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The 3P Study: Optimisation and feasibility of Triple P parenting programme for remote delivery

Submission date	Recruitment status	[_] Prospectively registered
20/06/2023	No longer recruiting	[_] Protocol
Registration date	**Overall study status**	[_] Statistical analysis plan
19/09/2023	Completed	[X] Results
Last Edited	**Condition category**	[_] Individual participant data
25/06/2026	Other	

Plain English summary of protocol

Background and study aims

The Triple P – Positive Parenting Program® is an effective eight-week parenting programme which helps families with children under 12 years old build healthy relationships and confidently manage their children's behaviour. Parenting and parent-child relationships play a key role in children's social and emotional development. During the COVID-19 pandemic, the group Triple P programme was quickly adapted to remote delivery using videoconferencing, (Zoom, WhatsApp). Using remote delivery may reduce barriers to some parents and caregivers joining the programme and lower the cost. However, the switch to remote delivery was made quickly, in extreme circumstances, and with rapid adaptations. As a result, it is still uncertain whether the positive effects of face-to-face interventions will result from remote delivery. The study aims to optimise remote delivery, with a focus on parent engagement, programme implementation, group functioning and dynamics, and practical aspects of remote delivery. The 3P study aims to assess the feasibility of conducting a non-randomised controlled trial of Group Triple P when it is delivered remotely via video-conferencing platforms (Zoom, WhatsApp) compared to face-to-face Group Triple P.

Who can participate?

The study is being conducted with Triple P UK, group Triple P practitioners, parents/caregivers and children aged 8-12 years old. Four local authority areas across Wales, England, Scotland and Northern Ireland will deliver both the face-to-face and remote versions of group Triple P to a total of around 96 parents split into two groups.

What does the study involve?

Before the programme is delivered, questionnaire data will be collected from parents/carers and children aged 8-12 years old. Questions will measure children's behavioural and emotional problems; health; family relationships; parenting style and confidence; and well-being. These things will be measured again 16 weeks later after the programme is delivered. The study team will be looking to see if there are positive changes and whether there are any differences between the two groups.

The study team will interview some parents/carers and Triple P practitioners and trainers, and some sessions will be observed. Finally, the cost of the intervention will be calculated and weighed up against any benefits to see if it provides good value for money. The study team will then decide if it is appropriate to proceed to a future large-scale trial.

What are the possible benefits and risks of participating?
There are no direct benefits to taking part. However, by hearing about the experiences of families, the study team hope to be able to provide advice on the best ways to deliver remote Group Triple P and design future studies to test the differences between remote and face-to-face Group Triple P. Taking part in this study does require some time and participants may find some of the questions that are asked are sensitive. However, there are no other risks to taking part in the study.

Where is the study run from?
The study is being organised and led by researchers at Cardiff University and the University of Oxford (UK). The Chief Investigator is Jeremy Segrott, School of Medicine, Cardiff University. Stavros Petrou is leading the team at the University of Oxford (UK).

When is the study starting and how long is it expected to run for?
March 2023 to April 2025

Who is funding the study?
Nuffield Foundation (UK)

Who is the main contact?
Dr Elinor Coulman, Study manager, 3PStudy@cardiff.ac.uk (UK)

Contact information

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Additional identifiers

Study information

Scientific Title
The 3P Study: Remote delivery of the group Triple P parenting programme: Optimisation and a feasibility non-randomised trial

Acronym
The 3P Study

Study objectives
Current study hypothesis as of 29/01/2024:
During the COVID-19 pandemic, the group Triple P programme was quickly adapted to remote delivery using videoconferencing, (Zoom, WhatsApp). Using remote delivery may reduce barriers to some parents and caregivers joining the programme and lower the cost. However, the switch to remote delivery was made quickly, in extreme circumstances, and with rapid adaptations. As a result, it is still uncertain whether the positive effects of face-to-face interventions will result from remote delivery. The study team will focus on parent engagement, programme implementation, group functioning and dynamics, and practical aspects of remote delivery and decide if it is appropriate to proceed to a future large-scale definitive trial.

Current study hypothesis as of 20/12/2023 to 29/01/2024:
During the COVID-19 pandemic, the group Triple P programme was quickly adapted to remote delivery using videoconferencing, (Zoom, WhatsApp). Using remote delivery may reduce barriers to some parents and caregivers joining the programme and lower the cost. However, the switch to remote delivery was made quickly, in extreme circumstances, and with rapid adaptations. As a result, it is still uncertain whether the positive effects of face-to-face interventions will result from remote delivery. The study team will focus on parent engagement, programme implementation, group functioning and dynamics, and practical aspects of remote delivery and decide if it is appropriate to proceed to a future large-scale randomised controlled trial.

Previous study hypothesis:
During the COVID-19 pandemic, the group Triple P programme was quickly adapted to remote delivery using videoconferencing, (Zoom, WhatsApp). Using remote delivery may reduce barriers to some parents and caregivers joining the programme and lower the cost. However, the switch to remote delivery was made quickly, in extreme circumstances, and with rapid adaptations. As a result, it is still uncertain whether the positive effects of face-to-face interventions will result from remote delivery. The study team will focus on refining parent engagement, programme implementation, group functioning and dynamics, and practical aspects of remote delivery and decide if it is appropriate to proceed to a future large scale randomised controlled trial.

Ethics approval required
Ethics approval required

Ethics approval(s)
Approved 21/09/2023, The School of Medicine, Research Ethics Committee, Cardiff University (Cardiff University Main Building Heath Park, Cardiff, CF14 4XN, United Kingdom; +44 (0)29 2087 4000; Medic_REC@cardiff.ac.uk), ref: SMREC 23/40

Primary study design
Interventional

Study design
Multisite interventional optimisation and feasibility non-randomized trial

Study type(s)
Quality of life, Other

Health condition(s) or problem(s) studied
Positive parenting for parents/caregivers of children aged 0-12 years old.

Interventions

Current interventions as of 29/01/2024:
Triple P teams will consult with parents and caregivers, and practitioners will allocate participants to receive either face-to-face or remote delivery of the intervention. All participants will receive the intervention programme.
Triple P (Positive Parenting Programme) is an evidence-based, multi–level system comprising five levels of parenting and family support interventions. Level 4 Group Triple P is a broad-based parenting programme for parents of children up to the age of 12. It helps parents develop strategies to build healthy relationships and confidently manage their children's behaviour. Parents participate in activities to learn about the causes of child behaviour problems, set specific goals, and use strategies to promote child development and manage misbehaviour. Group delivery enables parents to learn from each other, creating peer support and reinforcing programme messages. The programme is delivered over eight weeks to groups of up to 12 parents and comprises five (2-hour) group sessions and three (15-30 minute) individual telephone consultations. These assist families with independent problem-solving while practising the skills at home.

Delivery of the programme is conducted by trained practitioners in local authorities (LAs) or independent community providers, who take responsibility for implementation costs and parent recruitment. Triple P UK (TPUK) provides implementation support. Face-to-face and the remote programmes will be delivered by the same LA/community team and may be the same practitioner. Practitioners will have received intervention training and will receive study-specific training. If delivered face-to-face, the intervention will be delivered in suitable rooms arranged by Local Authorities/community practitioners.

Current interventions as of 20/12/2023 to 29/01/2024:
In the two randomised sites, participants will be randomised on a 1:1 basis for either face-to-face or remote delivery of the intervention. Simple blocked randomisation stratified by the site will be carried out via an online system. In the other two non-randomised sites, Triple P teams will consult with parents and caregivers, and practitioners will allocate participants to receive either face-to-face or remote delivery of the intervention. All participants will receive the intervention programme.
Triple P (Positive Parenting Programme) is an evidence-based, multi–level system comprising five levels of parenting and family support interventions. Level 4 Group Triple P is a broad-based parenting programme for parents of children up to the age of 12. It helps parents develop strategies to build healthy relationships and confidently manage their children's behaviour. Parents participate in activities to learn about the causes of child behaviour problems, set specific goals, and use strategies to promote child development and manage misbehaviour. Group delivery enables parents to learn from each other, creating peer support and reinforcing programme messages. The programme is delivered over eight weeks to groups of up to 12 parents and comprises five (2-hour) group sessions and three (15-30 minute) individual telephone consultations. These assist families with independent problem-solving while practising the skills at home.

Delivery of the programme is conducted by trained practitioners in local authorities (LAs) or independent community providers, who take responsibility for implementation costs and parent recruitment. Triple P UK (TPUK) provides implementation support. Face-to-face and the remote programmes will be delivered by the same LA/community team and may be the same practitioner. Practitioners will have received intervention training and will receive study-specific training. If delivered face-to-face, the intervention will be delivered in suitable rooms arranged by Local Authorities/community practitioners.

Previous interventions:
Participants will be randomised on a 1:1 basis to either face-to-face or remote delivery of the intervention. Simple blocked randomisation stratified by the site will be carried out via an online system. Triple P (Positive Parenting Programme) is an evidence-based, multi–level system comprising five levels of parenting and family support interventions. Level 4 Group Triple P is a broad-based parenting programme for parents of children up to the age of 12. It helps parents develop strategies to build healthy relationships and confidently manage their children's behaviour. Parents participate in activities to learn about the causes of child behaviour problems, set specific goals, and use strategies to promote child development and manage misbehaviour. Group delivery enables parents to learn from each other, creating peer support and reinforcing programme messages. The programme is delivered over eight weeks to groups of up to 12 parents and comprises five (2-hour) group sessions and three (15-30 minute) individual telephone consultations. These assist families with independent problem-solving while practising the skills at home.

Delivery of the programme is conducted by trained practitioners in local authorities (LAs), who take responsibility for implementation costs and parent recruitment. Triple P UK (TPUK) provides implementation support. Face-to-face and remote programme will be delivered by the same LA team and may be the same Facilitator. Facilitators will have received intervention training and will receive study-specific training. If delivered face-to-face, the intervention will be delivered in suitable rooms arranged by Local Authorities.

Intervention Type
Behavioural

Primary outcome(s)
Children's behavioural and emotional problems measured using the Strengths and Difficulties Questionnaire (SDQ) at baseline and 12 weeks follow-up

Key secondary outcome(s)
The following secondary outcome measures are assessed at baseline and 12 weeks follow-up:
1. Reduced lax or overreactive parenting measured using the Arnold and O'Leary Parenting Scale (APS) Positive parenting
2. Parent-child relationship, family relationship and parental teamwork measured using the Triple P and Family Adjustment Scales (PAFAS)
3. Parental confidence measured using the Parenting Sense of Competence Scale
4. Parental well-being measured using the Depression Anxiety Stress Scale (DASS)
5. Demographics (age, sex, gender, ethnicity, educational qualifications, postcode (for the index of multiple deprivations) occupational status, family and household composition) are measured using appropriate questions
6. Parent health-related quality of life measured using the EuroQol EQ-5D-5L
7. Health economics resource use measured using the Adapted Client Service Receipt Inventory CSRI)
8. Child Health measured using the Utility 9 Dimension Instrument
9. Childrens health measured using the CHU9D proxy Child (8–12-year-olds)
10. Children's behavioural and emotional problems measured using the Me and My Feelings Questionnaire
11. Health and family relationships measured using the Kidscreen 27
12. Child health-related quality of life measured using the EQ-5D-Y

Completion date

30/04/2025

Eligibility

Key inclusion criteria
1. Parent/caregiver (biological, step, adoptive, foster) of at least one child aged 0-12 years old
2. Eligible to attend the Triple P parenting programme
3. Spend a substantial part of each week actively caring for the child they are attending the programme for
4. Aged >18 years old
5. Sufficient spoken English to attend the intervention, consent and complete outcome measures over the telephone/via Zoom

Participant type(s)
Service user

Healthy volunteers allowed
No

Age group
Mixed

Lower age limit
18 Years

Upper age limit
120 Years

Sex
All

Total final enrolment
0

Key exclusion criteria
Previous attendance at a Level 4 Group Triple P parenting programme

Date of first enrolment
15/09/2023

Date of final enrolment
31/07/2024

Locations

Countries of recruitment
United Kingdom

Wales

Study participating centre
Centre for Trials Research (CTR)
Cardiff University
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Sponsor information

Organisation
Cardiff University

ROR
https://ror.org/03kk7td41

Funder(s)

Funder type
Charity

Funder Name
Nuffield Foundation

Alternative Name(s)
NuffieldFound

Funding Body Type
Private sector organisation

Funding Body Subtype
Trusts, charities, foundations (both public and private)

Location
United Kingdom

Results and Publications

Individual participant data (IPD) sharing plan

IPD sharing plan summary

Data sharing statement to be made available at a later date

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article		24/06/2026	25/06/2026	Yes	No
Study website	Study website	11/11/2025	11/11/2025	No	Yes