Case Study 1: Evidence Based Practice Report

Theme:Interventions implemented by parents.

‘How effective is a level four Triple P parenting intervention at improving child behaviour in contexts where grandparents are carers?’

(Faraji-Khiavi et al., 2021; Sourander et al., 2006). This appears to be more than just the impact of having a child with special needs; Gallagher and Hannigan (2014) found that child behaviour explained the interaction between child disability and parental mental health.

Furthermore, poor behaviour is associated with poor social outcomes. Be dandy and p4 (and)10h3

(Sourander et al., 2006) and increased body mass index (Anderson et al., 2010).

Educational psychologists (EPs) and poor behaviour

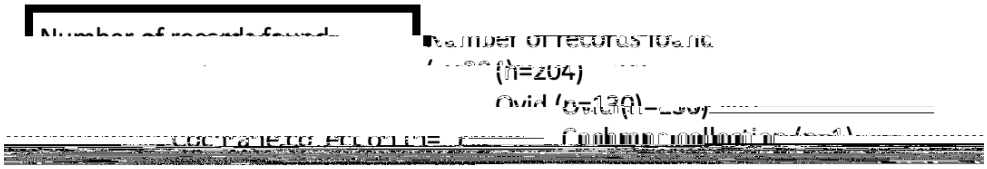
Because of the detrimental impacts of poor child behaviour, it is important to support children displaying poor behaviour as early as possible (Alatupa et al., 2011) and educational psychologists (EPs) are often requested to help support teachers, families and children with this (Hart, 2010). Furthermore, children who might see an EP for other needs

Search Terms Used in Literature Searching

Intervention	Participants‡‡
“positive parenting program*” † “triple p” ‡	

The search resulted in 204 results, of which 48 were duplicates (see figure one). 156 title and abstracts were screened using inclusion criteria (see table two) and 10 full articles were read (see appendix B for studies excluded at this point), resulting in five included studies (see table 3 and the appendix C Mapping the Field table for more information on each study).

Flowchart of the Screening Process



Note. Details of studies excluded after being read fully can be found in Appendix B.

Inclusion and Exclusion Criteria

	Inclusion criteria	Exclusion criteria	Rationale
1.	Type of publicPTj ET QMCID (pu 136.8 613eT /TT3 2a4T8QMCID (pn)10 (1(i)6 (on)5nva424.0		

Included studies

Included studies
Hoang, N. P. T., Kirby, J. N., Haslam, D. M., & Sanders, M. R. (2022). Promoting Positive Relationship Between Parents and Grandparents: A Randomized Controlled Trial of Group Triple P Plus Compassion in Vietnam. *Behavior Therapy, 53*(6), 1175-1190.
Kirby, J. N., & Sanders, M. R. (2013). Using a behavioural family intervention to produce a three-generational benefit on family outcomes: A case report. *Behaviour Change, 30*(4), 249-261.
Kirby, J. N., & Sanders, M. R. (2014). A randomized controlled trial evaluating a parenting program designed specifically for grandparents. *Behaviour Research and Therapy, 52*, 35-44.
Leung, C., Sanders, M., Fung, B., & Kirby, J. (2014). The effectiveness of the Grandparent Triple P program with Hong Kong Chinese families: A randomized controlled trial. *Journal of Family Studies, 20*(2), 104-117.
Smith, G. C., Hayslip Jr, B., Hancock, G. R., Strieder, F. H., & Montoro-Rodriguez, J. (2018). A randomized clinical trial of interventions for improving well-being in custodial grandfamilies. *Journal of Family Psychology, 32*(6), 816.

Weight of Evidence

Gough's (2007) Weight of Evidence (WoE) framework was used to assess the relevance and quality of the included studies. This framework has three components: WoE A assesses the study's methodological quality; WoE B assesses its methodological relevance; and WoE C assesses its topic relevance.

WoE B was assessed using the effectiveness evidence hierarchy taken from Petticrew and Roberts' (2003) adaption of Muir Grey's (1996) evidence hierarchy (see appendix E). WoE C was assessed against specific criteria created for this review question (see appendix F). Together, these were averaged to form WoE D, the overall weight of evidence: each WoE score was given equal weighting (see table 4 or appendix G for a full breakdown of scores).

Weight of Evidence (Gough, 2007) scores for each study

	Methodological Quality (WoE A)	Methodological Relevance (WoE B)	Topic Relevance (WoE C)	Overall Weight of Evidence (WoE D)
Hoang et al. (2022)	3 (High)	3 (High)	2.0 (Medium)	2.7 (High)
Kirby and Sanders (2013)	1.7* (Medium)	1 (Low)	2.9 (High)	1.9 (Medium)
Kirby and Sanders (2014)	1 (Low)	3 (High)	2.6 (High)	2.2 (Medium)
Leung et al. (2014)	3 (High)	3 (High)	2.4 (High)	2.8 (High)
Smith et al. (2018)	3 (High)	3 (High)	2.1 (Medium)	2.7 (High)

Note. 1-1.6 (low), 1.7-2.3 (medium), 2.4-3 (high)

*Kirby and Sanders (2013) is a case study and, therefore, Horner et al.'s (2005) rating system was used for WoE A. Gersten et al.'s (2005) indicators were used for the other studies.

Researchers

All of the studies except for Smith et al. (2018) were co-authored by Kirby and Sanders, both of whom work for the University of Queensland which owns Triple P. Indeed, Sanders is the founder of Triple P and, alongside Kirby, is the co-founder of GTP. This is a clear conflict of interest.

that children have a clearly identified and measured behavioural problem. This was due to the single-case design. Kirby and Sanders (2014) included grandparents who were concerned about their grandchild's behavioural problems (but did not rate this) or grandparents who were suffering from anxiety or depression. Leung et al.'s (2014) and Smith et al.'s (2018) inclusion criteria did not include any concerns about the child's behaviour. However, Smith et al. (2018) used fully custodial grandparents in the absence of birth parents: a sample who tend to experience high levels of grandchild behavioural difficulties and tend to find these behavioural difficulties challenging (Harnett et al., 2012). Participants also had to identify as White, Black, or Hispanic; it is unclear why. Leung et al.'s (2014) sample only required the child to live with their parent and/or grandparents and for both parents and grandparents to be resident in Hong Kong. This may explain why Leung et al. (2014) found notably lower pre-intervention Eyberg Child Behavior Inventory (ECBI) problem scores for the intervention group (M=11.28 (8.15)) than Kirby and Sanders' (2014) sample (M=13.28 (7.06)), perhaps explaining the lower effect sizes for Leung's study (see table 5).

culturally tied (Hoang & Kirby, 2020). Furthermore, Triple P (though not yet in the context of grandparents as carers) has been found to be culturally acceptable and effective across different cultural contexts (Turner et al., 2020).

Three included studies took plac

inconsistency with raters limits the extent to which results can be compared as there were clearly noted difference in parent and grandparent scores. For example, in Kirby and Sanders' (2014) study at the six month follow-up, grandparents noticed a large, significant change on the ECBI problem measure while the parents did not notice a significant change (see table five). It also is possible that, when raters were also participants, they may over-estimate the effect of such interventions. Again, due to the inconsistency and lack of double raters it is difficult to see if this was the case: if it was, this would apply to Hoang et al.'s (2022) participants, the grandparents in Kirby and Sanders' (2013, 2014) studies and participants in Smith et al.'s study but not Leung et al. (2014) participants. Multiple raters, as in Kirby and Sanders' (2013, 2014) studies might mitigate such effects.

Another concern about the raters is that no research could be found which provided validity or reliability data for any measures when used with a grandparent population. Again, this is concerning given Kirby and Sanders' (2013, 2014) findings that parents and grandparents perceived a difference in outcomes. Furthermore, the interrater reliability of the measures (although none examined grandparents) suggest that there may be issues applying a standardised measure to a new population. For instance, the interrater between teachers and parents for the relevant subscales from the SDQ is only between 0.26 and 0.47

Such issues with raters are reflected in WoE C, where no study met

the case-study, the number of non-significant results increased to four, while there were three significant changes (see table five).

For the significant results, effect sizes ranges from medium to large at post-intervention and the six-month follow-up. All were positive, indicating an improvement in child behaviour. The largest effect sizes were from Kirby and Sanders (2014) study. It is unclear if grandparents or parents were more likely to report significant changes; the grandparent in Kirby and Sanders (2013) study reported fewer improvements in child behaviour than the parent while the reverse was true for Kirby and Sanders' (2014) study. Similarly, it is unclear if raters who were also participants reported higher effect sizes than raters who were not participants because only Kirby and Sanders (2013, 2014) and Leung (2014) provided data from non-participating carers. Reporters marked with an asterix in table five were also participants in Triple P.

Smith et al. (2018) was the only RCT study that did not have any significant results post-intervention. It also had the only (non-significant) negative effect size, indicating a deterioration in child behaviour. This is perhaps because Smith et al. (2018) was the only study that used an IOC rather than a waitlist control. However, Smith et al.'s (2018) results *were* significant at the six month follow up, highlighting the potential perceived or genuine impact of information and attention to improve parenting practices in the short term.

Kirby and Sanders' (2013) case study did not have any significant results according to post-hoc t-tests. However, due to the nature of this small n study, such results are only based on two people's reports and may offer a limited understanding of the effect of the study. See table six for RCI scores which may provide a better representation of the effect of the intervention.

Effect sizes in Cohen's d (ES) at post-intervention and six month follow-up

Study name	Type of study	Overall WoE D Rating	Reporter	Measure	Post-intervention		Six month follow-up	
					ES and descriptor	Sig.	ES and descriptor	Sig.
Hoang et al. (2022)	RCT	2.7 (High)	Parent* (n=100)	SDQ-Prosocial CAPES-behavioural problems				

RCI scores for the case study at post- intervention and six month follow-up

				Post-intervention		Six month follow-up	
Study name	Overall WoED Rating	Reporter	Measure	RCI and descriptor	Sig.	RCI and descriptor	Sig.
Kirby and Sanders (2013)	1.9 (Medium)	Grandparent (n=1) Parent (n=1)	ECBI Problem	0.00 (no reliable change)	p=1.000		
		Grandparent (n=1) Parent (n=1)	ECBI Intensity	1.37 (no reliable change)	p=0.172	0.95 (no reliable change)	p=.344

Note. Positive RCI scores show decrease in problem behaviour. Werba's (2002) Australian norm data for three year olds was used because the child was aged somewhere between two and three and a half across the study (exact age is not known) and there is no data for two year olds. No grandparent normed data could be found, so parent report was used for both the grandmother and mother.

The results from the case study's RCI scores are contradictory. At post-intervention and six-month follow-up, the parent reported significant and reliable changes. These were positive, indicating a decrease in problem behaviour. However, the grandmother reported three non-significant

Bandura, A. (1989). Human agency in social cognitive theory. *American Psychologist*, *44*(9), 1175-1184. https://doi.org/10.1037/0003-066X.44.9.1175

Batum, P., & Yagmurlu, B. (2007). What counts in externalizing behaviors? The contributions of emotion and behavior regulation. *Current Psychology: Developmental• Learning• Personality• Social, 25*(1), 1184.

personality traits at age 26. *Journal of personality, 71*(4), 495-514. https://doi.org/10.1111/1467-6494.7104001

Colvin, A., Eyberg, S. M., & Adams, C. D. (1999). *Restandardization of the Eyberg Child Behavior Inventory*. University of Florida, Child Study Laboratory. https://www.researchgate.net/profile/Sheila-Eyberg/publication/239922241_Restandardization_of_the_Eyberg_Child_Behavior_Inventory/links/5429faca0cf277d58e870391/Restandardization-of-the-Eyberg-Child-Behavior-Inventory.pdf 4 Tc -60 Tw 5 /Artifact BMC C 0.1 0.33 bD-

Farquharson, C. & Olorenshaw, H. (2022). *The changing cost of childcare*, Institute of Fiscal Studies (No.R210). https://doi.org/10.1920/re.ifs.2022.0210

Funderburk, B. W., Eyberg, S. M., Rich, B. A., & Behar, L. (2003). Further psychometric evaluation of the Eyberg and Behar rating scales for parents and teachers of preschoolers. *Early Education and Development, 14*(1), 67–81. https://doi.org/10.1207/s15566935eed1401_5

Gallagher, S., & Hannigan, A. (2014). Depression and chronic health conditions in parents of children with and without developmental disabilities: The growing up in Ireland cohort study. *Research in developmental disabilities, 35*(2), 448-454. https://doi.org/10.1016/j.ridd.2013.11.029

Gersten, R., Fuchs, L. S., Compton, D., Coyne, M., Greenwood, C., & Innocenti, M. S. (2005). Quality indicators for group experimental and quasi-experimental research in special education. *Exceptional children*, *71*(2), 149-164. https://doi.org/10.1177/001440290507100202

Gough, D. (2007). Weight of Evidence: A Framework for the Appraisal of the Quality and Relevance of Evidence. *Research Papers in Education, 22*(2), 213-228. https://doi.org/10.1080/02671520701296189

Hallam, S., & Parsons, S. (2013). Prevalence of streaming in UK primary schools: Evidence from the Millennium Cohort Study. *British Educational Research Journal, 39*(3), 514-544. https://doi.org/10.1080/01411926.2012.659721

Hart, R. (2010). Classroom behaviour management: Educational psychologists' views on effective practice. *Emotional and behavioural difficulties, 15*(4), 353-371. https://doi.org/10.1080/13632752.2010.523257

Hoang, N. P. T., & Kirby, J. N. (2020). A meta-ethnography synthesis of joint care practices between parents and grandparents from Asian cultural

Landry-Meyer, L., & Newman, B. M. (2004). An exploration of the grandparent caregiver role. *Journal of family issues*, *25*(8), 1005-1025. https://doi.org/10.1177/0192513X04265955

Leijten, P., Gardner, F., Melendez-Torres, G. J., Van Aar, J., Hutchings, J., Schul04 Tm [(ht)4 (ou

Petticrew, M., & Roberts, H. (2003). Evidence, hierarchies, and typologies: horses 7 (c ()4 --1655

truancy: Evidence from the UK Millennium Cohort Study, *PsyArXiv*. 10.31234/osf.io/sf3b2

Wang, L., Zhang, Y., Chen, L., Wang, J., Jia, F., Li, F., Froehlich, T. E., Hou, Y., Hao, Y., Shi, Y., Deng, H, Zhang, J., Huang, L., Xie, X., Fang, S., Xu, L., Xu, Q., Guan, H., Wang, W., Shen, J., Qian, Y., Wang, X., Shan, L., Tan, C., Yu, Y., Wang, X., Chen, F., Zhang, L., Shi, X., Li, X., & Li, T. (2021). Psychosocial and behavioral problems of children and adolescents in the

family environment.

Appendix A- Full list of databases searched

List of databases and sub-databases searched

	GEORef
	GEORef's InProcess
	Global Helath
	Health and psychosocial instruments
	ICONDA
	International pharmaceutical abstracts
	Maternity and Infant Care Database
	Ovid MEDLINE
	APA PsychArticles
	APA PsycBooks
	PsycExtra
	PsycInfo
	PsycTests
	PsycTherapy
	Social Policy and Practice
	Transplant Library
	HMIC Health Management Information Consortium
Proquest databases	Academic Video Online
	Acta Sanctorum
	American Periodicals
	Art and Architecture Archive
	The Artforum Archive
	Arts Premium Collection
	Music and Performing Arts Collection
	Screen Studies Collection

Australian Education Index

Avery Index to Architectural Periodicals

British Periodicals

The Cecil Papers

Colonial Legacies: Empire & Commonwealth Periodicals

Colonoial State Papers

Coronavirus Research Database

Digital National Security Archive

Documents on British Policy Overseas

Early Modern Books

Ebook Central

Economist Intelligence Unit Country Reports Archive

Education Magazine Archive

Entertainment Industry Magazine Archive

Gerritsen Women's History Collectoion of Aletta H Jacobs

Humanities Index

LGBT Magazine Archive

News, Policy & Politics Magazine Archive

Patrologia Latina

Periodicals Archive Online

Philosopher's Index

PRISMA Database

*No results were found

** This is the official Triple P website (www.triplep.net) which has a list of published studies on Triple P. On this site, the ‘Participants’ search terms from table 1 were searched.

Appendix B- Excluded studies after full reading

Studies excluded after full text reading

Study	Reason for exclusion
Matsumoto, Y., Sofronoff, K., & Sanders, M. R. (2010). Investigation of the effectiveness and social validity of the Triple P Positive Parenting Program in Japanese society. *Journal of Family Psychology, 24*(1), 87.	Triple P not focused on or delivered
Cohen, B. E., Ateah, C. A., Chaudhri,	to grandparents

Parenting Program for indigenous Māori families in New Zealand. *Prevention Science, 19(*7), 954-965. Kirby, J. N., & Sanders, M. R. (2014). The acceptability of parenting strategies for grandparents providing care to their grandchildren. *Prevention Science, 15*(5), 777-787. Smith, G. C., Hancock, G. R., & Hayslip, B. (2022). Predictors and moderators of treatment efficacy in reducing custodial grandmothers' psychological distress. *Aging & Mental Health, 26*(2), 250-262.	Did not analyse pre and post qualitative or quantitative data on child behavioural outcomes

Appendix C - Mapping the Field Tables

Mapping the Field Table- Study Design

		Intervention	Control
Authors	Country		

Mapping the Field Table- Study Outcomes u10e0 Tc 0 5P -0.001960426 (ele)]

Authors

Appendix D- WoE A quality indicators

Gersten et al.'s (2005) quality of evidence indicators were used for the randomised controlled trials. This approach was chosen as it is appropriate for children with special educational needs (SEN) and therefore for grandchildren with behavioural issues. It has 10 essential characteristics and eight desirable characteristics (see table 2).

Gersten et al. (2005) recommends that studies may be considered high quality if they have at least nine of the 10 essential characteristics and four of the eight desirable characteristics; they can be considered acceptable quality if they have at least nine of the 10 essential characteristics and at least one of the eight desirable characteristics. Studies who met Gersten et al.'s high quality criteria were designated as '3' on the WoE while those who met the acceptable quality criteria were designated as '2' on the WoE. Studies that met more than five (half) but less than nine essential criteria were designated as '1' and studies with fewer than half of the of the essential cr

Appendix E- WoE B Rating System

The rating system for WoE B was taken from Petticrew and Roberts'

Appendix F- WoE C Rating Systems

Gough's (2007) WoE C is designed to be specific to the research

WoE C Rating system

WoE A- Horner et al.'s (2005) quality of evidence indicators used with Kirby and Sanders' (2013) paper

Category