Help When It's Needed First: A Controlled Evaluation of Brief, Preventive Behavioral Family Intervention in Primary Care Setting.

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1.1 Aim

This study aimed to evaluate the effectiveness of Primary Care Triple P, a brief, preventive behavioral family intervention program administered by child health nurses, within a typical work setting and normal restrictions, with parents requesting help for child behavior problems.

2.1 Hypotheses

It was hypothesized that in comparison to a wait-list control group, families receiving the primary care intervention would show:

- 1. A greater decrease in targeted child behaviour problems;
- 2. A greater reduction in dysfunctional parenting practices and increased use of appropriate discipline and positive strategies;
- 3. Greater self-efficacy or confidence in being a parent;
- 4. Improvement in parents' adjustment, particularly a reduction in parenting stress; and
- 5. Intervention gains maintained at 6-month follow-up.

3.1 Results

In comparison to the wait-list condition,

- 1. Parents who received the Primary Care Triple P reported significantly lower rates of targeted problem child behaviours;
- 2. Significantly fewer children in the intervention condition in the clinical range on the PDR following the intervention;
- 3. Mothers receiving the intervention reported significantly lower reliance on dysfunctional parenting practices;
- 4. Intervention condition mothers reported significantly greater levels of satisfaction with their parenting role.
- 5. The results for measures of parental adjustment, particularly the hypothesized reduction in parenting stress are less compelling.

In addition, and as predicted, intervention gains found at post-intervention assessment were primarily maintained at a 6-month follow-up of the intervention group.

4.1 Findings

Although this study provides some support for each hypothesis, the results must be interpreted with caution. Due to the lack of effects on the observational measures of child and parent behaviour, potential reporting biases must be considered in interpreting changes found on parent-report measures of child behaviour and parenting.

5.1 Summary and Implications

The present study provides support for the effectiveness of primary care Triple P when conducted by community child health nurses as a brief BFI program for families presenting with concerns about their child's behavior or development. This study extends earlier work by examining the impact of a brief, early intervention conducted by child health nurses in a community setting. These results provide the first effectiveness outcomes from a randomized controlled trial of BFI in a primary care setting. Given the impact of this brief intervention, the implications for more broad dissemination are promising.