

ARTICLE SCOPING REVIEW

Nurses' Role in Promoting Positive Parenting in Early Childhood: A Scoping Review

Atuação dos Enfermeiros na Promoção da Parentalidade Positiva na Primeira Infância: Scoping Review

Actuación de los Enfermeros en la Promoción de la Parentalidad Positiva en la Primera Infancia: Scoping Review

Ellen Lucena da Silva ¹
 <https://orcid.org/0000-0001-6335-7742>
Ana Paula Esmeraldo Lima ¹
 <https://orcid.org/0000-0002-8447-4072>
Clariana Vitória Ramos de Oliveira ²
 <https://orcid.org/0000-0001-9987-9948>
Jéssica Lúcia dos Santos ¹
 <https://orcid.org/0000-0003-0699-3608>
Maria Wanderley Lavor Coriolano Marinus ¹
 <https://orcid.org/0000-0001-7531-2605>
¹ Federal University of Pernambuco,

Department of Nursing, Recife,

Pernambuco, Brazil

² University of Nevada, Las Vegas, United

States

Abstract

Background: Positive parenting involves caregiving practices that meet children's physical and emotional needs. Primary Health Care (PHC) plays a key role in promoting child health, with nurses assuming an important role in supporting parenting practices.

Objective: To map the scientific evidence on nurses' role in promoting positive parenting during early childhood in the context of PHC.

Methodology: A scoping review was conducted through a search in five databases, following the Joanna Briggs Institute (JBI) guidelines and the PRISMA extension for scoping reviews (PRISMA-ScR) checklist.

Results: Twenty-one studies were included. Most nursing interventions were conducted in healthcare facilities, followed by home visits and virtual care. The most frequently addressed component of the Nurturing Care Framework was responsive caregiving, followed by adequate nutrition, early learning, and safety and security.

Conclusion: By implementing actions that promote positive parenting, nurses contribute not only to children's well-being but also to family health and balance.

Keywords: parenting; nursing; health promotion; child health; primary health care; nursing care

Resumo

Enquadramento: A parentalidade positiva envolve práticas de cuidado que atendem às necessidades físicas e emocionais das crianças. A Atenção Primária à Saúde (APS) é um ponto chave para promover a saúde infantil, com os enfermeiros desempenhando um papel importante no apoio à parentalidade.

Objetivo: Mapear as evidências científicas sobre a atuação dos enfermeiros na parentalidade positiva no contexto da Atenção Primária à Saúde, abrangendo a etapa da primeira infância.

Metodologia: Scoping review conduzida conforme orientações da Joanna Briggs Institute (JBI) e do checklist PRISMA-ScR, realizada por meio da busca em cinco bases de dados.

Resultados: Foram incluídos 21 estudos. A maioria das intervenções de enfermagem ocorreu na unidade de saúde, seguida por visitas domiciliares e atendimentos virtuais. O eixo mais abordado da Framework Nurturing Care foi cuidados responsivos, seguido por nutrição adequada, aprendizagem precoce e segurança e proteção.

Conclusão: Ao implementar ações voltadas à promoção da parentalidade positiva, o enfermeiro contribui não apenas para o bem-estar da criança, mas também para a saúde e o equilíbrio das famílias.

Palavras-chave: poder familiar; enfermagem; promoção da saúde; saúde da criança; atenção primária à saúde; cuidados de enfermagem

Resumen

Marco contextual: La parentalidad positiva implica prácticas de cuidado que satisfacen las necesidades físicas y emocionales de los niños. La atención primaria de salud (APS) es un elemento clave para promover la salud infantil, y los enfermeros desempeñan un papel importante en el apoyo a la parentalidad.

Objetivo: Mapear las evidencias científicas sobre la actuación de los enfermeros en la parentalidad positiva en el contexto de la APS, abarcando la etapa de la primera infancia.

Metodología: Revisión de alcance realizada según las directrices del Joanna Briggs Institute (JBI) y la lista de verificación PRISMA-ScR, llevada a cabo mediante la búsqueda en cinco bases de datos.

Resultados: Se incluyeron 21 estudios. La mayoría de las intervenciones de enfermería se llevaron a cabo en el centro de salud, seguidas de visitas domiciliarias y consultas virtuales. El eje más abordado del Nurturing Care Framework fue la atención receptiva, seguido de la nutrición adecuada, el aprendizaje temprano y la protección y seguridad.

Conclusión: Al implementar acciones orientadas a promover la parentalidad positiva, el enfermero contribuye no solo al bienestar del niño, sino también a la salud y el equilibrio de las familias.

Palabras clave: responsabilidad parental; enfermería; promoción de la salud; salud infantil; atención primaria de salud; cuidados de enfermería

Corresponding author

Ellen Lucena da Silva

E-mail: ellen.lucena@ufpe.br

Received: 09.04.25

Accepted: 31.10.25



How to cite this article: Silva, E. L., Lima, A. P., Oliveira, C. V., Santos, J. L., & Marinus, M. W. (2025). Nurses' Role in Promoting Positive Parenting in Early Childhood: A Scoping Review. *Revista de Enfermagem Referência*, 6(4), e41253. <https://doi.org/10.12707/RV125.36.41253>



Introduction

Parenting practices are characterized by interactions between parents and children. These practices are influenced by factors such as caregivers' knowledge, childhood experiences, cultural context, stress, and overload. These practices can be expressed in either positive or negative ways. Negative parenting practices include constant punishment, neglect, physical abuse, and lack of discipline. In contrast, positive parenting practices involve stimulating children through play, discipline, and monitoring their moral behavior and emotional expression (Altafim et al., 2023).

Positive parenting is associated with positive child outcomes, including the development of self-esteem and self-confidence, as well as improvements in cognitive, linguistic, motor, and psychosocial skills. Parenting practices are particularly important during early childhood - from pregnancy to six years of age - when brain development is most sensitive to experiences and the environment. During this period, implementing actions and interventions that promote child development is considered a national and international priority (Altafim et al., 2023).

The World Health Organization's (WHO) Nurturing Care Framework provides a practical approach to promoting responsive parenting interactions and improving early childhood development. This framework comprises five interrelated components: health, nutrition, responsive caregiving, early learning, and safety and security (WHO, 2018). To implement this approach effectively, Primary Health Care (PHC) professionals must be equipped with appropriate knowledge and tools to address the challenges associated with the interconnected challenges associated with child development.

These interventions include monitoring child developmental stages, strengthening parenting skills to encourage positive role modeling, and promoting alternatives to punitive practices, such as positive discipline and nonviolent education. Additionally, supporting parents' mental health, emotional and social well-being, and stress management skills is essential (Altafim et al., 2023).

Considering positive parenting as a key component of comprehensive care for children's integral development in early childhood, PHC should proactively promote child health through nursing interventions. Despite nurses' role in child health promotion, there remains a lack of synthesized evidence on practical strategies for promoting positive parenting at a global level. Searches conducted on the Open Science Framework (OSF) platform and in the PubMed, EMBASE, LILACS/BVS, Web of Science, and PsycInfo databases using the term "positive parenting AND scoping review" did not identify any scoping or systematic reviews addressing this topic. This gap highlights the importance of synthesizing international evidence on nurses' role in promoting positive parenting. Therefore, this study aimed to map the scientific evidence on nurses' role in promoting positive parenting during

early childhood within the PHC context.

Methodology

This scoping review was designed and conducted in accordance with the Joanna Briggs Institute (JBI) guidelines and the Preferred Reporting Items for Systematic Reviews and Meta-Analyses extension for scoping reviews (PRISMA-ScR).

The research question that guided this review was: "What evidence is available in the scientific literature on interventions carried out by primary health care nurses aimed at promoting positive parenting among caregivers of children aged zero to six years?" This question was formulated using the acronym PCC (P-Population: Caregivers of children; C-Concept: Actions developed by nurses to promote positive parenting during early childhood; C-Context: Primary Health Care).

Inclusion/exclusion criteria

Studies addressing actions developed by PHC nurses to promote positive parenting among caregivers of children aged zero to six years were included. For the purposes of this review, caregivers were defined as biological parents, legally appointed guardians, or adult caregivers responsible for the child's well-being (Jeong, 2021). Studies involving children with developmental delays or comorbidities were excluded due to the specific care demands associated with special health needs and developmental disorders. Studies that did not address the research question or in which the interventions were not conducted by nurses were also excluded.

Search strategy and source of evidence screening

The review was conducted in five databases: PubMed, EMBASE, LILACS/BVS, Web of Science, and PsycInfo in June 2024. An additional search was conducted in October 2025 to identify newly published studies and update the results. However, this search did not lead to the inclusion of new articles, and no changes were made to the previously mapped evidence.

Controlled and uncontrolled descriptors were used in the search strategy. Controlled descriptors were identified using the Health Sciences Descriptors (DeCS) and Medical Subject Headings (MeSH) platforms, with only English-language terms included. The terms were selected based on the PCC framework and combined using the Boolean operators "AND" and "OR," as shown in Table 1. No filters for year of publication and language were applied during the database search to capture all available evidence on the topic. Search strategies were adapted for each database. The reference lists of the included studies were also screened. Gray literature was identified through searches of non-indexed journals in the field of child health using Google Scholar and the ProQuest platform.

Table 1



Example of the strategy used in the search via MEDLINE/PubMed in 2024

Database	Search strategy
MEDLINE (PubMed)	((((((((((((((Nurses[MeSH Terms]) OR (Nurses)) OR (“Nursing Personnel”)) OR (Nursing[MeSH Terms])) OR (Nursing)) OR (“Nurses Role”)) OR (“Nursing Care”[MeSH Terms])) OR (“Nursing Care”)) OR (“Primary Nursing”[MeSH Terms])) OR (“Primary Nursing”)) OR (“Primary Care Nursing”[MeSH Terms])) OR (“Primary Care Nursing”)) OR (“Nurse Practitioners”[MeSH Terms])) OR (“Nurse Practitioners”)) OR (“Family Nursing”[MeSH Terms])) OR (“Family Nursing”)) OR (“Family Centered Nursing”)) AND (((((Parenting[MeSH Terms]) OR (Parenting)) OR (“Child Rearing”)) OR (“Parent-Child Relations”)) OR (“Family Relations”)) OR (“Parenting education”))) AND (((“Primary Health Care”[MeSH Terms]) OR (“Primary Health Care”)) OR (“Primary Care”)) OR (“Primary Healthcare”))

Source of evidence selection

After retrieving articles from the databases according to the search strategy, all records were screened in detail. Two independent reviewers selected the articles based on the inclusion criteria. Figure 1 presents the PRISMA-ScR flowchart illustrating the study selection process.

Data extraction

The included studies were exported to the Rayyan QCRI online platform for data analysis, organization, duplicate verification, screening, and review. This step was performed by two independent reviewers. A Microsoft Excel 2010[®] spreadsheet was created to extract the following data from the selected studies: article title, authors, year of publication, country, level of evidence, study objectives, setting, target population, type of intervention, Nurturing Care Framework components, topics addressed, and strategies used in the nursing interventions.

The use of the Nurturing Care Framework did not influence study selection. However, the framework components were considered during data analysis, particularly in the

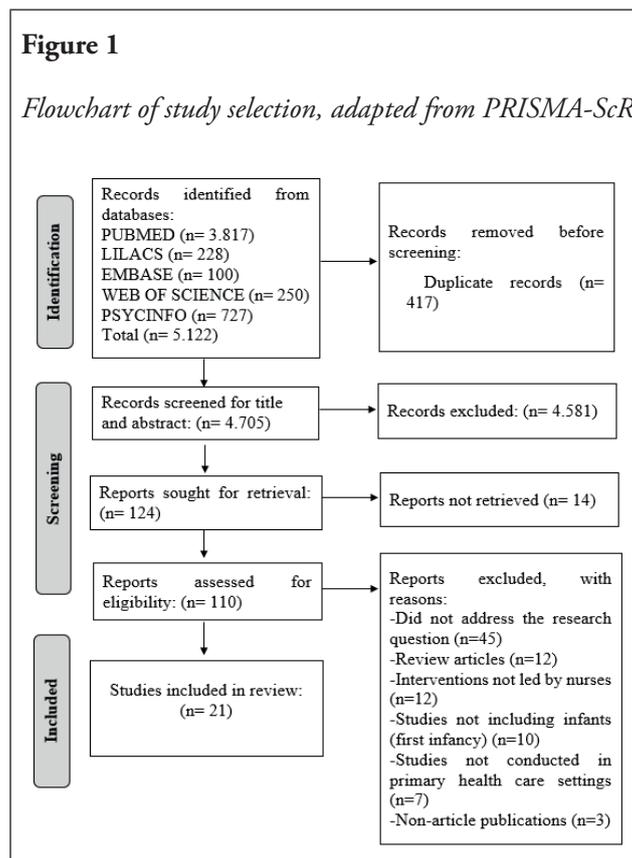
categorization of the main topics related to nurses' positive parenting approaches.

Data synthesis

A description of the selected studies was provided, as well as a narrative summary of the data.

Results

A total of 5,122 studies were identified across the databases, including 3,817 in MEDLINE/PubMed, 228 in LILACS, 100 in EMBASE, 250 in Web of Science, and 727 in PsycINFO. After duplicate removal, screening of titles and abstracts, full-text review, and application of the inclusion and exclusion criteria, 21 articles were selected for the final sample, as illustrated in Figure 1. The excluded studies did not meet the eligibility criteria based on the PCC framework. The authors were contacted to obtain the full texts of unidentified records, and it was found that the three documents classified as non-articles corresponded to editorials.



Regarding year of publication, the included studies were published between 2008 and 2023. The highest number of publications (11 studies) were published between 2019 and 2023. The included studies were conducted across 11 countries. Australia accounted for the highest number

of studies ($n = 5$), followed by Canada and Sweden ($n = 3$ each), the Netherlands and Brazil ($n = 2$ each), and the United States, Iraq, Jamaica, Portugal, Spain, and Turkey ($n = 1$ each). Nineteen studies were published in English, and two were published in Portuguese (Table 2).

Table 2

Summary of included studies and characterization of the interventions, topics addressed, nature and setting of the intervention, target population, and components of the Nurturing Care framework

Code, author, year and country of study	Topics addressed in the intervention	Nature (group or individual) and setting of the intervention	Target population	Components of the Nurturing Care Framework
S1-Costa et al., 2023. Brazil	Positive interactions between parents and children and participation in cognitively stimulating activities such as playing with the child, telling stories, and using picture books	Group Healthcare facility	First-time parents of children under 1 year of age	Responsive caregiving and early learning
S2-Rae et al., 2023. Canada	Child nutrition and obesity prevention	Individual and group Healthcare facility and home visit	Parents of children under 5 years of age	Adequate nutrition
S3-Goldfeld et al., 2022. Australia	Child development, language, and learning	Individual Home visit	Pregnant women, mothers of children under 2 years of age	Early learning
S4-Eli et al., 2022. Sweden	Child nutrition and obesity prevention	Individual Virtual	Parents of children between the ages of 2 and 6	Adequate nutrition
S5-Santamaría - Martín et al., 2022. Spain	Breastfeeding	Group Healthcare facility	Mothers and breastfeeding women	Adequate nutrition

S6- Costa et al., 2022. Brazil	Child development and socio-emotional skills of infants based on the four developmental milestones	Group Healthcare facility	Mothers and caregivers of children under 1 year of age	Responsive caregiving
S7-Driessche et al., 2021. The Netherlands	Parental behavior and care during pregnancy	Individual Home visit	Pregnant women and parents	Responsive caregiving
S8-Sari & Altay, 2020. Turkey	Child growth and development; breastfeeding	Individual Virtual	Pregnant women and infants	Responsive caregiving and adequate nutrition
S9-Piro & Ahmed, 2020. Iraq	Breastfeeding	Group Healthcare facility	Pregnant women	Adequate nutrition
S10-Henriksson et al., 2020. Sweden	Child nutrition, obesity prevention, and physical activity in children	Individual Healthcare facility	Parents of children between 2 and 5 years of age	Adequate nutrition
S11-Schlottmann et al., 2019. United States	Child nutrition	Individual Virtual	Parents of children between the ages of 2 and 5	Adequate nutrition
S12-Chang et al., 2015. Jamaica	Child development and parenting behavior	Group Healthcare facility	Parents of children under 1 year of age	Responsive caregiving
S13-Döring et al., 2014. Sweden	Child nutrition and obesity prevention	Individual and group Healthcare facility	Parents of children between 8 months and 4 years of age	Adequate nutrition
S14-Kemp et al., 2013. Australia	Support in the transition to parenting during pregnancy and child development	Individual Healthcare facility and home visit	Pregnant women	Responsive caregiving
S15-Ateah, 2013. Canada	Safe sleeping environment, shaken baby syndrome, physical punishment risks, positive parenting, and expected development and safety	Group Healthcare facility	First-time expectant parents	Responsive caregiving and safety and security
S16-Stel et al., 2012. The Netherlands	Child development and risk of parental problems	Individual Healthcare facility and home visit	Parents of children aged 18 months	Responsive caregiving
S17-Graça et al., 2011. Portugal	Breastfeeding	Individual Healthcare facility	Pregnant women and women who have recently given birth	Adequate nutrition
S18-Goldfeld et al., 2011. Australia	Shared reading	Group Healthcare facility	Parents of children under 2 years of age	Early learning
S19-Bayer et al., 2010. Australia	Child behavior	Individual and group Healthcare facility	Parents of children under 3 years of age	Responsive caregiving
S20-Hiscock et al., 2008. Australia	Child development and behavior	Individual and group Healthcare facility	Parents of children under 2 years of age	Responsive caregiving
S21-Benzies et al., 2008. Canada	Child behavior and positive interactions	Individual Home visit	Parents and children aged 5 and 6 months	Responsive caregiving

Discussion

This review found that nurses' practical interventions aimed at promoting positive parenting involved several strategies, including home visits, interventions in healthcare facilities, and, in some cases, virtual interventions. These interventions addressed topics such as encouraging healthy habits, providing guidance on child behavior and development, and facilitating positive parent-child interactions. Home visits have proven to be an effective strategy because they enable nurses to provide direct support to families, particularly in situations of social vulnerability (Benzies et al., 2008; Driessche et al., 2021;

Goldfeld et al., 2022).

In healthcare facilities, interventions were delivered through individual follow-up consultations and group-based activities with parents. Group interventions are advantageous because they are cost-effective, promote the sharing of experiences among parents and professionals, and help build a support network that increases parents' confidence (Costa et al., 2022; Costa et al., 2023; Chang et al., 2015; Santamaría-Martín et al., 2022). Individual consultations are essential because they enable a detailed assessment of the child and family, provide tailored guidance, and facilitate early identification of health and behavioral problems. They also allow for more in-depth

discussions about family dynamics (Bayer et al., 2010; Eli et al., 2022).

Overall, interventions aimed at promoting positive parenting cover the prenatal and postpartum periods and include ongoing monitoring of the children through childcare consultations. Most of these interventions focus on pregnant women and caregivers of children up to one year of age. Studies suggest that this focus is justified by the high levels of uncertainty and insecurity commonly experienced during pregnancy and the first months of a child's life (Kemp et al., 2013).

However, the predominance of studies focusing on children under 12 months limits the transferability of findings to the 1-6 age group because parental demands and child developmental milestones change throughout this period. While the first year of life requires greater attention to physical care practices, breastfeeding, and the establishment of initial bonding, subsequent stages require strategies that promote autonomy, emotional regulation, socialization, and learning. Furthermore, the scarcity of interventions targeting this age group highlights a gap in the care provided during this stage of child development. In low- and middle-income countries, for example, only 25.4% of children aged 3 and 4 years (62 million) currently receive comprehensive care (Altafim et al., 2023; Draper et al., 2024).

Regarding the components of the Nurturing Care Framework addressed in the interventions, responsive caregiving emerged as the most frequently targeted component. In this context, nurses promoted positive parent-child interactions by encouraging activities such as playing with children, storytelling, and the use of picture books (Chang et al., 2015; Costa et al., 2022; Driessche et al., 2021; Sari & Altay, 2020; Stel et al., 2012). Adequate nutrition was the second most frequently addressed component, with emphasis on breastfeeding guidance and childhood obesity prevention (Döring et al., 2014; Graça et al., 2011; Piro & Ahmed, 2020; Rae et al., 2023; Santamaría-Martín et al., 2022; Schlottmann et al., 2019). Despite this focus, particularly in childcare contexts, other components of the Nurturing Care Framework have received less attention. Early learning stimulation, which involves cognitive development, has been underexplored, indicating a gap in the promotion of practices that foster cognitive and intellectual stimulation. Shared reading and storytelling are parenting practices with significant potential for integrating emotional and affective aspects into child development (Goldfeld et al., 2011). Although these practices have been examined in fields such as education, psychology, and speech therapy, it is crucial to further explore these strategies in the health context, particularly with nurses in health education interventions.

Similarly, the safety and security component, which addresses non-punitive care and violence prevention, was minimally addressed in the reviewed studies involving nurses, despite its importance to children's well-being (Ateah, 2013). This finding underscores the importance of strengthening prevention programs such as the American Psychological Association's Adults and Children Together (ACT) Raising Safe Kids Program, which promotes par-

enting and safe environments through groups of parents and caregivers (Laffite et al., 2022).

Most studies on positive parenting focus on strategies to promote child health and development, often addressing these aspects in isolation. Only a limited number of studies address the challenges faced by parents. One limitation of this review is its restriction to studies addressing positive parenting interventions delivered by nurses in PHC, which may have limited the inclusion of research on topics related to child health promotion. Nevertheless, understanding the relationship between positive parenting and the Nurturing Care Framework strengthens a comprehensive and complex approach to health education and reinforces nurses' roles as educators in PHC.

Conclusion

This review identified the main nursing interventions used to promote positive parenting. By carrying out these interventions, nurses contribute to children's well-being and family balance, thereby generating positive impacts on society. The findings reveal gaps and limitations in studies focusing on children aged one to six years, underscoring the need for future research that includes this age group.

References

- Altafim, E. R., Souza, M., Teixeira, L., Brum, D., & Velho, C. (2023). *O cuidado integral e a parentalidade positiva na primeira infância*. Fundo das Nações Unidas para a Infância. <https://www.unicef.org/brazil/media/23611/file/o-cuidado-integral-e-a-parentalidade-positiva-na-primeira-infancia.pdf>
- Bayer, J. K., Hiscock, H., Ukoumunne, O. C., Scalzo, K., & Wake, M. (2010). Three-year-old outcomes of a brief universal parenting intervention to prevent behaviour problems: Randomised controlled trial. *Archives of Disease in Childhood*, *95*(3), 187-192. <https://doi.org/10.1136/adc.2009.168302>
- Benzies, K., Magill-Evans, J., Harrison, M. J., MacPhail, S., & Kimmak, C. (2008). Strengthening new fathers' skills in interaction with their 5-month-old infants: Who benefits from a brief intervention? *Public Health Nursing*, *25*(5), 431-439. <https://doi.org/10.1111/j.1525-1446.2008.00727.x>
- Bornstein, M. H., & Putnick, D. L. (2016). Mothers' and fathers' parenting practices with their daughters and sons in low- and middle-income countries. *Monographs of the Society for Research in Child Development*, *81*(1), 60-77. <https://doi.org/10.1111/mono.12226>
- Chang, S. M., Grantham-McGregor, S. M., Powell, C. A., Vera-Hernández, M., Lopez-Boo, F., Baker-Henningham, H., & Walker, S. P. (2015). Integrating a parenting intervention with routine primary health care: A cluster randomized trial. *Pediatrics*, *136*(2), 272-280. <https://doi.org/10.1542/peds.2015-0119>
- Ateah, C. A. (2013). Prenatal parent education for first-time expectant parents: "Making it through labor is just the beginning..." *Journal of Pediatric Health Care*, *27*(2), 91-97. <https://doi.org/10.1016/j.pedhc.2011.06.019>
- Costa, P., Andrade, P. R., Cintra, T. F., Cordeiro, S. M., Pettengil, M. A., & Veríssimo, M. D. (2022). Necessidades, práticas parentais e

- disseminação de informação sobre desenvolvimento infantil e socioemocional do lactente. *Revista Brasileira de Enfermagem*, 75(3), e20210296. <https://doi.org/10.1590/0034-7167-2021-0296>
- Costa, P., Cintra, T. F., Cordeiro, S. M., Andrade, P. R., & Veríssimo, M. D. (2023). Efeitos de um grupo educativo nas práticas parentais promotoras do desenvolvimento infantil. *Revista de Enfermagem do Centro-Oeste Mineiro*, 13, 1-8. <https://doi.org/10.19175/recom.v13i0.4612>
- Döring, N., Hansson, L. M., Andersson, E. S., Bohman, B., Westin, M., Magnusson, M., Larsson, C., Sundblom, E., Willmer, M., Blennow, M., Heitmann, B. L., Forsberg, L., Wallin, S., Tyne-lius, P., Ghaderi, A., & Rasmussen, F. (2014). Primary prevention of childhood obesity through counselling sessions at Swedish child health centres: Design, methods, and baseline sample characteristics of the PRIMROSE cluster-randomised trial. *BMC Public Health*, 14(1), 335. <https://link.springer.com/article/10.1186/1471-2458-14-335>
- Draper, C. E., Yousafzai, A. K., McCoy, D. C., Cuartas, J., Obradović, J., Bhopal, S., Fisher, J., Jeong, J., Klingberg, S., Milner, K., Pisani, L., Roy, A., Seiden, J., Sudfeld, C. R., Wrottesley, S. V., Fink, G., Nores, M., Tremblay, M. S., & Okely, A. D. (2024). The next 1000 days: Building on early investments for the health and development of young children. *The Lancet*, 404(10467), 2094-2116. [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(24\)01389-8/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(24)01389-8/fulltext)
- Driessche, A. V., Stel, H. F., Vink, R. M., & Staal, I. I. (2021). Assessing concerns and care needs of expectant parents: Development and feasibility of a structured interview. *International Journal of Environmental Research and Public Health*, 18(18), 9585. <https://doi.org/10.3390/ijerph18189585>
- Eli, K., Neovius, C., Nordin, K., Brissman, M., & Ek, A. (2022). Parents' experiences following conversations about their young child's weight in the primary health care setting: A study within the STOP project. *BMC Public Health*, 22(1), 1540. <https://doi.org/10.1186/s12889-022-13803-8>
- Gaíva, M. A., Alves, M. D., & Monteschio, C. A. (2019). Consulta de enfermagem em puericultura na estratégia saúde da família. *Revista da Sociedade Brasileira de Enfermeiros Pediatras*, 19(2), 65-73. <https://doi.org/10.31508/1676-3793201900009>
- Goldfeld, S., Bryson, H., Mensah, F., Price, A., Gold, L., Orsini, F., Kenny, B., Perlen, S., Mudiyansele, S. B., Dakin, P., Bruce, T., Harris, D., & Kemp, L. (2022). Nurse home visiting to improve child and maternal outcomes: 5-year follow-up of an Australian randomised controlled trial. *Plos One*, 17(11), e0277773. <https://doi.org/10.1371/journal.pone.0277773>
- Goldfeld, S., Napiza, N., Quach, J., Reilly, S., Ukoumunne, O. C., & Wake, M. (2011). Outcomes of a universal shared reading intervention by 2 years of age: The let's read trial. *Pediatrics*, 127(3), 445-453. <https://doi.org/10.1542/peds.2009-3043>
- Graça, L. C., Figueiredo, M. C., & Conceição, M. T. (2011). Contributos da intervenção de enfermagem de cuidados de saúde primários para a promoção do aleitamento materno. *Revista Latino-Americana de Enfermagem*, 19(2), 429-436. <https://doi.org/10.1590/S0104-11692011000200027>
- Henriksson, H., Alexandrou, C., Henriksson, P., Henström, M., Bendtsen, M., Thomas, K., Müssener, U., Nilsen, P., & Löf, M. (2020). MINISTOP 2.0: A smartphone app integrated in primary child health care to promote healthy diet and physical activity behaviours and prevent obesity in preschool-aged children: Protocol for a hybrid design effectiveness-implementation study. *BMC Public Health*, 20(1), 1756. <https://doi.org/10.1186/s12889-020-09808-w>
- Hiscock, H., Bayer, J. K., Price, A., Ukoumunne, O. C., Rogers, S., & Wake, M. (2008). Universal parenting programme to prevent early childhood behavioural problems: Cluster randomised trial. *BMJ*, 336(7639), 318. <https://doi.org/10.1136/bmj.39451.609676.AE>
- Jeong, J., Franchett, E. E., Oliveira, C. V., Rehmani, K., & Yousafzai, A. K. (2021). Parenting interventions to promote early child development in the first three years of life: A global systematic review and meta-analysis. *Plos Medicine*, 18(5), e1003602. <https://doi.org/10.1371/journal.pmed.1003602>
- Laffite, L. T., Souza, F. H., Dias, F., Ribeiro, N., Altafim, E. R., & Linhares, M. B. (2022). *Conexão do programa ACT para educar crianças em ambientes seguros com as políticas da primeira infância no estado do Ceará: Caminhos para a sustentabilidade*. Instituto de Valorização da Educação e Pesquisa do Estado de São Paulo. <https://ivep.org.br/wp-content/uploads/2023/07/Ebook-Programa-ACT-digital-Caminhos-para-Sustentabilidade.pdf>
- Kemp, L., Harris, E., McMahon, C., Matthey, S., Vimpani, G., Anderson, T., Schmied, V., & Aslam, H. (2013). Benefits of psychosocial intervention and continuity of care by child and family health nurses in the pre- and postnatal period: Process evaluation. *Journal of Advanced Nursing*, 69(8), 1850-1861. <https://doi.org/10.1111/jan.12052>
- Melnik, B. M., & Fineout-Overholt, E. (2018). *Evidence-based practice in nursing & healthcare: A guide to best practice* (4th ed.). Wolters Kluwer Health.
- Piro, S. S., & Ahmed, H. M. (2020). Impacts of antenatal nursing interventions on mothers' breastfeeding self-efficacy: An experimental study. *BMC Pregnancy and Childbirth*, 20(1), 19. <https://doi.org/10.1186/s12884-019-2701-0>
- Rae, S., Maguire, J., Aglipay, M., Barwick, M., Danavan, K., Haines, J., Jenkins, J., Klaassen, M., Moretti, M. E., Ong, F., Persaud, N., Porepa, M., Straus, S., Tavares, E., Willan, A., & Birken, C. (2023). Randomized controlled trial evaluating a virtual parenting intervention for young children at risk of obesity: Study protocol for parenting addressing early years intervention with coaching visits in Toronto (PARENT) trial. *Trials*, 24(1), 8. <https://doi.org/10.1186/s13063-022-06947-w>
- Reticena, K. O., Gomes, M. F., & Fraccolli, L. A. (2022). Promoção da parentalidade positiva: Percepção de enfermeiros da atenção básica. *Texto & Contexto Enfermagem*, 31, e20220203. <https://doi.org/10.1590/1980-265X-TCE-2022-0203pt>
- Santamaria-Martín, M. J., Martín-Iglesias, S., Schwarz, C., Rico-Blázquez, M., Portocarrero-Nuñez, J. A., Díez-Izquierdo, L., Llamas-Falcón, L., Rodríguez-Barrientos, R., Del-Cura-González, I., & Grupo PROLACT. (2022). Effectiveness of a group educational intervention – prolact - in primary care to promote exclusive breastfeeding: A cluster randomized clinical trial. *BMC Pregnancy and Childbirth*, 22(1), 132. <https://doi.org/10.1186/s12884-022-04394-8>
- Sari, C., & Altay, N. (2020). Effects of providing nursing care with a web-based program on maternal self-efficacy and infant health. *Public Health Nursing*, 37(3), 380-392. <https://doi.org/10.1111/phn.12712>
- Schlottmann, H., Broome, M., Herbst, R., Burkhardt, M. C., & Mescher, A. (2019). Nurse-led telephone follow-up to improve parent promotion of healthy behaviors in young children with motivational interviewing techniques. *Journal of Pediatric Health Care*, 33(5), 545-554. <https://doi.org/10.1016/j.pedhc.2019.02.003>



- Stel, H. F., Staal, I. I., Hermanns, J. M., & Schrijvers, A. J. (2012). Validity and reliability of a structured interview for early detection and risk assessment of parenting and developmental problems in young children: A cross-sectional study. *BMC Pediatrics*, 12(1), 71. <https://doi.org/10.1186/1471-2431-12-71>
- World Health Organization, United Nations Children's Fund, & World Bank Group. (2018). *Nurturing care for early childhood development: A framework for helping children survive and thrive to transform health and human potential*. <https://apps.who.int/iris/bitstream/handle/10665/272603/9789241514064-eng.pdf>