Appendix 8. Programs rated as Well Supported in the REA (data extracted from papers and program rating checklists)

Well Supported programs were rated as follows on the evidence of effectiveness checklist:

	Evidence of effectiveness criteria	Well Supported	Supported	Promising	Emerging	No Effect	Concerning Practice
1.	No evidence of risk or harm	☒	☐	☐	☐	☐	
2.	If there have been multiple studies, the overall evidence supports the benefit of the program	☒	☐	☐			
3.	Clear <u>baseline</u> and <u>post</u> measurement of outcomes for both conditions	☒	☐	☐			
4.	At least **two** RCTs have found the program to be significantly more effective than comparison group. Effect was maintained for at least **one** study at **1 year** follow-up.	☒					
5.	At least **one** RCT has found the program to be significantly more effective than comparison group. Effect was maintained at **6 month** follow-up.		☐				
6.	At least one study using some form of contemporary comparison group demonstrated some improvement outcomes for the intervention but not the comparison group			☐			

Evidence of effectiveness criteria	Well Supported	Supported	Promising	Emerging	No Effect	Concerning Practice
7. There is insufficient evidence demonstrating the program's effect on outcomes because: a) the designs are not sufficiently rigorous (criteria 1-6) OR b) the results of rigorous studies are not yet available				☐		
8. Two or more RCTs have found no effect compared to usual care OR the overall weight of the evidence does not support the benefit of the program					☐	
9. There is evidence of harm or risk to participants OR the overall weight of the evidence suggests a negative effect on participants						☐

Parenting Research Centre
raising children well

Triple P

Study	Program aims	Outcomes	Design	Mode	Setting	Dose	Participants		Main findings
							Intervention	**Comparison**	
Turner & Sanders (2006)	To improve child behaviour problems, reduce dysfunctional parenting practices and increase use of appropriate discipline and positive parenting strategies as well as increase parental confidence and adjustment	Child behaviour Parent-child relationship	Randomised controlled trial Waitlist Pre-post-follow-up (6 months) measures	Individual parents	Primary care settings	Number of sessions –3-4 Duration of sessions – 30 minutes Frequency of sessions – weekly with a break of 3 to 4 weeks before the fourth session if it was required Total duration of program – not indicated	Parents (n = 16) Description – parents seeking advice about child behaviour problems or developmental issues in low income areas Sex – F = 15 Age – mother's mean age = 33.67 years; father's mean age = 35.27 years Children (n = 16) Description – children between 2 and 6 years of age who have not started primary school Sex – M = 43.8% Age – mean = 37.38 months	Parents (n = 14) Description – parents seeking advice about child behaviour problems or developmental issues in low income areas Sex – not indicated Age – mother's mean age = 34.62 years; father's mean age = 35.09 years Children (n = 14) Description – children between 2 and 6 years of age who have not started primary school Sex – M = 64.3% Age – mean = 43.07 months	Statistically significant – Parents receiving the Primary Care Triple P-Positive Parenting Program intervention reported significantly lower levels of targeted child behaviour problems, dysfunctional parenting and reduced parental anxiety and stress in comparison to wait listed parents at post assessment. Maintenance of effect – Short term effects were largely maintained at 6 month follow-up assessment of the intervention group.

Triple P

Study	Program aims	Outcomes	Design	Mode	Setting	Dose	Participants		Main findings
							Intervention	**Comparison**	
Sanders, Pidgeon, Gravestock, Connors, Brown & Young (2004)	Targets parents' negative attributions regarding their child's and their own behaviour and parents' anger-control deficits	Safety and physical wellbeing Parent-child relationship Child behaviour	Randomised controlled trial Contemporary alternate treatment Pre-post-follow-up (6 months) measures	Groups of parents	Not indicated	Number of sessions – 8 Duration of sessions – 2 hours Frequency of sessions – not indicated	Parents (n = 50) Description – parents at risk of child maltreatment Sex – F = 94% Age – mother's mean age = 33.68 years; father's mean age = 36.45 years Children (n = 50) Sex – F = 48% Age – mean = 52.84 months	Parents (n = 48) Description – parents at risk of child maltreatment Sex – F = 92% Age – mother's mean age = 33.29 years; father's mean age = 35.32 years Children (n = 48) Sex – F = 52% Age – mean = 53.71 months	Statistically significant – EBFI showed a significantly greater short term improvement on measures of negative parental attributions for children's misbehaviour, potential for child abuse and unrealistic parental expectations than SBFI. Maintenance of effect – At 6 months follow-up both conditions showed similarly positive outcomes on all measures of child abuse potential, parent practices, parental adjustment and child behaviour and adjustment; however EBFI continued to show greater change in negative parental attributions. Descriptive – At post intervention both conditions were associated with lower levels of observed and parent-reported disruptive child behaviour, lower levels of parent reported dysfunctional parenting, greater parental self-efficacy, less parental distress, relationship conflict and similarly high levels of consumer satisfaction.
				Individual parents	Telephone	Number of sessions – 4 Duration of sessions – 15-30 minutes Frequency of sessions – not indicated Total duration of program – 12 weeks			

Triple P

Study	Program aims	Outcomes	Design	Mode	Setting	Dose	Participants		Main findings
							Intervention	**Comparison**	
Sanders, Bor, & Morawska (2007)	Parents are typically taught to increase positive interactions with children and to reduce coercive and inconsistent parenting practices	Child behaviour Parent-child relationship	Randomised controlled trial Waitlist Pre-post-1 year and 3 year follow-up 3 intervention groups: 1) Enhanced Behavioural Family Intervention **(EBFI)** 2)Standard Behavioural Family Intervention **(SBFI)** 3) Self-directed behavioural family intervention **(SDBFI)**	**EBFI** Individual parents	**EBFI** Not indicated	**EBFI** Number of sessions –12 Duration of sessions – 60-90 minutes Frequency of sessions – weekly Total duration of program – approx. 14 hours of intervention	**EBFI** Parents (n = not indicated) Children (n = 48) Description – children aged between 36 and 48 months with child behaviour problems and no evidence of developmental disorder or significant health impairment Sex – M = 67.50% Age – mean = 84.94 months	**No waitlist demographics available**	Maintenance of effect – The findings showed a very similar pattern of sustained improvement at both 1 and 3 year post intervention irrespective of which variant of Triple P parents received. All three variants showed maintenance of treatment gains and the changes observed in levels of disruptive behaviour had either maintained or shown further improvement by 3 year follow-up. Descriptive – There was no evidence of relapse or negative side effects of intervention on any child or parent measure. Approximately 2/3 of preschoolers who were clinically elevated on measures of disruptive behaviour at pre-intervention moved from the clinical to the non-clinical range. Across conditions, there was a comparable preventive effect for each intervention for these high risk children.
				SBFI Individual parents	**SBFI** Not indicated	**SBFI** Number of sessions –10 Duration of sessions – 60-90 minutes Frequency of sessions – weekly Total duration of	**SBFI** Parents (n = not indicated) Children (n = 50) Description – children aged between 36 and 48 months with child behaviour problems and no evidence of developmental disorder or significant		

Triple P

| Study | Program aims | Outcomes | Design | Mode | Setting | Dose | Participants | | Main findings |
							Intervention	Comparison	
						program – approx. 10 hours of intervention	health impairment Sex – M = 66.20% Age – mean = 83.73 months		
				SDBFI Individual parents	**SDBFI** Home	**SDBFI** Number of sessions –10 Duration of sessions – N/A Frequency of sessions – N/A Total duration of program – not indicated	**SDBFI** Parents (n = not indicated) Children (n = 41) Description – children aged between 36 and 48 months with child behaviour problems and no evidence of developmental disorder or significant health impairment Sex – M = 69.30% Age – mean = 82.64 months		

Triple P

Study	Program aims	Outcomes	Design	Mode	Setting	Dose	Participants		Main findings
							Intervention	**Comparison**	
Morawska & Sanders (2006)	To prevent child problems	Child behaviour Parent child relationship	Randomised controlled trial Waitlist Pre-post-follow-up (6 months) measures Two interventions: 1) Telephone assisted self directed behavioural family intervention **(TASD-BFI)** 2) Self directed behavioural family intervention **(SD-BFI)**	**TASD-BFI** Individual Parents	**TASD-BFI** Home	**TASD-BFI** Number of sessions – N/A Duration of sessions – N/A Frequency of sessions – N/A	**TASD-BFI** Parents (n = 43) Description –Families with a toddler between the ages of 18 and 36 months with child behaviour problems. **Demographics are for the whole sample** Sex – not indicated Age – mother's mean age = 33.21 years; father's mean age = 35.05 years Children (n = 43) Sex – M = 50.8% Age – mean = 26.10 months	Parents (n = 41) Description – Families with a toddler between the ages of 18 and 36 months with child behaviour problems. **Demographics are for the whole sample** Sex – not indicated Age – mother's mean age = 33.21 years; father's mean age = 35.05 years Children (n = 41) Description – not indicated Sex – m = 50.8% Age – mean = 26.10 months	Statistically significant – There were significant short-term reductions in reported child behaviour problems and improvements in maternal parenting style, parenting confidence and anger. Gains were more clinically significant in the telephone group. For child behaviour problems the two intervention groups differed significantly from the waitlist group. Families who received minimal therapist assistance made more clinically significant gains compared with families who completed the program with no therapist assistance. Maintenance of effect – The intervention effects were maintained at 6 month follow-up Descriptive – Mothers in both intervention groups become more confident than those in the waitlist group.
				Individual parents	Telephone	Number of sessions – 10 Duration of sessions – max. 30 minutes Frequency of			

Triple P

Study	Program aims	Outcomes	Design	Mode	Setting	Dose	Participants		Main findings
							Intervention	**Comparison**	
						sessions – weekly Total duration of program – 10 weeks			
				SD-BFI Individual Parents	**SD-BFI** Home	**SD-BFI** Number of sessions –N/A Duration of sessions – N/A Frequency of sessions – N/A Total duration of program – 10 weeks	**SD-BFI** Parents (n = 42) Descrscription – Families with a toddler between the ages of 18 and 36 months with child behaviour problems. **Demographics are for the whole sample** Sex – not indicated Age – mother's mean age = 33.21 years; father's mean age = 35.05 years Children (n = 42) Sex – M = 50.8% Age – mean = 26.10 months		

Triple P

Study	Program aims	Outcomes	Design	Mode	Setting	Dose	Participants		Main findings
							Intervention	**Comparison**	
Ireland, Sanders, & Markie-Dadds (2003)	Aims to teach parents to identify the causes of child behaviour problems, promote children's development, manage misbehaviour and plan ahead to prevent child behaviour problems in "high risk" parenting situations The additional sessions included in EGTP aimed to improve marital communication, enhance consistent use of the positive parenting strategies and to offer support for each other's	Child behaviour Child development Family relationships Parent-child relationship	Randomised controlled trial Pre-post-follow-up (3 months) measures Two interventions 1) Standard Group Triple P **(SGTP)** 2) Enhanced Group Triple P **(EGTP)**	**SGTP** Groups of parents Individual parents **EGTP** As above	**SGTP** University Telephone **EGTP** As above	**SGTP** Number of sessions – 4 Duration of sessions – 2 hours Frequency of sessions – weekly Number of sessions – 4 Duration of sessions – 15-30 minutes Frequency of sessions – weekly Total duration of program – 8 weeks **EGTP** As above	Parents (n = 19) Description – couples experiencing child behaviour problems and concurrent marital conflict Sex – F = 16 Age – mother's mean age = 34.50 years, father's mean age = 8.13 years Children (n = 19) Sex – M = 11 Age – mean = 3.53 years **EGTP** Parents (n = 18)	**Did not use a true comparison group**	Statistically significant – There were significant improvements from pre to post intervention for both conditions, on measures of disruptive child behaviour, dysfunctional parenting style, conflict over parenting, relationship satisfaction and communication. Maintenance of effect – Effects were maintained at 3 month follow-up. Descriptive – No differences were found between the two conditions, with both the EGTP and SGTP programs resulting in similar outcomes.

Triple P

Study	Program aims	Outcomes	Design	Mode	Setting	Dose	Participants		Main findings
							Intervention	**Comparison**	
	parenting efforts			Groups of parents		Number of sessions – 2

Duration of sessions – 90 minutes

Frequency of sessions – weekly (overlap of 2 weeks where parents participated in a group session and a telephone consultation)

Total duration of program – 8 weeks | Description – couples experiencing child behaviour problems and concurrent marital conflict

Sex – F = 16

Age –mother's mean age = 34.94 years, father's mean age = 36.69 years

Children (n = 18)

Sex – m = 13

Age – mean = 3.78 years | | |

Triple P

Study	Program aims	Outcomes	Design	Mode	Setting	Dose	Participants		Main findings
							Intervention	Comparison	
Dean, Myors, & Evans (2003)	Aims to prevent behavioural, emotional and developmental problems in children by enhancing the knowledge, skills and confidence of parents	Child behaviour Child development Parent-child relationship	Non-controlled trial Pre-post-follow-up (6 and 12 months) measures	Groups of parents	Not indicated	Number of sessions –8 Duration of sessions – not indicated Frequency of sessions – not indicated Total duration of program – not indicated	Parents (n = 560) Description – parents who had at least one child aged 2-10 years with behavioural problems Sex – F = 446 Age – not indicated	None	Statistically significant – There were significant improvements for mothers and fathers on all of the measures, except the fathers' DASS Anxiety Scale score. Parents reported a significant decrease in disruptive child behaviour after attending the groups. Maintenance of effect – Gains were maintained at 6 and 12 month follow-up. Descriptive – Parent evaluations at the conclusion of the program demonstrated a reduction in disruptive child behaviour, lower levels of dysfunctional parenting, reduction in conflict between parents over child-rearing and gains in parental mental health

Triple P

Study	Program aims	Outcomes	Design	Mode	Setting	Dose	Participants		Main findings
							Intervention	**Comparison**	
Rogers, Cann, Cameron, Littlefield & Lagioia (2003)	Aims to a) enhance the knowledge, skills, confidence, self- sufficiency and resourcefulness of parents of pre-adolescent children b) promote the development of nurturing, safe engaging, non-violent and low conflict environments for children c) enhance children's social, emotional, language, intellectual and behavioural competencies through positive	Safety and physical wellbeing Child development Child behaviour Parent-child relationship	Non-controlled trial Pre- post measures Two delivery modes: 1) **Group Triple P** 2) **Standard Triple P**	**Group Triple P** Group of families Individual families **Standard Triple P** Individual families	**Group Triple P** Not indicated Telephone **Standard Triple P** Home	**Group Triple P** Number of sessions – 4 Duration of sessions – 2 hours Frequency of sessions – not indicated Number of sessions –4 Duration of sessions – 15-30 minutes Frequency of sessions – not indicated **Standard Triple P** Number of sessions – not indicated	<u>Parents</u> (n = 83) Description – families of children at risk of developing emotional and behavioural problems Sex – F = 100% Age – not indicated <u>Children</u> (n = 83) Description – children exhibiting ADHD characteristics Sex – M = 67% Age – 2-15 years (mean = 5 years)	None	<u>Significant</u> – Significant pre to post decrease in child behaviour intensity and problem in both groups. Significant reduction in proportion of children presenting in the clinical range on the ADHD scale of ECBI. Significant pre to post improvement in parent coping, parenting skills and feelings of competence. <u>Descriptive</u> – Following the intervention there was a reduction in problem behaviour scores of children perceived to have a high frequency of behaviours typical of ADHD. Mothers also reported reduced depression, anxiety and stress, increased feelings of satisfaction and competency in parenting, less negative parenting behaviour and reduction in parental conflict.

Triple P

Study	Program aims	Outcomes	Design	Mode	Setting	Dose	Participants		Main findings
							Intervention	Comparison	
	parenting practices					Duration of sessions – not indicated Frequency of sessions – not indicated Total duration of program – 10-16 weeks			

Triple P

Study	Program aims	Outcomes	Design	Mode	Setting	Dose	Participants		Main findings
							Intervention	**Comparison**	
Markie-Dadds & Sanders (2006)	Targets coercive family interactions known to contribute to the development and maintenance of children's disruptive behaviour problems	Family relationships Child behaviour Parent-child relationship Child development	Randomised controlled trial Waitlist Pre-post-follow-up (6 months) measures	Individual families	Home	Number of sessions – 10 Duration of sessions – Not indicated Frequency of sessions – weekly Total duration of program – 10 weeks	Parents (n = 32) Sex – F = 100% Age – mother's mean age = 32.47 years Children (n = 32) Description – aged between 2 and 5 years with behavioural concerns and no evidence of developmental disorders or significant health impairment Sex – M = 62.5% Age – mean = 42.91 months	Parents (n = 31) Sex – F = 100% Age – mother's mean age = 31.45 years Children (n = 31) Description – aged between 2 and 5 years with behavioural concerns and no evidence of developmental disorders or significant health impairment Sex – M = 64.5% Age – mean = 43.26 months	Statistically significant – Mothers in the intervention group reported significantly less child behaviour problems, less use of dysfunctional discipline strategies and greater parenting competence than mothers in the waitlist group. Maintenance of effect – Mothers' reports at 6 month follow-up indicated that gains in child behaviour and parenting practices achieved at post intervention were maintained. Non-significant – On measures of parental adjustment, there was no significant difference in conditions at post-intervention based on mothers' reports of depression, anxiety, stress and conflict with partners over parenting issues.

Triple P

Study	Program aims	Outcomes	Design	Mode	Setting	Dose	Participants		Main findings
							Intervention	**Comparison**	
Bor, Sanders, & Dadds (2002)	**Standard Triple P:** reduce child disruptive behaviour **Enhanced Triple P:** reduce child disruptive behaviour and reduce psychosocial risk factors associated with child behaviour problems (i.e., partner conflict and parental stress)	Child Behaviour Parent-child relationships Family relationships	Randomised controlled trial Waitlist Pre-post-follow-up (1year) measures Two intervention groups **1) Standard Triple P** **2) Enhanced Triple P**	**Standard Triple P** Individual families	**Standard Triple P** Combination of clinic and home	**Standard Triple P** Number of sessions – 10 Duration of sessions – 60-90 mins Frequency of sessions – weekly Total duration of program – 15 weeks	**Standard Triple P** Families (n = 29) Unclear how many individual parents Family description – across both intervention groups families had at least one risk factor (maternal depression, relationship conflict, single parent, low family income or occupational prestige) Sex – Female and male (proportion unclear) Age – Females: m = 30.21(SD = 4.69);Males: m = 33.65 (SD = 7.89) Children (n = 29) Description – Mother rated child as having co-occurring disruptive	Family description – as per intervention group Child description - as per intervention group Families (n = 32) Unclear how many individual parents Sex - Female and male (proportion unclear) Age – F: mean = 29.72 (SD = 4.57); M: mean = 33.03 (SD = 5.51) Children (n = 32) Sex – F and M (proportion unclear) Age – mean = 42.81 (SD = 3.81) in months	Statistically significant – At post-intervention both intervention programs were associated with significantly lower levels of mother-reported disruptive child behavior and significant improvement in parenting skills compared to the waitlist group. At post-intervention the Enhanced Triple P condition was associated with significantly less observed child negative behavior compared to the waitlist group. At post-intervention the Standard Triple P condition was associated with higher levels of parenting efficacy and competence, and more significant improvements in parent conflict compared to the waitlist group. Maintenance of effect – gains achieved at post-intervention across all outcome measures were maintained at 1-year follow-up. Non-significant – no differences between the two intervention conditions on any of the measures of child behaviour, parenting skills or confidence, or parent conflict at post-intervention or follow-up.

Study	Program aims	Outcomes	Design	Mode	Setting	Dose	Participants		Main findings
							Intervention	**Comparison**	
							and behaviour and attentional/hyperactive difficulties. Sex – F and M (proportion unclear) Age – mean = 39.86 (SD = 3.34) in months		Descriptive – 80% of the children in either intervention group showed clinically reliable improvement in observed negative behaviour from pre-intervention to follow-up.
				Enhanced Triple P Individual families	**Enhanced Triple P** Combination of clinic and home	**Enhanced Triple P** Number of sessions – 12 sessions Duration of sessions – 60-90 mins Frequency of sessions – weekly Total duration of program – 17 weeks	**Enhanced Triple P** Families (n = 26) Unclear how many individual parents Family description – across both intervention groups families had at least one risk factor (maternal depression, relationship conflict, single parent, low family income or occupational prestige) Sex – F and M (proportion unclear) Age – F: mean =		

Triple P									
Study	**Program aims**	**Outcomes**	**Design**	**Mode**	**Setting**	**Dose**	**Participants**		**Main findings**
							Intervention	**Comparison**	
							28.41 (SD = 4.21); M: mean = 31.54 (SD = 6.23) Children (n = 26) Description – Mother rated child as having co-occurring disruptive and behaviour and attentional/hyperactive difficulties. Sex –F and M (proportion unclear) Age – mean = 40.41 (SD = 3.80) in months		

Triple P

Study	Program aims	Outcomes	Design	Mode	Setting	Dose	Participants		Main findings
							Intervention	**Comparison**	
Cann, Rogers, & Matthews (2003)	**Group, individual and self-directed** **Triple P**: reduce child disruptive behaviour **Enhanced Triple P:** reduce child disruptive behaviour and reduce psychosocial risk factors associated with child behaviour problems (i.e., partner conflict and parental stress)	Child behaviour Parent-child relationships	Non-controlled trial Pre and post measures Interventions: **1) Group Triple P** **2) Individual Triple P** **3) Self-directed Triple P** **4) Enhanced Triple P –** Offered to parents still recording critical levels of child or parent	**Group** Group of parents	**Group** Various community locations and home	**Group:** Number of sessions – 8 Duration of sessions – 4x2-hour group sessions and 3 half-hour phone calls, plus 1 final phone or group session Frequency of sessions – weekly Total duration of program – 8 weeks	**Demographics are for the whole sample** Parents (n = 589) Description – mothers who commenced and completed a program and for whom there are pre and post measures available Sex - F Age – not reported Children (n = not reported)	No comparison group	Statistically significant – Significant improvements in measures of child behaviour problems, parental style, parent sense of competence (satisfaction and efficacy), parent depression, anxiety and stress, and couple conflict (problem and intensity scales) from pre- to post-intervention. All changes were clinically significant.

Triple P

Study	Program aims	Outcomes	Design	Mode	Setting	Dose	Participants		Main findings
							Intervention	Comparison	
			problems following the group program or who had concurrent problems in personal adjustment (stress or depression) or family dysfunction	**Individual** Individual parents	**Individual** Unclear	**Individual** Unclear	Description – unclear Sex – 61% male Age – less than 1 year to 15 years (mean = 4.5, SD = 2.5)		
				Enhanced	**Enhanced** Unclear.	**Enhanced** Number of sessions – unclear Duration of sessions – unclear Frequency of sessions – unclear Total duration of program – 10-16 weeks			

Triple P

Study	Program aims	Outcomes	Design	Mode	Setting	Dose	Participants		Main findings
							Intervention	Comparison	
				Self-directed Written version to work through themselves with minimal assistance)	**Self-directed** Home	**Self-directed** Unclear			

Triple P

Study	Program aims	Outcomes	Design	Mode	Setting	Dose	Participants		Main findings
							Intervention	Comparison	
Cann, Rogers & Worley (2003)	To promote the competence and confidence of parents experiencing early difficulties in their relationship with their children to acquire skills known to promote the development, health, safety and emotional wellbeing of children	Child behaviour Parent-child relationships	Non-controlled trial Pre –post measures	Telephone supported, self-directed version of Triple P	Home	Number of sessions – 10 Duration of sessions – 15-30 minutes Frequency of sessions – weekly Total duration of program – 10 weeks	Parents (n = 73) Description – isolated families for whom pre and post data was available. Sex – not reported Age – not reported Children (n = unclear) Description – significant number of the target children had moderate to severe behavioural difficulties. Sex – 60% boys Age – range = 1-11 years, mean = 5.0, SD = 2.5	None	Statistically significant – Significant improvements in child behaviour (problem and intensity),parenting style, parental depression, anxiety, and stress, inter-parent conflict (problem and intensity) and parent sense of competence (satisfaction and efficacy). Non-significant – No change in parent reported marital satisfaction following intervention.

Triple P

Study	Program aims	Outcomes	Design	Mode	Setting	Dose	Participants		Main findings
							Intervention	**Comparison**	
Crisante (2003)	Help practitioners to deal more effectively with requests for assistance with behaviour management by parents whose children attend pre-schools and long-day care centres	Child behaviour Parent-child relationships	Non-controlled trial Pre-post measures	Level 3 of Triple P – up to 4 face-to-face sessions with individual parents, tip sheets, video tape and monitoring activities	Delivered by pre-school practitioner at pre-schools and long-day care centres	Number of sessions – up to 4 face-to-face sessions, with average of 3 attended per parent Duration of sessions – 15-30 mins Frequency of sessions – unclear Total duration of program – 6 weeks	Parents (n = 39) Description – had concerns about the management of their children's behaviour Sex – 77% mothers Age – 86% aged between 20 to 40 years Children (n = 39) Description – 42% of children had behaviour problems in the clinical range (ECBI) Sex – 54% M; 33% F; 13% unspecified Age – mean of 3 years	None	Statistically significant – pre- to post-intervention data on Parenting Experience Survey available for 29 parents: significant improvements in perceptions of parenting experiences, support and relationship satisfaction. Descriptive – Practitioners reported improvements in their own skills in managing difficult child behaviour at pre-school.

Stepping Stones Triple P

Study	Program aims	Outcomes	Design	Mode	Setting	Dose	Participants		Main findings
							Intervention	Comparison	
Plant & Sanders (2006)	Designed for parents who have a child with a disability to promote children's competence and development, parents management of misbehaviour and generalisation and maintenance of parenting skills	Child development Child behaviour	Randomised controlled trial Waitlist Pre-post-follow-up (12 months) measures Two interventions: 1) Stepping Stone Triple P-Enhanced **(SSTP-E)** 2) Stepping Stones Triple P-Standard **(SSTP-S)**	**SSTP-S** Individual parents **SSTP-E** Individual parents	**SSTP-S** Not indicated **SSTP-E** Not indicated	**SSTP-S** Number of sessions – 10 Duration of sessions – 60-90 minutes Frequency of sessions – weekly Total duration of program – 10 weeks **SSTP-E** Number of sessions – 16 Duration of sessions – 60-90 minutes Frequency of sessions – weekly Total duration of program – 16 weeks	**SSTP-S** Parents (n = 26) Children (n = 26) Description – children with a developmental disability and behavioural problems Sex – M = 69.2% Age – mean = 54.62 months Parents (n = 24) Children (n = 24) Description – children with a developmental disability and behavioural problems Sex – M = 70.8% Age – mean = 56.63 months	Parents (n = 24) Children (n = 24) Description – children with a developmental disability and behavioural problems Sex – M = 83.3% Age – mean = 54.04 months	Statistically significant – Both interventions produced significant reductions in child problem behaviour, with 67% of children in the SSTP-E and 77% of children n the SSTP-S showing clinically reliable change from pre-intervention to follow-up. Maintenance of effect – Gains attained at post-intervention were maintained at 1 year follow-up. Descriptive – At post-intervention, both programs were associated with lower levels of observed negative child behaviour, reductions in the number of care-giving settings where children displayed problem behaviour and improved parental competence and satisfaction in the parenting role as compared with the waitlist condition.

Stepping Stones Triple P

Study	Program aims	Outcomes	Design	Mode	Setting	Dose	Participants		Main findings
							Intervention	Comparison	
Whittingham, Sofronoff, Sheffield, & Sanders (2008)	To treat specific problems of children with ASD, aiming to improve social behaviour and increase language, as well as to decrease inappropriate behaviours	Child behaviour Child development	Randomised controlled trial Waitlist Pre-post-follow-up (6 months) measures	Groups of parents	Not indicated	Number of sessions – 5 Duration of sessions – not indicated Frequency of sessions – weeks 1, 3, 4, 7 and 9	Parents (n = 29) Sex – F = 29 Age – not indicated Children (n = 29) Description – children with ASD aged between 2 and 9 years Sex – M = 24 Age – mean = 5.62 years	Parents (n = 30) Sex – F = 26 Age – not indicated Children (n = 30) Description – children with ASD aged between 2 and 9 years Sex – M = 23 Age – mean = 6.20 years	Statistically significant – Significant improvements in parental reports of child behaviour and parenting styles. Significant improvements in parental satisfaction and conflict about parenting as well as a sleeper effect for parental efficacy. Maintenance of effect – The treatment effects for child behaviours, parental over reactivity and parental verbosity were maintained at follow-up 6 months later.
				Individual parents	Not indicated	Number of sessions – 4 Duration of sessions – not indicated Frequency of sessions – weeks 2, 5, 6 and 8 Total duration of program – 9 weeks			