# Parenting Support for Parents of Early Adolescents.

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# **Outline**

- Background
- Triple P Positive Parenting Program
  - o Teen Triple P
- The Current Study

# Background

- Parents can be a powerful influence on many aspects of family life and adolescent adjustment.
- Poor parenting practices have been associated with adolescent behaviour problems.
- High quality parenting is critical for children to develop into self-sufficient, resourceful adults.

## Research shows ...

- Parenting programmes have been useful in prevention and treatment of a variety of issues related to youth
- Evidence-based parenting programmes make a difference.
- Parenting interventions are amongst the most powerful and cost-effective tools available to assist children and their families.

# Rationale for Parenting Programmes for Parents with Teenagers

- Parents are more receptive to support at key developmental stages.
- Teenage children have different developmental needs.
- Problem behaviour in teenage years.
- Helps prevent negative developmental pathway

# What is Triple P?



A whole of population approach

Suite of evidence based programs 5 levels, 4 delivery modalities

Blends
universal and
targeted
programs

Concurrently implements multiple levels

# Triple P – Positive Parenting Progr



#### Breadth of reach

# Universal Triple P Level One

### **Selected Triple P**

**Level Two** 

#### Primary Care Triple P

Level three

#### Standard Triple P

Level four

## Enhanced Triple P

Increasing Intensity

# Program objectives - teenagers

- Promote teenager development
- Increase teenager competence in managing personal issues
- Reduce conflict over parents' use of methods of discipline
- Improve communication between teenagers and parents
- Reduce anxiety and stress associated with being a teenager

# Program objectives - parents

- Increase parents' competence in promoting teenager development
- Increase parents' competence in managing common behaviour problems and developmental issues
- Reduce parents' use of coercive and punitive methods of discipline
- Improve communication between parents and teenagers
- Reduce parental stress associated with raising teenagers

## Aim

- The aim of the study is to compare the effectiveness of Group Teen Triple P (GTTP) with a Care as Usual (CAU) control condition using a randomised controlled trial.
- The effects on the following will be examined:
  - General early adolescent behaviour problems and adjustment
  - Parenting (parenting style)
  - Family relations (parent-child conflict, family environment)
  - Consumer acceptability

# Level 4: Group Triple P

- Groups of 10-12 parents
- Active skills training in small groups
- 8 session group program
  - -4 x 2 hour group sessions
  - -3 x 15-30 minute telephone sessions
  - Final group session
- Supportive environment
- Normalise parenting experiences

# Hypotheses

- GTTP will be more effective than CAU.
- GTTP will lead to reduction in problematic behaviour and enhanced parenting skills and efficacy at both post-intervention and follow up.

# Sample

- 200 parents and their child
- Selection criteria:
  - The child do not have a developmental disorder or significant health impairment
  - The target child is between the age of 12 to 15
  - The child is not currently receiving psychological treatment for behaviour problems
  - Parents are not intellectually impaired
- Recruitment Process community outreach approach

## Method

- Parents will be randomly assigned to one of two conditions:
  - Care as Usual (CAU)
    - Receive their usual services
  - Group Teen Triple P (GTTP)
    - 8 week programme
      - 5 x 2-hour group session
      - 3 x 15-minute telephone session

## Method

#### CAU

Baseline, 8-10 weeks after baseline, and 6 months follow up.

#### GTTP

- Baseline, end of GTTP, and 6 months following completion of GTTP.
- CAU will be offered GTTP once collection of follow up data completed

#### Measures

#### Parent-Completed Questionnaires

- Family Background Questionnaire (FBQ) (Zubrick et al., 1995)
- o Parenting Scale Adolescent version (PSA) (Irvine et al., 1999)
- Parent Problem Checklist (PPC) (Dadds & Powell, 1991)
- o Parent Conflict (PCQ) (Greenberger, Chen, & Beam, 1998)
- Strengths and Difficulties Questionnaire (SDQ) (Goodman, 1999)
- o Parental Monitoring (PM) (Greenberger et al., 2000)
- o Family Environment Scale (FES) − (Moos & Moos, 1994)
- Depression Anxiety and Stress Scale (DASS) (Loyibond & Moyibond, 1995)
- Relationship Quality Index (RQI) (Norton, 1983)
- The Client Satisfaction Questionnaire (CSQ) Adapted from TAI (Eyberg, 1993)

#### Measures

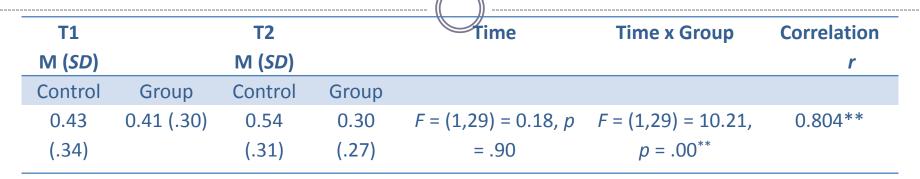
#### Adolescent-Completed Questionnaires

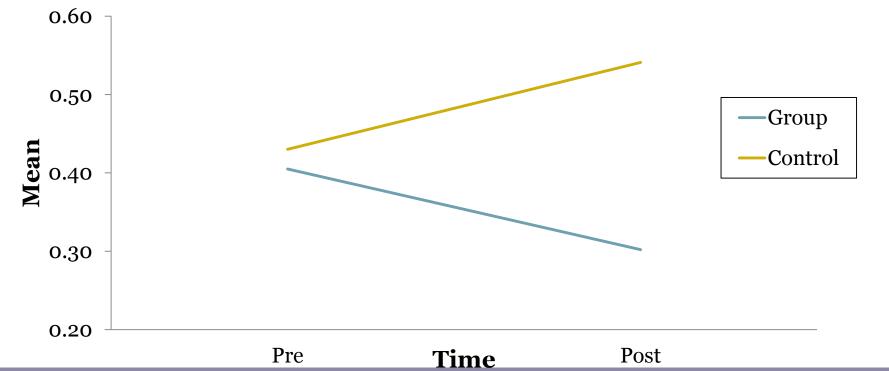
- Problem Behaviour Checklist (PBC) (Greenberger et al., 2000)
- Rosenberg Self-Esteem Scale (SES) (Rosenberg, 1965)
- Parental Monitoring (PM) (Greenberger et al., 2000)
- The Parent Conflict Questionnaire (PCQ) (Greenberger et al., 1998)
- Decision Making Measure (DMM; Greenberger, Chen, Beam, Whang & Dong 2000)
- Family Environment Scale (FES) (Moos & Moos, 1994)

# Results - Participants

- 31 families, completed pre and post assessments
  - o 10 families randomly allocated to group
  - 21 families randomly allocated to control
- Parents age (32-62), M = 44.52 (SD = 5.84)
  - o 78% Biological Mother, 6% Step Mother, 16% Biological Father
- Adolescent age (12-14), M = 12.71 (SD = 0.53)
  - o 32% Female, 68% Male
- Family Structure
  - o 65% Original family, 32% Sole parent family, 3% Step family
- Child ethnicity
  - o 77% European, 13% Asian, 6% Pacific Islander, 4% Maori

SDQ





# Parenting Style - PSA

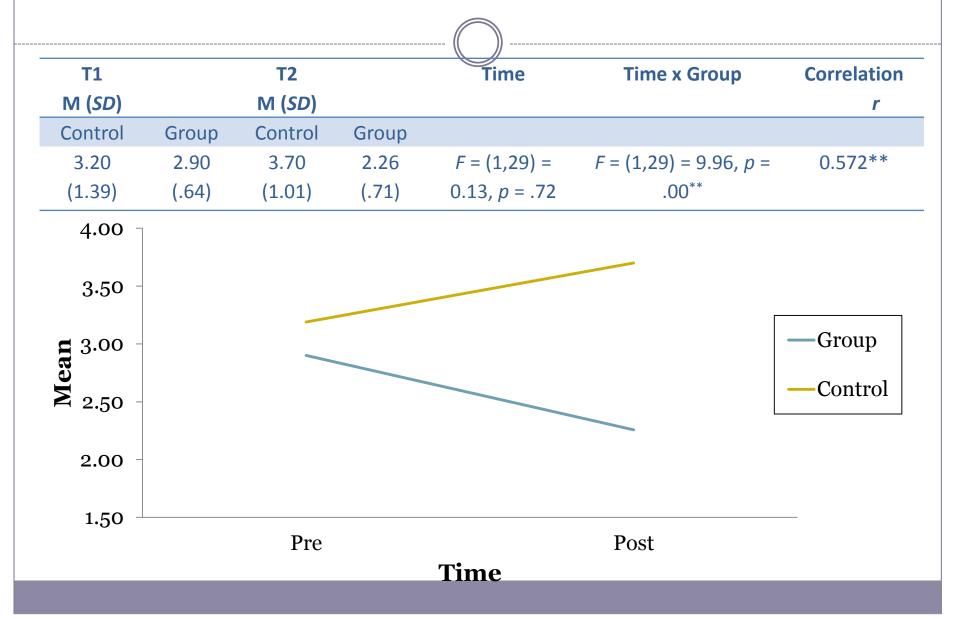
T1		T2		Time	Time x Group	Correlation
M ( <i>SD</i> )		M ( <i>SD</i> )				r
Control	Group	Control	Group			
3.31 (.74)	3.37	3.69 (.54)	2.75	F = (1,29) =	F = (1,29) = 15.82, p =	0.297
	(.59)		(.38)	0.91, $p = .35$	.00**	
4.00 - 3.50 -						
3.00 - 2.50 -	_				—Gr	oup
<b>\(\begin{array}{c} 2.50 \end{array}\)</b>	_				—Co	ontrol



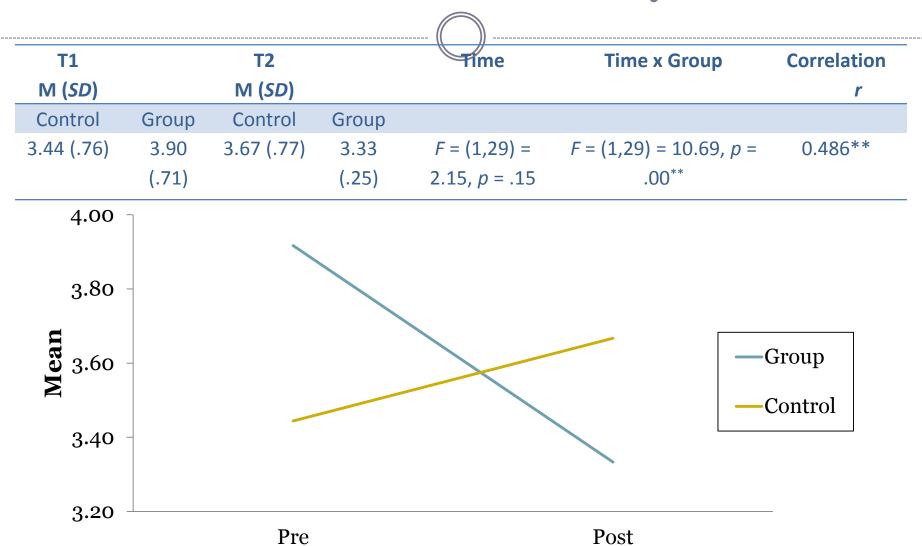
2.00

Time

### PSA - Laxness

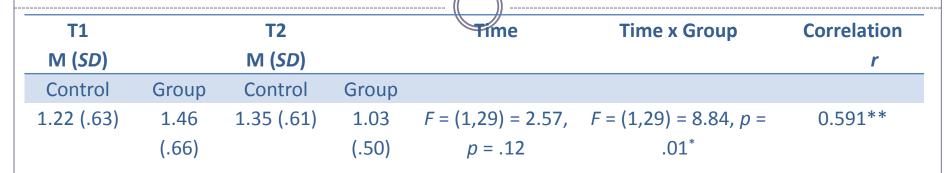


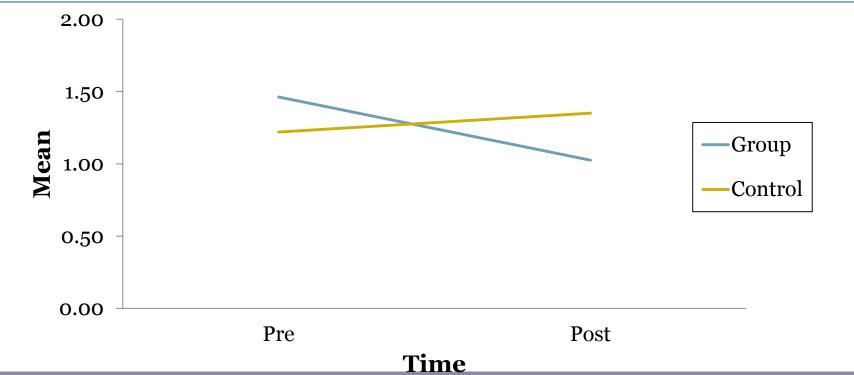
# PSA – Over-reactivity



**Time** 

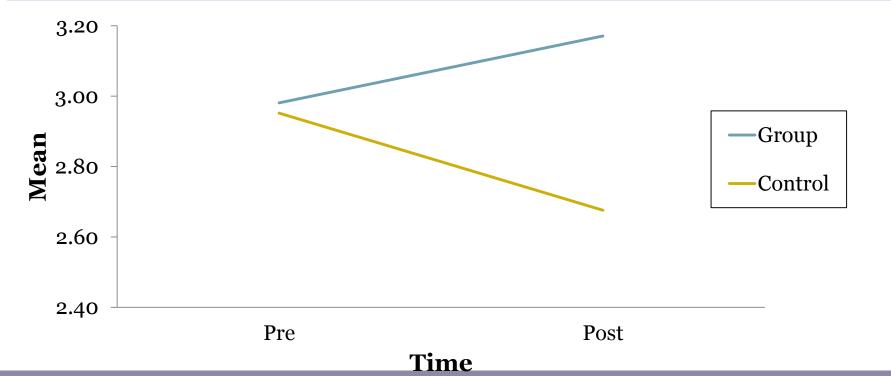






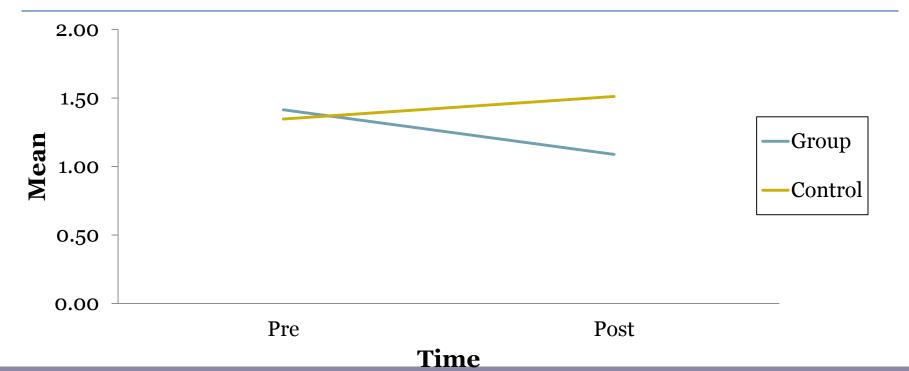
# FES - Cohesion

T1 M ( <i>SD</i> )		T2 M ( <i>SD</i> )		Time	Time x Group	Correlation r
Control	Group	Control	Group			
2.95 (.63)	2.98 (.47)	2.68 (.62)	3.17 (.39)	F = (1,29) = .32, p = .58	$F = (1,29) = 9.41, p = .01^*$	0.709**



## FES - Conflict

T1 M ( <i>SD</i> )		T2 M ( <i>SD</i> )		Time	Time x Group	Correlation r
Control	Group	Control	Group			
1.35 (.70)	1.41 (.86)	1.51 (.51)	1.09 (.81)	F = (1,29) = .44, p = .51	$F = (1,29) = 4.06, p = .05^*$	0.545**



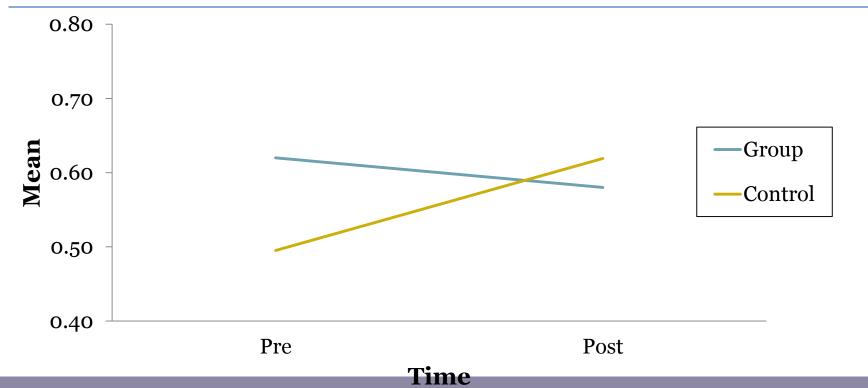
## **Client Satisfaction**

#### Parents' comments

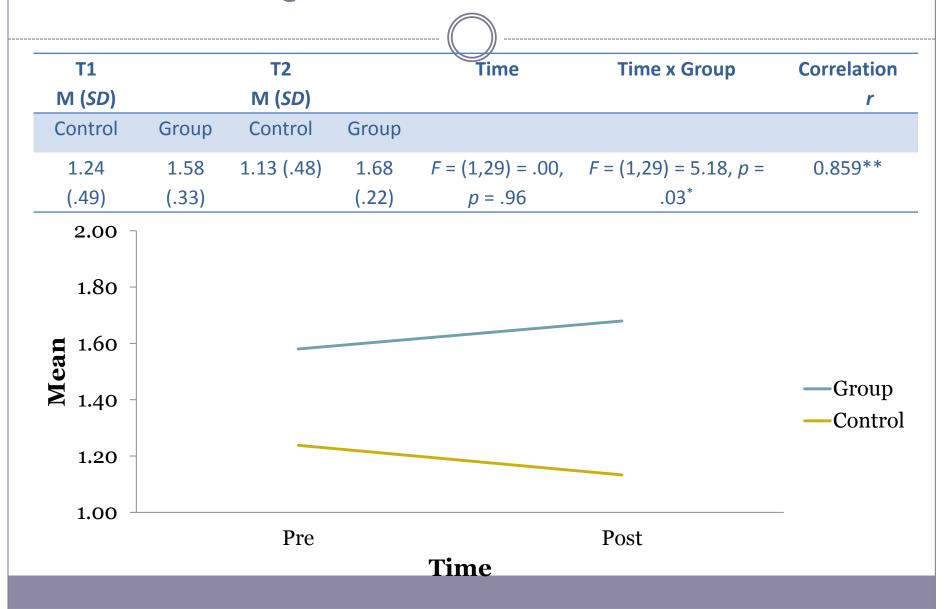
- "Interaction with facilitator and other parents were fantastic. Really enjoyed the course".
- "It gave me the confidence to parent as I realised that others have the same difficulties, this (the programme) has greatly improved my children's behaviour".
- "The major benefit was being in a small "like-minded" group. Sharing parenting "problems" and useful ways of dealing with them was great".

# SDQ - Emotion

				(( ))		
T1		T2		Time	Time x Group	Correlation
M ( <i>SD</i> )		M ( <i>SD</i> )				r
Control	Group	Control	Group			
0.50	0.62	0.62 (.40)	0.60	F = (1,29) =	F = (1,29) = 7.10, p =	0.939**
(.46)	(.60)		(.55)	.1.86, $p = .18$	.01*	

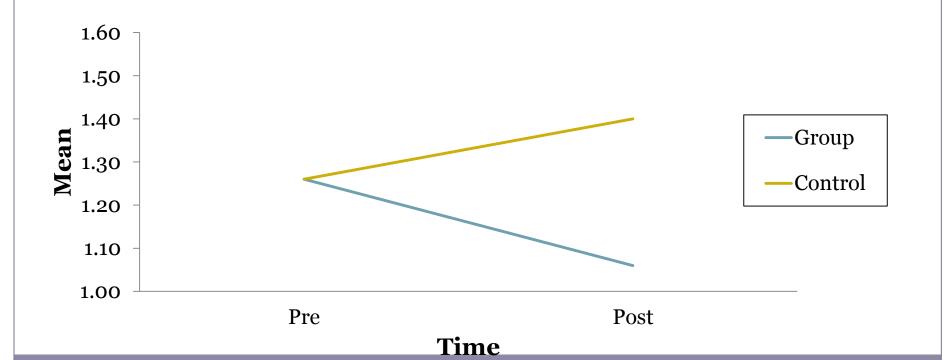


## SDQ – Prosocial Behaviour

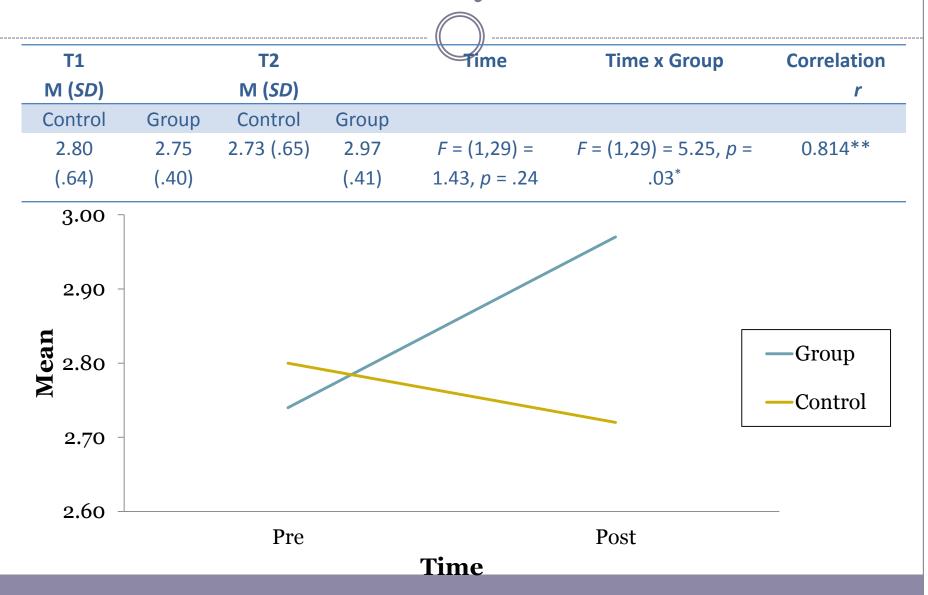




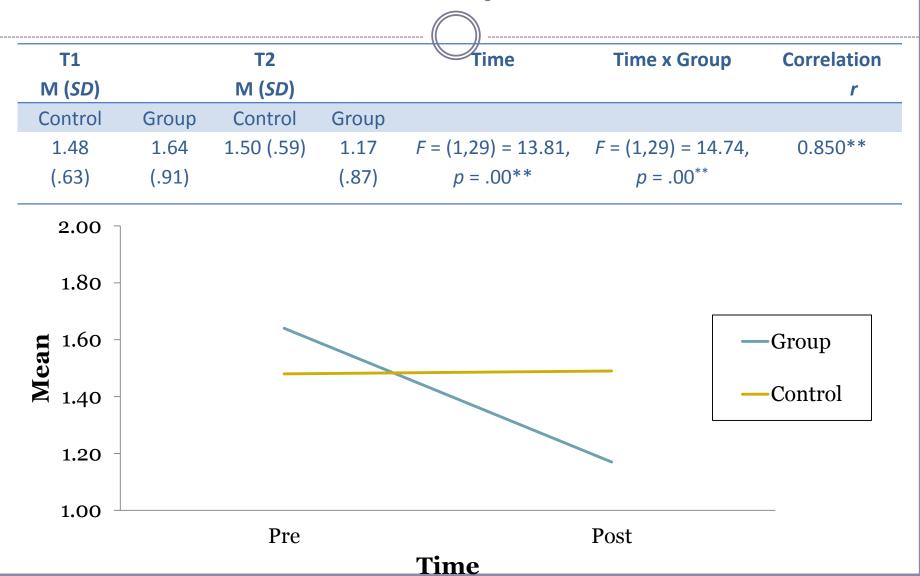
T1 M ( <i>SD</i> )		T2 M ( <i>SD</i> )		Time	Time x Group	Correlation r
Control	Group	Control	Group			
1.26	1.26	1.40 (.57)	1.06	F = (1,29) = .24,	F = (1,29) = 6.73, p =	0.848**
(.70)	(.70)		(.74)	p = .63	.01*	



## FES – Family Cohesion



# FES – Family Conflict



## Summary

- Families in the GTTP compared with Control:
  - Reduction in adolescent problem behaviours.
  - Improvement in parenting style –decrease in laxness and overreactivity.
  - Decrease in parent-child conflict, family conflict and improvement in family cohesion.
- GTTP is effective for parents with adolescents

# Limitation and Challenges

- Self-reports
- Small pilot sample size
- Low participation rate
  - Possible recruitment and engagement strategies

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## THANK YOU

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