

## TRIPLE P IN QUÉBEC

### THE PROJECT

Between January 2015 – December 2016, Triple P was implemented for the first time in Québec, Canada<sup>1</sup>. All five levels of Triple P – Positive Parenting Program were implemented as a part of a community-university partnership devoted to the prevention of child maltreatment. A communications strategy was launched in February 2015, with a dedicated website, tailored flyers and posters disseminated throughout participating communities until December 2015<sup>3</sup>.

Triple P was implemented across two healthcare catchment areas in collaboration with local organisations (child welfare services, primary social care services, community organizations, primary schools, and child daycare centers), targeting families with children aged 0 – 12 years old. These communities were chosen due to the vulnerability of their populations, as indicated by prevalence of poverty and child maltreatment (between 6% and 22% of 0–12-year-olds living within low-income households; approximately 14% being under investigation for suspected child maltreatment)<sup>1</sup>.

Across 2014, approximately 100 practitioners were trained to deliver Triple P programs. Of these, a majority of practitioners attended training for a minimum two or three levels, with most practitioners achieving accreditation in at least one level of Triple P. A two-year follow-up study with practitioners who had implemented Triple P with parents indicated significant improvements in self-efficacy when working with parents<sup>4</sup>.

### BENEFITS FOR FAMILIES

Ongoing evaluation of Triple P in Québec indicates significant benefits for participating families (compared to families receiving care-as-usual services), including preliminary support for a protective effect for Canadian families during the COVID-19 pandemic<sup>2,5-7</sup>. Across the two-year implementation period, 1016 parents from 769 families participated in Primary Care and/or Group Triple P<sup>6</sup>. A proportion of participating families agreed to contribute to research evaluation efforts, providing insight into parent and child outcomes prior to program completion, directly following completion, and two to four years following completion.



At post-intervention a number of improvements were reported by families, including:

- **The joy of parenting was greatly enhanced in those who received Triple P programs.** Parents reported experiencing less stress and distress related to parenting, dysfunctional interactions with their child, and feelings of having a difficult child. They also saw an increase in their sense of self-efficacy as a parent<sup>6</sup>.
- **Parents who received Triple P interventions have experienced significant changes in their parenting practices.** Following completion of a Triple P program, parents reported using significantly more positive parenting practices and a reduction in the use of over-reactive, hostile, and lenient parenting practices<sup>6</sup>.
- **Parents who completed Triple P were less likely to engage in child maltreatment behaviours.** Parents who had completed Triple P reported significant decreases in the presence of minor physical violence towards their child (from 38% to 22% between pre- and post-intervention) – parents in the care-as-usual group reported no change (33% to 35%)<sup>6</sup>.
- **Parents who have participated in the Triple P program reported significant improvements in their child's behaviour.** Following the intervention, hyperactivity, and disruptive behaviors of the children in the experimental group decreased substantially (compared to families who were assigned to care-as-usual). Children also demonstrated an increase in pro-social behaviour<sup>2</sup>.

As part of this independent evaluation of Triple P In Quebec, researchers reached out to families between March and May 2019 to evaluate long-term program effects, indicating that **participation in Triple P services demonstrates sustained benefits for families, with positive effects being reported two to four years after program completion**<sup>8</sup>.

Follow-up with families who had completed Triple P years prior indicates that the majority of improvements were maintained or further improved over time, including:

- Improvements in parenting practices, including increases in positive parenting and reductions in hostile, over-reactive and lenient parenting<sup>6</sup>
- Improvements in parenting stress<sup>5</sup>
- Reductions in child emotional and behavioural challenges<sup>2,5</sup>
- Reduction in minor physical violence towards the child<sup>6</sup>.

Between May and July In 2020, when COVID-19 caused lockdowns in Québec, researchers took the opportunity to contact these families again to see how they were faring during the pandemic.<sup>5</sup> Consistent with Statistics Canada<sup>9</sup> data and echoing media reports, parents reported increased psychological distress and a decrease in confidence in their parenting during the first wave of lockdowns. However, there was no change in their parenting stress or parenting practices - suggesting that during the first wave, these parents were able to maintain changes they'd made, despite increased distress. Parents reported no increases in parental violence towards their children, sustained improvements in child behaviour, and further improvements in child emotional challenges<sup>5</sup>.

This study was one of the first to analyse moderators of change two to four years following implementation of a population-wide parenting support intervention. The study adds to existing literature demonstrating the long-term effectiveness of Triple P<sup>10,11</sup>, and importantly, demonstrates effectiveness in a different linguistic and socio-cultural context to the one in which the program was developed<sup>6</sup>.

## IN SUMMARY

The current evaluation in Québec has demonstrated the potential for Triple P to reduce proximal risk factors of child maltreatment, such as parental stress and distress and dysfunctional parenting styles. Triple P also enhances protective factors, including parental sense of self-efficacy, use of positive parenting practices, and child socio-emotional wellbeing.

This initiative has sustained and Triple P is offered in primary schools, early childhood education centres, child welfare agencies, and non-profit community organisations in some areas of Québec. Findings show the program to be effective for low- middle- and high-income families.

“In the Quebec context, Triple P stands out as a major asset for public establishments in the health and social services network, since it makes it possible to intervene with more intensity than the usual intervention and with better, and persistent, outcomes”

Gagné et al., 2023<sup>2</sup>

## RETURN ON INVESTMENT FOR MENTAL HEALTH PROMOTION: PARENTING PROGRAMS AND EARLY INTERVENTION

The Institute of Health Economics Return on Investment for Mental Health Promotion: Parenting Programs and Early Childhood Development<sup>12</sup> study (supported by the Public Health Agency of Canada) outlines the human and financial costs cost of untreated mental health issues in the community, and how these can be addressed through implementation of the Triple P – Positive Parenting Program. The report contextualizes the importance of mental health across the lifespan and discusses the economic burden of mental disorders and the long-term implications of childhood mental illness and conduct disorder on public resources.

The aim of the study was to develop an economic model of a mental health promotion intervention, to examine the cost effectiveness of early childhood mental health interventions, and address implications for Canadian health policy. The likely impact of introducing Triple P was measured over a time span of 25 years to calculate reductions in special education, social services, mental health services, and criminal justice services.

### CONTEXT

Triple P was evaluated in terms of the cost-benefit of its program interventions. The model is based on an Australian study which evaluated the cost-benefit of Triple P<sup>13</sup>. The study estimated the aggregate cost of conduct disorder and compared these costs to the cost of implementation of Triple P programs as a public health intervention strategy.

Calculations included the cost of conduct disorder on:

- Justice system
- Mental health costs
- Education
- Foster care
- Income support

Triple P costs in Alberta (delivered to a cohort of 52,000 families):

- Training costs for 1 year – \$192,000
- Labor costs – just over \$3 million
- Materials costs - \$500,000
- **Total costs of providing Triple P - approximately \$3.8 million**

### KEY FINDINGS & RESULTS

- The **total costs of adverse events** (including on the justice system, mental health system, special education, and social services system) equates to **\$55,949,584.00** (no reduction in conduct disorder incidence).
- A **1% reduction** in lifetime costs of adverse events across these systems as a consequence of implementing Triple P will result in **cost savings of \$561,297**
- A **6.5% reduction** in conduct disorder would see Triple P **pay for itself** (break even)
- A **10% reduction** in conduct disorder would result in over **\$1.8 million saved** due to Triple P
- A **25% reduction** in conduct disorder would result in over **\$10.2 million saved** due to Triple P
- A **48% reduction** in conduct disorder would result in over **\$23 million saved** due to Triple P (this represents a cost saving of 8x the cost of Triple P).

Research shows that Triple P can result in reductions ranging between 25-48%<sup>13</sup>. The report therefore highlights the utility of parenting interventions as a public health measure to reduce conduct disorder, and the cost-benefit associated with early intervention and prevention.

## REFERENCES

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