The Development and Dissemination of the Triple P—Positive Parenting Program: A Multilevel, Evidence-Based System of Parenting and Family Support

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This paper describes the theoretical and empirical basis of a unique multilevel system of parenting and family support known as the Triple P—Positive Parenting Program. The program incorporates five levels of intervention on a tiered continuum of increasing strength and narrowing population reach. The self-regulation framework of the program is discussed and an ecological or systems-contextual approach to dissemination of the program to service providers is highlighted. Implementation issues to consider in effective program dissemination are discussed including managing the “politics” of family support, strategies for coping with changes in government, maintaining quality, balancing cost and sustainability, and remaining data responsive. Future research directions are identified.

KEY WORDS: dissemination; Positive Parenting Program; multilevel; family support.

The Triple P—Positive Parenting Program was developed as a system of parenting and family support to assist parents to promote their children’s social competence and manage common developmental and behavioral problems. Although parenting interventions based on social learning principles (Patterson, 1982) are the most effective parenting programs available (Kazdin, 1991; McMahon & Wells, 1998), they are not widely used, expensive to deliver, and most importantly, have made little impact on the prevalence of behavioral disorders in children (Sanders, 2001). Many of the parent training and family intervention programs developed to date have been delivered as remedial treatment after serious conduct problems have developed or as early interventions for high-risk children already showing signs of behavioral disorder. As dysfunctional parenting is related to a wide range of health, social and educational problems in children and young people, we believed a population approach that sought to improve parental competencies in the community was needed. This paper describes the Triple P system of intervention, its conceptual and empirical base and discusses issues relevant to its successful dissemination and implementation at a population level.

WHAT IS TRIPLE P?

The Triple P model of parenting and family support is a contemporary behavioral family intervention (BFI) that aims to prevent severe behavioral and emotional disturbances in children. A unique characteristic of Triple P is that rather than being a single program it is a multilevel system of parenting support on a tiered continuum of increasing intensity. The Triple P system aims to promote positive, caring relationships between parents and their children and to help parents develop effective management strategies for dealing with a variety of childhood behavior problems and common developmental issues (Sanders et al., 2000b). Apart from improving parenting skills, the program aims to increase parents’ sense of competence in their parenting abilities, improve couples’ communication about parenting, and reduce
parenting stress. The acquisition of specific parenting competencies results in improved family communication and reduced conflict that in turn reduces the risk that children will develop a variety of behavioral and emotional problems. Although the original research on Triple P focused on conduct problems in children, many of the same social learning principles and processes within families (e.g., contingent positive support for adaptive, prosocial or incompatible behaviors, use of effective consequences to decrease maladaptive behaviors) are relevant to other childhood disorders, and have been successfully applied to an increasingly diverse range of childhood problems such as depression, anxiety, feeding difficulties, habit disorders, and recurrent pain syndromes (see Sanders, 1996, 1998; Sanders et al., 1994).

The Triple P model is based on the principle of sufficiency. That is, amongst parents who are concerned about their child’s behavior, there are individual differences in the severity of problems experienced (mild to severe), breadth of knowledge, motivation, access to support, and the presence of additional family stresses (e.g., relationship conflict, financial difficulties). It is therefore unlikely that any single family intervention program will cater for the requirements of all parents. The Triple P model assumes that the differing needs of parents will require differing levels of support. Consequently, Triple P allows the strength of the intervention to be tailored to the assessed needs and preferences of individual families. It incorporates five levels of intervention (see Table 1) for parents of preadolescent children from birth to 12 years, with recent extensions of the program for parents of teenagers. The application of the principle of sufficiency means that the same content (e.g., a specific parenting plan for managing fighting or aggression) can be provided with different intensities of skills training and practitioner support (e.g., a tip sheet plus video demonstrating the strategy versus a tip sheet plus video plus behavioral rehearsal and coaching with a practitioner).

Level 1, a universal parent information strategy, provides all interested parents with access to useful information about parenting through a coordinated media and promotional campaign using print and electronic media, as well as user-friendly parenting tip sheets and videotapes that demonstrate specific parenting strategies. This level of intervention aims to increase community awareness of parenting resources and receptivity of parents to participating in parenting programs, and to create a sense of optimism by depicting solutions to common behavioral and developmental concerns. Level 2 is a brief, one-to-two session primary health care intervention providing early anticipatory developmental guidance to parents of children with mild behavior difficulties. Level 3, also a brief primary health care intervention (up to 80 min of contact), targets children with mild to moderate behavior difficulties and includes active skills training for parents. Level 4 is an intensive 10-session individual or 8-session group parent training program for children with more severe behavioral difficulties. Level 5 is a 5- to 11-session enhanced BFI program for families where parenting difficulties are complicated by other sources of family distress (e.g., relationship conflict, parental depression, or high levels of stress). It builds on Level 4, with additional modules targeting home practice of parenting skills, coping skills, and partner support skills.

This multilevel model has considerable flexibility and enables parents to participate in the program at different levels of intensity depending on the parent’s assessed need (e.g., parenting concerns alone versus parenting concerns plus marital conflict) and parental availability. In the case of universal level intervention the goals are to normalize and destigmatize parent-child interaction. Many of the issues that are relevant to parents (e.g., parental consistency, having engaging supervised activities for children, positive attention) can be depicted at all levels of the intervention, however the intensity of intervention support will vary (e.g., number of sessions required, amount of practice, and feedback provided to the parent). Furthermore, parents may enter the system (for the first time) or re-enter the system for subsequent parenting support at any level (e.g., at a later developmental phase or with other siblings) for booster sessions.

THEORETICAL BASIS OF TRIPLE P

Triple P is a contemporary form of behavioral family intervention. Across the five levels of the intervention the Triple P system draws on:

(i) Social learning models of parent-child interaction that highlight the reciprocal and bi-directional nature of parent–child interactions (e.g., Patterson, 1982);

(ii) Research in child and family behavior therapy that has identified many useful behavior change techniques (Sanders, 1992, 1996);

(iii) Developmental research on parenting in everyday contexts that has identified children's competencies in naturally occurring