

## GUIDEBOOK

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Downloaded from <https://guidebook.eif.org.uk/programme/selected-seminars-stepping-stones-triple-p>

# Selected (Seminars) Stepping Stones Triple P

Review: September 2017

**Note on provider involvement:** This provider has agreed to EIF's terms of reference, and the assessment has been conducted and published with the full cooperation of the programme provider.

**Stepping Stones Triple P has been developed for parents or caregivers of children aged 0-12 with a developmental disability, such as Down's Syndrome or Autistic Spectrum Disorder, as well as moderate or severe behavioural problems. Selected (Seminars) Stepping Stones Triple P is one mode of implementation of the Stepping Stones programmes.**

Selected (Seminars) Stepping Stones Triple P is a low-intensity parenting support and education programme conducted in a seminar format. It is classified as a Level 2 Triple P programme. It is for parents who are interested in general information about promoting their child's development. It is aimed at a diverse range of parents seeking support for a specific child behavioural or emotional problem or developmental issue, which is of mild to moderate severity.

It is typically delivered through three seminars which consist of presentations followed by time for questions. It teaches parents how to encourage their child's social and communication skills, emotional self-regulation, independence and problem-solving ability.

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Evidence  
rating: 3

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Cost rating: 1

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## EIF Programme Assessment

Selected (Seminars) Stepping Stones Triple P has evidence of a **short-term positive impact** on child outcomes from at least one rigorous evaluation.

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Evidence  
rating: **3**

### What does the evidence rating mean?

**Level 3** indicates **evidence of efficacy**. This means the programme can be described as evidence-based: it has evidence from at least one rigorously conducted RCT or QED demonstrating a statistically significant positive impact on at least one child outcome.

This programme does not receive a rating of 4 as it has not yet replicated its results in another rigorously conducted study, where at least one study indicates long-term impacts, and at least one uses measures independent of study participants.

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### Cost rating

A rating of 1 indicates that a programme has a low cost to set up and deliver, compared with other interventions reviewed by EIF. This is equivalent to an estimated unit cost of less than£100.

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Cost rating: **1**

# Child outcomes

According to the best available evidence for this programme's impact, it can achieve the following positive outcomes for children:

## Preventing crime, violence and antisocial behaviour

### Improved child behaviour and adjustment

#### Based on study 1

2.73-point reduction on the Eyberg Child Behaviour Inventory (problem subscale – parent report)

Improvement index: **+14**

This means we would expect the average participant in the comparison group who did not receive the intervention (ie, someone for whom 50% of their peers have better outcomes and 50% have worse outcomes), to improve to the point where they would have better outcomes than 64% and worse outcomes than 36% of their peers, if they had received the intervention.

Immediately after the intervention

This programme also has evidence of supporting positive outcomes for couples, parents or families that may be relevant to a commissioning decision. Please see the 'About the evidence' section for more detail.

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## Key programme characteristics

### Who is it for?

The best available evidence for this programme relates to the following age-groups:

- Preschool
- Primary school

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### How is it delivered?

The best available evidence for this programme relates to implementation through these delivery models:

- Group

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### Where is it delivered?

The best available evidence for this programme relates to its implementation in these settings:

- Children's centre or early-years setting
- Primary school
- Community centre

The programme may also be delivered in these settings:

- Children's centre or early-years setting
  - Primary school
  - Community centre
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## How is it targeted?

The best available evidence for this programme relates to its implementation as:

- Targeted selective
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## Where has it been implemented?

Australia, Canada, Denmark, United States, Ireland

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## UK provision

This programme has not been implemented in the UK.

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## UK evaluation

This programme's best evidence does not include evaluation conducted in the UK.

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## Spotlight sets

EIF includes this programme in the following Spotlight sets:

- programmes for children with recognised or possible special education needs
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# About the programme

## What happens during delivery?

### How is it delivered?

- Selected (Seminars) Stepping Stones Triple P is delivered in three sessions of 1.5 hours' duration each, by one practitioner to 20–200 parents.
- Parents may attend one or more seminars.
- In addition, parents may access a brief individual consultation (up to 20 minutes) following the seminar.

### What happens during the intervention?

- Seminar 1, *Positive Parenting for Children with a Disability*, provides the building blocks for the program as it introduces parents to Triple P's seven core principles of positive parenting.
- Seminar 2, *Helping Your Child Reach Their Potential*, shows parents how they can use positive parenting principles to help their child develop by teaching them new skills and behaviours. For example, breaking the skill into steps and choosing suitable rewards.
- Seminar 3, *Changing Problem Behaviour into Positive Behaviour*, focuses on a process for understanding and managing problem behaviour. This includes understanding why the behaviour is occurring and encouraging alternative behaviour.
- Providers use a range of learning methods with parents, including selecting examples to illustrate teaching points and using live demonstrations.
- Parents receive a tip sheet covering the content of the seminar they attend. Parents can also access individual consultations with the presenter.

## What are the implementation requirements?

### Who can deliver it?

The practitioner who delivers this programme is typically involved in education, disability services, health services, or voluntary organisations and has NFQ-6 level qualifications.

## **What are the training requirements?**

Practitioners attend two days' training, a one-day pre-accreditation workshop and a half-day accreditation session. It is recommended that they spend 4-6 hours on individual preparation before accreditation. Booster training of practitioners is not required.

## **How are the practitioners supervised?**

It is recommended that practitioners are supervised by one host agency supervisor qualified to NFQ level 9/10. Supervisors do not have programme training.

## **What are the systems for maintaining fidelity?**

- Training manual
- Other printed material
- Other online material
- Video or DVD training
- Face-to-face training
- Fidelity monitoring.
- A quality assurance checklist is available for organisations to use when planning for quality assurance of Triple P. There are three standard fidelity protocols built into the Triple P Implementation Framework (1) Practitioner Accreditation, (2) Intervention Fidelity using Session Checklists, (3) Supervision and Practitioner Support Standards using the Peer Support Network. Triple P UK offers trainer facilitated PASS sessions or a Flexibility & Fidelity workshop for professional development.

## **Is there a licensing requirement?**

There is no licence required to run this programme.

## How does it work? (Theory of Change)

### How does it work?

- Stepping Stones Triple P assumes that parents with a disabled child need help understanding and adapting to their child's needs.
- Parents therefore learn positive strategies for managing their child's behaviour and helping their child become more independent.
- Children, in turn, become more independent and learn how to better manage their own behaviour.
- Children ultimately become more independent of their parents and the parents experience less stress and greater family harmony.

### Intended outcomes

Supporting children's mental health and wellbeing Preventing crime, violence and antisocial behaviour

### Contact details

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<http://www.triplep.net/>



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## About the evidence

Selected (Seminars) Stepping Stones Triple P's most rigorous evidence comes from an RCT conducted in Australia. This is a rigorously conducted (level 3) study, which identified a statistically significant positive impact on child and parent outcomes.

A programme receives the same rating as its most robust study, and so receives a level 3 overall.

In the most robust study on which this rating is based, the intervention involved two longer seminars attended by 29 parents rather than the typical three shorter seminars, which between 20 and 200 people can attend. The opportunity for individual consultation is not part of the intervention description in the most robust study.

### Study 1

**Citation:** Sofronoff, Jahnel, & Sanders, (2011)

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**Design:** RCT

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**Country:**

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**Sample:** 53 parents of a child with a disability, mean age of 6.15 years

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**Timing:** Post test

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**Child outcomes:**

- Improved child behaviour and adjustment
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**Other outcomes:**

- Improved parenting style (over-reactivity) Improved parenting style (verbosity) Reduced interparental conflict over child-rearing
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**Study rating:** 3

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Sofronoff, K., Jahnel, D., & Sanders, M. (2011). Stepping Stones Triple P seminars for parents of a child with a disability: A randomized controlled trial. *Research in Developmental Disabilities*, 32, 2253–2262.

### **Study design and sample**

This study is a rigorously conducted RCT.

This study involved random assignment of children to a Seminars Stepping Stones Triple P group or a waitlist group that participated in the intervention six weeks later.

The study was conducted in Australia with a sample of 53 parents of a child with a disability. The children had a mean age of 6.15 years. Over half of the children (54.75%) had multiple disabilities, with diagnoses including autistic spectrum disorder (45.3%) and intellectual disability (18.9%). Parents were mainly women (92.5%) and had a mean age of 38.64 years. Two thirds (67.9%) were in paid employment, working an average of 15.43 hours per week. No information regarding ethnicity or socio-economic status is provided.

### **Measures**

The following outcomes were measured:

- Child behaviour and adjustment was measured using the Eyberg Child Behaviour Inventory (parent-report).
- Parenting style was measured using the Parenting Scale (self-report).
- Interparental conflict over parenting was measured using the Parent Problem Checklist (self-report).
- Parents' views of their competence was measured using the Parenting Sense of Competence Scale (self-report).
- Relationship quality and satisfaction was measured using the Relationship quality index (self-report).
- Parental adjustment was measured using the Depression Anxiety Stress Scales (self-report).
- Overall functioning of the family was measured using the Family Assessment Device-General Functioning Scale (self-report).

### **Findings**

This study identified statistically significant positive impact on a number of child and parent outcomes:

- Eyberg Child Behavior Inventory: problem scale
- Parenting Scale: over-reactivity and verbosity scales
- Parent Problem Checklist: problem scale

## Other studies

The following studies were identified for this programme but did not count towards the programme's overall evidence rating. A programme receives the same rating as its most robust study or studies.

(None)

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## Guidebook

The EIF Guidebook provides information about early intervention programmes that have at least preliminary evidence of achieving positive outcomes for children. It provides information based on EIF's assessment of the strength of evidence for a programme's effectiveness, and on detail about programmes shared with us by those who design, run and deliver them.

The Guidebook serves an important starting point for commissioners to find out more about effective early interventions, and for programme providers to find out more about what good evidence of impact looks like and how it can be captured. As just one of our key resources for commissioners and practitioners, the Guidebook is an essential part of EIF's work to support the development of and investment in effective early intervention programmes.

Our assessment of the evidence for a programme's effectiveness can inform and support certain parts of a commissioning decision, but it is not a substitute for professional judgment. Evidence about what has worked in the past offers no guarantee that an approach will work in all circumstances. Crucially, the Guidebook is not a market comparison website: ratings and other information should not be interpreted as a specific recommendation, kite mark or endorsement for any programme.

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[How to read the Guidebook](#)

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[EIF evidence standards](#)

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[About the EIF Guidebook](#)

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## EIF

The Early Intervention Foundation (EIF) is an independent charity and a member of the What Works network. We support the use of effective early intervention for children, young people and their families: identifying signals of risk, and responding with effective interventions to improve outcomes, reduce hardship and save the public money in the long term.

We work by generating evidence and knowledge of what works in our field, putting this information in the hands of commissioners, practitioners and policymakers, and supporting the adoption of the evidence in local areas and relevant sectors.

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[www.EIF.org.uk](http://www.EIF.org.uk) | [@TheEIFoundation](https://twitter.com/TheEIFoundation)

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