Overview of Triple P and IDD

Positive Parenting Program (Triple P) is aimed at providing family intervention as a proactive and preventative approach to future problems for the child(ren). Consistent with the proactive and preventative emphasis the program provides varying levels of intensity/specificity beginning with a universal level that is aimed at broad population-level education for all parents. The levels are outlined in the table provided in this white paper.

The model draws on areas of research and intervention also implicated in work with individuals with intellectual/developmental disabilities.

1. Social learning models
2. Child and family behavior therapy (including ABA)
3. Developmental approaches to learning and developmental psychopathology research
4. Population health, normalization and role of ecology in development

The self-regulatory approach to parenting is very consistent with approaches often used for children with developmental disabilities but steps in early to teach parents the needed skills including:

1. Understanding and selecting goals appropriate to their child’s developmental stage
2. Monitoring the child and their own behavior
3. Choosing appropriate intervention approaches for specific issues
4. Implementing and monitoring the solutions
5. Vetting strengths and limitations of their own performance
6. Adjusting or setting new goals

The program also works to connect parents to other social support networks and considers the environmental context for the family and how this may affect parenting and thus the child. Core parenting skills are identified and developed within this framework.

Because each level looks at impacts across the developmental stages it should not be presumed that a parent of a child with IDD would not be able to benefit and participate with a positive impact on the child.

Stepping Stones Triple P is a parallel version of the core Triple P system developed for families with youth with IDD. It has 5 levels of increasing intensity and takes a “blended prevention/treatment approach”. The Triple P program offers a certification in Stepping Stones Triple P. The program aims to increase the skills of the existing workforce/programs. Currently the focus is on pre-adolescent children but program authors note an aim to extend through adolescence in future. Core concepts include:

- Safe and engaging environment
- Positive learning environment
- Assertive discipline
- Adaptation to a child with a disability

Research into this program demonstrates the following:

- Decreases in child behavior problem
- Decreases in dysfunctional parenting behaviors
- Decreases in parental stress
- Realistic expectations
- Community participation
- Parental self-care

- Decreases in parental conflict
- Increase in relationship satisfaction
## Triple P and IDD

**Summary White Paper Developed by Louisiana OCDD Clinical Services Team**

### Levels and Target Groups

<table>
<thead>
<tr>
<th>Level</th>
<th>Target Group</th>
<th>Approach/Methods</th>
<th>Professionals Involved</th>
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</table>
| **1: Media-based parent information campaign** | Population of parents with children with disabilities | • Coordinated media and health promotion campaign  
• Electronic and print media | Media Liaison |
| Universal Triple P | | | |
| **2: Brief Selective Intervention** | Parents of children with disabilities with specific concern about child's behavior or development | • Specific advice for child-specific problem  
• May involve telephone or face-to-face work with clinician  
• May involve group work (up to 20 min) | Child and community health  
Education Professionals  
Allied Health  
Childcare Staff  
Early Intervention Staff [during routine well-child care] |
| Selected Stepping Stones Triple P | | | |
| **3: Narrow Focus Parent Training** | Parents of children with disabilities with specific concern about child's behavior or development who require consultations or active skills training | • Brief Therapy Program (1-4 clinic sessions)  
• Combines advice, rehearsal, and self-evaluation  
• Teaches parents to manage discrete child problem behavior  
• Telephone or face-to-face clinician contact  
• May involve group work | Child and community health  
Education Professionals  
Allied Health  
Childcare Staff [during routine well-child care] |
| Primary Care Stepping Stones Triple P | | | |
| **4: Broad Focus Parent Training** | Parents of children with disabilities who want intensive training in positive parenting skills [usually have child(ren) with more severe behavior problems or at risk] | • Intensive program (9-16 hours over 9-10 sessions)  
• Broad range of targets  
• Includes generalization focus  
• May be self-directed  
• May involve telephone or face-to-face  
• May involve group work | Mental Health staff  
Welfare Staff  
Allied Health  
Education Professionals [Who routinely consult with parents about behavioral challenges] |
| Standard Stepping Stones Triple P  
Group Stepping Stones Triple P  
Self-Directed Stepping Stones Triple P | | | |
| **5: Behavioral family intervention modules** | Parents with concurrent child behavior problems and family needs [Parent stress, conflict, depression, etc]  
Parents at risk of abuse/neglect | • Individually tailored intensive program  
• Modules involve home visits with focus on parenting skills, mood management, stress related coping, and partner support  
• May involve telephone or face-to-face  
• May involve group work  
• Modules focus on attribution retraining and anger management | Disability Professionals  
Mental Health Staff  
Welfare Staff |
| Enhanced Triple P | | | |
| Pathways Triple P | | | |

**NOTE:** Adapted from Mazzuchelli & Sanders, 2012.
REFERENCES


