**The Positive Parenting Program (Triple P)**

**Frequently Asked Questions**

**Program Summary:** The Positive Parenting Program is a comprehensive system of parenting and family support for families with children. The program consists of five levels of intervention, which increases with intensity, and progressively narrows the reach at each increasing level. Triple P is designed to promote positive parenting practices, and reduce family risk factors as they relate to maltreatment and behavioral and emotional problems.

**Developer:** Matthew Sanders, PH.D., The University of Queensland

**Website:** [http://www.triplep.net/glo-en/home/](http://www.triplep.net/glo-en/home/)

**Contact:** Triple P America, (803) 451-2278 or [contact.us@triplep.net](mailto:contact.us@triplep.net)

**FREQUENTLY ASKED QUESTIONS**

1. **What population is the Triple P program designed to target?**
   The Triple P program contains multiple levels of intervention with increasing intensity for parents of children from birth – 16 years of age. There are multiple delivery methods within each of the five (5) levels, providing enough flexibility to meet the needs of many different individuals and communities.

2. **What are the five levels of Triple P?**
   - **Level 1:** Universal Triple P, is a communications strategy designed to build awareness and promote access to parenting support as well as to destigmatize parent seeking of support around parenting.
   - **Level 2:** Light touch intervention providing brief assistance (often one-time contacts) to parents who are generally coping well but have a few concerns with their child’s behavior or development.
     - Triple P Selected Seminar Series (Power of Positive Parenting; Raising Confident, Competent Children; Raising Resilient Children)
     - Teen Triple P Seminar Series (Raising Responsible Teenagers; Raising Competent Teenagers; Getting Teenagers Connected)
     - Brief Primary Care/Brief Primary Care Teen
   - **Level 3:** Targeted support for parents of a child with mild to moderate behavioral difficulties, typically dealing with a specific problem or issue.
     - Primary Care Triple P/Primary Care Teen Triple P
     - Triple P Discussion Groups/Teen Triple P Discussion Groups
Level 4: For parents of children with moderate to severe behavioral difficulties or for motivated parents interested in gaining a thorough understanding of Positive Parenting

- Group
- Group Teen
- Standard
- Standard Teen
- Triple P Online
- Self-directed Triple P

*Those programs highlighted in yellow are those that PCCD accepts grant applications for in PA.

Level 5: Intensive support for families that face challenges beyond just parenting skills (e.g., difficulty coping with stress or anger; having unrealistic expectations; not on the same page as their partner with parenting; recently separated or divorced). Level 4 Standard or Group is a prerequisite before beginning Level 5.

- Enhanced Triple P
- Pathways Triple P
- Family Transitions Triple P

3. Can you tell me more about the Triple P Level 4 Models that PCCD supports with grant-funding?

Level 4 Standard

- This program is offered to parents/caregivers of children birth-12 years of age. The core components for this model are provided over ten weeks/sessions, individually to parents/caregivers in their home, office-setting or in the community.

Level 4 Standard Teen

- This program is offered to parents/caregivers of children 12-16 years of age. The core components for this model are provided over ten weeks/sessions, individually to parents/caregivers in their home, office-setting or in the community.

Level 4 Group

- This program is offered to parents/caregivers of children birth-12 years of age. The core components for this model are provided over eight sessions to a group of parents/caregivers in an office or community setting. The format of all 8 session are as follows:

  1. Offered to a group of 10-12 parents/caregivers together.
  2. Offered to a group of 10-12 parents/caregivers together.
  3. Offered to a group of 10-12 parents/caregivers together.
  4. Offered to a group of 10-12 parents/caregivers together.
  5. Offered *individually to parents/caregivers by phone or in-person.*
  6. Offered *individually to parents/caregivers by phone or in-person.*
  7. Offered *individually to parents/caregivers by phone or in-person.*
  8. Offered to a group of 10-12 parents/caregivers together.
4. **What risk and protective factors does the Triple P program target?**

According to Blueprints for Healthy Youth Development, the Triple P program targets the following risk and protective factors:

<table>
<thead>
<tr>
<th>Protective Factors Targeted for an Increase</th>
<th>Risk Factors Targeted for a Decrease</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Coping Skills</td>
<td>• Family conflict/violence</td>
</tr>
<tr>
<td>• Attachment to Parents</td>
<td>• Parent Stress</td>
</tr>
<tr>
<td>• Non-violent discipline</td>
<td>• Poor Family Management</td>
</tr>
<tr>
<td>• Parent Social Support</td>
<td>• Psychological Aggression/Discipline</td>
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<tr>
<td></td>
<td>• Violent Discipline</td>
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5. **What kind of outcomes can be expected from the Triple P program?**

According to the Blueprints for Healthy Youth Development:

- In a U.S. Population Study:
  - Positive effects in the Triple P System counties for rates of substantiated child maltreatment, child-out-of-home placements, and hospitalizations or emergency-room visits for child maltreatment injuries, compared to control counties
- In an Australian Population Study:
  - Triple P System was associated with significantly greater reductions in emotional problems and psychosocial distress in both children and their parents than in the care as usual condition
  - No intervention effects were found for conduct problems, hyperactivity and peer relationship difficulties.

6. **What kind of training is needed for the Triple P program? What about materials?**

Practitioners need to be trained to the highest standard and supported in their use of the program in order for the program to be as effective as possible. Triple P’s training model has been developed to produce Practitioners who are confident, knowledgeable and understand the importance of delivering the program with fidelity to the model.

Due to the varied nature of the program levels, it is recommended that individuals contact Triple P America, (803) 451-2278 or contact.us@triplep.net, to determine the best intervention fit that will then determine training and program material needs.

7. **What Triple P program costs should I budget for?**

Given the many flexible options available within the Triple P program, it is recommended that individuals interested in the program contact Triple P America to inquire about specific costs for training and materials as it relates to the level they are interested in implementing.
8. What evaluation tools should I use?
   Below is the list of evaluation tools required of PCCD grant-funded projects:
   - PAFAS Pre/Post Survey Tool
   - Triple P Quarterly Data Tool
   - Triple P Fidelity Session Checklists

   Pre- and Post-Surveys are completed by caregivers participating in Triple P programming. Pre-Surveys are completed during Session 1. Post-Surveys are completed at the last session.

   Sites are expected to monitor program implementation quality and fidelity. Each Triple P session has checklists for Practitioners to utilize ensuring they are following the model as it was designed by the developer. PCCD projects are required to provide this information from 20% of the total sessions offered by an observer who has been trained in the Triple P program. Triple P Level 4 Standard and Standard Teen however, are self-observations.

   Sites funded by PCCD are required to report quarterly in Egrants utilizing the Triple P Data Tool. The evaluation tools and spreadsheet provide analyzed data from the PAFAS survey and the fidelity observation forms. All of these evaluation tools can be found here:
   [http://www.episcenter.psu.edu/newvpp/triplep/evaluation-tools](http://www.episcenter.psu.edu/newvpp/triplep/evaluation-tools)

   If more extensive analysis is desired locally, sites may wish to identify additional evaluation support and budget for these costs accordingly.

9. In what ways can I involve my local prevention board?
   - Local collaborative boards can play an important role in program development and sustainability. At start-up, present the research behind Triple P and share your local goals for the program.
   - Provide board members with a fact sheet, the program’s logic model, and demonstrated outcomes.
   - Help them to understand ways in which they can contribute to the program’s local success.
   - Identify potential program champions or community gatekeepers that can help to build relationships that may lead to program support.
   - Provide frequent verbal reports on the program’s impact and at least annually provide a written summary of program outcomes.
   - Identify board members to become engaged in generating outcome reports and securing sustainability funds.

10. Are there other sites in PA implementing the Triple P program?

    For this information, please contact the EPISCenter Implementation Specialist Team: 814-863-2568 or [EPISCenter@psu.edu](mailto:EPISCenter@psu.edu)