

Last reviewed: September 2024

Intervention website: www.triplep-parenting.net/

GUIDEBOOK INTERVENTION INFORMATION SHEET

Triple P Seminar Series

Please note that in the ‘Intervention summary’ table below, ‘child age’, ‘level of need’, and ‘race and ethnicities’ information is **as evaluated in studies**. Information in other fields describes the intervention **as offered/supported by the intervention provider**.

Intervention summary	
Description	Triple P Seminar Series is a parenting intervention for parents with everyday concerns about the behaviour of a child between 0 to 12 years. It is delivered by an accredited Triple P practitioner in a large group format (for 20 to 200 parents) via three sessions lasting 90 minutes each. During these sessions, parents learn strategies for encouraging positive child behaviour.
Evidence rating	2
Cost rating	1
Child outcomes	<ul style="list-style-type: none">• Preventing crime, violence and antisocial behaviour- Improved behaviour.
Child age (population characteristic)	0 to 12 years
Level of need (population characteristic)	Universal

Foundations Guidebook – Intervention information sheet

Visit the Foundations Guidebook | www.foundations.org.uk/guidebook

Intervention summary	
Race and ethnicities (population characteristic)	Not reported
Type (model characteristic)	Promotion-Plus
Setting (model characteristic)	<ul style="list-style-type: none">• School• Community centre.
Workforce (model characteristic)	<ul style="list-style-type: none">• Parenting professional• Teachers.
UK available?	Yes
UK tested?	No

Model description

Triple P Seminar Series is part of the Triple P multi-level system of family support and is offered as universally to any parent with a child between 0 to 12 years old.

It is delivered by an accredited Triple P to groups of up to 200 parents via three 60-minute seminars (plus 30 minutes' question time) covering the following topics:

- **Seminar 1: Positive parenting:** Practitioners introduce parents to the five key principles of positive parenting that form the basis of Triple P. These principles are:
 - Ensuring a safe engaging environment
 - Creating a positive learning environment
 - Using assertive discipline
 - Having reasonable expectations
 - Looking after yourself as a parent.
- **Seminar 2: Raising confident, competent children:** Parents are introduced to six core building blocks for children to become confident and successful at school and beyond:
 - Showing respect to others
 - Being considerate

Foundations Guidebook – Intervention information sheet

Visit the Foundations Guidebook | www.foundations.org.uk/guidebook

- Having good communication and social skills
- Having healthy self-esteem
- Being a good problem-solver
- Becoming independent.
- **Seminar 3: Raising resilient children:** Parents are introduced to six core building blocks for children to manage their feelings and become resilient in dealing with life stress:
 - Recognising and accepting feelings
 - Expressing feelings appropriately
 - Building a positive outlook
 - Developing coping skills
 - Dealing with negative feelings
 - Dealing with stressful life events.

Each seminar focuses on enhancing parenting knowledge, skills, and confidence to prevent severe behavioural, emotional, and developmental problems in children and is supplemented with take-home tip sheets.

Target population

Age of child	0 to 12 years
Target population	<ul style="list-style-type: none">• Parents interested in participating in parent education• Parents who have minor concerns about their child's behaviour or development.

Please note that the information in this section on target population is as **offered/supported by the intervention provider**.



Theory of change

Why		Who	How	What		
Science-based assumption	Science-based assumption	Science-based assumption	Intervention	Short-term outcomes	Medium-term outcomes	Long-term outcomes
<ul style="list-style-type: none"> • Young children naturally behave in challenging and non-compliant ways • Challenging child behaviours during preschool and primary school increase the risk of more serious behavioural problems in adolescence. 	<ul style="list-style-type: none"> • Effective parenting behaviours help child to regulate their own behaviour and reduce the risk of child behavioural problems persisting • Ineffective parenting strategies can increase the risk of child behavioural problems persisting. 	<p>All parents can benefit from strategies aimed at helping children regulate their own behaviour and encouraging positive child behaviour.</p>	<p>Parents learn:</p> <ul style="list-style-type: none"> • Strategies for promoting positive parent–child interaction through non-directive play • Strategies for reinforcing positive child behaviour through praise and rewards • Strategies discouraging challenging child behaviour through age-appropriate discipline. 	<ul style="list-style-type: none"> • Parents implement effective parenting strategies in the home • Parents' confidence increases • Parental stress reduces • Parent–child interaction improves. 	<p>Children's self-regulatory capabilities and behaviour improves.</p>	<ul style="list-style-type: none"> • Children are at less risk of problematic behaviour in adolescence • Children are more compliant and better able to engage positively with others.



Implementation requirements

Who is eligible?	All parents of children aged 0 to 12 who are interested in participating in parent education and may have minor concerns about their child's behaviour or development.
How is it delivered?	Triple P Seminars has three standalone topics, delivered in three sessions of 90 minutes' duration each by one practitioner to 20 to 200 parents.
What happens during the intervention?	Participants learn parenting skills and gain confidence in preventing behavioural, emotional, and developmental problems in children.
Who can deliver it?	The practitioner who delivers this intervention is an accredited Triple P Practitioner, typically with qualifications and experience in a helping profession.
What are the training requirements?	The practitioners have 3.5 days of intervention training. Ongoing and regular peer support is recommended once a month.
How are practitioners supervised?	Triple P supervision is managed by the local implementing organisation. Triple P teaches the model of Peer Assisted Support and Supervision (PASS) as a model for sustainability to embed within local practice. Where organisations already have a supervisor model in place, it is recommended the supervisor has a master's qualification in a helping profession and knowledge of Triple P. Triple P supervisors are encouraged to attend agency training as an observer at no cost, to develop an understanding of intervention content and process (maximum two places per agency training course).
What are the systems for maintaining fidelity?	Intervention fidelity is maintained through the following processes: <ul style="list-style-type: none"> • Training manual • Fidelity monitoring • Accreditation process • Supervision.
Is there a licensing requirement?	No
Contact details	Organisation: Triple P UK Email Address: contact@triplep.uk.net



	Websites: www.triplep-parenting.net www.triplep.net https://pfsc-evidence.psy.uq.edu.au/
--	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Evidence summary

Triple P Seminar Series' most rigorous evidence comes from a single RCT consistent with Foundation's Level 2 evidence strength criteria. This study identified statistically significant reductions in child behavioural problems.

Search and review

	Number of studies
Identified in search	12
Studies reviewed	1
Meeting the L2 threshold	1
Meeting the L3 threshold	0
Contributing to the L4 threshold	0
Ineligible	11

Individual study summary: Study 1

Study 1	
Study design	RCT
Country	Greece
Sample characteristics	124 parents living in the Athens area with an average child age of 5.5 years. Most participants were mothers, married, mostly university-educated,



Study 1	
	worked full-time, had average monthly family incomes, and had one or two children.
Race, ethnicities, and nationalities	Not reported
Population risk factors	N/A
Timing	Post-intervention and six-month follow-up
Child outcomes	Reduced child behavioural problems
Other outcomes	Reduced dysfunctional discipline styles
Study Rating	2
Citation	Foskolos, K., Gardner, F. & Montgomery, P. (2023) Brief parenting seminars for preventing child behavioural and emotional difficulties: A pilot randomized controlled trial. <i>Journal of Child and Family Studies</i> . 32 (10), 3063–3075.

Brief summary

Population characteristics

This study involved a sample of 124 parents from Athens, Greece, who had at least one child aged 2 to 12 years, with an average child age of 5.5 years. Most parents were university-educated (81%), working (71%), mothers (84%), from middle-income (44%) urban households.

Study design

Eighty parents (representing 83 children) were randomly assigned to Triple P Seminar Series and 40 parents (representing 40 children) to the control condition.

This study adopted a pragmatic randomised controlled trial design, where researchers stratified participants into permuted blocks according to child gender, child age, and clinical status of child behaviour difficulties. The researcher's assistant then randomly allocated participants on a 2:1 basis, using an online computerized random integer generator. Issues regarding the stratification of the sample, however, compromised the randomisation of the groups.



Families allocated to the control condition received a leaflet on child health and development provided by the Greek National Health Services of the Ministry of Health. Topics covered included vaccinations, common childhood illnesses, first aid guide on severe injuries and cuts, and nutrition.

Measurement

Parents completed an assessment booklet of validated parent and child measures at baseline, immediately post-intervention and at a six-month follow-up. One parent completed a booklet for each child within the intervention's target age range.

- **Parent report** measures included the 36-item Eyberg Child Behaviour Inventory (ECBI) intensity scale and problem scale, the 48-item Conners Parent Rating Scale (CPRS), the 30-item Parenting Scale (PS), the 28-item Parenting Tasks Checklist (PTC) to measure parental confidence in dealing with specific child behaviours and the 11-item General Health Questionnaire (GHQ) to assess common psychological distress on a 4-point scale.

Study retention

Post-intervention

72% (89) of the parents completed measures immediately after completing the intervention, including 75% (62) of the Triple P parents and 66% (27) assigned to the control group.

Six-month follow-up

63% (78) of the study participants completed measures at the six-month follow-up, including 63% (52) of the parents attending Triple P Seminar Series and 63% (26) assigned to the control group.

Results

Data-analytic plan

Analysis was conducted with the entire sample within an intent-to-treat design, substituting the group median for missing data. Repeated measures ANCOVAs and MANOVAs were used to analyse the findings.

Findings

The study observed statistically significant reductions in parents' perceptions of the intensity of child behaviour problems immediately post-intervention and at the six-month follow-up. Reductions in parental reports of dysfunctional disciplinary styles were also observed immediately post-intervention.

Limitations

The conclusions that can be drawn from this study are limited by methodological issues pertaining to non-equivalent groups, hence why a higher rating is not achieved.



Study 1: Outcomes table

Outcome	Measure	Effect size	Statistical significance	Number of participants	Measurement time point
Child outcomes					
Intensity of child behavioural problems	Eyberg Child Behaviour Inventory (ECBI) (Parent report)	d=0.74	Yes	123	Post-intervention
Intensity of child behavioural problems	Eyberg Child Behaviour Inventory (ECBI) (Parent report)	d=0.47	Yes	123	Six-month follow-up
The number of behavioural difficulties seen as problematic by the parent	Eyberg Child Behaviour Inventory (ECBI) (Parent report)	d=.06	No	123	Post-intervention
The number of behavioural difficulties seen as problematic by the parent	Eyberg Child Behaviour Inventory (ECBI) (Parent report)	Not reported	No	123	Six-month follow-up
Child conduct	Conners Parent Rating Scale (CPRS) (Parent report)	d=.34	No	123	Post-intervention
Child conduct	Conners Parent Rating Scale (CPRS) (Parent report)	Not reported	No	123	Six-month follow-up



Outcome	Measure	Effect size	Statistical significance	Number of participants	Measurement time point
Child anxiety	Conners Parent Rating Scale (CPRS) (Parent report)	$d=.25$	No	123	Post-intervention
Child anxiety	Conners Parent Rating Scale (CPRS) (Parent report)	Not reported	No	123	Six-month follow-up
Parent outcomes					
Dysfunctional discipline styles	Parenting Scale (Parent report)	$d=0.49$	Yes	123	Post-intervention
Dysfunctional discipline styles	Parenting Scale (Parent report)	Not reported	No	123	Six-month follow-up
Parental confidence in different settings	Parenting Tasks Checklist (Parent report)	$d=.16$	No	123	Post-intervention
Parental confidence in different settings	Parenting Tasks Checklist (Parent report)	Not reported	No	123	Six-month follow-up
Parental confidence in dealing with specific child behaviours	Parenting Tasks Checklist (Parent report)	$d=.35$	No	123	Post-intervention



Outcome	Measure	Effect size	Statistical significance	Number of participants	Measurement time point
Parental confidence in dealing with specific child behaviours	Parenting Tasks Checklist (Parent report)	Not reported	No	123	Six-month follow-up
Common psychological distress	General Health Questionnaire (GHQ) (Parent report)	$d = -.09$	No	123	Post-intervention
Common psychological distress	General Health Questionnaire (GHQ) (Parent report)	Not reported	No	123	Six-month follow-up

Other studies

The following studies were identified for this intervention but did not count towards the intervention's overall evidence rating. An intervention receives the same rating as its most robust study or studies.

Boyle, C., Sanders, M. R., Ma, T., Hodges, J., Allen, K. A., Cobham, V. E. ... & Trompf, M. (2023) The thriving kids and parents schools project: Protocol of an incomplete stepped wedged cluster randomised trial evaluating the effectiveness of a Triple P seminar series. *BMC Public Health*. 23 (1), 2021.

Gonzalez, M., Ateah, C. A., Durrant, J. E. & Feldgaier, S. (2019) The impact of the Triple P seminar series on Canadian parents' use of physical punishment, non-physical punishment and non-punitive responses. *Behaviour Change*. 36 (2), 102–120.

Özyurt, G., Dinsever, Ç., Çalışkan, Z. & Evgin, D. (2018) Effects of Triple P on digital technological device use in preschool children. *Journal of Child and Family Studies*. 27, 280–289.

Özyurt, G., Dinsever, C., Caliskan, Z. & Evgin, D. (2018) Can positive parenting program (Triple P) be useful to prevent child maltreatment? *Indian Journal of Psychiatry*. 60 (3), 286.

Prinz, R. J., Sanders, M. R., Shapiro, C. J., Whitaker, D. J. & Lutzker, J. R. (2009) Population-based prevention of child maltreatment: The US Triple P system population trial. *Prevention Science*. 10, 1–12.



Salari, R., Fabian, H., Prinz, R., Lucas, S., Feldman, I., Fairchild, A. & Sarkadi, A. (2013) The Children and Parents in Focus project: A population-based cluster-randomised controlled trial to prevent behavioural and emotional problems in children. *BMC Public Health*. 13 (1), 1–8.

Sanders, M., Prior, J. & Ralph, A. (2009) An evaluation of a brief universal seminar series on positive parenting: A feasibility study. *Journal of Children's Services*. 4 (1), 4–20.

Sanders, M. R., Ralph, A., Thompson, R., Sofronoff, K., Gardiner, P., Bidwell, K. & Dwyer, S. (2005) *Every family: A public health approach to promoting children's wellbeing* (Study 3, p. 72). University of Queensland.

Schilling, S., Lanier, P., Rose, R. A., Shanahan, M., & Zolotor, A. J. (2020) A quasi-experimental effectiveness study of Triple P on child maltreatment. *Journal of Family Violence*. 35, 373–383.

Sumargi, A., Sofronoff, K., & Morawska, A. (2015) A randomized-controlled trial of the Triple P-Positive Parenting Program seminar series with Indonesian parents. *Child Psychiatry & Human Development*. 46, 749–761.

—

Note on provider involvement: This provider has agreed to Foundations' terms of reference (or the Early Intervention Foundation's terms of reference), and the assessment has been conducted and published with the full cooperation of the intervention provider.