Triple P in action with complex cases

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Overview

- Our background
- Dynamics of complex cases
- Understanding the different levels of Triple P
- Referral process
- Case planning
- Case examples of Triple P with complex cases
- Fidelity versus flexibility in program delivery
- Resistance
- Points to remember

Our Background

- Michelle has been a Triple P practitioner for 13 years and a Triple P trainer for 10 years
 She has utilised Triple P with clients referred from Child Youth and Family Services, Family Court, CCS, IBS, Corrections and HCN cases
- Anna has been a Triple P practitioner for 15 years and a Triple P trainer for 10 years
 She has utilised Triple P with clients referred from Child Youth and Family Services, Family Court and IBS
- Sally has been a Triple P practitioner for 3 years and has used Triple P with clients referred from Child Youth and Family Services, Probation and IBS

Dynamics of complex cases

- Abuse and neglect
- Substance abuse
- Domestic violence
- Anger management issues
- Limited family/whanau or social support
- Relationship issues and different parenting styles
- Separated and single parents
- Parental stress, depression and anxiety
- Engagement/ motivation
- Mental health issues for parents
- Educational issues and/or special needs (Parents and children)
 - High and complex needs cases

Levels of Triple P

- Level 1 Universal Triple P
 - Media based parenting information campaign
- Level 2 Selected Triple P
 - Information and advice for a specific concern
- Level 3 Primary Care Triple P
 - Narrow focus parenting skills training
- Level 4 Standard/Group/Self-directed Triple P
 - Broad focus parenting skills training
- Level 5 Enhanced Triple P
 - Behavioural family intervention

Level 4 Interventions

- Broad focus parent skills training
- Active skills training
- Generalisation of strategies
- Based on 10 sessions
 - Assessment and feedback
 - Causes of children's behaviour problems
 - Positive parenting strategies
 - Managing Misbehaviour strategies
 - Support, coaching and practice
 - Planned activities for high-risk settings
 - Maintenance and closure

Level 5 Interventions: Enhanced and Pathways

- Adjunct to other intervention levels
- Review and feedback
- Negotiation of additional modules tailored to family's needs
 - Coping Skills Module
 - Partner Support Module
 - Attribution Retraining
 - Anger Management
- Maintenance and closure

Referral Process

- Client consent and mandate (where necessary)
- Having clear and specific information about the case
- Being clear with the referer regarding your role and the intervention required
- Clients understanding the their expectations of the Triple P intervention
- Reviewing the data collected regarding any partner support, relationship and emotional wellbeing issues
- Keep reassessing any complex issues that may arise

Case Planning

Issues to consider:

- Assessment issues that arise
- Meetings with other Professionals
- Involving the client in meetings
- Supervision
- Timing of the Triple P intervention
- Client engagement
- Resistant clients
- Motivation of the client

Exercise 1

- Think about a previous or current complex case you have been involved with
- What case planning did you do and what parts went well?
- What could you have focused on more or done differently?
- Discuss with the person next to you

Case Example 1 Anna IWS

Referral :

- Single Mum Father not involved
- History of Domestic Violence
- Referral from Intensive Wrap around Service Ministry of Education
- Challenging behaviour at home and school
- Only Child 8 year old boy
- Limited support networks
- Many agencies involved with the family
- Parental anxiety

Case example 1 continued

Triple P Intervention:

- Triple P standard programme (Principles of Positive Parenting, Observation, Positive strategies and strategies for managing
- Level 5 Pathways module (Attribution Retraining) was negotiated (3 sessions completed).
- Level 5 Coping Skills module negotiated

 Other interventions through Teacher aide, CAMHS, RTLB, Speech Therapy

Case example 1 outcomes and learnings

Outcomes:

- Qualitative reports of improvement in: parenting style (tone of voice, awareness of anger, self calming).
 Son's behaviour
- Explore and understand Impact of own parenting history
- Self awareness of modelling behaviours
- Ongoing ability to self goal set
- Evolving Intervention plan

Case example 2 Michelle CYFS

- Referral :
- Two parent family-separated parents (had on again off again relationship)
- Mother convicted of physical assault on her12 yr old son – she was not allowed to live in family home
- Two children 12yrs (boy) and 8yrs (girl)
- Syr old has diabetes and challenging behaviour
- Limited family support
- Dad was working fulltime, now stopped work to care for kids
- Disagreement between parents regarding parenting
- Past domestic violence between parents
- Dad anger management issues
- Dad Maori, Mum Pakeha

Case example 2 continued

Intervention

- Triple P standard programme 10–12 sessions completed separately with both parents, focusing on strategies to encourage good behaviour and alternatives to manage misbehaviour, involving children in family meetings were appropriate
- A focus on managing your emotions while parenting also part of the sessions
- Triple P Enhanced: Partner support sessions together focusing on communication and working together as parents
- Other interventions: Living Without Violence course for Dad, support from hospital diabetes team. Regular meetings with Social worker, Counselling for 12 year old boy. Individual counselling for Mum.

Case outcomes and learnings

Outcomes:

- Reported improvements in 8 year olds behaviour from both parents
- Post questionnaires showed significant improvements in child behaviour, parenting, partner support and emotional wellbeing
- Dad had developed awareness and insight into what he needs to focus on e.g. praising for good behaviour and being consistent with consequences
- They developed more realistic expectations of the children and themselves
- Both parents now have a plan regarding how to prevent and manage any misbehaviour

Learning's:

- Dad realising working helps him cope better and is finding a part time job
- Mum beginning to develop insight into her own behaviour and the impact on her parenting and her relationship with her children -counselling was put in place to explore this further
- Open and honest communication with Social worker when difficulties occurred

Fidelity vs Flexibility

- Fidelity : Order of sessions and Triple P Content needs to stay the same
- Don't add other strategies

Flexibility could include:

- More sessions
- Longer or shorter sessions
- Covering less content in a session while keeping it in the same order
- Processes having an initial engagement session or starting the session in a specific way
- Home visits /phone calls/Skype sessions

Client resistance

- Often related to change
- What else might be going on, that we don't know about
- Consider timing of the intervention
- Goals and expectations of client and referral agency
- Their past experiences with agencies/ services

Exercise 2

- Think about a complex case you have or could have in the future
- How could you utilise Triple P, whilst keeping the fidelity of the programme?
- Does it require a different level of intervention?
- What other interventions might the family need other than parenting?
- Discuss with the person next to you

Things to consider with complex cases – points to remember

- May often require Triple P parenting in conjunction with other levels e.g. level 5: Enhanced/Pathway modules
- May take more time, sessions and possibly follow up or review sessions after main intervention is completed
- Other interventions maybe needed that you don't provide e.g. CADS, Living Without Violence course
- Taking care of yourself as a practitioner
- Timing of interventions
- Supervision and self reflection