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Research in Autism Spectrum Disorders

Journal homepage: <http://ees.elsevier.com/RASD/default.asp>



Behavioural Family Intervention with parents of children with ASD: What do they find useful in the parenting program Stepping Stones Triple P?

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ARTICLE INFO

Article history:

Received 12 January 2009

Accepted 27 January 2009

Keywords:

Parent training

Behavioural Family Intervention

Autism Spectrum Disorders

Stepping Stones Triple P

ABSTRACT

This study was conducted in conjunction with a randomised controlled trial of the parenting program Stepping Stones Triple P for parents of children with Autism Spectrum Disorders. The current study concerned examination of the qualitative data arising from the RCT as well as evaluation of the particular parenting strategies that the parents found helpful. The results showed that parents were satisfied with the program, including the partial group format. Further, the majority of participants found the parenting strategies within Stepping Stones Triple P to be helpful, including timeout, physical guidance and blocking. In addition, many of the parents also used the additional strategies of Comic Strip Conversations and Social Stories and the majority of the parents who attempted these strategies found them to be helpful. The clinical implications of the findings are discussed.

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Autism Spectrum Disorders, including Autism and Asperger syndrome, are defined by three key characteristics; social interaction impairments, communication and imagination impairments and stereotyped interests or behaviours (Gillberg, 2002). The prevalence of emotional and behavioural disturbance within the ASD population is significantly higher than within the intellectually disabled population (Brereton, Tonge, & Einfeld, 2006) where it is 2–3 times higher than the normal population (Einfeld & Tonge, 1996).

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1. Parent training and Autism Spectrum Disorders

The treatment of children with ASD has long incorporated the use of specific training programs, involving the training of parents and others to administer behavioural interventions (Koegel, Schreibman, Britten, Burke, & O'Neill, 1982). These programs have been developed to treat specific problems of children with ASD, aiming to improve social behaviour and increase language, as well as to decrease inappropriate behaviours. Lovaas, Koegel, Simmons, and Long (1973) demonstrated that training parents as co-therapists produced better outcomes for children with autism at follow-up than clinic treatment alone.

These specific programs for ASD make use of operant techniques. In spite of the problems that children with ASD may encounter, the core principles of operant conditioning apply to them, just as they apply to typical children (Howlin & Rutter, 1987). Howlin and Rutter have themselves effectively used operant techniques in treating children with autism, including strategies such as time out, prompting, fading, reinforcement and the pairing of tangible rewards with attention, and note a significant reduction in maladaptive behaviours in children in their program.

Specific parenting programs have also been successful in helping parents of children with Asperger syndrome. Sofronoff, Leslie, and Brown (2004) evaluated a parenting program specifically targeting parents of children with Asperger syndrome. The program included psychoeducation, management of behaviour problems, routines, special interests and anxiety. Results from parent reports showed a significant decrease in the number and intensity of problem behaviours and a significant increase in parental self-efficacy (Sofronoff & Farbotko, 2002).

Although the efficacy of these specific parent training programs in treating children with ASD has been well documented, little research has been conducted on the experiences of children with ASD and their parents in standard parenting programs. The current study was conducted in tandem with a randomised controlled trial of the parenting program Stepping Stones Triple P for the ASD population.

2. Stepping Stones Triple P

Stepping Stones is a new variant of the Triple P positive parenting program that specifically targets families of children with disabilities (Sanders, Mazzucchelli, & Studman, 2003). Triple P is a Behavioural Family Intervention with social learning principles as the theoretical basis (Sanders, 1999). The Triple P approach to parenting focuses on providing children with positive attention and managing children's behaviour in a constructive way that does not hurt the child (Sanders et al., 2003). To this end, the parents are encouraged to develop knowledge, skills and confidence (Sanders, 1999). Stepping Stones Triple P incorporates standard Triple P strategies and includes additional strategies arising from the disabilities literature, developed especially for this population (Sanders et al., 2003; Sanders, Mazzucchelli, & Studman, 2004).

Triple P has an impressive evidence base and has been shown to produce statistically significant and clinically meaningful decreases in the problem behaviour of children that are maintained over time (Sanders, 1999; Sanders, Markie-Dadds, Tully, & Bor, 2000). Triple P's treatment effect has been replicated in several studies and has been typically associated with high levels of acceptance and satisfaction on the part of the participating parent (Sanders, 1999). Initial research on Stepping Stones Triple P demonstrated that it too has a meaningful treatment effect (Roberts, Mazzucchelli, Studman, & Sanders, 2006). The first randomised controlled trial of Stepping Stones Triple P was conducted with families of children with disabilities including Down's syndrome, Cerebral Palsy, other genetic syndromes, disability due to accident or disease and developmental disability of unknown origin. Within this trial Stepping Stones Triple P was associated with significant reductions in child problem behaviours as well as significant improvements in parental styles.

3. The current study

The current study was conducted in tandem with a randomised controlled trial of Stepping Stones Triple P for the ASD population. This RCT found that Stepping Stones Triple P significantly

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