Why was parent training invented?

- Parent training was developed to deal with conduct problems, typical of children with disruptive behaviour disorders including
  - Oppositional defiant disorder
  - Conduct disorder
  - Attention deficit hyperactivity disorder.

- Parent training was also developed to help parents deal with challenging behaviour in children with developmental disorders
  - Intellectual disability
  - Autism spectrum disorder
  - Speech and language delay

- To prevent the development of behaviour problems in normally developing children
Features of Disruptive Behaviour Disorders

- Problems internalizing and following rules
- Problems regulating impulses – acting without thinking
- Problems regulating emotions, especially anger – short fuse
- Problems solving interpersonal problems - difficulty generating useful solutions
- Problems maintaining co-operative relationships with parents, teachers and peers - fight with adults and mix with deviant peers or become isolated

Why are Disruptive Behaviour Disorders of Interest?

- Very common
- Very troublesome
- Very costly

Prevalence of Conduct Problems in Ireland

Percentage of cases scoring above the clinical cut-off score for the externalizing behaviour problem scale on ASEBA Instruments in a population study of 3119 0-18 year olds in Clonmel with a response rate of 70%.
Long-term Outcome For Disruptive Behaviour Disorders

<table>
<thead>
<tr>
<th>Category</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Criminality</td>
<td>More criminal behaviour, arrests, convictions, imprisonment and rates of driving while intoxicated</td>
</tr>
<tr>
<td>Mental health</td>
<td>Higher rates of psychiatric hospitalization and higher rates of all psychological symptoms, antisocial personality disorder, drug abuse and alcohol abuse</td>
</tr>
<tr>
<td>Physical health</td>
<td>Higher rates of hospitalization and mortality</td>
</tr>
<tr>
<td>Educational attainment</td>
<td>Higher rates of school drop-out and lower attainment levels</td>
</tr>
<tr>
<td>Occupational adjustment</td>
<td>Higher unemployment, lower occupational status if employed, more frequent job changes</td>
</tr>
<tr>
<td>Marital adjustment</td>
<td>Higher rates of separation, divorce and remarriage</td>
</tr>
<tr>
<td>Social adjustment</td>
<td>Less contact with relatives, friends, neighbours and church</td>
</tr>
</tbody>
</table>

Intergenerational Transmission More children with conduct problems

Rationale for Parent Training

- Children learn behaviour problems through coercive family process
  - They learn aggression and defiance brings relief
  - They learn parents are to be avoided because they hassle you

- Parent training helps families
  - Make and maintain positive parent-child relationships
  - Use effective behaviour control systems where rule following is rewarded (instead of coercive family process, where rule breaking is rewarded)

International Evidence-Based Group Parent Training Programmes

Incredible Years Programme
Caroline Webster Stratton
U Washington, USA

Triple P
Positive Parenting Programme
Matt Sanders
U Queensland, Australia
Effectiveness of Parent Training

- Meta-analyses of randomized controlled trials show that, for pre-adolescent children, group behavioural parent training
  - Is moderately effective in reducing behaviour problems
  - Is moderately effective in improving parental adjustment
  - Is about twice as effective as individual therapy in reducing children’s behaviour problems

Effect Sizes for Behaviour Problems from Meta-Analyses of Parent Training & Individual Therapy for Children aged 6-12 years

![Effect Sizes Chart]

Evaluation of the Parents Plus Programmes

![Parents Plus Logo]
How Many Evaluation Studies of Parents Plus Programmes have been Conducted?

- 19 studies of all Parents Plus Programmes and the Working Things Out Programme between 2001 and 2015
- 3 studies of the original Parents Plus Programme - PP
- 6 studies of Parents Plus Early Years Programme – PP-EYP
- 3 studies of Parents Plus Children’s Programme – PP-CP
- 1 Study of Parents Plus Parenting When Separated Programme – PP-PWS

Evidence Base for Parents Plus Programmes

- This is a large evidence base
- 19 studies
- Over 1000 families
- All types of families - single parent, two parent and second marriage families
- Children of all ages – ranging from 2-17 years
- A wide range of problems - CD, ADHD, ASD, & ID, depression and anxiety
- PP was offered in many settings - CAMHS, early intervention disability services, preschools, schools, special schools, and community centres
- PP was facilitated by a range of professionals - child care workers, teachers, speech and language therapists, nurses, social workers, psychologists and psychiatrists

3 Studies of The Original Parents Plus Programme - PP

- Joanne Behan et al. (2001) – In CAMHS PP works for families of children with DBD (RCT, N=40)
- Mark Quinn et al. (2007) – In a rural EIT setting PP works for families of children with ID and DBD (NRCT, N=41)
- Mark Quinn et al. (2006) – In rural EIT and CAMHS settings PP works for families of children with DBD with and without DD (NRCT, N=38)
Evaluation of the Parents Plus Programme with children 3-12y in CAMHS
Joanne Behan et al. 2001

Paper

Design
40 parents of children ages 3-12 years with behaviour problems at 2 Mater University Hospital CAMHS clinics completed this RCT.
There were 26 in PP group and 14 in the control group.
The PP programme involved 8 two-hour sessions.

Results
Compared with the control group, the PP group showed trends (p<.09) for fewer behaviour problems on the SDQ total difficulties, conduct problems and hyperactivity scales, fewer externalizing behaviour problems on the CBCL, better parent-child interaction on the PSI
Compared with the control group, the PP group showed significantly greater parental goal attainment on the goals scales.
Improvement on the SDQ and CBCL was maintained at 3 months follow-up.
On the SDQ total difficulties scale 31% of the PP group were clinically improved after treatment compared with 14% of the control group

SDQ Total Difficulties Scale

<table>
<thead>
<tr>
<th>CONDUCT PROBLEMS</th>
<th>HYPERACTIVITY</th>
<th>EMOTIONAL SYMPTOMS</th>
<th>PEER PROBLEMS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Often has temper tantrums or hot tempers</td>
<td>Restless, overactive, cannot stay still for long</td>
<td>Often complains of headaches, stomach-aches or sickness</td>
<td>Rather solitary, tends to play alone</td>
</tr>
<tr>
<td>Generally obstinate, usually does what adults request (R)</td>
<td>Constantly fidgeting or squirming</td>
<td>Many worries, often seems worried</td>
<td>Has at least one good friend (R)</td>
</tr>
<tr>
<td>Often fights with other children or bullies them</td>
<td>Easily distracted, concentration wanders</td>
<td>Often unhappy, down-hearted or tearful</td>
<td>Generally liked by other children (R)</td>
</tr>
<tr>
<td>Often lies or cheats</td>
<td>Thinks things out before acting (R)</td>
<td>Nervous or clingy in new situations, easily loses confidence</td>
<td>Picked on or bullied by other children</td>
</tr>
<tr>
<td>Steals from home, school or elsewhere</td>
<td>Sees tasks through to the end, good attention span (R)</td>
<td>Many fears, easily scared</td>
<td>Gets on better with adults than with other children</td>
</tr>
</tbody>
</table>

Evaluation of the Parents Plus Programme with children 3-12y in CAMHS
Joanne Behan et al. 2001
Evaluation of the Parents Plus Programme for children 4-7y with developmental disabilities and behaviour problems in EIT
Mark Quinn et al. 2007

Paper

Design
41 parents of 31 children ages 4-7 years with mild or moderate ID or ASD and behaviour problems at 4 rural early intervention clinics in Kerry receiving routine care completed this study.

There were 22 parents in the PP group and 19 in the control group.

In this non-RCT consecutive referrals were assigned to each group.

The PP programme involved 8 two-hour sessions.

Results
Compared with the control group, the PP group showed significant improvement on the SDQ total difficulties scale.

Improvement was maintained at 10 months follow-up

The PP group also showed significant improvement in parental satisfaction on the KPS and parenting goal attainment on the goals scale.

Evaluation of the Parents Plus Programme for children 4-7y with development disabilities and behaviour problems in EIT
Mark Quinn et al. 2006

Paper

Design
The disability group contained parents of 21 children aged 4-7 with mild or moderate ID or ASD and behaviour problems from 4 rural early intervention clinics.

The conduct problems group contained parents of 17 children aged 4-7 with disruptive behaviour disorders from a rural CAMHS.

In this non-RCT, consecutive referrals were assigned to each group.

The PP programme involved 8 two-hour sessions.

Results
Both groups showed significant improvement on the SDQ total difficulties scale.

Improvement was maintained at 10 months follow-up

On the SDQ total difficulties scale over 70% of cases were clinically improved at 10 months follow-up.

Evaluation of the Parents Plus Programme for children 4-7y with behaviour problems, with & without developmental disabilities in CAMHS & EIT
Mark Quinn et al. 2006
Evaluation of the Parents Plus Programme for children 4-7y with behaviour problems, with & without developmental disabilities in CAMHS & EIT

Mark Quinn et al. 2006

6 Studies of The Parents Plus Early Years Programme – PP-EYP

- John Sharry et al. (2005) – In CAMHS PP-EYP works for children with DBD & DD (SG, N = 31)
- Clare Griffin et al. (2010 & 2006) – In CAMHS PP-EYP works for children with DBD & DD, & group support is critical (NRCT, N = 81)
- Sarah Kilroy et al. (2011) – In Preschools PP-EYP works as a prevention programme for normal children with behaviour problems (SG, N=31)
- Sarah-Jane Gerber et al. (2015) – In preschools PP-EYP works as a prevention programme for normal children with behaviour problems, and best for those with significant behaviour problems (SG, N=212)
- Aoife Lonergan et al. (2015) – In preschools a half-day PP-EYP workshop works as a prevention programme, but not as well as the 7-week PP-EYP (N=121)
- Noirin Hayes et al. (2013) – In preschools attendance at more PP-EYP prevention programme sessions helps parents create a better home learning environment (RCT, N=331)
Pilot evaluation of the Parents Plus Early Years Programme in CAMHS
John Sharry et al. 2005

Paper

Design
31 parents from 24 families with children ages 2-5 years with behavioural problems and developmental disabilities referred to 2 clinics at the Mater Hospital CAMHS completed this single group outcome study.

PP-EYP included 7 group sessions interspersed with 5 individual sessions over 12 weeks.

Results
The group showed significant improvement on the SDQ total difficulties, conduct problems and hyperactivity scales, parenting stress on the PSS, goal attainment on the goals scale, and ratings of parent-child interaction.

Qualitative data showed that parents perceived their children’s behaviour and communication to have improved; that they were using more positive parenting strategies; and that the quality of the parent-child relationship had improved.

Evaluation of the Parents Plus Early Years Programme in CAMHS
Claire Griffin et al., 2010

Paper

Design
This non-RCT was completed by parents of 81 children ages 3-6 years with behavioural & developmental difficulties referred to 4 Mater University Hospital CAMHS clinics.

There were 46 in the PP-EYP group and 35 in the TAU control group.

PP-EYP included 7 group sessions interspersed with 5 individual sessions over 12 weeks.

Results
Compared with the control group, the PP-EYP group reported significant improvement on the SDQ total difficulties and hyperactivity scales and goal attainment on the goals scales.

Improvements were maintained at 5 months follow-up.

The PP-EYP group showed significant improvement on independent ratings of parent-child interaction.

PP-EYP was equally effective for children with behavioural and developmental difficulties.
Evaluation of the Parents Plus Early Years Programme in CAMHS
Claire Griffin et al., 2010

The Importance of the group in the Parents Plus Early Years Programme
Claire Griffin et al., 2006

Paper

Design
Parents of 43 children ages 3-6 years with behavioural & developmental difficulties who had completed the PP-EYP.

Method
Five months after completion of the programme, parents were asked what it was about the PP-EYP that helped them overall in their day-to-day interactions with their children.

Results
47% said participation in a parents group was most important

The value of the group in the Parents Plus Early Years Programme
Claire Griffin et al., 2006

Group Support
Group support reduced isolation and gave a sense of belonging:
"It was great to meet the other parents with the same issues. You knew you weren't alone. So that helped a lot. We all basically had the same stories, just different children so that was good as well that you didn't feel isolated. It is good to know that other people are there with you".

Group Learning
The group was a good environment for learning parenting skills:
"You are sharing your experience and they are sharing their experience, you can always pick up stuff".

**Design**

In this single group outcome study 31 parents of children ages 1-9 years of whom 13 (45%) had behavioural difficulties on the SDQ completed a 6 session prevention version of the PP-EYP.

The programmes took place in 4 schools and one family centre and were facilitated by Home School Liaison teachers and Child Care Workers who received two days facilitator training, and recruited participants.

**Results**

For the whole sample significant improvement occurred on the SDQ total difficulties, conduct problems, and hyperactivity scales and in goal attainment on the goal scale.

Greater improvement occurred for cases with behavioural difficulties, than for the sample as a whole.

For the whole sample 3 factors were correlated with overall outcome on the parenting problems scale.

1. Weekly end of sessions ratings of perceived progress towards personal goals,
2. Hopefulness about goal attainment
3. Perceiving the group to be well organized

**Pilot Evaluation of the Parents Together community course: A preventative version of the PPEYP**

**Sarah Kilroy et al., 2010**

In this single group outcome study 212 parents or guardians of children aged 6 months - 7 years of whom 40% had behavioural difficulties on the SDQ completed a 7 session prevention version of the PP-EYP.

Early years practitioners from 35 preschools in the Fingal area recruited participants and delivered the programme to 45 groups after receiving 3 days of training & received ongoing supervision in programme delivery.

For the whole sample significant improvement occurred on all SDQ scales including the total difficulties scale, parenting stress on the PSS, parenting satisfaction on the KPS, and goal attainment on the goals scale.

Greater improvement occurred for cases with clinically significant behavioural difficulties on the SDQ, than for those with normal SDQ scores at baseline.
Large scale evaluation of the Parents Together community course
A preventative version of the PP-EYP
Sarah-Jane Gerber et al., 2015

Comparison of a single session PPEY workshop and the 7-session Parents Together PPEY community course
Aoife Lonergan et al., 2015

PAPER


Design
For this non-RCT, 121 parents of children aged 1-6 years were recruited through preschools in the Fingal area.

32 completed a 2.5 hour workshop based on the PP-EYP
89 completed a 7 session prevention version of the PP-EYP

Early years practitioners from 35 preschools in the Fingal area delivered the interventions after receiving 3-4 days of training & received ongoing supervision in programme delivery

Results
Participants in both groups showed significant improvement on the SDQ total difficulties scale and parenting satisfaction on the KPS
Greater improvement occurred for participants on the 7-week course
Participants on the 7-week course also showed significant improvement in parenting stress on the IPS and the SDQ prosocial behaviour scale.
Evaluation of the Parents Together PPEY Community Course as one element of a 24 month intensive Early Years Intervention
Noirín Hayes et al., 2013

Design
For this RCT parents of 331 children aged 2.5 - 4 years were recruited through preschools in the West Tallaght area. 165 were in the Early Years Programme group and 113 of these completed the Parents Together PP-EYP; and 166 were in in the routine services control group.

Parents attended the Parents Together PP-EYP as one element of an intensive 24 month programme that involved the High Scope Curriculum for 4h 15m per day, with a child care staff/child ratio of 1:5 and dedicated SLT services; and high quality child care, home-visiting and parent support.

The High/Scope curriculum is a flexible and broad-based curriculum that encourages children's holistic development and learning across a range of competencies (social, emotional, cognitive and language).

Results
Parents who attended more sessions of the Parents Together PP-EYP created better home learning environments and actively engaged their children in play and learning activities (joint reading, playing with numbers or letters, painting, doing songs/poems/rhymes and going to the library).

3 Studies of The Parents Plus Children’s Programme – PP-CP

- Michael Coughlin et al. (2009a & 2009b) - In CAMHS PP-CP works, & group support and skills development are critical (NRCT, N=74)

- Ailish Hand, Ciara Ní Raghallaigh et al. (2013) - In a special school for children with ID an adapted version of PP-CP works (RCT, N=29)

- Ailish Hand, Emma McDonnell et al. (2013) – In regular schools PP-CP works as a prevention programme (RCT, N=63)
Evaluation of the Parents Plus Children’s Programme in CAMHS
Michael Coughlan et al. 2009

Paper

Design
In this sequential block design study there were 74 parents of children ages 6-11 years with behavioural & developmental difficulties referred to 4 Mater University Hospital CAMHS. There were 42 in the PP-CP group and 32 in the control group.

PP-CP included 9 group sessions and 2 individual sessions.

Results
Compared with the control group, the PP-CP group showed significant improvement on the SDQ total difficulties and conduct problems scales.

Compared with the control group, the PP-CP group reported decreases in parental stress on the PSS; increased confidence in their parenting; and movement towards their parenting goals and resolution of parenting problems on the goals scale.

These post-treatment improvements were maintained at 5 months follow up.

Compared with families of children with developmental disorders, families of children with behaviour problems benefited more from the PP-CP programme on the SDQ total problems and peer problems scales.

Evaluation of the Parents Plus Children’s Programme in CAMHS
Michael Coughlan et al. 2009

Parents’ experience of participation and psychological factors mediating outcome of the Parents Plus Children’s Programme
Michael Coughlan et al. 2009

Paper

Design
21 parents or carers of children ages 6-11 years with behavioural & developmental difficulties referred to 4 Mater University Hospital CAMHS clinics were interviewed 5 months after completing the PP-CP

Results
Parents said that the PP-CP led to their children being calmer, showing better regulation of emotions, and communicating with them more clearly.

Parents said group support was the main benefit of participating in the PP-CP.

Parents said the most useful skills covered on the PP-CP were advice on how to ‘tune in’ to their children, play with them, using planned sanctions to discipline their children and stepping back from conflict situations.

Compared with non-improvers, parents whose children improved after PP-CP reported greater optimism, self-control, consistency in disciplining their children, and capacity to reframe child behaviour problems as situational rather than labelling their child as bad.
Evaluation of the Parents Plus Children’s Programme with families of children with intellectual disabilities

Ailish Hand, Ciara Ní Raghallaigh et al. 2013

Paper

Design
In this RCT 29 parents of children aged 6-11 years with intellectual disability attending Scoil Chiaráin completed the study.

There were 16 in the PP-CP group and 13 in the waiting list control group.

PP-CP included 8 two and a half hour sessions.

Some parents had mild ID or literacy problems and the PP-CP was adapted to meet their needs

Some PP-EYP videos of children with disabilities were included

Results
Compared with the control group, the PP-CP group showed significant improvement on the SDQ total difficulties, hyperactivity and conduct problems scales, parent stress on the PSI, parenting satisfaction on the KPS, and goal attainment on the goals scale.

Evaluation of the Parents Plus Children’s Programme with families of children in the community

Ailish Hand, Emma McDonnell et al. 2013

Paper

Design
In this RCT there were 63 parents of children ages 6-11 years from 3 primary schools.

There were 36 completers in the PP-CP group and 27 in the waiting list control group.

Programmes, which included 8 sessions, were facilitated by Home School Liaison Teachers and primary care professionals who received 2 days training.

Results
Compared with the control group, the PP-CP group showed significant improvement on the SDQ total difficulties and hyperactivity scales; parenting stress on the PSI, parenting satisfaction on the KPS, and goal attainment on the goals scale.

Improvements were maintained at 6 months follow-up.
Evaluation of the Parents Plus Children’s Programme
as a preventative intervention with families of children in the community
Ailish Hand, Emma McDonnell et al. 2013

6 Studies of
The Parents Plus Adolescent’s Programme – PP-AP &
Working Things Out Programme – WTO

- Diane Beattie et al. (2011) - In CAMHS PP-AP works for families of children with DBD (NRCT, N=53)
- Eileen Nitsch et al. (2015) - In schools PP-AP works as a prevention programme for families of adolescents with behaviour problems (RCT, N=109)
- Ciara Wynne et al. (2015) - In CAMHS PP-AP + WTO works for families of children with DBD and ED (SG, N=83)
- Eoin Rickard et al. (2015) - In schools PP-AP + WTO works as a prevention programme for families of children with behavioural and emotional problems (SG, N=32)
- Eileen Brosnan (2015) - In CAMHS WTO works for adolescents with ED (NRCT, N=57)
- Professor Carol Fitzpatrick (2015) - In CAMHS WTO works for adolescents with ED (RCT, N = 78)
**Evaluation of the Parents Plus Adolescent Programme in CAMHS**
*Diane Beattie et al. 2011*

**Paper**

**Design**
This sequential block design study involved parents of 53 adolescents ages 10-17 years with emotional and behavioural difficulties referred to the Mater University Hospital CAMHS. There were 37 in the PP-AP group and 16 in the TAU control group.

**Results**
Compared with the control group, the PP-AP group showed significant improvement on the SDQ total difficulties and peer problems scales. Gains made during treatment were maintained at 5 months follow-up.

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**Evaluation of the Parents Plus Adolescent Programme in schools**
*Eileen Nitsch et al., 2015*

**Paper**

**Design**
In this RCT 109 parents of children ages 11-16 years of whom 12% had behavioural difficulties were recruited from the community through media advertisements in the south west of Ireland. Data were collected from 70 in the PP-AP group and 39 in the control group.

**Results**
Compared with the control group, the PP-AP group showed significant improvement on all SDQ scales except the hyperactivity scale. Compared with the control group, the PP-AP group reported decreased parental stress on the PSS and PSI; increased parent satisfaction on the KPS; and goal attainment on the goals scale. These post-treatment improvements were maintained at 6 months follow-up.
Evaluation of the Parents Plus Adolescent Programme and the Working things Out Programme in CAMHS
Ciara Wynne et al., 2015

Paper

Design
In this single group outcome study participants were recruited from 8 HSE CAMHS teams.

79 adolescents aged 11-17 and 83 parents completed WTO and PP-AP respectively.

The 2 programmes were run in parallel over 8 weeks with joint family sessions after sessions 3 and 6.

Results
Significant improvement occurred on the parent and adolescent completed SDQ emotional problems scale, the McMaster Family Assessment Device General Functioning Scale and the goals scale.

Significant improvement also occurred on the parent completed SDQ total difficulties, conduct problems, hyperactivity and peer problems scales; parenting satisfaction on the KPS and parental stress on the PSS.

Evaluation of the Parents Plus Adolescent Programme & the Working things Out Programme in CAMHS
Ciara Wynne et al., 2015
Evaluation of the Parents Plus Adolescent Programme and the Working things Out Programme in Schools
Eoin Rickard et al., 2015

Paper

Design
In this single group outcome study participants were recruited from 8 secondary schools. 32 adolescents aged 11-17 and 32 parents completed WTO and PP-AP respectively. The 2 programmes were run in parallel over 8 weeks with joint family sessions after sessions 3 and 6.

Results
Significant improvement occurred on the parent-completed SDQ total difficulties and conduct problems scales, the adolescent-completed SDQ emotional problems scale and goal attainment on the parent and adolescent-completed GS.

Significant improvement also occurred in parental satisfaction on the KPS, and parental stress on the PSS.

Gains made on the parent-completed SDQ total difficulties scale and parental satisfaction on the KPS after treatment were maintained at 5-months follow-up.

Evaluation of the Parents Plus Adolescent Programme and the Working things Out Programme in Schools
Eoin Rickard et al., 2015

Evaluation of the Working things Out Programme in CAMHS
Eileen Brosnan, 2015

Paper

Design
In this non-RCT adolescents aged 12-16 years with anxiety, depressive and behavioural disorders were recruited from Mater CAMHS. 30 adolescents completed the 8-session WTO group and 27 received CAMHS TAU (about 9 MDT child / parent / family sessions). Follow-up data were collected at 12 and 24 weeks.

Results
Compared with the TAU control group, the WTO group showed significant improvement after treatment on the Child Global Assessment Scale.

Both WTO and TAU groups improved from pretreatment to 24 weeks later on the parent and adolescent completed SDQ total difficulties and emotional problems scales, the adolescent completed SDQ peer problem scale, and the adolescent completed Adolescent Well-Being Scale.

Qualitative analysis of interview transcripts from 23 adolescents who completed the WTO showed it was positively evaluated by 83% of participants: ‘I thought it was great it was a bit of fun as well.’
Evaluation of the Working things Out Programme in CAMHS
Eileen Brosnan, 2015

Paper

Design
In this RCT adolescents aged 12-16 years with anxiety, depressive and behavioural disorders were recruited from Mater CAMHS

14 adolescents completed the 8-session WTO group and 14 received CAMHS TAU (5 sessions of MDT child / parent / family intervention)

Follow-up data were collected 3 months after treatment.

Results
Both groups showed significant improvement after treatment and at 3 months follow-up in global functioning on the CGAS and in adaptive approach oriented coping on the Adolescent Coping Scale

Evaluation of the Parents Plus Parenting When Separated Programme
An evaluation of the Parents Plus – Parenting When Separated Programme

Adele Keating et al., 2015

Paper

Design
In this RCT there were 82 separated parents in the PP-PWS group and 79 in a waiting list control group recruited through the Unmarried and Separated Families of Ireland. 71 parents were female and had custody; parents and children’s mean ages were 39 and 9 years respectively; families were separated for an average of 3 years.

The 6-week PP-PWS programme was facilitated by supervised and trained professionals at 16 community sites.

Results
Compared with the control group, from pre- to post-treatment, the PP-PWS group showed significant goal attainment on the goals scale and increases in parenting satisfaction on the KPS. They also showed decreases in child behaviour problems of the SDQ total difficulties scale, parental adjustment problems on the MHI-5 and interparental conflict on the Quality of Co-parental Communications Scale.

Overall how effective are the Parents Plus Programmes (compared to TAU or WL control groups) in reducing behaviour problems?

- All PP programmes are effective
- There are medium to large effect sizes (.62-.80) for the original PPP, PP-CP & PP-AP
- Effect sizes of .62 - .80 mean that about 64-69% showed marked improvement compared with control groups (who showed 31-36% improvement).
- There are small to medium effect-sizes (.31-.41) for the PP-EYP and PP-PWSP
- Effect sizes of .31 - .41 mean that about 57-60% showed marked improvement compared with control groups (who showed 40-43% improvement).
Between groups post-treatment effect sizes on the SDQ-P total difficulties scale from 10 controlled studies of Parents Plus Programmes

<table>
<thead>
<tr>
<th>Program</th>
<th>Effect Size</th>
<th>Number of Studies</th>
</tr>
</thead>
<tbody>
<tr>
<td>PP Online Programme</td>
<td>.62</td>
<td>3 studies</td>
</tr>
<tr>
<td>PP Early Years Programme</td>
<td>.41</td>
<td>2 studies</td>
</tr>
<tr>
<td>PP Child Programme</td>
<td>.68</td>
<td>5 studies</td>
</tr>
<tr>
<td>PP Adolescent Programme</td>
<td>.80</td>
<td>2 studies</td>
</tr>
<tr>
<td>PP PWS Programme</td>
<td>.31</td>
<td>1 study</td>
</tr>
</tbody>
</table>

Overall were improvements shown at the end of PP programmes maintained at follow-up?

- Yes!

- Gains shown after treatment were maintained at 3-10 months follow-up.

- Averaging across all PP programmes the effect size at 3-10 months follow-up on the total difficulties scale of the SDQ-P (.80) was greater than at the end of treatment (.59).

Before to after treatment, and before treatment to 3-10 month follow-up effect sizes on the SDQ-P total difficulties scale from 16 controlled studies of Parents Plus Programmes

<table>
<thead>
<tr>
<th>Follow-up</th>
<th>Effect Size</th>
<th>Studies</th>
</tr>
</thead>
<tbody>
<tr>
<td>Post-treatment</td>
<td>.59</td>
<td>16 studies</td>
</tr>
<tr>
<td>5-10 months follow-up</td>
<td>.80</td>
<td>10 studies</td>
</tr>
</tbody>
</table>
For each of the different types of PP programmes were improvements shown at the end of PP programmes maintained at follow-up?

- Yes!

- For all programmes (except the PP-PWSP where there were no data), gains shown after treatment were maintained at 3-10 months follow-up.

Pre- to post-treatment (PT) and pre-treatment to 3-10 month follow-up (FU) effect sizes on the SDQ-P total difficulties scale from 15 controlled studies of Parents Plus Programmes

Did PP programmes lead to improvements in other areas besides child behaviour problems?

- Yes!

- PP programmes led to improvements in the areas of
  - Goal attainment
  - Parental satisfaction
  - Behaviour problems
  - Parental stress
Between groups post-treatment effect sizes for goal attainment, parental satisfaction, behaviour problems, and parental stress from 10 studies of Parents Plus Programmes

Are Parents Plus Programmes as effective as other evidence-based parent training group programmes?

- Yes!

- Post-treatment effect sizes on indices of child behaviour problems from major meta-analyses of the Incredible Years Programme and the Triple P programme were no larger than those for the Parents Plus programmes.

Between groups post-treatment effect sizes on indices of behaviour problems for the Parents Plus, Incredible Years and Triple P Programmes


What can we conclude about the evidence-base for Parents Plus Programmes?

- Parents Plus programmes work.
- They work for families with children of all ages, and for separated families.
- The gains made on Parents Plus programmes are lasting.
- Parents Plus programmes work as well as other evidence-based parent training programmes.

What are the implications of PP research results for practice, policy and future research?

- PP programmes should be rolled out nationally in preschools, schools and CAMHS.
- Large multi-site RCTs with long-term follow-up should be conducted to find out the long-term benefits of PP.
- Economic evaluations should be conducted to find out the extent of the cost-savings to society associated with PP programmes.

Thank You

Alan Carr
Professor of Clinical Psychology