

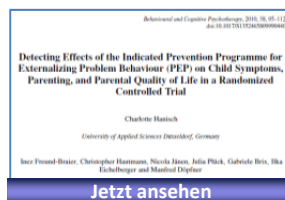
Aktuelle Forschungsergebnisse und Publikationen aus dem Ausbildungsinstitut für Kinder- und Jugendlichenpsychotherapie an der Uniklinik Köln (AKiP) und der Klinik für Psychiatrie, Psychosomatik und Psychotherapie des Kindes- und Jugendalters an der Uniklinik Köln

Thema: *Prävention expansiver Verhaltensprobleme bei Kindern ist möglich*

Zu den Forschungsprojekten

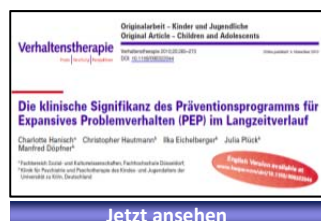


Das Präventionsprogramm für Expansives Problemverhalten (PEP) ist die am besten untersuchte deutschsprachige Intervention zur indizierten Prävention von expansiven Verhaltensauffälligkeiten im Vorschul- und Grundschulalter. Mit Unterstützung der Deutschen Forschungsgemeinschaft wurde die Wirksamkeit von PEP in drei umfassenden Studien über mehr als sechs Jahre untersucht. Das Programm besteht aus einem Elternt raining und einem Erziehertraining für die Bezugspersonen von Kindern mit expansiven Verhaltensauffälligkeiten im Gruppenformat; es ist jedoch auch im Einzelformat einsetzbar.



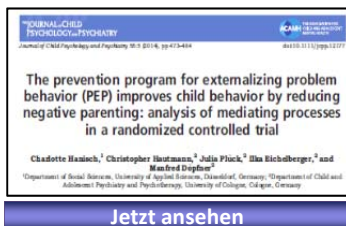
Die randomisierte Kontrollgruppenstudie mit Eltern und Erziehern von expansiv verhaltensauffälligen Vorschulkindern belegt die Wirksamkeit der Prävention. In dieser Hauptanalyse untersuchen Hanisch und Mitarbeiter (2010) die Effekte auf Verhaltensprobleme, Erziehungsverhalten und Lebensqualität. *Behavioural and Cognitive Psychotherapy*, 38, 95-112.

Abstract. Background: Behavioural parent training is effective in improving child disruptive behavioural problems in preschool children by increasing parenting competence. The indicated Prevention Programme for Externalizing Problem behaviour (PEP) is a group training programme for parents and kindergarten teachers of children aged 3–6 years with externalizing behavioural problems. Aims: To evaluate the effects of PEP on child problem behaviour, parenting practices, parent-child interactions, and parental quality of life. Method: Parents and kindergarten teachers of 155 children were randomly assigned to an intervention group ($n = 91$) and a nontreated control group ($n = 64$). They rated children's problem behaviour before and after PEP training; parents also reported on their parenting practices and quality of life. Standardized play situations were video-taped and rated for parent-child interactions, e.g. parental warmth. Results: In the intention to treat analysis, mothers of the intervention group described less disruptive child behaviour and better parenting strategies, and showed more parental warmth during a standardized parent-child interaction. Dosage analyses confirmed these results for parents who attended at least five training sessions. Children were also rated to show less behaviour problems by their kindergarten teachers. Conclusions: Training effects were especially positive for parents who attended at least half of the training sessions.



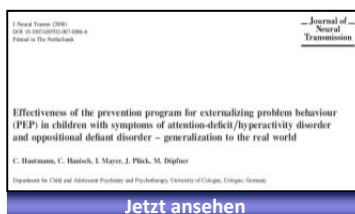
Die Prävention führt zur schnellen und klinisch bedeutsamen Verminderungen von Verhaltensproblemen, die sich im weiteren Verlauf stabilisieren. In dieser Follow-up-Studie belegen Hanisch und Mitarbeiter (2010) die klinische Signifikanz der Präventionseffekte, die sich im Langzeitverlauf allerdings auch in der Kontrollgruppe einstellen. *Verhaltenstherapie* 20, 265–273.

Abstract. Hintergrund: Lerntheoretisch orientierte Elternt rainings gelten als effektive Präventions- und Interventionsmethode zur Reduzierung expansiver Verhaltensauffälligkeiten im Kindesalter. Interventionseffekte werden hierbei meist im statistischen Gruppenvergleich überprüft. Unser Präventionsprogramm für Expansives Problemverhalten (PEP) war sowohl in einer Kontrollgruppenstudie als auch in einer Anwendungsstudie in der Lage, kindliches Problemverhalten zu reduzieren. Die vorliegende Analyse überprüft die langfristige klinische Signifikanz dieser Veränderungen. Material und Methoden: Mithilfe eines Screeninginstruments wurde eine Stichprobe expansiv auffälliger Kindergartenkinder identifiziert. In einer Kontrollgruppe (KG: $n = 34$), einer Erziehertrainingsgruppe (ER: $n = 21$) und einer Eltern- und Erzieher-Trainingsgruppe (EL+ER: $n = 38$) wurde das kindliche Problemverhalten vor und bis 30 Monate nach dem PEP-Training erhoben. Die klinische Relevanz der Trainingseffekte wurde anhand des von Jacobson und Truax vorgeschlagenen Maßes für klinische Signifikanz überprüft. Ergebnisse: In einer Messwiederholungsvarianzanalyse zeigten sich keine gruppenspezifischen Verläufe im Untersuchungszeitraum. Klinisch signifikante Verbesserungen erzielten in der kombinierten EL+ER-Gruppe 34,2% der Kinder, in der ER-Gruppe 28,6% und in der KG je nach Instrument 17,6% bzw. 32,4%. In der EL+ER-Gruppe waren diese Verbesserungen bereits unmittelbar nach Interventionsende vorhanden (36,8% bzw. 39,5%), während sich in der KG von Prä nach Post lediglich 20,6% klinisch signifikant verbesserten. Die ER-Gruppe weist zum Postzeitpunkt 42,9% klinisch relevant gebesserte Kinder auf. Schlussfolgerungen: Das Problemverhalten wird in der kombinierten Interventionsgruppe früher relevant reduziert als in der Kontrollgruppe. PEP scheint somit in der Lage, eine Reduktion von Problemverhalten, die auch in der Kontrollgruppe zu beobachten ist, früher anzustoßen.



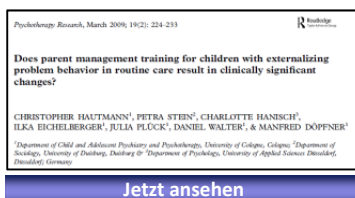
Die Effekte des Präventionsprogramms werden durch die Veränderung des elterlichen Erziehungsverhaltens mediert. Hanisch und Mitarbeiter (2014) belegen mit dieser Mediator-Analyse im *Journal of Child Psychology and Psychiatry* 55, 473-484, dass die Verminderung von negativem und die Steigerung von positivem Erziehungsverhalten Effekte der Intervention auf die Verhaltensänderungen des Kindes erklären.

Abstract. Our indicated Prevention program for preschool children with Externalizing Problem behavior (PEP) demonstrated improved parenting and child problem behavior in a randomized controlled efficacy trial and in a study with an effectiveness design. The aim of the present analysis of data from the randomized controlled trial was to identify the mediating processes that account for these positive treatment effects. We hypothesized that a decrease in negative parenting and increases in positive parenting and parental warmth would mediate the relationship between treatment and child improvement. Method: Parents of 155 children were randomly assigned to the PEP intervention group (n = 91) or a nontreated control group (n = 64). Parents rated their child's problem behavior and their own parenting practices before and after PEP training. Parental warmth was assessed during standardized play situations. Four mediation models were tested using structural equation modeling. Trial registration number ISRCTN12686222; <http://www.controlled-trials.com/isrctn/pf/12686222>. Results: Changes in child externalizing problem behavior were most strongly mediated by reductions of negative parenting in difficult parenting situations. Increases in positive parenting also served as a mediator. Changes in parental warmth, parents' feeling of self-efficacy, and parental mental health did not play a mediating role in the association between PEP treatment and child behavior. Conclusions: In our program, the most important component was to teach parents how to reduce dysfunctional parenting strategies in conflict situations. Keywords: Parenting, conduct problems, randomized trial, mediator.



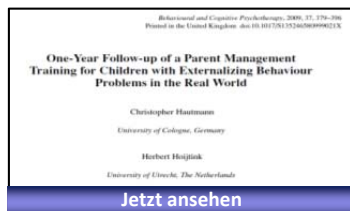
Die Alltagswirksamkeit des Elterntrainings aus PEP lässt sich in einer Stichprobe von bis zu 277 Eltern von Kindern im Alter von 3 bis 10 Jahren bestätigen. Die Studie von Hautmann und Mitarbeitern (2008; *Journal of Neural Transmission* 115, 363-370) belegt die Wirksamkeit des Elterntrainings sowohl bezüglich der Verhaltensprobleme des Kindes als auch des Erziehungsverhaltens der Eltern.

Abstract: The aim of the present study was to test the effectiveness of the Prevention Program for Externalizing Problem Behaviour (PEP). PEP has already been evaluated as an efficacy study, i.e., with high internal validity. The main concern of the current study was to test the effects of PEP under conditions of high external validity. 58 child therapists of 37 local institutions of the public health system held PEP trainings. The intervention was evaluated by a within-subject control group design with three assessment points, two before (pre1 and pre2) and one immediately after (post) the PEP training. Depending on the type of analysis, 198 up to 277 families with children aged 3–10 years were included. Data were collected by questionnaires and comprised symptomatology of the child and the mother as well as parenting. For parenting and child behaviour problems, changes after treatment were greater than changes during the waiting period. PEP produced effect sizes in the small to moderate range. The results suggest that PEP can be delivered under routine care settings without loss of positive treatment effects. As worse results are often obtained in effectiveness trials, these findings have to be regarded as particularly promising.



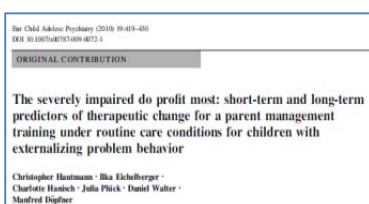
Bei rund 25 bis 60% der Kinder lassen sich die Verhaltensprobleme im Verlauf des Elterntrainings soweit vermindern, dass sie bei Interventionsende keine Auffälligkeiten mehr zeigen: Eine Analyse zur klinischen Signifikanz von Hautmann und Mitarbeitern (2009) in *Psychotherapy Research* 19, 224-233.

Abstract: The clinical significance of a parent management training that is part of the Prevention Program for Externalizing Problem Behavior (PEP) was assessed in an effectiveness trial. Parent management training was offered under routine care conditions in a setting where a high proportion of children were expected to show clinically relevant symptoms of externalizing problem behavior. At the beginning of the study, 32.6% to 60.7% of children were classified as clinical cases (dysfunctional) on three outcome measures of child behavior problems. Three months after treatment, 24.8% to 60.4% of children were judged to be recovered. Parent management training can result in clinically significant changes in children with externalizing behavior problems.



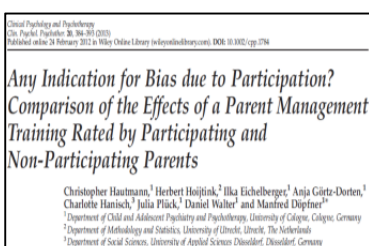
Die Verminderungen des Problemverhaltens im Verlauf des Elterntrainings stabilisieren sich im Einjahres-Follow-up und das Erziehungsverhalten der Eltern verbessert sich in diesem Zeitraum weiter. Eine Analyse zur Langzeitstabilität der Intervention unter Routinebedingungen von *Hautmann* und Mitarbeitern (2009) in *Behavioural and Cognitive Psychotherapy*, 29, 379-396.

Abstract: The long-term effectiveness of parent training for children with externalizing behaviour problems under routine care within the German health care system is unclear. We report the 1-year follow-up results of the parent training component of the Prevention Program for Externalizing Problem Behaviour (PEP) for 270 children aged 3–10 years with externalizing behaviour problems. Method: Outcome measures included child behaviour problems (externalizing behaviour problems, Attention-Deficit/Hyperactivity Disorder symptoms and Oppositional Defiant Disorder symptoms) and parenting (self efficacy of parenting and perceived ability to solve difficult parenting situations). Data were analysed using multilevel modelling. Results: Comparison of the changes during the 3-month waiting and treatment periods revealed significantly stronger treatment effects on all outcome measures, indicating a substantial decrease in child behaviour problems and a significant increase in parenting due to treatment. At 1-year follow-up, initial treatment effects on child behaviour problems were maintained, while parenting continued to improve. Conclusions: Families whose children exhibited externalizing problem behaviour profit from PEP and improvements are maintained for at least one year.



Die am stärksten beeinträchtigten Kinder und Eltern profitieren am meisten vom Elterntaining aus dem Präventionsprogramm PEP. Anhand von Prädiktoranalysen zeigen *Hautmann* und Mitarbeiter (2010) in *European Child and Adolescent Psychiatry*, 19, 419-430, dass sich sowohl kurz- als auch langfristig die externalen Verhaltensprobleme am stärksten bei den Kindern mit den stärksten Auffälligkeiten und das Erziehungsverhalten am stärksten bei den Eltern mit den stärksten Erziehungsproblemen verändern.

Abstract: Short-term and long-term predictors of therapeutic change due to parent management training were investigated. Therapeutic change was defined as the change in outcome measures [externalizing problem behavior and parenting self-efficacy (PSE)] from before treatment to afterward. Three different types of predictors were analyzed: child variables (gender, age, and initial externalizing and internalizing behavior), parent variables (age, initial PSE and parental psychopathology) and socioeconomic status and other sociodemographic characteristics of the family (parental school education, employment, family status, language). The parent management training was part of the Prevention Program for Externalizing Problem Behavior, which was evaluated as an effectiveness trial under routine care conditions using a within-subject control group design. Between 78 and 270 families were included in the analysis, which investigated therapeutic change over two time intervals: (1) immediate change from the pretreatment to the post-treatment assessments, and (2) longterm- change from pre-treatment to 1-year follow-up. Throughout several analyses, the only predictor of therapeutic change that was consistently significant over the two time periods for the externalizing problem behavior of the child was the initial externalizing problem behavior. More impaired children improved more. Similarly, the only predictor of therapeutic change for the two time periods in PSE was the initial level of PSE. Parents with less PSE gained more during the course of the training.



Es gibt keine Hinweise auf eine Verzerrung der Effekte durch eine Anstrengungsrechtfertigung des am Training teilnehmenden Elternteils. Das Problemverhalten des Kindes ändert sich sowohl nach Einschätzung des an dem Training teilnehmenden als auch des nicht teilnehmenden Elternteils. Das Erziehungsverhalten ändert sich jedoch nur bei dem teilnehmenden Elternteil. Eine Analyse von *Hautmann* und Mitarbeitern (2013) in *Clinical Psychology & Psychotherapy* 20, 384-393.

Abstract. Ratings of parents that have participated in a parent training for child externalizing behaviour problems might be biased (e.g., they may report symptom reduction to reward their own endeavours for attending the training). The potential for bias in parent ratings was investigated in a secondary analysis of an effectiveness study of a parent management training for children (aged 3–10 years) with externalizing behaviour problems under routine care conditions. For the 56 families included in the current analysis, we compared the ratings of training participants (predominately mothers) and training non-participants (predominately fathers). A 3-month waiting period prior to treatment served as the control condition. Outcome measures were attention problems and conduct problems of the children and perceived parental self-efficacy rated by both the mothers and fathers. Child attention problems and conduct problems both decreased significantly during the treatment period for participating and non-participating parents, and the changes in ratings during treatment were of a similar magnitude for participants compared with non-participants. Taking into account the methodological limitations of the current analysis, no indication was found that treatment effects are strongly biased due to participation in the training.

Pre-Su
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Effectiveness of a Teacher-Based Indicated Prevention Program for Preschool Children with Externalizing Problem Behavior

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Jetzt ansehen

Auch die Alltagswirksamkeit des Erziehertrainings aus PEP lässt sich in einer Stichprobe von 144 Kindergartenkindern mit expansiven Verhaltensproblemen bestätigen. Die Studie von Plück und Mitarbeitern (2015; *Prevention Science*, 16, 233-241) belegt die Wirksamkeit des Erziehertrainings sowohl bezüglich der expansiven Verhaltensprobleme des Kindes als auch des Erziehungsverhaltens der Erzieherinnen.

Abstract. Externalizing behavior is common in preschool children and shows stability over the lifespan implying that strategies for early intervention and prevention are needed. Improving parenting reduces child behavior problems but it is unproven whether the effects transfer to kindergarten. Strategies implemented directly by teachers in the kindergarten may be a promising approach. The effectiveness of the teacher's module of the Prevention Program for Externalizing Problem Behavior (PEP-TE) was investigated in a study using a within-subject control group design. Each of the 144 teachers enrolled identified one child with externalizing problem behavior (aged 3–6 years) and rated that child's behavior problems [broadband externalizing, attention-deficit/hyperactivity disorder (ADHD), oppositional defiant disorder] as well as their own behavior (attending skills) and burden by the child. Changes in child symptoms and teacher behavior or burden during the 3-month waiting period (control) and 3-month treatment period were compared. Stability of treatment effects at both 3- and 12-months follow-up after treatment was examined. Multilevel modeling analyses showed that, despite a reduction in externalizing behavior and ADHD scores during the waiting period, all child problem behavior scores decreased during the treatment period compared with the waiting period. The teacher's behavior also improved and their burden decreased. These treatment effects were stable during follow-up for the subsample remaining in the kindergarten for up to 1 year. This study shows that a teacher-based intervention alone is associated with improvements in both the externalizing behavior of preschoolers and teacher behavior and burden. Indications of long-term stability of effects were found.