Randomised clinical trial of a group parent education programme for Australian Indigenous families

Karen Turner¹, Mary Richards¹ and Matthew R Sanders¹

1.1 Aim

The aim of this project was to assess the impact and cultural appropriateness of a group-based parenting programme tailored for Aboriginal and Torres Strait Islander families. The programme was an adaptation of the evidence-based Group Triple P – Positive Parenting Program (Turner, Markie-Dadds, Sanders, 2002), a preventively oriented, early intervention programme incorporating consultation, print and video materials that aim to promote positive, caring relationships between parents and their children, and to help parents develop effective management strategies for dealing with a variety of common behaviour problems and developmental issues.

2.1 Hypotheses

It was hypothesised that compared with a waitlist comparison group, parents receiving Indigenous Group Triple P would show significant improvements across many areas of family functioning, including:

1. Reduced disruptive child behaviour;
2. Reduced use of harsh and coercive parenting practices;
3. Improved parental adjustment (e.g. reduced stress in parents);
4. There would be high consumer satisfaction with the programme and resources (with detailed exploration of reactions to the programme content, format and resources); and
5. Intervention gains would be maintained at 6-month follow-up assessment.

3.1 Results

The results from the study revealed that indigenous parents attending Group Triple-P compared to the waitlist condition, reported:

1. Significant decreases in rates of problem child behaviour on the ECBI intensity and problem scores and SDQ total difficulty scores, with a shift from the clinical range into the non-clinic range on each of these measures.
2. Significant decrease in reliance on some dysfunctional parenting practices (PS verbosity scale).
3. No change was found, however, on parental adjustment as per Hypothesis 3. It should be noted that parents’ mean DASS depression and stress scores were not clinically elevated at any assessment point.
4. The programme resulted in high rates of consumer satisfaction.
5. Intervention gains found at post-test were primarily maintained at 6-month follow-up.

4.1 Findings

A positive finding was that this culturally tailored programme appeared to break down some of the obstacles Indigenous families face in accessing mainstream services. Three parents who attended the group programme went on to access Enhanced Triple P interventions offered by mainstream Community Child Health services (for coping skills and partner support). Anecdotal reports confirmed that they would not have accessed such services had they not first attended the group programme and found it culturally sensitive, supportive and helpful. These results provide the first outcome evidence from a randomized controlled trial of a parenting intervention for Australian Indigenous families conducted by Child Health and Indigenous Health workers in a community setting.

5.1 Summary and Implications

This study adds to a series of controlled outcome studies exploring the efficacy and effectiveness of Triple P interventions. The outcomes of this initial trial are a significant step forward in increasing appropriate service provision for Indigenous families and reducing barriers to accessing available services in the community. These trial results are sufficiently encouraging to warrant wider scale implementation and evaluation of the programme with other Indigenous groups in rural and regional areas.

¹ Parenting and Family Support Centre, The University of Queensland, Brisbane, Queensland, Australia