for such extensive discussions for every family, Supervisors are encouraged to use the GGK Home Visit Record for framing an informative and solution-focused discussion of each family being reviewed that week. The curriculum packet includes complimentary post-certification e-learning courses for supervisors. Additionally, REMAP, a three-day supervisory seminar specific to implementing the curriculum within reflective supervision is offered.

(3) Curriculum Implementation
• Use of Parenting Attachment Tools:
  o 6 Daily Do’s (essential parenting skills sets)
  o Getting in sync (cueing response tool)
  o Ready for Play (relationship focused child development skills)
• Use of six development focused modules for every three months of a child’s development:
  o Basic Care
  o Social Emotional Development
  o Cues and Communication
  o Physical and Brain Development
  o Play and Stimulation
  o Successes and Next Steps (The GGK Tool)
- Use of Growing Great Families (GGF) units:
  - Strengthening Family Foundations and Motivating Growth
  - Reducing Stress: Tools for Stress Management
  - Discipline and Special Parenting Circumstances
  -Blueprints for Emergent Practice

- Focus on child development across all domains, including over 500 developmentally-appropriate activities that are designed to enhance parent-child relationships and parenting skills for optimizing their child’s development.

**Recommended Parameters**

**Recommended Intensity:** The GGK Curriculum is flexible enough to meet program standards for home visitation intensity levels. GGK parenting intervention content and materials are available to support 1.5 hour weekly visits for up to five years. The curriculum is designed to be used emergently with families and can be contextualized to a program model. GKI recommends use of the curriculum for 1 hour to 1.5 hour weekly visits for at least 12 months as a best practice.

**Recommended Duration:** Curriculum components can be used in any combination for a minimum of 30-45 minutes per home visit.

**Delivery Setting**

The curriculum is typically utilized in a(n):

- Birth family home
- Adoptive family home
- Foster family home
- Kinship family home
- Supervised visitation setting

**Homework**

Homework is focused on parents practicing family life, parenting, and child development support skills learned during visits, such as revisiting child development and attachment focused activities and handouts, Daily Do’s, and practicing problem-solving and stress reduction strategies.

**Languages**

The GGK Curriculum and certification training are available in English and Spanish languages. Parent educational materials are also available in English, Spanish, and French.
Resources Needed to Run the Curriculum

The typical resources for implementing the curriculum are:

- Curriculum manual
- Parent Handbook
- Toy-making supplies (made from recycled household items)
- Variety of family learning aids crafted during certification seminar

Minimum Provider Qualifications

Completion of GGK 4.5 day certification training. The average GGK parenting intervention curriculum reading and comprehension level is grade six through eight.

Education and Training Resources

There is a manual that describes how to implement the GGK curriculum and there is training available for this curriculum.

Training Contact:

Great Kids, Inc.
www.greatkidsinc.org
Phone: (715) 298-9075

Training is obtained:

Training is provided in person. Training can be provided on site or regionally. Advanced-practice training is available online.

Number of days/hours:

4.5 full days for direct service staff and supervisors. An additional 3 day training is available for supervisors.

Implementation Information

Pre-Implementation Materials:

A pre-implementation orientation webinar is available for programs.
Formal Support for Implementation:

There are formal supports available for implementation of the GGK Curriculum, as listed below:

- Post-certification supervisors professional development package
  - Great FIT (Fidelity Implementation Training) (e-learning course)
  - Complimentary consultation teleconferences
- GGK Tier 2 Premium Advanced Certification Program for practitioners and supervisors
- GGK Research-Informed Practice blog index
- Advanced practice e-learning courses
- REMAP: A model for supervising home visitors seminar (3 days)
- Integrated Strategies for Home Visiting seminar offered on site or regionally.
- On-site technical assistance and quality improvement consultation (3 days).
- On-site Growing Great Families advanced practice training (3 days)
- GGK Booster Training, advanced practice/refresher training (2-3 days)
- Professional Boundaries training (2-3 days)
- Advanced Strategies for Working with Teen Parents training (2-3 days)
- Great Kids, Great Start Introductory Modules and e-Learning Course (GGK curriculum materials and pre-certification e-learning aimed at providing home visitors with materials to use with families prior to their GGK certification seminar.
- Evaluation guidance, instruments to assess fidelity curriculum implementation, and outcome measures are available through GKI’s partnership with the evaluation and research firm LeCroy & Milligan Associates.

Fidelity Measures:

There are fidelity measures for the GGK Curriculum as listed below:

LeCroy & Milligan Associates (2015) developed and tested a series of fidelity metrics and target fidelity standards for GKI and the Growing Great Kids™ Curriculum that fall into three broader categories: (1) Certification training/ongoing skill building, (2) Supervision, and (3) Curriculum implementation. Fidelity implementation guidelines are also provided in the Staff Development and Certification Guides for Home Visiting Programs. The Great FIT (Fidelity Implementation Training) e-learning course includes a fidelity checklist.

Implementation Guides or Manuals:

There are implementation guides or manuals for the GGK Curriculum as listed below:

- GGK Prenatal to 36 Months: Staff Development and Certification Guide for Home Visiting Programs
- GGK for Preschoolers: Staff Development and Certification Guide for Home Visiting Programs
Relevant Published, Peer-Reviewed Research


See Exhibit 2 for a summary of information about this research study.

Type of Study: Randomized Controlled Trial

Number of Participants: 245

Population:
- **Age** - Adults: Mean=25.8 years (Control), 26.9 years (HFA+GGK), Children: Birth-3 years (both groups)
- **Race/Ethnicity** - 15.0% (Control) and 7.2% (HFA+GGK) Caucasian; 74.8% (Control) and 74.2% (HFA+GGK) Hispanic/Latino.
- **Gender** — Adults: Females (both groups), Children: Not specified (both groups)
- **Status** — Participants were families at risk for child abuse and neglect.

Location / Institution: Healthy Families Arizona in Pima and Maricopa Counties/Arizona State University, School of Social Work.

Length of post-intervention follow-up: 6-Months

**Summary of the Study**
A recent study published in Research on Social Work Practice (LeCroy & Davis, March 2016) assessed the short-term effectiveness (6 month follow up) of the Healthy Families Arizona (HFAz) program across a range of parent and family outcomes. In a randomized controlled trial, 245 families were randomly assigned to the experimental group (HFAz plus the GGK parenting intervention curriculum) or control group (child development assessments only).

**Measures** used included: Healthy Families Parenting Index (HFPI), Rand Mental Health Index, HFAz Safety Checklist, health outcomes (initiated breast feeding, immunizations, and well-baby visits,) and maternal health outcomes (use of contraception, subsequent pregnancies, job training or employment, and substance abuse treatment). A qualitative part of the study included an analysis of linguistic word count between the intervention and control groups.

**Results** revealed significant findings achieved by the experimental group across four domains including safety and resources, parenting attitudes and behaviors, health and maternal outcomes, and mental health and coping. Also, qualitative differences were found between experimental and control group in their narrative descriptions of parenting. Significant findings (p≤.05) and effect sizes (Cohen’s d) were used to interpret the impact of the intervention.
Parents in the experimental group (HFAz + GGK) who received HFAz services using the GGK curriculum as the primary parenting intervention showed significant improvements in the following areas, compared to the control group:

- Implementation of more safety practices in the home
- Use of more resources to meet their family needs
- Higher rates of breast feeding
- Improved parenting attitudes and practices towards:
  - The quality of the home environment to support the child’s learning and development
  - Use of regular routines with the child
  - Reading more to their child
  - Feeling that their household was less chaotic

Parents in the experimental group (HFAz + GGK) also scored significantly higher on mental health survey measures compared to the control group.

Parents in the experimental group (HFAz + GGK) who received more home visits showed significantly better improvement in several outcome areas:

- Increased social supports;
- Reduced depression;
- Increased role satisfaction;
- Breastfeeding;
- Higher scores on the Mental Health Index.

Results showed significant differences between the experimental (HFAz + GGK) and control group using the linguistic inquiry and word count on the following linguistic dimensions. The experimental group expressed:

- More positive emotions and less negative emotions;
- Less sadness;
- More feeling expressions;
- Enhanced cognitive mechanisms; and
- Greater insight, cause, and certainty.

Limitations: This study is limited due to the small number of participants. The results presented in this study are limited to short-term follow-up period and we do not know if these results will persist at longer follow-up time points. Another consideration in the interpretation of the results is that the control group did not receive services, but they did get ongoing child development assessments, referral information as needed, and had a consistent, caring research assistant who asked them about their child and family life—all actions which diminished the difference between the active treatment and the control condition.
### Exhibit 2. Growing Great Kids™ Prenatal – 5 Years Peer-Reviewed Published Research and Outcomes

<table>
<thead>
<tr>
<th>Intervention Name</th>
<th>Peer Reviewed Publications</th>
<th>Study Design</th>
<th>Characteristics of Measures</th>
<th>Sample Size</th>
<th>Significant Parent and Family Outcomes</th>
</tr>
</thead>
</table>
| Growing Great Kids™ Prenatal – 5 Years (GGK), Parenting, Attachment, Child Development, and Family Strengthening Curriculum | LeCroy & Davis, March 2016 | Randomized Control Trial | Multiple Measures were used: | 245 Families | Parents in the experimental group (HFAz + GGK) showed significant improvements in the following areas compared to the control group:  
- Implementation of more safety practices in the home;  
- Use of more resources to meet their family needs;  
- Higher rates of breastfeeding; and  
- Improved parenting attitudes and practices towards:  
  - The quality of the home environment to support the child’s learning and development;  
  - Use of regular routines with the child; and  
  - Feeling that their household was less chaotic.  

Parents in the experimental group (HFAz + GGK) also scored significantly higher on mental health survey measures compared to the control group.  

Parents in the experimental group (HFAz + GGK) showed significant differences in the following linguistic dimensions compared to the control group, expressing:  
- More positive emotions and less negative emotions;  
- Less sadness;  
- More feeling expressions;  
- Enhanced cognitive mechanisms; and  
- Greater insight, cause, and certainty.  

Parents in the experimental group (HFAz + GGK) who received more home visits showed significantly better improvement in several outcome areas:  
- Increased social supports;  
- Reduced depression;  
- Increased role satisfaction;  
- Breastfeeding; and  
- Mental health survey measures. |
| Growing Great Kids™ Prenatal – 5 Years (GGK), Parenting, Attachment, Child Development, and Family Strengthening Curriculum | LeCroy & Davis, March 2016 | Experimental Group: Healthy Families Arizona using the GGK pre-birth-5 parenting intervention curriculum | Standardized Measures (2) | 245 Families | Parents in the experimental group (HFAz + GGK) showed significant improvements in the following areas compared to the control group:  
- Implementation of more safety practices in the home;  
- Use of more resources to meet their family needs;  
- Higher rates of breastfeeding; and  
- Improved parenting attitudes and practices towards:  
  - The quality of the home environment to support the child’s learning and development;  
  - Use of regular routines with the child; and  
  - Feeling that their household was less chaotic.  

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- Increased social supports;  
- Reduced depression;  
- Increased role satisfaction;  
- Breastfeeding; and  
- Mental health survey measures. |
| Growing Great Kids™ Prenatal – 5 Years (GGK), Parenting, Attachment, Child Development, and Family Strengthening Curriculum | LeCroy & Davis, March 2016 | Control Group: Received child development assessments only | Non-Standardized Measures (1) | 245 Families | Parents in the experimental group (HFAz + GGK) showed significant improvements in the following areas compared to the control group:  
- Implementation of more safety practices in the home;  
- Use of more resources to meet their family needs;  
- Higher rates of breastfeeding; and  
- Improved parenting attitudes and practices towards:  
  - The quality of the home environment to support the child’s learning and development;  
  - Use of regular routines with the child; and  
  - Feeling that their household was less chaotic.  

Parents in the experimental group (HFAz + GGK) also scored significantly higher on mental health survey measures compared to the control group.  

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- More feeling expressions;  
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- Greater insight, cause, and certainty.  

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- Reduced depression;  
- Increased role satisfaction;  
- Breastfeeding; and  
- Mental health survey measures. |

LeCroy & Milligan Associates, Inc.  
Growing Great Kids Curriculum: Summary of Evidence-Based Criteria - May 2016  
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