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A Randomized Controlled Trial of Triple P Online for Parents of Hyperactive/ Inattentive Pre-schoolers

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Introduction



Parent-child relationships of pre-schoolers with hyperactivity/ inattention are often negative and can cause parenting stress.

Early intervention may reduce poor outcomes, such as conduct problems and ADHD.

Evidence exists for the efficacy of therapist-led parenting interventions in reducing hyperactive preschool behavior.

No studies have examined online self-help parenting programs in this target group.

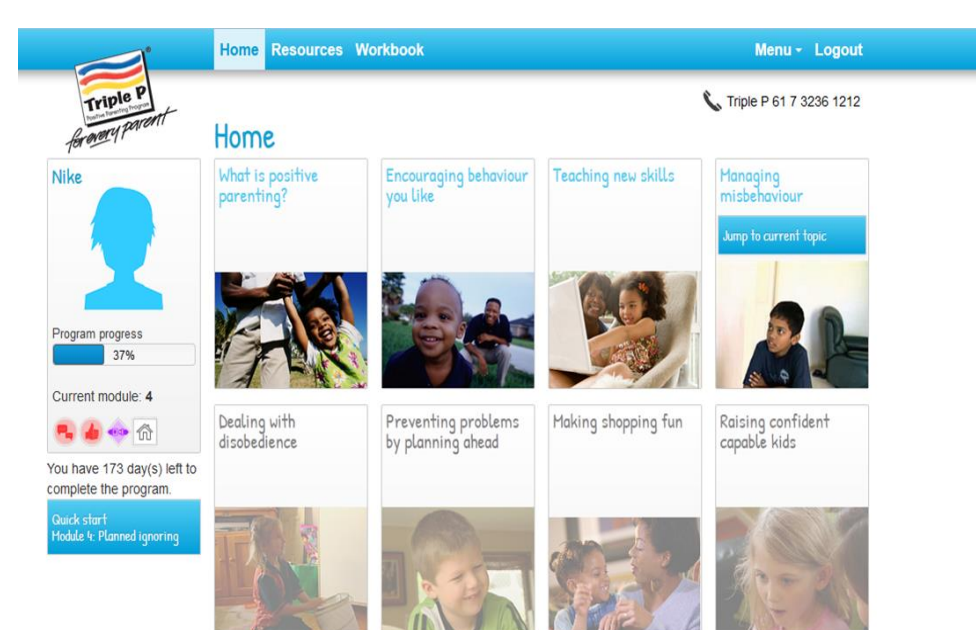
Online, self-help delivery has the added benefit of low costs, increased access to hard-to-reach-parents and elimination of barriers, such as childcare, transport, and stigma.

Hypotheses

In comparison to the waitlist control group, it was predicted that the intervention group would show a greater ...

- Decline in hyperactive/ inattentive child behavior
- Increase in child psychosocial functioning
- Decrease in dysfunctional parenting
- Decrease in parenting stress and depression
- Increase in parenting satisfaction, self- efficacy, and well-being

Intervention



- 8 weekly modules of 30mins each
- Interactive exercises, video clips
- Self-regulatory focus
- 2 telephone consultations with Triple P practitioner

Measures

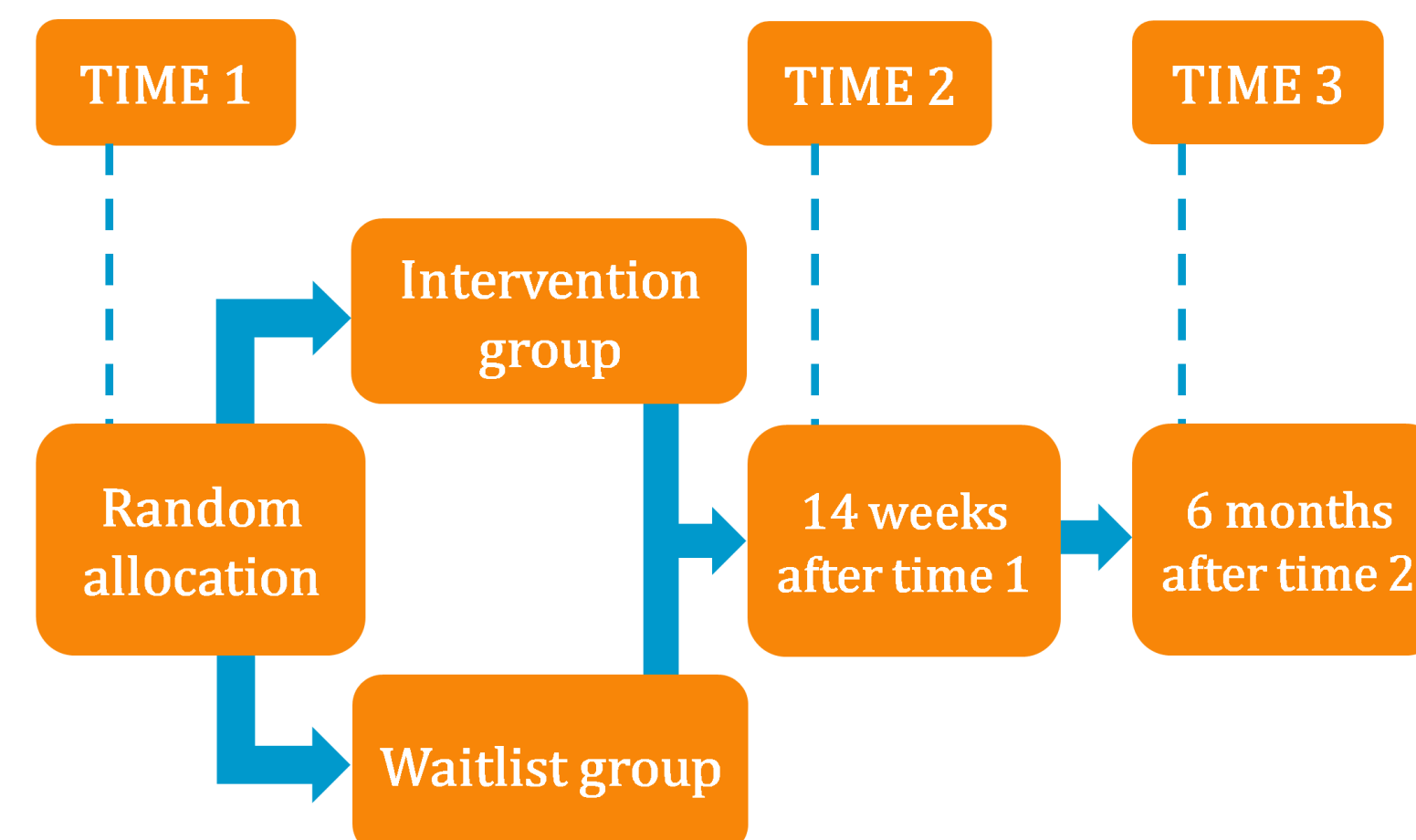
Screening measures

- Parent-reported hyperactive/ inattentive child behavior on the Werry-Weiss-Peters Activity Rating Scale (WWPARS; Routh, 1978) (cut-off = 14)
- Parental account of Child Symptoms (PACS; Taylor et al., 1986) to assess impairing levels of hyperactivity/ inattention (cut-off = 16)

Outcome measures

- Maternal and paternal ratings of hyperactivity/ inattention on the Conners Early Childhood Behavior scale
- Teacher ratings of psychosocial behavior on the Strengths and Difficulties Questionnaire (SDQ) and the Child Behavior Scale (CBS)
- Maternal ratings on the
 - Parenting Scale (PS)
 - Parenting Styles and Dimensions Questionnaire (PSDQ)
 - Parenting Sense of Competence scale (PSOC)
 - Depression Anxiety Stress Scales (DASS-21)

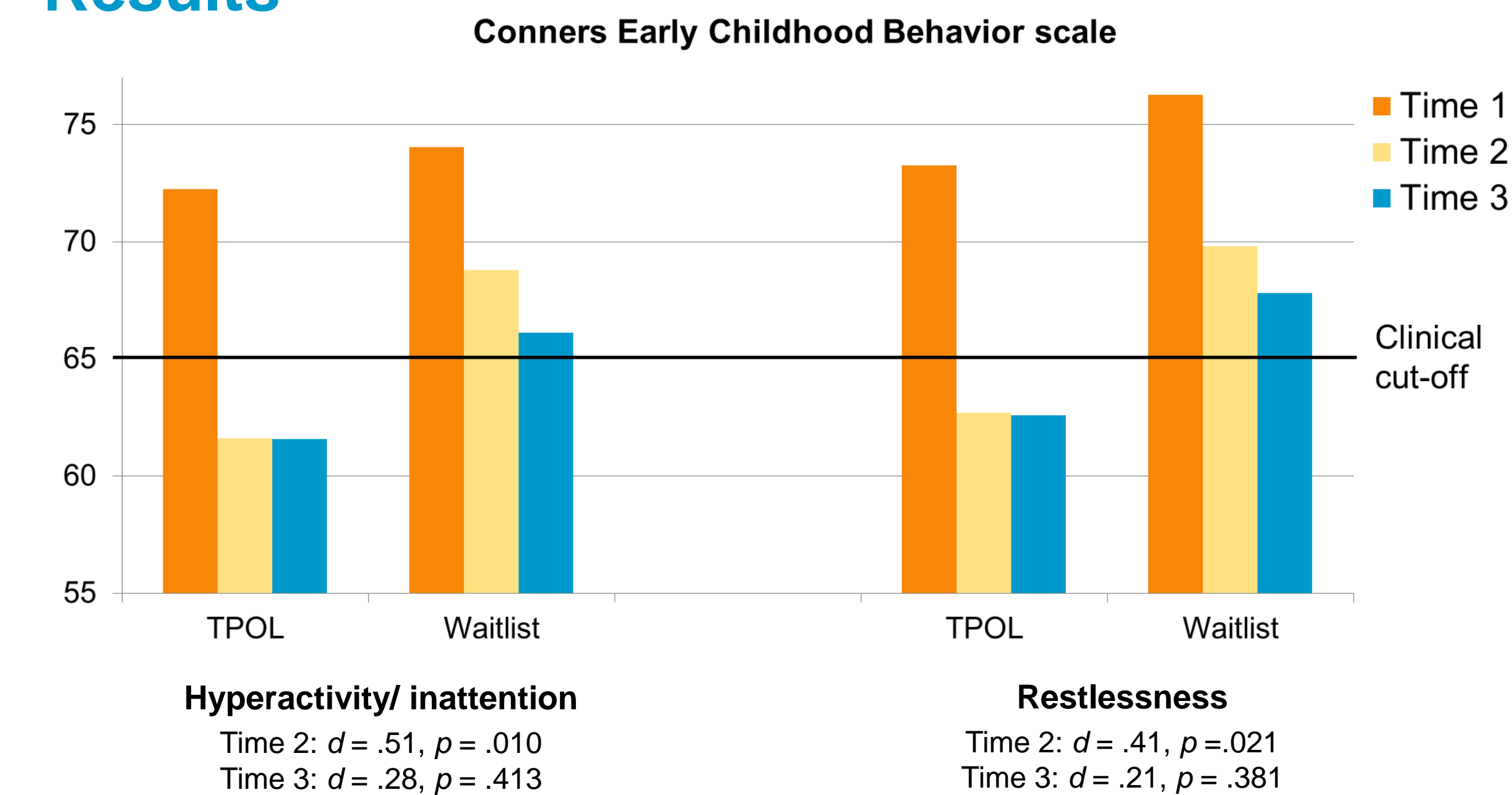
Design



Participants

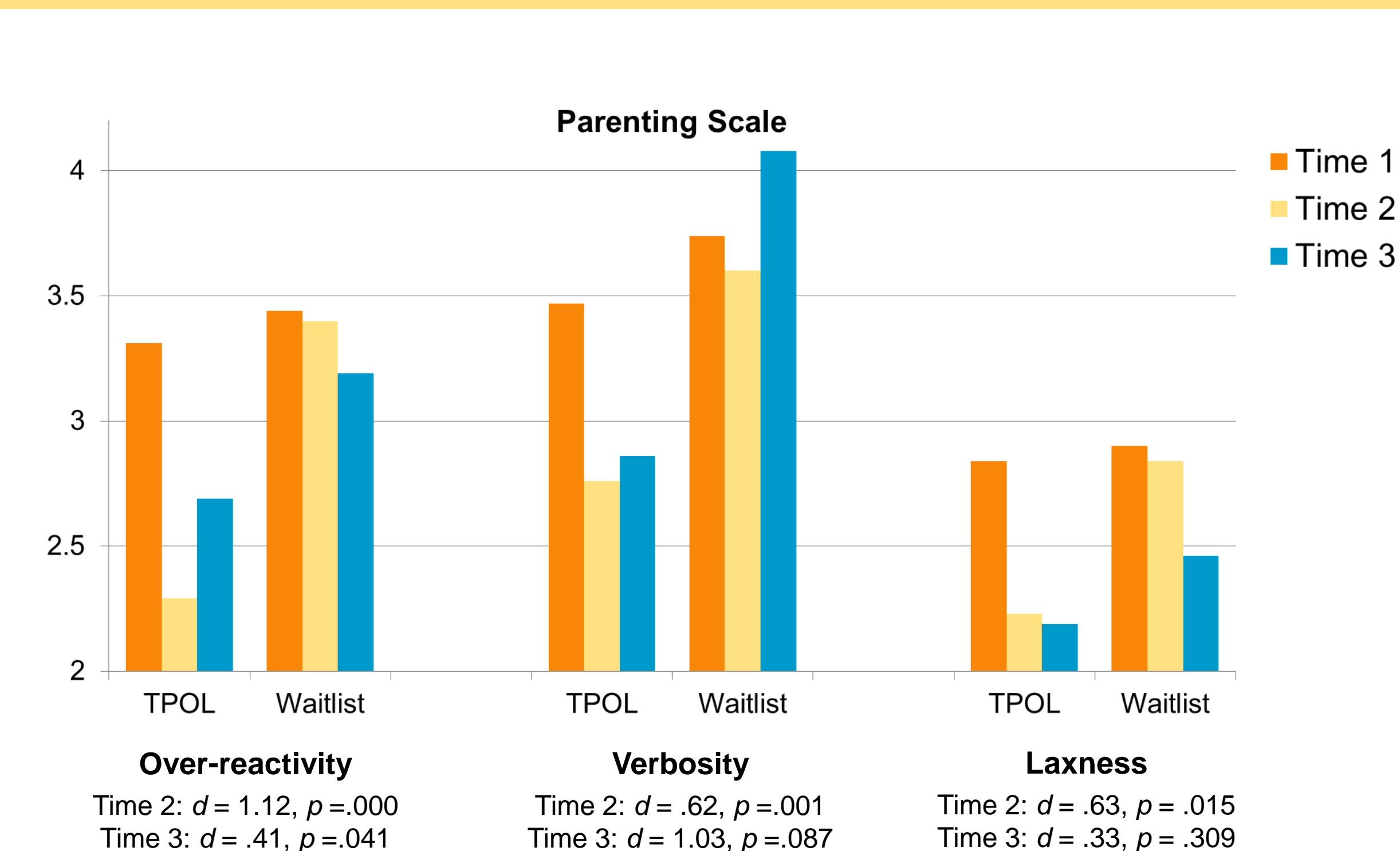
- Total sample, N = 53 (38 boys, 15 girls)
- 80% middle to high SES

Results



Intervention effects for PSOC and DASS-21 after controlling for Time 1 scores

	Intervention			Control			Pre-post	Pre-follow-up		
	T1	T2	T3	T1	T2	T3				
Satisfaction	21.19 (5.85)	28.37 (5.11)	22.86 (5.59)	21.69 (6.31)	22.57 (5.71)	19.07 (4.88)	1.03	.000	.70	.010
Self-efficacy	22.15 (4.58)	29.65 (5.25)	34.98 (5.93)	25.13 (4.44)	25.57 (4.84)	32.56 (5.17)	1.55	.000	1.18	.030
Depression	8.44 (7.26)	3.74 (5.27)	1.47 (2.89)	7.92 (7.99)	6.96 (7.63)	7.16 (8.75)	.49	.033	.81	.006
Anxiety	4.47 (6.49)	3.22 (5.49)	1.37 (2.41)	4.85 (5.19)	5.04 (7.00)	5.37 (6.08)	.24	.233	.61	.007
Stress	17.29 (8.57)	9.65 (7.60)	8.74 (5.51)	14.62 (9.58)	13.91 (8.50)	15.79 (10.85)	.76	.014	1.06	.004



Results

Mother-reported child behavior

Significant intervention effects at Time 2:

- Hyperactivity/ inattention
- Restlessness

Teacher-reported child behavior

Significant intervention effects at Time 2:

- Total problems (SDQ)
- Pro-social behavior (SDQ)

Parenting behavior and well being

Significant intervention effects at Time 2 and Time 3:

- Over-reactivity (PS)
- Depression (DASS-21)
- Stress (DASS-21)
- Parenting satisfaction (PSOC)
- Self-efficacy (PSOC)

Significant intervention effects at Time 2:

- Verbosity (PS)
- Laxness (PS)

Conclusions

Triple P Online appears to be effective in ...

- Reducing hyperactive/ inattentive child behavior and dysfunctional parenting
- Reducing feelings of stress and depression in mothers
- Improving parenting satisfaction and self-efficacy in mothers



Acknowledgements

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