



A Population Approach to Parenting and Family Support

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***Taking Parenting Programmes to the People:
Lessons from Around the World***

University of Auckland, Auckland, New Zealand, 24February 2010



Critical Question

**In trying to prevent child maltreatment:
Why adopt a population frame for
parenting and family support?**

1. CM has low base rate

- Official CM occurs in very small proportion of the population
- Difficult to know who might enter the child welfare system
- Population approach casts a bigger net to increase the likelihood of prevalence reduction

2. Avoids stigmatized approach

- Parents do not want to be characterized as at risk for child abuse
- Parenting and family support that is perceived as for every parent (rather than only at-risk parents) offers a non-stigmatized frame
- Easier to engage parents with a normalized approach

3. Addresses problematic parenting

- Much more common than official CM
- Problematic parenting practices are detrimental to child development, even if an official child protective services response is not triggered

Problem grossly underestimated

- Study by Theodore, Chang, Runyan et al. (2005)
- Random telephone survey in North and South Carolina
- Incidence of physical abuse in the telephone survey was 40 times greater than the official records showed

Epidemiologic features of the physical and sexual maltreatment of children in the Carolinas.
Pediatrics, 115, 331-3337.

Widespread Parenting Practices

- Random-dial telephone survey of 3,600 SC parents of children under 8 years old
- 49% reported heavy reliance on discipline strategies for child misbehavior that are considered ineffective and mostly coercive
- 10% reported they spanked using an object on a frequent or very frequent basis

4. Creates greater efficiency

- Implemented at a population level, a broad parenting and family support strategy can address multiple goals with the same intervention
- Avoids the added cost of different interventions for each goal
- Facilitates continuity across settings/agencies, service delivery personnel, intervention contexts

Targeting Multiple Outcomes

1. Prevention of child maltreatment
2. Reduction of coercive parenting more generally
3. Prevention of children's (early) social, emotional, behavioral and health problems
4. Improving child adjustment at school entry
5. Early intervention/treatment for child mental health problems
6. Reduction of risk for adolescent delinquency

What is required for a population approach?

1. Target multiple outcomes to justify broader implementation (and investment)
2. Non-stigmatized programming
3. Efficient dissemination strategy
4. Strong evidence base

U.S. Triple P System Population Trial

If geographical units were randomized to an evidence-based parenting intervention (such as Triple P), would population indicators associated with child maltreatment be impacted?

This type of question had never been tested in the child-maltreatment prevention field.

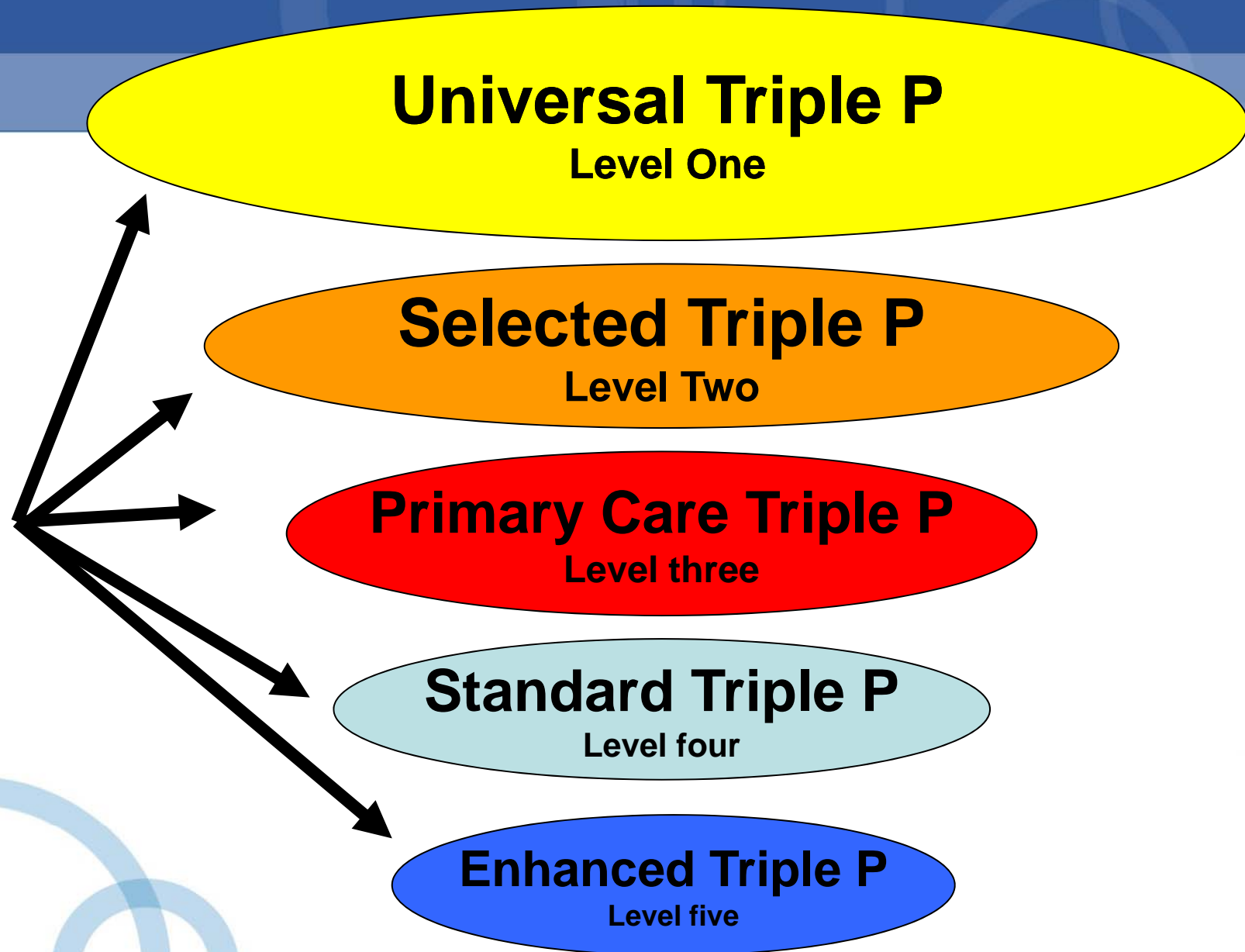
TRIPLE P—Positive Parenting Program

- Developed by Prof Matt Sanders and colleagues at the Parenting and Family Support Centre, University of Queensland
- Triple P based on over 30 years of research and implementation
- Designed from the outset as a public health strategy created for broad-scale dissemination
- Grounded in a self-regulation framework

What makes TRIPLE P unique?

- Suite or coordinated system of evidence based programs (not a single program):
 - Multi-level programs of increasing intensity
 - Parenting across developmental periods from infancy through adolescence
 - Based on core principles of positive parenting, which provides continuity and consistency
- Integrates media and communication strategies with face-to-face programming
- Continuum of prevention, early intervention, and treatment
- Blending of universal and targeted programs
- Uses self-regulatory framework

Levels of Intervention



Creation of multiple access points

To give parents easy access:

- Multidisciplinary:
 - Service providers from many disciplines who serve families
 - No discipline “owns” or controls Triple P
- Utilize the existing workforce
- Train large numbers of service providers
- Involve many settings where parents have routine contact

Synergistic Goal in Pop. Dissem.

Implement the entire Triple P System
concurrently

Media/communication strategies (Level 1)

Parenting seminars (Level 2)

Brief consultation levels (Levels 2 & 3)

More intensive programming (Levels 4 & 5)

Universal Triple P (media strategy)

- Normalize the seeking of parenting information
- De-stigmatize the participation in parenting programs
- Validate:
 - Parents who are already participating in parenting interventions
 - Service providers who are implementing Triple P with parents
- Empower parents to address parenting challenges without relying heavily on face-to-face professional contact

Media Coverage

G YORK • CHESTER • LANCASTER COUNTIES

e Herald

Rock Hill • South Carolina

heraldonline.com

Power of Triple P

Program helps girl develop, bond with foster parents

By Karen Bair
The Herald

Lisa was 18 months old when she finally responded to hugs.

"Failure to thrive" was the diagnosis when she arrived at Tom and Nan Goforth's home as a 3-month-old foster child. It meant she had never experienced human bonding. She had never known kissing, holding, touching.

She screamed at noises, at touching or tasting anything that was wet, and did not want to interact with people. When she was old enough to talk, she did not want to. She climbed before she walked. She jumped without fear from tabletops when she was 2 and never cried if she was hurt. She intentionally knocked things over. She sped headfirst into walls, turned around and did it again.

The Goforths had taken in nine foster children before Lisa arrived.

"She was not like any other child I have had in our home," Nan said. "She was the most difficult. It took a long time for Lisa to bond."

Focusing on positive parenting

Lisa, whose last name not being identified because she is a foster child, was 2 when Nan, overwhelmed and in tears, carried her into the Catawba Family Center, where psychologist Sara Castillo introduced her to Triple P — Positive Parenting Program. Triple P consists of techniques to improve children's development and parents' confidence in parenting, reduce child abuse and prevent behavior problems. It was developed in Australia.

It came to South Carolina through a five-year, \$7.5 million grant from the Centers for Disease Control and Prevention to a University of South Carolina psychology professor. Berk County is one of nine counties where Triple P is being piloted to foster positive parenting to determine whether it can reduce child abuse. It teaches trainers to work with parents.

The program offers parents a variety of techniques. It can be as simple as getting close and using a firm voice instead of shouting at children when disciplining them.

"Raising your voice only teaches your children that you are angry," said Matt Sanders, director of the National Center on Positive Parenting.



Melissa Cherry • The Herald

Jasmine Goforth, 8, top, swings her foster sister, Lisa, 3, in the backyard. Lisa had problems bonding with her foster parents, Tom and Nan Goforth, before being helped through the Positive Parenting Program.

Education

Triple P helps parents take care of children, themselves

Raising children can be as frustrating as it is rewarding, but learning how to spot and avoid common parenting traps that can ensnare every parent from time to time can help parents keep their cool.

April was Child Abuse Prevention Month and the Triple P — Positive Parenting Program is helping Berkeley County parents improve their lives by learning ways to handle misbehavior, especially when faced with difficult situations.

"It's important for parents to find some support. Everyone needs support in raising children. Good support includes partners, family, and friends," said Sandra St. Don, Triple P Coordinator.

When parents find themselves in a parenting trap where they may react more negatively toward their children than they intend.

Using Triple P, St. Don said parents can learn how to spot common parenting traps including:

- The "Blame Trap": Parents blame themselves for their actions.
- The "You Made Me Do It" Trap: In this trap, the child is blamed for the parent's loss of control.
- The "I'm Not the Parent" Trap: Parents avoid some of the most common parenting traps.

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Workshop teaches joys of 'positive parenting'

The Town of Moncks Corner second reading of Council 7:00 p.m. at the Municipal Center, 1000 Carolina Avenue, Moncks Corner. Comments, written or verbal, are invited. An ordinance to amend the Code of Ordinances of the Town of Moncks Corner, South Carolina, is being read.

Rebecca Peake of Lugoff is a typical mother of three who intimately understands the joys and challenges of parenting. Like all parents, she gets frustrated when her kids misbehave and isn't sure where to turn for help to improve her parenting skills.

Jordau, executive director of Kershaw County First Steps, said, "It's important to be able to give parents, in lay terms, examples or model activities to help them at home. Triple P is a great example of that."

Peake agreed. "From just the notes I took here tonight I can go home and get a foundation started," she said. "This seminar has given me the information that I need to give my kids the best start. It gave me the soil and the seeds. Now I just have to grow it."

Triple P teaches several principles to parents including how to create a safe, interactive and positive environment for children, how to use discipline and how parents can take care of themselves. These principles are the foundation for Triple P — Positive Parenting Program.

"I'm tired of blowing my top, I'm tired of going around and feeling yelled at by my children. I want to be a better parent. I want to be a parent that my children can be proud of."

Correct bad behavior, or let it slide?

By DR. MATT SANDERS

We all know parenting isn't an easy task. For most of us, we begin our careers as parents without a lot of training or preparation. And because children don't come with their own instruction manual, complete with a crash course on how to raise them, we often find ourselves in a parenting trap where we may react more negatively toward our children than we intend.

Using Triple P, St. Don said parents can learn how to spot common parenting traps including:

- The "Blame Trap": Parents blame themselves for their actions.
- The "You Made Me Do It" Trap: In this trap, the child is blamed for the parent's loss of control.
- The "I'm Not the Parent" Trap: Parents avoid some of the most common parenting traps.

Some parents deal with misbehavior by blaming themselves. I have talked with many guilt-ridden and worried parents over the years. These parents blame themselves for almost every problem their child has and are severely depressed. The truth is, some children are simply harder to raise than others. Those who have feeding problems, cry excessively and have sleeping difficulties are hard for almost all parents to deal with.

And as our children grow, we play a large role in shaping their character. We can't control what happens in a classroom or a playground, but our influence on the classroom and playground will be significant.

Matthew Sanders, Ph.D., is a clinical psychologist and author of "The Power of Positive Parenting."

For more information, contact the Kershaw County First Steps Center at 432-7756.

Research design

- 18 counties
 - Each with 50K to 175K population
 - None had prior exposure to Triple P
- Counties were matched up by pairs on child abuse rates, poverty, and population size
- Random assignment of 18 counties to:
 - Triple P System
 - Comparison (services as usual)
- Referent population: All families with at least one child in the birth to 8-year-old age range

Training of Service Providers

- Train the existing workforce
- Hundreds of service providers working in a broad variety of settings:
 - daycare and preschools
 - mental health system
 - social services system
 - elementary schools
 - churches
 - NGOs (e.g., early-childhood service organizations)
 - healthcare system

Population reach of Triple P

- Eligible population: 85,000 families with at least one child birth to 8 years of age
- Based on systematic interviewing of Triple P service providers
- Exposure rate to Triple P programming (excluding media and parenting-seminar exposure) estimated between 9,075 and 13,620 families over a year
- Represents between 10.7% and 16.0% of families with a child birth to 7 years of age

Population outcomes

- Key indicators:
 - Child out-of-home placements (Foster Care System)
 - Maltreatment injuries resulting in hospitalization or emergency-room visit (Hospitals)
 - Substantiated cases of child maltreatment (Child Protective Services)
- Stable pre-intervention baselines
- Analyses control for baseline levels

Prevention Effects

- Triple P system counties:
 - Lower rates of child out-of-home placements (ES=1.22)
 - Lower rates of child maltreatment injuries (ES=1.14)
- Substantiated/founded cases of CM showed differential effects
 - Triple P system slowed the growth of substantiated cases, compared with the control counties (ES=1.09)

Caveats

- Paradigm for population-based parenting interventions does not eliminate the need for:
 1. policies to improve the economic and environmental conditions in which children and families operate
 2. support services to address basic needs
 3. treatment services for adult problems (e.g., substance abuse, PTSD)
 4. child-protective services triggered interventions
- This approach may not work as well if every agency/organization is strictly out for itself. There is an assumption of modest cooperation or coordination across providers and organizations.
- Child welfare, health, and mental health segments of the professional community need to coalesce goals to some degree, and partner with non-governmental sectors as well.

Triple P System provides

a path for how can these multiple outcomes can be pursued in a non-stigmatizing manner with evidence-based interventions that can be disseminated in an efficient way.

Triple P[®] Estimator

Triple P[®] Prevention Estimator


BEGIN HERE


SELECT A STATE: Florida

Save Scenario Print Reset

2006 Child Census and Federally Reported Maltreatment Data		
Total Population 0-9	Cases of Maltreatment	Out of Home Placement
1,977,541	89,072	10,421

Substantiated Cases of Maltreatment Out of Home Placements Cases of Lifetime Conduct Disorder

 **CHILDREN 2,657**
Saved Annually

 **DOLLARS \$47,832,390**
Saved Annually

Adjust the value to display the estimated savings.

Annual Placement Cost Per Child
\$18,000 18000

\$11,000 \$66,000
Expert Adjustor

Prinz, Sanders, Shapiro, Lutzker & Whitaker (2009). Population-based prevention of child maltreatment: The U.S. Triple P System Population Trial. Volume 10, March Issue. <http://www.springerlink.com/content/104965/>

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Cost offset---example

- Investment of about \$20 million in the whole state of Florida
- Potential to save in child foster-care placements
 - About \$47 million per year


Conclusions from U.S. Pop Trial

Results from the U.S. Triple P System Population Trial,
in conjunction with many prior studies of Triple P showing reduction of coercive parenting practices,
support:

- the viability of the population paradigm
- the utility of Triple P to address multiple outcomes concurrently



This approach has the potential to de-stigmatize parental participation or information-seeking regarding parenting improvement:

- Triple P is presented and useful to all parents
 - Triple P is not solely or specifically described to the public as targeting child abuse
 - There is continuity of parenting principles and strategies across programs and families
- 

Key References

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