Improving Outcomes for Children Exposed to Violence

Safe Start Promising Approaches

Appendix D. Detroit, Michigan: Intervention, Study, and Results

Dana Schultz, Lisa H. Jaycox, Lynsay Ayer, Claude Messan Setodji, Ammarah Mahmud, Aaron Kofner, Dionne Barnes-Proby

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Appendix D. Detroit, Michigan: Intervention, Study, and Results

Introduction

The Detroit Safe Start program served 17 ZIP Codes in Detroit, Michigan. According to the U.S. Census Bureau's 2014 American Community Survey (U.S. Census Bureau, 2016), these ZIP Codes had a combined population of 491,697 residents, 25.6 percent of whom were younger than age 18 and 7.1 percent of whom were younger than age 5. Approximately 12 percent of the population were white, 76 percent were black, 10 percent were Hispanic, and 2 percent were Native American, Asian, or other. The 2014 median household income was $30,180, compared with the national average of $53,482, and about 33 percent of the population were living at or below the poverty threshold. Of families with children under the age of 18, 46 percent were living at or below the poverty threshold. In 2014, the violent crime rate in the larger city of Detroit was 1,125.6 per 100,000 residents, compared with the national average of 202.6 per 100,000 (City-Data.com).

To address these problems in Detroit and to meet the particular needs of girls, Alternatives for Girls (AFG) conducted a violence prevention project to serve families with children ages 3–16 with a primary focus on the southwest neighborhoods of the city. These children and families are highly vulnerable and experience significant exposure to violence in the home, school, and community. Forms of violence that families in these neighborhoods experience include child abuse, neglect, and maltreatment; youth violence and victimization; school-based violence; domestic and partner abuse; gang and drug violence; and self-inflicted harm. For the Safe Start intervention, AFG used an enhanced version of SFP (Gottfredson et al., 2006; Kumpfer, Alvarado, et al., 2002), a group-based family therapy, to reduce the impact that exposure to violence has on children and families.

The outcome evaluation reported here presents data relevant to the question of whether the Detroit Safe Start program, as implemented within this project, improves outcomes for CEV compared with the case management and health and nutrition groups provided to the comparison group.

Detroit Safe Start

- **Intervention components:** SFP group therapy enhanced with PFA; case management
- **Intervention length:** 16 weeks for SFP (14 weeks) + PFA (two weeks); as needed for case management
- **Intervention setting:** Community-based organization
- **Target population:** Children exposed to child abuse, neglect, and maltreatment; youth violence and victimization; school-based violence; domestic and partner abuse; gang and drug violence; and self-inflicted harm
- **Age range, in years:** 3–16
- **Primary referral source:** AFG

Intervention Summary

Referrals

AFG recruited almost half of its families from its existing client population. AFG also had a strong relationship with local schools, which was another large source of referrals. As shown in Table D.1, the Detroit Safe Start program received most of its referrals from these two sources. Detroit hired a designated outreach coordinator who marketed the Safe Start program to families around the community. It found that many of these families—particularly within the Hispanic community—then referred their friends and neighbors to Safe Start. In addition, Detroit Safe Start conducted a series of focus groups with community members, stakeholders, elected officials, and program participants to solicit feedback on the program and identify potential barriers to participation. Once a referred potential participant contacted the program, AFG staff completed an eligibility screening tool with questions pertaining to violence.

Table D.1. Detroit Safe Start Referral Sources

Referral Source	Number of Referrals	Percentage of Total (*n* = 403)
AFG	192	48
School	128	32
Department of Human Services	14	3
Community-based organization	47	12
Other referral sources	22	5

Intervention Components

Strengthening Families Program

The Detroit Safe Start program consisted of an enhanced version of SFP. SFP is a 14-week prevention program specific to high-risk families of children ages 3–16 (Kumpfer, Alvarado, et al., 2002). The curriculum teaches parenting skills related to child discipline and communication to encourage positive child behaviors. Although children also attend separate workshops that focus on life skills during the first hour of the session, both the parent and child participate in a joint session during the second hour that incorporates skill-building exercises and other activities (SFP, undated). This interactive component during the second hour allows the parents and children to apply the skills they learned prior to this joint session. With the enhancements described below, a full course of intervention lasted 16 weeks. Sessions were often preceded by a meal that included informal family practice time and group leader coaching. These closed groups ran weekly.

Enhancements to the Strengthening Families Program

The enhancements to SFP were as follows:

- PFA workshops to educate youths and their families about strategies to cope with violence and reduce its impact. The focus was on the management of contributing factors, such as physical, mental, and emotional health; conflict resolution; and substance abuse. PFA is an evidence-informed supportive intervention originally purposed for disaster trauma but adapted for use with those exposed to community violence (Brymer et al., 2006). PFA is generally provided to people who have experienced a traumatic event. The Detroit Safe Start program applied the foundational elements of PFA through two workshops. PFA consists of eight core elements: contact and engagement, safety and comfort, stabilization, information gathering, practical assistance, psychoeducation on the impact of violence, enhancement of coping skills, and linkage with collaborative services (National Center for Post-Traumatic Stress Disorder and National Child Traumatic Stress Network, 2005). The Detroit Safe Start program specifically focused on PFA components related to enhancing social support and coping. Through the combination of these components, intervention families received information about strategies for functioning and coping, different responses to violence exposure, and local resources to receive additional guidance and support.
- one-on-one intensive family case management, goal planning, and referrals to respond to the specific needs of each family. This service was also provided to the families in the comparison group.

Design Overview

The design of this study was an RCT, with randomization occurring at the family level and eligible children recruited after families were referred to the program. The intervention group received enhanced SFP for up to 16 weeks and case management throughout the study. Families in the comparison group received case management and seven sessions of health and nutrition groups. For both groups, we assessed child outcomes and contextual information at baseline, six, and 12 months. Chapter Two summarizes and Appendix A fully describes the measures used in this study. The measures were uniform across the national evaluation but prioritized within each site as to the relevance to the intervention under study. Given the nature of the Detroit Safe Start intervention, the outcomes were prioritized as shown in Table D.2. Study enrollment took place between January 2012 and June 2014.

Table D.2. Detroit Prioritized Outcomes

Domain	Source or Measure	Child's Age, in Years	Respondent
Primary outcome measures			
Family functioning	FES Conflict scale	3–16	Caregiver
Secondary outcome measures			
Background and contextual	Attitudinal Barriers to Care	3–16	Caregiver
	ESI total stressors and resource problems	3–16	Caregiver
Behavior and conduct problems	Child behavior problems (BPI Total Scores and BPI Externalizing Subscale)	3–16	Caregiver
	Delinquency	11–16	Child
	Substance use	11–16	Child
	Gangs	11–16	Child
Social and emotional competence	SSIS cooperation and self-control	3–12	Caregiver
		13–16	Child
	SSIS assertion	3–12	Caregiver
	BERS-2 Affective Strength subscale	6–12	Caregiver
		11–16	Child
School behavior and attitudes	BERS-2 School Functioning subscale	6–12	Caregiver
		11–16	Child
	Self-reported grades	13–16	Child
Family functioning	BERS-2 Family Involvement subscale	6–12	Caregiver
		11–16	Child
	APQ positive involvement, negative or ineffective discipline, and deficient monitoring	6–16	Caregiver
	APQ parental involvement, positive parenting, poor monitoring and supervision, inconsistent discipline, and corporal punishment	11–16	Child
	FES Conflict scale	11–16	Child
Violence exposure	JVQ child victimization experiences (total, child maltreatment, child assault, child sexual abuse, and child witnessing violence)	3–11	Caregiver
		10–16	Child
	Caregiver victimization (total, non-DV, and DV)	3–16	Caregiver
Caregiver mental health	PHQ-8 depression scale	3–16	Caregiver
	PC-PTSD	3–16	Caregiver
Tertiary			
Background and contextual	ESI personal problems	3–16	Caregiver
Child PTSD symptoms	TSCYC PTSD scale	3–10	Caregiver
	CPSS total PTSD symptoms	8–16	Child
Social and emotional competence	SSIS assertion	13–16	Child
Child depression	BPI Internalizing subscale	3–16	Caregiver
	RADS	13–16	Child

Analysis Plan and Power Calculations

We conducted descriptive analyses to summarize the sample baseline characteristics: age, gender, race or ethnicity, family income level, child's violence exposure, and the outcome variables. The randomized controlled design makes it unlikely that there were differences between intervention and comparison groups, but we tested for differences in child and caregiver characteristics between intervention and comparison group children using *t*-tests and chi-squared tests to ensure that this was the case. We also examined whether those families who were lost to follow-up differed in any systematic way from those who were retained, using *t*-tests and chi-squared tests.

To assess the effect of the Safe Start intervention, we examined differences between children in the intervention and comparison groups at six and 12 months postbaseline. It is important to consider the power this study has for such an analysis. One way to describe power is by using the effect size difference between the two groups being compared. The effect size is a standardized measure of the strength of association between an intervention and an outcome and is defined as the average difference in an outcome between the intervention and comparison groups divided by the common SE. The effect size measure is commonly classified as small if it is about 0.2, medium if it is about 0.5, and large if it is about 0.8 (Jacob Cohen, 1988).

The enhanced SFP model had not been studied previously, with no prior estimates of its intervention effect. However, SFP (without the PFA and case management enhancements) has demonstrated medium-sized effects on similar outcomes in previous RCTs (e.g., Kumpfer, Alvarado, et al., 2002), so we expected medium effect sizes. Table D.3 shows the enrollment by group, comparing the actual enrollment with the target enrollment needed for power, assuming an 80-percent retention rate. With total enrollment of 403, Detroit enrolled more than the sample size required to detect a medium intervention effect (161 percent). Detroit's overall retention rates at six and 12 months meant that it retained a total of 319 families in the study at six months and 308 at 12 months, which exceeded the number necessary (160 percent and 154 percent, respectively) to have an 80-percent chance of detecting a medium intervention effect. The power analysis indicated that we can expect a 99-percent chance at both six and 12 months to detect a medium effect. Given the sample size, there was sufficient power to detect a small to medium intervention effect of size 0.32 at six and 12 months, according to Cohen's 1988 effect size classification.

Table D.3. Detroit Required Versus Actual Enrollment for a Medium Effect Size

Requirement	Intervention Group	Comparison Group	Total
Enrolled sample needed for power	125	125	250
Total enrollment	201	202	403
Percentage of needed enrollment	161	162	161
Retained sample needed for power	100	100	200
Retained sample, six months	159	160	319
Percentage of needed retention, six months	159	160	160
Retained sample, 12 months	157	151	308
Percentage of needed retention, 12 months	157	151	154

Several factors dampened statistical power. The range of children's ages meant that the full data were not available for some measures because not all children were in the age range eligible to complete that measure. Further, the corrections for the multiple statistical tests being conducted also reduced power.

We examined differences between the intervention and comparison groups using an intent-to-treat approach, which includes in analyses all assigned to the intervention group, regardless of the amount of services received. As discussed in Chapter Two, comparisons between a comparison group and only those who complete services (or receive a predetermined amount of services) are likely to provide biased results given that those who do not engage in services or drop out prior to completion might differ systematically from those who remain. Ideally, analyses would take into account the type and amount of services received to account for dosage variability. We explore this issue of dose of intervention as described below.

To examine differences between the intervention and comparison groups using the intent-to-treat approach described above, we present baseline and follow-up estimates of primary, secondary, and tertiary outcomes for both groups when the sample size is greater than or equal to five. We compare groups via chi-squared or *t*-tests at each time point, compare means within groups across time, and examine difference in differences in comparing the two groups on changes over time between baseline and the six-month and 12-month assessments (when the sample size is at least ten per group). At the six-month follow-up, we conducted multiple linear regressions on the continuous outcomes and linear probability regressions on the dichotomous outcomes to test for the difference in differences via main effects and the interaction between intervention status and time after controlling for baseline characteristics (child age, child gender, child race and ethnicity, and child's exposure to violence). We selected these baseline characteristics to correct for any potential imbalance in the groups by relevant demographic characteristics. We present the adjusted models when the sample size is more than 20 per group. At the 12-month follow-up, we conducted multiple linear regressions on the continuous outcomes and linear probability regressions on the dichotomous outcomes to test for the

difference in differences via main effects and the interaction between intervention status and time after controlling for those same baseline characteristics, as well as six-month violence exposure.

To examine outcomes related to the as-treated sample, those families who took part in the intervention services offered, we examined the outcome means for families who took part in the intervention services offered, broken down into groups that received a low dose of the intervention (zero to three sessions), a medium dose (four to nine sessions), and a high dose (ten or more sessions) at six months and again at 12 months. Because children with more need are likely to receive more services, we would expect this selection scheme to possibly present an unforeseeable bias, with families more in need receiving more services. To account for this selection bias related to service dosage, we used the propensity score matching method to pair families in each dosage group with families with similar needs in the comparison group. The matching paired families based on similar baseline scores on the outcome measure of interest. The analyses then examined the difference in differences between the intervention and comparison groups for each dosage group at follow-up. Note that, in this analysis, the full comparison group is used in the matching of each of the dosage levels. We examine only the primary outcome (family conflict) with this method, in recognition that it is exploratory and preliminary. Further, the power for the dosage analyses is reduced because of the smallness of the samples for the different dosage groups.

When conducting large numbers of simultaneous hypothesis tests, as we did in this study, it is important to account for the possibility that some results will achieve statistical significance simply by chance. The use of a traditional 95-percent confidence interval, for example, will result in one out of 20 comparisons achieving statistical significance as a result of random error. We therefore adjusted for false positives using the FDR method (Benjamini and Hochberg, 1995). We based our assessments of statistical significance on applying the FDR procedure separately to the primary, secondary, and tertiary outcome tests in this report (as reported in Tables D.10 and D.11) using an FDR of 0.05. In the discussion of results, we have also identified significant trends in the data, defined as those tests with *p*-values of less than 0.05 without adjusting for multiple significance tests. Although these results might suggest a practical difference that would be statistically significant with a larger sample, they must be interpreted with caution because we cannot rule out that the difference was due to chance because of the multiple significance tests being conducted.

Study Results

Enrollment and Retention

As noted above, Detroit enrolled a total of 403 families in the study, with 201 in the intervention group and 202 in the comparison group. In Table D.4, we present the number and

percentage of all enrollees who were eligible for participation at each data collection time point. As shown, 79 percent of the caregivers in both groups were retained for the six-month caregiver assessment. Retention for the caregiver assessments at 12 months was 78 percent for the intervention group and 75 percent for the comparison group.

Table D.4. Retention of Enrollees Eligible to Participate in Assessments at Each Time Point

	Caregiver Assessment		Child Assessment	
Enrollees	**Six Months**	**12 Months**	**Six Months**	**12 Months**
Intervention				
Received	159	157	72	73
Expected	201	201	100	100
Retention rate, as a percentage	79	78	72	73
Comparison				
Received	160	151	69	56
Expected	202	202	86	86
Retention rate, as a percentage	79	75	80	65

Baseline Descriptive Statistics

For the descriptive statistics, we provide the characteristics for the full sample enrolled at baseline. As shown in Table D.5, children who participated were, on average, 8.5 years old (range 3–17), with a majority being female (58 percent). The racial and ethnic background of families was 61 percent Hispanic and 36 percent black. Families reported a range of family incomes, with only 11 percent reporting incomes above $30,000. The difference in income between the intervention and comparison group families was statistically significant ($p < 0.05$). Caregivers reported an average exposure to one type of violence for the child in the past six months, while older youths self-reported an average exposure to just over two types of violence in the past six months. Besides the difference in family income, we observed no statistically significant differences between the intervention and comparison groups at baseline.

Table D.5. Detroit Safe Start Baseline Sample Characteristics

Characteristic	Combined		Intervention		Comparison		Test for Comparison *p*-Value
	N	Mean (SD)	*N*	Mean (SD)	*N*	Mean (SD)	
Child							
Age	403	8.5 (3.6)	201	8.8 (3.8)	202	8.2 (3.4)	0.10
CR of violence exposure	314	1.0 (1.6)	149	1.1 (1.7)	165	1.0 (1.5)	0.82
SR of violence exposure	125	2.1 (2.2)	73	2.0 (2.4)	52	2.1 (2.0)	0.79
		Percentage		**Percentage**		**Percentage**	
Child							
Gender							0.29
Male	171	42	80	40	91	45	
Female	232	58	121	60	111	55	
Race and ethnicity							0.44
Hispanic	245	61	123	61	122	60	
White	3	1	1	1	2	1	
Black	144	36	74	37	70	35	
Other	11	3	3	1	8	4	
Caregiver							
Family income level							0.04[a]
Less than $10,000	152	39	87	45	65	33	
$10,001–20,000	140	36	57	29	83	42	
$20,001–30,000	58	15	30	15	28	14	
More than $30,000	42	11	21	11	21	11	
Relationship to child							—
Parent or guardian	403	100	201	100	202	100	
Other relationship	0	0	0	0	0	0	

NOTE: — = Cell is too small to show.
[a] A significant trend in the chi-squared statistic. Because of missing data, some numbers might not sum as shown.

In the sample of families that were retained in the study at six and 12 months, these characteristics were similar to those shown in Table D.5 except that, on average, children had been exposed to fewer than one type of violence since the last assessment by CR and one type of violence by SR (data not shown). Compared with those not retained at six months, children retained at six months were more likely to be Hispanic (65.8 percent versus 41.7 percent) than black (31 percent versus 53.6 percent; $p < 0.0001$) (data not shown). Compared with those not retained at 12 months, children retained at 12 months were also younger ($p = 0.01$), more likely to be Hispanic (68.5 percent versus 35.8 percent) than black (28.3 percent versus 60 percent;

$p < 0.0001$) or white (0.3 percent versus 2.1 percent; $p < 0.01$), and less likely to report family incomes below $10,000 than incomes between $10,000 and $20,000 ($p < 0.01$) (data not shown).

We also examined the Detroit sample at baseline on three mental health variables (PTSD symptoms, child depressive symptoms, and caregiver depressive symptoms) to describe the level of severity on these indexes among families entering the study (Table D.6). At baseline, 14 percent of caregivers reported symptoms of PTSD in the significant range for their children (8 percent for boys and 20 percent for girls), but 50 percent of children ages 8–17 reported high levels of PTSD symptoms (48 percent for boys and 51 percent for girls). Also at baseline, 27 percent of children ages 13–16 self-reported depressive symptoms in the moderate to severe clinical range (19 percent for boys and 32 percent for girls). Eight percent of caregivers reported their own depressive symptoms in the moderately severe or severe range.

Table D.6. Baseline Assessment Estimates for Detroit Families

	Combined		Boys		Girls	
Assessment	***N***	**Percentage**	***N***	**Percentage**	***N***	**Percentage**
CR of child PTSD symptoms (ages 3–10)						
Normal	231	78	112	86	119	73
Borderline	22	7	9	7	13	8
Significant	42	14	10	8	32	20
SR of child PTSD symptoms (ages 8–17)						
Low	93	50	37	52	56	49
High	92	50	34	48	58	51
SR of child depression (ages 13–16)						
Normal range	24	38	9	41	15	37
Mild clinical range	22	35	9	41	13	32
Moderate clinical range	14	22	3	14	11	27
Severe clinical range	3	5	1	5	2	5
Caregiver depression						
None or minimal	233	58	103	60	130	56
Mild	99	25	34	20	65	28
Moderate	39	10	19	11	20	9
Moderately severe	28	7	15	9	13	6
Severe	4	1	0	0	4	2

Finally, we examined differences between the intervention and comparison groups at baseline for Detroit's primary, secondary, and tertiary outcomes (see Table D.14). At baseline, there were no differences between groups for the primary, secondary, or tertiary child outcomes after adjusting for multiple comparisons (aside from three secondary outcomes that did not

withstand the correction for multiple testing), indicating that the randomization resulted in balanced groups.

Table D.14 summarizes cross-sectional differences between the intervention and comparison groups at the six- and 12-month follow-up time points for Detroit's primary, secondary, and tertiary outcomes. Again, the two groups did not differ from each other in terms of child outcomes at six and 12 months. There was one statistical trend in the primary outcome of CR of family conflict at 12 months, but this did not withstand the correction for multiple testing.

Uptake, Dosage, and Process of Care

The program recorded family-level service data on the follow-up service survey and submitted the data at six and 12 months after the baseline assessment. Table D.7 shows the type and amount of services received for all families who were initially enrolled in the intervention group, regardless of whether they continued to participate in the ongoing research assessment. The data displayed in Table D.7 include services received by summing all time points that the program reported, which was 12 months for most participants in Detroit Safe Start.

Table D.7. Services That Detroit Safe Start Intervention Families Received

	With Service		Number of Sessions		
Service	***N***	**Percentage**	**Range**	**Mean**	**Median**
Baseline sample (*n* = 201)					
Group therapy sessions (SFP)	143	71	0–24	6.0	6
Group therapy sessions (PFA)	9	4	0–2	0.1	0
Case management	197	98	0–24	10.8	12
Six-month analysis sample (*n* = 159)					
Group therapy sessions (SFP)	128	81	0–24	6.9	6
Group therapy sessions (PFA)	6	4	0–2	0.1	0
Case management	157	99	0–24	11.2	12
12-month analysis sample (*n* = 157)					
Group therapy sessions (SFP)	125	80	0–24	7.0	6
Group therapy sessions (PFA)	7	4	0–2	0.9	0
Case management	155	99	0–24	11.2	12

Detroit Safe Start families received a mix of group and individualized services (i.e., case management). As shown in the top portion of Table D.7, 71 percent of the 201 enrolled families received SFP group therapy sessions (average of 6.0 sessions), 4 percent received PFA (average of 0.1 sessions), and 98 percent received case management (average of 10.8 contacts). Among only the families who received the services, the averages were 8.4 for SFP group sessions, 1.9 for PFA sessions, and 11.0 for case management contacts. The middle portion of Table D.7

shows the services received during the six months between baseline and the six-month assessment by the subgroup of intervention group families who participated in the six-month follow-up research assessment. These are the 159 families included in the intervention group in the six-month outcome analysis sample for the Detroit program. As shown in Tables D.7 and D.8, 81 percent of these families received SFP group therapy sessions (average of 6.9 sessions), 4 percent received PFA (average of 0.1 sessions), and 99 percent received case management (average of 11.2 contacts). Among only the families who received the services, the averages were 8.6 for SFP group sessions, 2.0 for PFA sessions, and 11.4 for case management contacts. The bottom portion of Table D.7 shows the services received between baseline and the 12-month assessment by the subgroup of intervention group families who participated in the 12-month follow-up research assessment. These are the 157 families included in the intervention group in the 12-month outcome analysis sample for the Detroit program. As shown in Table D.7, 80 percent of these families received SFP group therapy sessions (average of 7.0 sessions), 4 percent received PFA (average of 0.9 sessions), and 99 percent received case management (average of 11.2 contacts). Among only the families who received the services, the averages were 8.8 for SFP group sessions, two for PFA sessions, and 11.4 for case management contacts.

Table D.8. Services That Detroit Safe Start Comparison Families Received

	With Service		Number of Sessions		
Service	***N***	**Percentage**	**Range**	**Mean**	**Median**
Baseline sample (*n* = 202)					
Nutrition workshops	134	66	0–7	3.3	4
Case management	199	99	0–21	10.6	12
Six-month analysis sample (*n* = 160)					
Nutrition workshops	113	71	0–7	3.6	5
Case management	160	100	4–21	11.1	12
12-month analysis sample (*n* = 151)					
Nutrition workshops	108	72	0–7	3.7	5
Case management	151	100	5–21	11.1	12

Similarly, Table D.8 shows the same data for families in the comparison group. Sixty-six percent of the baseline sample received nutrition workshops (average of 3.3 sessions), and 99 percent received case management (average of 10.6 contacts). For the six-month sample (*n* = 160), 71 percent received nutrition workshops (average of 3.6 contacts), and 100 percent received case management (average of 11.1 contacts). Within the 12-month sample, 72 percent received nutrition workshops (average of 3.7 sessions), and 100 percent received case management (average of 11.1 contacts).

On the caregiver survey, we asked caregivers in the intervention group about their satisfaction with Safe Start services (Table D.9). Results show that the caregivers who took part in the enhanced SFP intervention reported high satisfaction on every item (close to very satisfied or the highest relevant rating on each item).

Table D.9. Satisfaction with Services That Detroit Safe Start Intervention Families Received

	Six Months			12 Months		
Satisfaction	***N***	**Mean**	**SD**	***N***	**Mean**	**SD**
Rate quality of service	122	3.70	0.56	145	3.79	0.44
Got the kind of service wanted	122	3.70	0.57	145	3.65	0.65
Program met needs	122	3.16	0.74	146	3.23	0.70
Would recommend to a friend	122	3.88	0.46	146	3.91	0.31
Satisfied with help received	122	3.43	0.85	146	3.51	0.81
Helped deal more effectively with problems	122	3.70	0.50	145	3.74	0.47
Satisfied with service	122	3.67	0.62	146	3.72	0.51
Would come back to program	122	3.89	0.39	146	3.86	0.42

Key Outcome Findings

We begin by analyzing changes in mean scores over time both within the intervention and comparison groups and between the groups. For these analyses, we used an intent-to-treat approach that included all families allocated to the intervention, regardless of the level of service they received. The first set of columns of numbers in Table D.10 describes differences within groups between the baseline and the six-month assessment, with paired *t*-tests comparing each person's score at each follow-up wave with his or her own score at the baseline assessment and adjusting for multiple testing. For both groups, we observed a statistically significant improvement in scores within groups on the primary outcome variable of family conflict by CR, but not by SR, with both groups showing a decrease in family conflict from baseline to six months. For the 44 secondary outcomes, we observed significant improvement in both groups for CR of child victimization experiences after adjusting for multiple comparisons. We observed some differences in secondary outcomes in the intervention but not comparison group after adjusting for multiple comparisons. These include improvements in total stressors, CR of child total behavior problems, CR of child externalizing problems, CR of child self-control, CR of family involvement, and CR of the child witnessing DV. Among Detroit's six tertiary outcomes, we observed significant improvements in the intervention group but not comparison group in CR of personal problems and of child PTSD symptoms. We observed significant improvements in CR of child internalizing problems in both groups.

Table D.10. Changes in Means for Outcome Variables Between Baseline and Six-Month Assessment and Group-Level Comparison of Mean Changes

						Group-Level Comparison of Mean Changes					
		Within-Family Mean Change[a]				Unadjusted Model[b]			Adjusted Model[c]		
Outcome		***N***	**Estimate**	**SE**	***p*-Value**	**Estimate**	**SE**	***p*-Value**	**Estimate**	**SE**	***p*-Value**
Primary											
CR of family conflict (ages 3–16)	Intervention	159	–0.46	0.16	<0.01[d]*	–0.14	0.31	0.65	–0.23	0.30	0.44
	Comparison	160	–0.32	0.14	0.02[d]*						
SR of family conflict (ages 11–16)	Intervention	40	–0.05	0.29	0.86	0.36	0.69	0.61	0.41	0.60	0.49
	Comparison	37	–0.41	0.38	0.30						
Secondary											
CR of attitudinal barriers to care	Intervention	159	–0.40	0.20	0.05[d]	–0.04	0.30	0.90	–0.02	0.31	0.96
	Comparison	160	–0.36	0.13	0.01[d]						
CR of total stressors	Intervention	159	–3.44	0.86	<0.01[d]*	–2.33	1.83	0.20	–2.22	1.77	0.21
	Comparison	160	–1.11	0.76	0.15						
CR of resource problems	Intervention	159	–1.11	0.38	<0.01[d]	–0.88	0.77	0.25	–0.97	0.75	0.20
	Comparison	160	–0.23	0.37	0.53						
CR of child total behavior problems (ages 3–16)	Intervention	159	–1.72	0.43	<0.01[d]*	–0.38	1.15	0.74	–0.33	1.06	0.76
	Comparison	160	–1.34	0.42	<0.01[d]						
CR of child externalizing behavior problems (ages 3–16)	Intervention	159	–1.02	0.28	<0.01[d]*	–0.27	0.79	0.73	–0.25	0.73	0.73
	Comparison	160	–0.75	0.29	0.01[d]						
SR of child delinquency (ages 11–16)	Intervention	40	–0.10	0.06	0.10	–0.02	0.16	0.90	–0.02	0.13	0.88
	Comparison	37	–0.08	0.08	0.32						
SR of child drug use (ages 11–16)	Intervention	40	0.00	0.05	1.00	–0.05	0.11	0.62	–0.03	0.10	0.78
	Comparison	37	0.05	0.07	0.42						
SR of child gang involvement (ages 11–16)	Intervention	40	–0.05	0.03	0.16	0.00	0.09	0.96	0.00	0.08	0.96
	Comparison	37	–0.05	0.04	0.16						

Outcome		Within-Family Mean Change[a]				Group-Level Comparison of Mean Changes					
						Unadjusted Model[b]			Adjusted Model[c]		
		N	Estimate	SE	*p*-Value	Estimate	SE	*p*-Value	Estimate	SE	*p*-Value
CR of child cooperation (ages 3–12)	Intervention	129	0.91	0.30	<0.01[d]	0.50	0.67	0.46	0.48	0.66	0.46
	Comparison	138	0.41	0.28	0.14						
SR of child cooperation (ages 13–16)	Intervention	28	0.11	0.89	0.91	–0.65	1.82	0.72	–0.47	1.56	0.77
	Comparison	21	0.76	1.10	0.50						
CR of child self-control (ages 3–12)	Intervention	129	1.57	0.41	<0.01[d]*	1.06	0.81	0.19	0.95	0.82	0.25
	Comparison	139	0.51	0.34	0.14						
SR of child self-control (ages 13–16)	Intervention	29	–0.93	0.77	0.24	–2.31	1.78	0.20	–2.24	1.62	0.17
	Comparison	21	1.38	0.99	0.18						
CR of child assertion (ages 3–12)	Intervention	129	0.42	0.33	0.21	0.13	0.65	0.84	0.15	0.65	0.81
	Comparison	138	0.29	0.31	0.36						
CR of child affective strengths (ages 6–12)	Intervention	82	1.02	0.41	0.01[d]	0.45	0.67	0.51	0.66	0.67	0.32
	Comparison	102	0.58	0.31	0.06						
SR of child affective strengths (ages 11–16)	Intervention	40	–0.20	0.54	0.71	–0.50	1.21	0.68	–0.10	1.11	0.93
	Comparison	37	0.30	0.71	0.68						
CR of child school functioning (ages 6–12)	Intervention	81	0.89	0.50	0.08	1.07	1.06	0.31	1.10	1.01	0.27
	Comparison	100	–0.18	0.34	0.60						
SR of child school functioning (ages 11–16)	Intervention	38	–0.03	0.61	0.97	–0.40	1.33	0.76	–0.50	1.16	0.67
	Comparison	37	0.38	0.67	0.57						
SR of child grades (ages 13–16)	Intervention	29	0.03	0.30	0.91	0.42	0.54	0.45	0.49	0.52	0.35
	Comparison	21	–0.38	0.28	0.19						
CR of family involvement (ages 6–12)	Intervention	82	1.46	0.42	<0.01[d]*	0.74	0.86	0.39	0.82	0.85	0.34
	Comparison	102	0.73	0.37	0.05						
SR of family involvement (ages 11–16)	Intervention	40	0.95	0.77	0.23	0.79	1.80	0.66	0.96	1.54	0.54
	Comparison	37	0.16	0.64	0.80						

Outcome		Within-Family Mean Change[a]				Group-Level Comparison of Mean Changes					
						Unadjusted Model[b]			Adjusted Model[c]		
		N	Estimate	SE	*p*-Value	Estimate	SE	*p*-Value	Estimate	SE	*p*-Value
CR of positive involvement (ages 6–16)	Intervention	111	1.81	0.61	<0.01[d]	2.87	1.60	0.07	3.16	1.54	0.04[d]
	Comparison	120	–1.06	0.70	0.13						
CR of negative or ineffective discipline (ages 6–16)	Intervention	112	–0.92	0.59	0.12	–0.30	1.05	0.78	–0.28	1.02	0.78
	Comparison	122	–0.62	0.45	0.16						
CR of deficient monitoring (ages 6–16)	Intervention	112	–0.10	0.34	0.77	0.18	0.72	0.80	0.20	0.68	0.77
	Comparison	122	–0.28	0.25	0.27						
SR of mother involvement (ages 11–16)	Intervention	70	0.87	0.90	0.34	–0.95	1.92	0.62	–0.81	1.83	0.66
	Comparison	69	1.83	0.84	0.03[d]						
SR of father involvement (ages 11–16)	Intervention	69	0.28	1.19	0.82	–1.26	2.58	0.63	–1.31	2.56	0.61
	Comparison	67	1.54	1.10	0.17						
SR of positive parenting (ages 11–16)	Intervention	72	0.64	0.72	0.38	–0.45	1.26	0.72	–0.71	1.19	0.55
	Comparison	69	1.09	0.65	0.10						
SR of poor monitoring and supervision (ages 11–16)	Intervention	72	0.43	0.73	0.56	0.81	1.52	0.60	0.98	1.33	0.46
	Comparison	69	–0.38	0.72	0.60						
SR of inconsistent discipline (ages 11–16)	Intervention	72	0.00	0.47	1.00	–0.03	1.02	0.98	–0.12	0.97	0.90
	Comparison	69	0.03	0.65	0.96						
SR of corporal punishment (ages 11–16)	Intervention	72	–0.17	0.28	0.56	0.60	0.54	0.27	0.60	0.53	0.27
	Comparison	69	–0.77	0.28	0.01[d]						
CR of total child victimization experiences (ages 3–11)	Intervention	123	–0.51	0.14	<0.01[d]*	–0.04	0.24	0.87	0.00	0.23	0.99
	Comparison	133	–0.47	0.12	<0.01[d]*						
CR of child maltreatment (ages 3–11)	Intervention	123	–0.14	0.05	<0.01[d]	–0.08	0.07	0.24	–0.08	0.07	0.22
	Comparison	133	–0.06	0.03	0.07						
CR of child assault (ages 3–11)	Intervention	123	–0.08	0.05	0.11	0.02	0.07	0.82	0.03	0.07	0.73
	Comparison	133	–0.10	0.04	0.02[d]						

Outcome		Within-Family Mean Change[a]				Group-Level Comparison of Mean Changes: Unadjusted Model[b]			Group-Level Comparison of Mean Changes: Adjusted Model[c]		
		N	Estimate	SE	*p*-Value	Estimate	SE	*p*-Value	Estimate	SE	*p*-Value
CR of child sexual abuse (ages 3–11)	Intervention	123	–0.02	0.02	0.18	–0.01	0.02	0.69	–0.01	0.02	0.68
	Comparison	133	–0.02	0.02	0.32						
CR of child witnessing violence (ages 3–11)	Intervention	123	–0.28	0.09	<0.01[d]*	–0.05	0.14	0.71	–0.03	0.14	0.81
	Comparison	133	–0.23	0.08	<0.01[d]						
SR of total child victimization experiences (ages 10–14)	Intervention	51	–0.51	0.25	0.05	0.05	0.59	0.94	0.04	0.59	0.95
	Comparison	45	–0.56	0.26	0.04[d]						
SR of child maltreatment (ages 10–14)	Intervention	51	–0.12	0.08	0.16	0.02	0.19	0.93	0.01	0.19	0.94
	Comparison	45	–0.13	0.10	0.20						
SR of child assault (ages 10–14)	Intervention	51	–0.20	0.09	0.04[d]	–0.13	0.22	0.56	–0.13	0.22	0.55
	Comparison	45	–0.07	0.10	0.52						
SR of child sexual abuse (ages 10–14)	Intervention	51	–0.08	0.04	0.04[d]	–0.06	0.04	0.20	–0.06	0.05	0.20
	Comparison	45	–0.02	0.02	0.32						
SR of child witnessing violence (ages 10–14)	Intervention	51	–0.22	0.16	0.19	0.05	0.33	0.88	0.05	0.32	0.88
	Comparison	45	–0.27	0.19	0.16						
CR of caregiver total number of traumatic experiences	Intervention	159	–0.18	0.08	0.03[d]	0.03	0.14	0.82	–0.01	0.13	0.93
	Comparison	160	–0.21	0.08	0.01[d]						
CR of caregiver experience of any non-DV trauma	Intervention	159	–0.03	0.03	0.32	0.01	0.04	0.88	0.00	0.04	0.99
	Comparison	160	–0.03	0.03	0.23						
CR of caregiver experience of any DV	Intervention	159	–0.05	0.02	0.05[d]	0.01	0.04	0.88	0.00	0.04	0.97
	Comparison	160	–0.06	0.02	0.01[d]						
CR of caregiver depression	Intervention	159	–1.14	0.36	<0.01[d]	–0.33	0.73	0.65	–0.74	0.71	0.30
	Comparison	160	–0.81	0.36	0.02[d]						
CR of caregiver PTSD	Intervention	159	–0.25	0.11	0.03[d]	0.01	0.21	0.96	0.00	0.20	1.00
	Comparison	160	–0.26	0.11	0.03[d]						

		Within-Family Mean Change[a]				Group-Level Comparison of Mean Changes					
						Unadjusted Model[b]			Adjusted Model[c]		
Outcome		***N***	**Estimate**	**SE**	***p*-Value**	**Estimate**	**SE**	***p*-Value**	**Estimate**	**SE**	***p*-Value**
Tertiary											
CR of personal problems	Intervention	159	–2.33	0.58	<0.01[d]*	–1.45	1.22	0.24	–1.25	1.19	0.30
	Comparison	160	–0.88	0.54	0.10						
CR of child PTSD symptoms (ages 3–10)	Intervention	115	–2.78	0.78	<0.01[d]*	–1.23	1.61	0.45	–1.15	1.52	0.45
	Comparison	122	–1.56	0.67	0.02[d]						
SR of child PTSD symptoms (ages 8–16)	Intervention	72	–1.54	0.90	0.09	0.30	2.16	0.89	0.54	2.02	0.79
	Comparison	69	–1.84	1.05	0.08						
SR of child assertion (ages 13–16)	Intervention	29	–0.31	0.82	0.71	–0.60	1.95	0.76	–0.46	1.85	0.80
	Comparison	21	0.29	1.06	0.79						
CR of child internalizing problems (ages 3–16)	Intervention	159	–0.70	0.19	<0.01[d]*	–0.11	0.44	0.80	–0.08	0.42	0.85
	Comparison	160	–0.59	0.19	<0.01[d]*						
SR of child depressive symptoms (ages 13–16)	Intervention	29	0.00	1.06	1.00	1.43	2.72	0.60	1.36	2.46	0.58
	Comparison	21	–1.43	1.47	0.34						

NOTE: * = the significant difference over time remains after adjustment for multiple comparisons. Mean change estimates are not shown when the group size is fewer than ten, and comparisons are not shown when the group size is fewer than ten for either group. Adjusted model results are not shown when the group size is fewer than 20 for either group.

[a] Within-family mean changes between the baseline and six-month scores for each group separately.

[b] Group-level comparison of within-family mean changes from baseline to six months.

[c] Estimate of the difference between the two groups' within-family mean changes from baseline to six months, controlling for child age, gender, race and ethnicity, and violence exposure (baseline exposure plus exposure between baseline and six months).

[d] A significant paired *t*-test of differences over time ($p < 0.05$). In cells containing *0.05*, we have rounded the value to 0.05, but it is still less than 0.05.

Table D.10 also shows intervention effects over time using an intent-to-treat approach in which all families in the intervention are compared with all those in the comparison group, regardless of the actual amount of intervention received in the intervention group. Because any change in outcomes observed can potentially be the result of a time trend observed in all children in the study, we used a difference-in-differences method to assess the unadjusted impact of the program. For Detroit's primary outcome of family conflict, the difference-in-differences models presented in the second set of data columns revealed no significant differences between the intervention and comparison groups, nor did the adjusted models (third column of numbers in Table D.10). There were also no significant differences in the unadjusted or adjusted models for Detroit's secondary or tertiary outcomes. The results in Table D.10 can also be discussed in terms of effect size for Detroit's primary outcome. Within-group change in the family conflict scale was small for the SFP intervention (–0.23 [–0.45 – –0.01]). However, the adjusted between-group effect size was close to 0 (–0.05 [–0.18 – 0.08]), indicating again that the two groups did not differ much in terms of their improvement.

Table D.11 presents changes in outcomes from baseline to 12 months for each group, as well as group comparisons in the 12-month outcomes. As can be seen in the first set of columns, improvements in family conflict (Detroit's primary outcome) were significant for both groups by CR and for the comparison group by SR. These differences remained after correcting for multiple comparisons. The difference-in-differences models (unadjusted and adjusted) showed no evidence of intervention effects on CR of family conflict and an effect favoring the comparison group for SR.

Table D.11. Changes in Means for Outcome Variables Between Baseline and 12-Month Assessment and Group-Level Comparison of Mean Changes

						Group-Level Comparison of Mean Changes					
		Within-Family Mean Change[a]				Unadjusted Model[b]			Adjusted Model[c]		
Outcome		***N***	**Estimate**	**SE**	***p*-Value**	**Estimate**	**SE**	***p*-Value**	**Estimate**	**SE**	***p*-Value**
Primary											
CR of family conflict (ages 11–16)	Intervention	157	–0.62	0.16	<0.01[d]*	–0.10	0.31	0.75	–0.14	0.29	0.64
	Comparison	151	–0.52	0.16	<0.01[d]*						
SR of family conflict (ages 3–16)	Intervention	43	0.28	0.29	0.34	1.42	0.67	0.04[d]	1.49	0.60	0.01[d]*
	Comparison	29	–1.14	0.44	0.02[d]*						
Secondary											
CR of attitudinal barriers to care	Intervention	157	–0.70	0.19	<0.01[d]*	–0.36	0.29	0.23	–0.32	0.30	0.28
	Comparison	151	–0.34	0.16	0.03[d]						
CR of total stressors	Intervention	157	–2.78	0.96	<0.01[d]	–0.03	1.91	0.99	–0.01	1.88	1.00
	Comparison	151	–2.76	0.89	<0.01[d]						
CR of resource problems	Intervention	157	–0.94	0.41	0.02[d]	0.02	0.80	0.98	–0.11	0.79	0.88
	Comparison	151	–0.97	0.38	0.01[d]						
CR of child total behavior problems (ages 3–16)	Intervention	157	–2.03	0.48	<0.01[d]*	0.50	1.18	0.67	0.74	1.09	0.49
	Comparison	151	–2.52	0.38	<0.01[d]*						
CR of child externalizing behavior problems (ages 3–16)	Intervention	157	–1.39	0.31	<0.01[d]*	0.24	0.79	0.76	0.41	0.74	0.58
	Comparison	151	–1.64	0.25	<0.01[d]*						
SR of child delinquency (ages 11–16)	Intervention	43	–0.16	0.07	0.02[d]	–0.02	0.16	0.88	–0.06	0.13	0.66
	Comparison	29	–0.14	0.10	0.16						
SR of child drug use (ages 11–16)	Intervention	43	0.05	0.07	0.49	0.08	0.10	0.40	0.06	0.09	0.49
	Comparison	29	–0.03	0.03	0.33						
SR of child gang involvement (ages 11–16)	Intervention	41	–0.02	0.06	0.66	0.04	0.10	0.65	0.04	0.09	0.61
	Comparison	29	–0.07	0.05	0.16						

Outcome		Within-Family Mean Change[a]				Group-Level Comparison of Mean Changes					
						Unadjusted Model[b]			Adjusted Model[c]		
		N	Estimate	SE	*p*-Value	Estimate	SE	*p*-Value	Estimate	SE	*p*-Value
CR of child cooperation (ages 3–12)	Intervention	118	0.81	0.34	0.02[d]	–0.10	0.68	0.88	–0.14	0.66	0.83
	Comparison	128	0.91	0.30	<0.01[d]						
SR of child cooperation (ages 13–16)	Intervention	24	2.25	1.05	0.04	1.05	1.90	0.58	—	—	—
	Comparison	15	1.20	1.10	0.29						
CR of child self-control (ages 3–12)	Intervention	118	2.11	0.44	<0.01[d]*	0.81	0.83	0.33	0.75	0.84	0.37
	Comparison	128	1.30	0.35	<0.01[d]*						
SR of child self-control (ages 13–16)	Intervention	27	1.67	0.86	0.06	0.96	1.94	0.62	—	—	—
	Comparison	17	0.71	1.11	0.53						
CR of child assertion (ages 3–12)	Intervention	118	1.04	0.32	<0.01[d]*	0.36	0.63	0.57	0.40	0.64	0.53
	Comparison	128	0.68	0.31	0.03[d]						
CR of child affective strengths (ages 6–12)	Intervention	72	0.88	0.42	0.04	0.58	0.69	0.40	0.71	0.69	0.31
	Comparison	89	0.29	0.35	0.40						
SR of child affective strengths (ages 11–16)	Intervention	43	–0.65	0.70	0.36	–1.06	1.29	0.41	–0.97	1.19	0.41
	Comparison	29	0.41	0.80	0.61						
CR of child school functioning (ages 6–12)	Intervention	72	1.01	0.58	0.08	0.54	1.06	0.61	0.45	0.99	0.65
	Comparison	84	0.48	0.46	0.30						
SR of child school functioning (ages 11–16)	Intervention	39	–0.05	0.70	0.94	–1.09	1.38	0.43	–0.98	1.29	0.45
	Comparison	27	1.04	0.73	0.17						
SR of child grades (ages 13–16)	Intervention	27	0.52	0.32	0.12	0.81	0.62	0.19	—	—	—
	Comparison	17	–0.29	0.28	0.31						
CR of family involvement (ages 6–12)	Intervention	72	1.04	0.58	0.08	–0.21	0.88	0.82	–0.11	0.86	0.89
	Comparison	89	1.25	0.38	<0.01[d]						
SR of family involvement (ages 11–16)	Intervention	43	0.91	0.82	0.28	–0.54	1.83	0.77	–0.47	1.56	0.76
	Comparison	29	1.45	0.79	0.08						

Outcome		Within-Family Mean Change[a]				Group-Level Comparison of Mean Changes					
						Unadjusted Model[b]			Adjusted Model[c]		
		N	Estimate	SE	*p*-Value	Estimate	SE	*p*-Value	Estimate	SE	*p*-Value
CR of positive involvement (ages 6–16)	Intervention	111	1.34	0.68	0.05	1.85	1.56	0.24	2.15	1.53	0.16
	Comparison	104	–0.51	0.71	0.48						
CR of negative or ineffective discipline (ages 6–16)	Intervention	111	–1.23	0.50	<0.01[d]	0.67	1.03	0.52	0.78	0.97	0.42
	Comparison	110	–1.89	0.54	<0.01[d]*						
CR of deficient monitoring (ages 6–16)	Intervention	111	–0.27	0.35	0.45	0.24	0.71	0.74	0.22	0.64	0.73
	Comparison	110	–0.51	0.22	0.02[d]						
SR of mother involvement (ages 11–16)	Intervention	68	0.81	0.99	0.42	–1.38	2.07	0.51	–1.28	2.05	0.53
	Comparison	53	2.19	1.16	0.07						
SR of father involvement (ages 11–16)	Intervention	72	1.35	1.22	0.27	0.05	2.60	0.98	0.20	2.57	0.94
	Comparison	54	1.30	1.41	0.36						
SR of positive parenting (ages 11–16)	Intervention	73	–0.42	0.66	0.52	–1.73	1.33	0.20	–1.75	1.27	0.17
	Comparison	56	1.30	0.77	0.10						
SR of poor monitoring and supervision (ages 11–16)	Intervention	73	–0.85	0.69	0.22	0.83	1.37	0.55	0.79	1.25	0.53
	Comparison	56	–1.68	0.70	0.02[d]						
SR of inconsistent discipline (ages 11–16)	Intervention	73	0.19	0.52	0.72	0.39	1.03	0.71	0.44	1.03	0.67
	Comparison	56	–0.20	0.68	0.77						
SR of corporal punishment (ages 11–16)	Intervention	73	–0.88	0.29	<0.01[d]	0.16	0.55	0.77	0.15	0.54	0.79
	Comparison	56	–1.04	0.34	<0.01[d]						
CR of total child victimization experiences (ages 3–11)	Intervention	110	–0.53	0.15	<0.01[d]*	0.18	0.23	0.43	0.21	0.23	0.36
	Comparison	121	–0.71	0.14	<0.01[d]*						
CR of child maltreatment (ages 3–11)	Intervention	110	–0.12	0.05	0.02[d]	–0.02	0.07	0.77	–0.02	0.07	0.74
	Comparison	121	–0.10	0.04	0.01[d]						
CR of child assault (ages 3–11)	Intervention	110	–0.13	0.05	0.01[d]	0.05	0.07	0.52	0.05	0.07	0.45
	Comparison	121	–0.17	0.04	<0.01[d]*						

Outcome		Within-Family Mean Change[a]				Group-Level Comparison of Mean Changes					
						Unadjusted Model[b]			Adjusted Model[c]		
		N	Estimate	SE	*p*-Value	Estimate	SE	*p*-Value	Estimate	SE	*p*-Value
CR of child sexual abuse (ages 3–11)	Intervention	110	0.00	0.00	—	0.02	0.01	0.16	0.02	0.01	0.15
	Comparison	121	–0.02	0.01	0.16						
CR of child witnessing violence (ages 3–11)	Intervention	110	–0.30	0.08	<0.01[d]*	0.04	0.13	0.76	0.04	0.13	0.74
	Comparison	121	–0.34	0.08	<0.01[d]*						
SR of total child victimization experiences (ages 10–14)	Intervention	52	–1.00	0.22	<0.01[d]*	0.06	0.55	0.92	0.00	0.55	1.00
	Comparison	35	–1.06	0.36	0.01[d]						
SR of child maltreatment (ages 10–14)	Intervention	52	–0.27	0.09	<0.01[d]	0.13	0.18	0.47	0.13	0.19	0.50
	Comparison	35	–0.40	0.12	<0.01[d]						
SR of child assault (ages 10–14)	Intervention	52	–0.38	0.08	<0.01[d]*	0.07	0.21	0.73	0.06	0.21	0.76
	Comparison	35	–0.46	0.16	0.01[d]						
SR of child sexual abuse (ages 10–14)	Intervention	52	–0.02	0.03	0.57	–0.02	0.03	0.56	–0.02	0.03	0.57
	Comparison	35	0.00	0.00	—						
SR of child witnessing violence (ages 10–14)	Intervention	52	–0.44	0.13	<0.01[d]*	–0.21	0.33	0.52	–0.26	0.31	0.41
	Comparison	35	–0.23	0.24	0.35						
CR of caregiver total number of traumatic experiences	Intervention	157	–0.29	0.08	<0.01[d]*	–0.07	0.12	0.55	–0.09	0.11	0.41
	Comparison	151	–0.22	0.07	<0.01[d]						
CR of caregiver experience of any non-DV trauma	Intervention	157	–0.04	0.03	0.13	0.00	0.04	0.97	0.00	0.04	1.00
	Comparison	151	–0.04	0.02	0.08						
CR of caregiver experience of any DV	Intervention	157	–0.08	0.03	<0.01[d]*	–0.02	0.04	0.65	–0.01	0.04	0.70
	Comparison	151	–0.07	0.02	<0.01[d]						
CR of caregiver depression	Intervention	157	–1.25	0.38	<0.01[d]*	–0.20	0.78	0.80	–0.40	0.75	0.59
	Comparison	151	–1.05	0.41	0.01[d]						
CR of caregiver PTSD	Intervention	157	–0.55	0.12	<0.01[d]*	–0.17	0.20	0.40	–0.14	0.20	0.47
	Comparison	151	–0.38	0.13	0.01[d]						

Outcome		Within-Family Mean Change[a]				Group-Level Comparison of Mean Changes					
						Unadjusted Model[b]			Adjusted Model[c]		
		N	Estimate	SE	*p*-Value	Estimate	SE	*p*-Value	Estimate	SE	*p*-Value
Tertiary											
CR of personal problems	Intervention	157	–1.84	0.65	0.01[d]*	–0.05	1.27	0.97	0.11	1.25	0.93
	Comparison	151	–1.79	0.63	0.01[d]*						
CR of child PTSD symptoms (ages 3–10)	Intervention	103	–3.97	0.84	<0.01[d]*	–0.87	1.59	0.58	–0.78	1.48	0.60
	Comparison	114	–3.10	0.71	<0.01[d]*						
SR of child PTSD symptoms (ages 8–16)	Intervention	73	–5.19	1.06	<0.01[d]*	–2.28	2.32	0.33	–2.19	2.21	0.32
	Comparison	56	–2.91	1.35	0.04[d]						
SR of child assertion (ages 13–16)	Intervention	27	0.30	0.80	0.71	0.41	1.94	0.83	—	—	—
	Comparison	17	–0.12	0.96	0.90						
CR of child internalizing problems (ages 3–16)	Intervention	157	–0.63	0.20	<0.01[d]*	0.26	0.45	0.57	0.33	0.43	0.44
	Comparison	151	–0.89	0.19	<0.01[d]*						
SR of child depressive symptoms (ages 13–16)	Intervention	27	–1.07	1.23	0.39	1.57	3.00	0.60	—	—	—
	Comparison	17	–2.65	1.41	0.08						

NOTE: * = the significant difference over time remains after adjustment for multiple comparisons. — = Cell is too small to show. Mean change estimates are not shown when the group size is fewer than ten, and comparisons are not shown when the group size is fewer than ten for either group. Adjusted model results are not shown when the group size is fewer than 20 for either group.

[a] Within-family mean changes between the baseline and 12-month scores for each group separately.

[b] Group-level comparison of within-family mean changes from baseline to 12 months.

[c] Estimate of the difference between the two groups' within-family mean change from baseline to 12 months, controlling for child age, gender, race and ethnicity, and violence exposure (baseline exposure plus the average of exposure at 6 and 12 months).

[d] A significant paired *t*-test of differences over time ($p < 0.05$).

Table D.11 also shows many significant within-group changes in secondary and tertiary outcomes for both the intervention and comparison groups, suggesting that both groups improved from baseline to 12 months. These included CR of child total behavior problems and child externalizing problems, CR of child self-control, CR of total child victimization experiences, CR of child witnessing violence, CR of personal problems, CR of child PTSD symptoms, and CR of child internalizing problems. We observed significant improvements in the intervention but not comparison group in attitudinal barriers to care, CR of child assertion, SR of total victimization experiences, SR of assault, SR of witnessing violence, CR of total number of traumatic experiences, CR of experiencing DV, caregiver self-reported depression, caregiver self-reported PTSD, and child self-reported PTSD. We observed significant improvements in the comparison but not intervention group in CR of negative or ineffective discipline and CR of child assault. The difference-in-differences models (unadjusted and adjusted) showed no evidence of intervention effects on any of the secondary or tertiary outcomes at 12 months.

Safe Start Service Dosage and Changes in Primary Outcomes

To examine any intervention effects that Safe Start service dosage has on outcomes, we divided the intervention families into three dosage groups because families tend to receive different amounts of services. Divided into three levels, the variable defines a low dosage as zero to three SFP sessions, a medium dosage as four to nine SFP sessions, and a high dosage as ten or more SFP sessions.

Because children and families with more need are likely to receive more services, we would expect a selection bias, with higher-need families receiving more services. To account for this selection bias, we used the propensity score matching method to pair families in each dosage group with families with similar needs in the comparison group. The matching paired families based on baseline scores on the outcome measure of interest. The analyses examined the difference in mean score changes between the intervention and comparison groups for each dosage group, after controlling for the number of case management contacts. Note that, in this analysis, the full comparison group is used in the matching of each of the dosage levels.

At six months, the propensity score matching analyses for the primary outcome of CR of family conflict (we did not test dosage with the outcome of SR of family conflict because the sample was too small) comparing the two groups on changes in mean family conflict score between baseline and six months revealed no statistically significant difference between the intervention and comparison groups in any of the dosage categories (see Table D.12).

Table D.12. Changes in Means by Dosage Group for Primary Outcome Variable, Caregiver Report of Family Conflict, Between Baseline and Six-Month Assessment

			Baseline		Six Months		
Dosage	Group	*N*	Mean	SD	Mean	SD	Difference in Differences
Low	Intervention	63	2.85	1.95	2.48	2.30	0.04
	Comparison	63	2.89	1.84	2.48	1.85	
Medium	Intervention	48	2.44	2.25	1.95	1.88	0.08
	Comparison	48	2.82	2.14	2.25	1.87	
High	Intervention	23	2.96	1.80	2.17	2.15	0.04
	Comparison	23	2.87	1.63	2.04	1.61	

NOTE: We do not show data for outcomes for which the cell size is less than five for the group. We did not test comparisons for group sizes less than ten for either group.

At 12 months, the propensity score matching analyses for the primary outcome of CR of family conflict (we did not test dosage with the outcome of SR of family conflict because the sample was too small) revealed no statistically significant difference between the intervention and comparison groups in any of the dosage categories (see Table D.13).

Table D.13. Changes in Means by Dosage Group for Primary Outcome Variable, Caregiver Report of Family Conflict, Between Baseline and 12-Month Assessment

			Baseline		12 Months		
Dosage	Group	*N*	Mean	SD	Mean	SD	Difference in Differences
Low	Intervention	37	2.56	1.95	2.35	1.83	0.49
	Comparison	37	2.46	1.79	1.76	1.69	
Medium	Intervention	44	2.55	1.98	1.93	1.97	–0.25
	Comparison	44	3.07	1.72	2.70	2.05	
High	Intervention	34	3.00	1.81	1.88	1.59	–0.26
	Comparison	34	2.82	1.80	1.97	1.85	

NOTE: We do not show data for outcomes for which the cell size is less than five for the group. We did not test comparisons for group sizes less than ten for either group.

Conclusions

The Detroit Safe Start program consisted of an enhanced version of SFP compared in an RCT with families who received case management and health and nutrition groups. The intervention group also received case management. The study enrolled 403 families and retained nearly 80 percent of them for follow-ups at six and 12 months. The participants in the study were largely minorities (61 percent Hispanic, 36 percent black) and impoverished (74 percent with

family incomes less than $20,000). Families in the sample had moderate but variable levels of symptoms at the beginning of the study: Although a minority of caregivers (14 percent) reported PTSD symptoms in the clinical range for young children, about half of older children reported this level of difficulty. About one-quarter of older children and about one-tenth of caregivers reported depression in the moderate clinical range. Uptake of services was high, with 71 percent of the intervention group receiving group therapy sessions and 98 percent receiving case management. Likewise, 66 percent of comparison group families attended nutrition workshops and 99 percent received case management.

Given the number of participants in the study, we had an 80-percent chance to detect a small to medium effect (0.32), so the study was fully powered to detect the medium effect size expected. Intent-to-treat analyses revealed changes within each of the two groups in the expected direction for many of the outcomes. That is, families in both groups improved over time. However, with both groups improving over time on many outcomes, we did not see any significant intervention effects for any of Detroit's primary, secondary, or tertiary outcomes at six or 12 months. Examination of families that received low, medium, and high doses of SFP intervention services likewise did not reveal any statistically significant differences between families in the intervention and comparable families in the comparison group. This finding differs from RCTs testing the effect of SFP on similar outcomes, in which significant group differences favoring the SFP treatment group were found in such outcomes as family relationships (Kumpfer, Alvarado, et al., 2002) and family supervision and bonding (Gottfredson et al., 2006). However, these studies might not be directly comparable to the evaluation of Detroit's Safe Start program. For instance, Kumpfer and colleagues' study (Kumpfer, Alvarado, et al., 2002) used a no-treatment control condition, whereas Detroit's comparison group received health and nutrition groups as well as case management. Gottfredson and colleagues (Gottfredson et al., 2006) employed a control group that did receive some minimal treatment, but their follow-up time point was 15 weeks postbaseline—a shorter follow-up period than the six- and 12-month periods examined in Safe Start. In addition, the treatment effect found by Gottfredson and colleagues (Gottfredson et al., 2006) was smaller (0.27) than the effect size we expected to be able to detect with 80-percent power in Detroit (i.e., 0.32). It could be that, with a larger sample, we would have found a significant treatment effect in Detroit for certain outcomes. However, the nonsignificant treatment effect for Detroit's primary outcome, family conflict, was very small (–0.05).

Overall, the results did not indicate that Detroit Safe Start program improved outcomes for children over time compared with a group of similar children who received case management and health and nutrition groups. Despite the rigorous randomized design, we cannot draw firm conclusions about the effectiveness of the Detroit Safe Start program based on these results, however. Although it is possible that the program was ineffective in improving outcomes for children in the intervention group versus those in comparison families, there are several other possible explanations for the results presented here. First, in this program, the comparison group

received quite a bit of help and support through case management and connection with other families in the health and nutrition groups. These services might have served to reduce the amount of difference between the two groups. Alternatively, both groups might have improved because of a recovery trajectory, with families in both groups displaying resilience and recovery following violence exposure. The failure to detect significant differences between the groups might also have been due to the particular outcomes measured. That is, the Detroit Safe Start program might have improved the lives of children and families in ways that we did not measure (or measured adequately) in this study. In addition, the baseline status of families in the study showed a relatively healthy sample on some of the measures, leaving little room for improvement.

In sum, the work demonstrates the promise of both intervention and comparison conditions given improvement in both groups on many measures, as well as robust uptake of the services offered and high satisfaction with them. These results call for reconsideration of what might be helpful to families and whether the supportive aspects present in both arms of the study might be as important as the trauma-related therapeutic components used in the intervention arm. Further exploration of the improvement noted in the comparison condition could help guide the field forward in terms of finding programs that help improve the lives of CEV.

Table D.14. Changes in Means for Outcome Variables Between Baseline and Six- and Twelve- Month Assessments and Group-Level Comparison of Mean Changes

		Baseline				Six Months				12 Months			
Outcome		***N***	**Mean**	**SD**	**Difference**	***N***	**Mean**	**SD**	**Difference**	***N***	**Mean**	**SD**	**Difference**
Primary													
SR of family conflict (ages 11–16)	Intervention	200	2.85	1.99	0.14	159	2.29	2.15	–0.05	157	2.15	1.87	0.03
	Comparison	202	2.71	1.97		160	2.34	1.83		151	2.13	1.92	
CR of family conflict (ages 3–16)	Intervention	59	3.25	1.97	–0.04	42	3.24	2.34	0.40	52	3.14	2.19	0.89[a]
	Comparison	44	3.30	2.13		38	2.84	2.14		36	2.25	1.92	
Secondary													
CR of attitudinal barriers to care	Intervention	201	1.72	2.33	0.30	159	1.33	2.19	0.31	157	0.96	1.81	–0.01
	Comparison	202	1.42	1.66		160	1.01	1.54		151	0.97	1.71	
CR of total stressors	Intervention	201	41.37	12.17	1.69	159	37.93	11.79	–0.41	157	38.79	12.66	1.51
	Comparison	202	39.67	11.67		160	38.34	10.63		151	37.28	11.13	
CR of resource problems	Intervention	201	14.56	5.31	0.67	159	13.26	4.71	–0.33	157	13.66	5.16	0.70
	Comparison	202	13.89	4.89		160	13.59	4.69		151	12.96	4.61	
CR of child total behavior problems (ages 3–16)	Intervention	201	10.01	7.56	0.60	159	8.26	7.20	0.00	157	8.20	7.76	1.32
	Comparison	202	9.41	6.97		160	8.26	7.04		151	6.87	6.79	
CR of child externalizing behavior problems (ages 3–16)	Intervention	201	6.93	5.08	0.41	159	5.82	5.02	–0.11	157	5.62	5.09	0.78
	Comparison	202	6.52	4.79		160	5.93	4.83		151	4.84	4.70	
SR of child delinquency (ages 11–16)	Intervention	59	0.51	0.50	0.08	42	0.43	0.50	0.14	52	0.29	0.46	0.07
	Comparison	44	0.43	0.50		38	0.29	0.46		36	0.22	0.42	
SR of child drug use (ages 11–16)	Intervention	59	0.19	0.39	0.07	42	0.14	0.35	0.01	52	0.19	0.4	0.19[a]
	Comparison	44	0.11	0.32		38	0.13	0.34		36	0.00	0.00	
SR of child gang involvement (ages 11–16)	Intervention	58	0.16	0.37	0.06	42	0.07	0.26	0.05	51	0.08	0.27	0.02
	Comparison	44	0.09	0.29		38	0.03	0.16		36	0.06	0.23	
CR of child cooperation (ages 3–12)	Intervention	162	12.31	3.88	–0.58	129	13.43	3.80	0.23	118	13.33	3.84	–0.44
	Comparison	173	12.89	3.97		139	13.19	3.96		129	13.78	3.48	

Outcome		Baseline				Six Months				12 Months			
		N	Mean	SD	Difference	*N*	Mean	SD	Difference	*N*	Mean	SD	Difference
SR of child cooperation (ages 13–16)	Intervention	36	13.94	4.21	1.26	29	14.07	4.57	0.31	35	15.83	4.60	1.43
	Comparison	25	12.68	4.53		21	13.76	4.62		20	14.40	3.59	
CR of child self-control (ages 3–12)	Intervention	162	9.96	4.75	–1.24[a]	129	11.67	4.9	0.00	118	12.21	4.77	–0.27
	Comparison	174	11.20	4.53		139	11.67	4.56		128	12.48	4.12	
SR of child self-control (ages 13–16)	Intervention	38	9.58	4.38	–0.06	29	9.45	5.19	–1.65	37	11.46	5.13	1.41
	Comparison	25	9.64	4.30		21	11.1	4.02		22	10.05	4.24	
CR of child assertion (ages 3–12)	Intervention	162	13.9	3.70	–0.57	129	14.51	3.83	–0.27	118	15.16	3.43	–0.09
	Comparison	173	14.46	3.72		139	14.78	3.72		129	15.25	3.34	
CR of child affective strengths (ages 6–12)	Intervention	105	16.85	3.26	–0.38	84	17.74	3.02	–0.05	103	17.66	3.00	–0.27
	Comparison	125	17.22	3.24		104	17.79	3.26		110	17.93	2.81	
SR of child affective strengths (ages 11–16)	Intervention	59	14.95	3.94	0.24	42	15.33	3.57	0.41	52	14.63	3.93	0.05
	Comparison	44	14.70	3.57		38	14.92	3.97		36	14.58	4.23	
CR of child school functioning (ages 6–12)	Intervention	105	20.08	5.11	–1.15	83	21.22	4.84	0.19	103	21.75	4.51	–0.33
	Comparison	122	21.22	4.36		103	21.03	5.56		107	22.07	4.44	
SR of child school functioning (ages 11–16)	Intervention	57	20.21	3.95	0.21	41	20.00	4.06	–0.45	47	20.89	4.01	0.41
	Comparison	44	20.00	4.68		38	20.45	4.04		33	20.48	3.55	
SR of child grades (ages 13–16)	Intervention	38	3.50	1.62	–0.30	29	3.28	1.41	–0.01	37	3.49	1.91	0.17
	Comparison	25	3.80	1.35		21	3.29	1.23		22	3.32	1.04	
CR of family involvement (ages 6–12)	Intervention	105	24.76	4.26	–0.31	84	25.83	3.98	0.00	103	25.59	4.03	–0.71
	Comparison	124	25.07	3.99		104	25.74	3.73		110	26.3	3.23	
SR of family involvement (ages 11–16)	Intervention	59	22.37	5.26	0.42	42	23.17	4.82	0.69	52	22.87	5.06	–0.33
	Comparison	44	21.95	5.98		38	22.47	5.74		36	23.19	4.36	
CR of positive involvement (ages 6–16)	Intervention	144	66.32	8.65	–0.35	113	67.96	9.13	1.92	142	67.15	8.15	0.51
	Comparison	150	66.67	8.11		124	66.05	8.40		128	66.65	7.91	
CR of negative or ineffective discipline (ages 6–16)	Intervention	144	22.17	5.44	–0.26	114	21.15	6.32	–0.21	142	20.77	5.79	–0.07
	Comparison	152	22.43	5.56		125	21.36	5.49		132	20.84	5.51	

Outcome		Baseline				Six Months				12 Months			
		N	Mean	SD	Difference	*N*	Mean	SD	Difference	*N*	Mean	SD	Difference
CR of deficient monitoring (ages 6–16)	Intervention	144	10.21	4.46	0.28	114	10.22	4.37	0.74	142	9.61	4.04	0.29
	Comparison	152	9.93	3.76		125	9.48	2.76		132	9.32	2.95	
SR of mother involvement (ages 11–16)	Intervention	96	35.42	8.09	2.53[a]	72	36.15	7.49	1.53	69	35.90	8.57	0.82
	Comparison	85	32.88	8.75		69	34.62	8.05		53	35.08	7.11	
SR of father involvement (ages 11–16)	Intervention	99	24.55	10.46	0.80	70	25.17	10.31	0.38	72	26.46	10.64	0.90
	Comparison	83	23.75	10.12		68	24.79	11.45		56	25.55	9.77	
SR of positive parenting (ages 11–16)	Intervention	100	23.75	4.89	1.88[a]	72	24.42	4.79	1.43	73	23.21	5.42	–0.24
	Comparison	85	21.87	5.56		69	22.99	5.70		56	23.45	5.21	
SR of poor monitoring and supervision (ages 11–16)	Intervention	100	17.11	6.21	0.12	72	17.29	7.61	1.05	73	15.79	5.37	0.79
	Comparison	85	16.99	5.83		69	16.25	6.06		56	15.00	5.17	
SR of inconsistent discipline (ages 11–16)	Intervention	100	12.90	3.71	–0.90	72	13.14	4.56	–0.19	73	13.22	4.79	0.06
	Comparison	85	13.80	4.45		69	13.33	4.35		56	13.16	3.48	
SR of corporal punishment (ages 11–16)	Intervention	100	5.23	2.44	–0.42	72	5.14	2.28	0.50	73	4.63	1.95	0.15
	Comparison	85	5.65	2.62		69	4.64	2.08		56	4.48	1.89	
CR of total child victimization experiences (ages 3–11)	Intervention	149	1.05	1.70	0.04	123	0.5	0.96	–0.02	110	0.35	0.77	0.05
	Comparison	165	1.01	1.52		133	0.52	1.00		121	0.30	0.76	
CR of child maltreatment (ages 3–11)	Intervention	149	0.17	0.46	0.03	123	0.04	0.24	–0.03	110	0.04	0.19	–0.01
	Comparison	165	0.14	0.43		133	0.07	0.31		121	0.05	0.25	
CR of child assault (ages 3–11)	Intervention	149	0.19	0.53	0.03	123	0.11	0.34	0.04	110	0.06	0.25	0.04
	Comparison	165	0.16	0.46		133	0.08	0.26		121	0.02	0.16	
CR of child sexual abuse (ages 3–11)	Intervention	149	0.02	0.18	0.00	123	0.00	0.00	–0.01	110	0.00	0.00	0.00
	Comparison	165	0.02	0.13		133	0.01	0.09		121	0.00	0.00	
CR of child witnessing violence (ages 3–11)	Intervention	149	0.58	1.01	0.03	123	0.25	0.59	–0.04	110	0.14	0.44	–0.01
	Comparison	165	0.55	0.9		133	0.29	0.64		121	0.15	0.46	
SR of total child victimization experiences (ages 10–14)	Intervention	73	2.03	2.4	–0.11	51	1.51	2.04	0.09	67	1.16	1.58	0.02
	Comparison	52	2.13	1.98		45	1.42	1.88		48	1.17	1.67	

Outcome		Baseline				Six Months				12 Months			
		N	Mean	SD	Difference	*N*	Mean	SD	Difference	*N*	Mean	SD	Difference
SR of child maltreatment (ages 10–14)	Intervention	73	0.40	0.74	–0.10	51	0.24	0.51	–0.10	67	0.16	0.41	0.04
	Comparison	52	0.50	0.78		45	0.33	0.64		48	0.13	0.39	
SR of child assault (ages 10–14)	Intervention	73	0.56	0.87	0.04	51	0.33	0.65	–0.09	67	0.24	0.58	0.09
	Comparison	52	0.52	0.87		45	0.42	0.72		48	0.15	0.41	
SR of child sexual abuse (ages 10–14)	Intervention	73	0.07	0.25	0.05	51	0.00	0.00	0.00	67	0.01	0.12	0.01
	Comparison	52	0.02	0.14		45	0.00	0.00		48	0.00	0.00	
SR of child witnessing violence (ages 10–14)	Intervention	73	1.01	1.14	–0.04	51	0.86	1.20	0.20	67	0.61	0.98	–0.18
	Comparison	52	1.06	1.21		45	0.67	1.07		48	0.79	1.11	
CR of caregiver total number of traumatic experiences	Intervention	201	0.45	1.16	0.10	159	0.21	0.8	0.11	157	0.10	0.36	0.03
	Comparison	202	0.35	1.06		160	0.1	0.38		151	0.07	0.42	
CR of caregiver experience of any non-DV trauma	Intervention	201	0.10	0.31	0.01	159	0.07	0.25	0.02	157	0.06	0.24	0.02
	Comparison	202	0.10	0.3		160	0.05	0.22		151	0.04	0.20	
CR of caregiver experience of any DV	Intervention	201	0.13	0.34	0.04	159	0.06	0.23	0.03	157	0.03	0.16	0.01
	Comparison	202	0.09	0.29		160	0.03	0.17		151	0.01	0.11	
CR of caregiver depression	Intervention	201	5.43	5.14	0.56	159	4.09	4.18	0.21	157	3.98	4.51	0.19
	Comparison	202	4.87	5.05		160	3.88	4.09		151	3.79	4.68	
CR of caregiver PTSD	Intervention	201	1.03	1.35	0.01	159	0.72	1.26	–0.04	157	0.45	1.01	–0.19
	Comparison	202	1.03	1.41		160	0.76	1.26		151	0.64	1.26	
Tertiary													
CR of personal problems	Intervention	201	26.81	7.99	1.02	159	24.67	7.94	–0.08	157	25.13	8.40	0.82
	Comparison	202	25.78	7.66		160	24.75	7.19		151	24.32	7.56	
CR of child PTSD symptoms (ages 3–10)	Intervention	141	37.21	10.07	1.84	115	34.26	8.89	0.69	103	33.02	7.94	1.59
	Comparison	154	35.38	8.14		122	33.57	7.33		114	31.43	6.70	
SR of child PTSD symptoms (ages 8–16)	Intervention	100	11.59	9.53	–0.16	72	10.85	9.48	1.33	73	7.55	8.51	–1.36
	Comparison	85	11.75	8.51		69	9.52	8.69		56	8.91	10.07	

Outcome		Baseline				Six Months				12 Months			
		N	Mean	SD	Difference	*N*	Mean	SD	Difference	*N*	Mean	SD	Difference
SR of child assertion (ages 13–16)	Intervention	38	12.53	4.88	0.29	29	12.97	4.42	0.30	37	13.89	4.77	1.53
	Comparison	25	12.24	4.04		21	12.67	5.55		22	12.36	4.28	
CR of child internalizing problems (ages 3–16)	Intervention	201	3.08	2.95	0.20	159	2.45	2.70	0.11	157	2.58	3.06	0.55
	Comparison	202	2.88	2.67		160	2.34	2.70		151	2.03	2.47	
SR of child depressive symptoms (ages 13–16)	Intervention	38	77.05	6.74	–0.23	29	76.93	6.28	1.12	37	74.76	6.30	0.44
	Comparison	25	77.28	6.91		21	75.81	7.22		22	74.32	7.34	

NOTE: Data are not shown for outcomes when the cell size is fewer than five for either group. Comparisons were not tested when the group size was fewer than ten for either group.

[a] A significant paired *t*-test of differences between groups ($p < 0.05$). In cells containing *0.05*, we have rounded the value to 0.05, but it is still less than 0.05.