Clark County Department of Family Services, Parenting Project

Julie Owens  
*University of Nevada, Las Vegas*

Natalie Grajeda  
*University of Nevada, Las Vegas*

Stephanie Thelen  
*University of Nevada, Las Vegas*

David L. Olivieri  
*University of Nevada, Las Vegas*

Fredric Jackson  
*University of Nevada, Las Vegas*

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Acknowledgements

The Gladiators would like to extend a sincere thank you and acknowledgement to the Clark County Department of Family Services, Parenting Project, for helping the Las Vegas community provide parents the skills and strategies to help build a stronger and healthy environment for their families. The opportunity to work with the Parenting Project team has been an eye opening experience and a wonderful learning opportunity. The Gladiators would also like to thank Dr. Lim for his guidance and knowledge through the process of this evaluation.
I. Executive Summary

The Clark County Parenting Project offers a series of free programs to help parents become more effective in raising their children. This program evaluation focuses on Teen Triple P, one of the six programs offered by Clark County, evaluating the effectiveness of the program to the community. The Parenting Project partnered with the University of Nevada, Las Vegas, School of Public Policy and Leadership to be a participant in a program evaluation. The evaluation will serve as a tool to determine the overall effectiveness in meeting program goals and objectives as well as determining strengths and weaknesses in program implementation.

In Teen Triple P the parents complete the Teen Triple P Booklet one at the first session and Booklet two in session 8. To have scores recorded, parents must have attended seven out of eight sessions or all eight sessions and must have attended session one and the last session. Data collected from the years 2013-2016 were used in this evaluation of the Teen Triple P Program.

The data showed there is significant increases in mean scores as it relates to instructor(s), location(s), voluntary vs. mandatory, and the time it takes to complete the eight sessions. The data shows instructor(s) Moorman, Richards and Paluzzi had the best effect overall in increasing parental knowledge. During this program evaluation, Team Gladiators examined the data from 15 locations that were grouped into five regions. Of the 15 locations, the areas with the most positive outcomes are in the Northwest, South, and North. The difference in location had the most positive effects on the topics of Overall Stress, Behavioral Difficulties and Getting Along with Others.
Some participants were mandated (59%) to take Teen Triple P and others took the parenting class voluntarily (41%). The data from these two groups shows that those participants who were mandated had a higher completion rate within the two month timeframe than those who volunteered. The results show that Overall Stress, Behavioral Difficulties and Hyperactivity had the highest increase for voluntary participants. Whereas Emotional Distress, Getting Along with Others and Kind and Helpful Behavior had the highest results from mandated participants.

Finally, we had the following research questions as our guide for the program evaluation: Does completion of Teen Triple P have an effect on the parent’s view of parenting? If yes how can the program be further improved and if no, what modifications are needed. Therefore we offer the following recommendations:

a. Focus on topics outside of Overall Stress, Behavioral Difficulties and Getting Along with Others
b. Focus on areas outside of North, Northwest, and South
c. Expand classes throughout Las Vegas Valley
d. Expand recruitment for male participants
e. Spread the top three instructors out over the class locations
f. Expand recruitment efforts to recruit more parents
g. Establish ways of tracking effectiveness
h. Teach program in Spanish
i. Streamline initial paperwork
II. Introduction

The Clark County Department of Family Services (DFS) is a local public agency formed in July 2002 whose role is to help keep children safe. The agency was formed in response to the merger of the state and county child welfare services. The DFS’ mission statement is “[to protect] children from abuse and neglect by partnering with our community to build safe, nurturing and stable families, to support family preservation when possible, to provide permanent families for those children who cannot safely return home and to ensure the wellbeing of children in our care.”

Teen Triple P introduces parents and caregivers to new parenting skills and aims to help improve existing skills to support their teenager. Per Matthew R. Sanders (1999) the overall mission is to prevent severe behavioral and developmental problems in children (teenagers) by enhancing the skills and confidence in parents (pg. 71-72). This program provides parents with strategies to increase desirable teen behaviors and manage problem behaviors in a constructive and caring manner to reduce conflict and minimize risk-taking behavior. Teen Triple P aims to more adequately prepare parents for their child’s transition to the teenage years by focusing on all-too common difficulties of children (and parents) of making successful transition to high school.

Teen Triple P utilizes three assessment tools known as the Strengths and Difficulties Questionnaire (SDQ), Parenting Scale, and the Conflict Behavior Questionnaire. The AAPI-2 (Adult-Adolescent Parenting Inventory) was designed for use with the Nurturing Programs,
which are other programs that the Parenting Project offers. In addition, the AAPI-2 questions relate to parenting young children. All versions of the SDQ ask about 25 attributes, some positive and some negative. The 25 items are divided between 5 scales: emotional symptoms, conduct problems, hyperactivity/inattention, peer relationship problems, and prosocial behavior. The parenting scale is a 30 item questionnaire measuring three dysfunctional discipline styles in parents and yields a total score and three factors: laxness (permissive discipline), over-reactivity (displays of anger, meanness, and irritability), and verbosity (overly long reprimands or reliance on talking). We did not choose to evaluate the Conflict Behavior Questionnaire and the parenting scale because there was not sufficient information to prove its usefulness.

The purpose of the evaluation is to assist in program development and improvement while also demonstrating the effectiveness of the program within our community. This evaluation can act as a useful tool for the Parenting Project to fulfill federal and state grant requirements. The following sections include our benchmark study, S.W.O.T. analysis, data analysis, and all Teen Triple P documents which are located in our appendix.

III. Program Description

Triple P was created by Professor Matt Sanders. Professor Sanders is a professor of Clinical Psychology and Director of the Parenting and Family Support Centre, University of Queensland, Australia. After witnessing a little boy swing a toy plastic lawnmower at his mother’s face, Professor Sanders knew he had to do something more than just help individual families. Professor Sanders stated “The child was definitely on track for serious behavior
problems, and you could see the major impact on the family.” Professor Sanders and colleagues set out to develop a program to help large numbers of parents. Sanders et al knew the program had to be:

- Effective and built around knowledge of child psychology and best practice, as well as repeated trials (evidenced based)
- Continually measured and refined
- Able to be delivered on a large scale, to reach whole population; and yet
- Adaptable to each family’s situation

The Teen Positive Parenting Program (TTP) was started in Clark County, 2012. TTP was started because of their program, “Staying connected with your teen” which was a program where the parents brought their teen children with them. However, there were some parents who were unable to bring their children for various reasons. Some had their children taken from them or the children were with their spouses etc. Being in these situations, without their children and seeing other parents with their children, caused mental and emotional stress to the parent(s) and made the parent(s) feel alienated. Therefore, the Department of Family Services felt compelled to create a program that was for parents only.

The Positive Parenting Program (Triple P) is funded through state and federal grants after demonstrating it is an evidenced based program. An evidenced based program that’s funded through grants is defined as: Programs which have had rigorous randomized study (evaluation) with statistically significant results (Wells, 2016). Since there was very little research available for the TTP, Clark County Department of Family Services extrapolated from the evidenced
Triple P. A curriculum was also created from Triple P for TTP. In the TTP course, parents and caregivers learn new parenting skills and improve existing skills to support the development of their teenagers. This eight-session program provides parents with strategies to increase desirable teen behaviors and manage problem behaviors in a constructive and caring manner to reduce conflict and minimize risk behavior (For adults only).

IV. Literature Review

Important scholars have found that evidence-based programs are an important basis for the future development of the teenager. Evidence-based programs such as Teen Triple P use attachment theory as a basis for their methodology. Attachment theory encourages practitioners in the field to manipulate and enhance parental sensitivity, so that they can find out if a higher percentage of teenagers feel securely attached to their parents (Juffer, Bakermans-Kranenburg, & van IJzendoorn, 2012). Programs such as Teen Triple P fall under this construct and it is the mission of the Department of Family Services to adequately prepare parents for their child’s transition into their teenage years. Their remit as construed by Clark County is to teach parents to become more sensitive so that they can enhance their attachment with their teenager.

Attachment theory was discovered by Mary Ainsworth (1967) and John Bowlby (1969). They both discovered that children use their parents to fulfill their attachment needs; that securely attached children are able to express their feelings confidently, because they themselves are confident that their parents will comfort and support them whenever they need help (Juffer, Bakermans-Kranenburg, & van IJzendoorn, p. 60, 2012). “Attachment theory suggests that
children's current and later development is most optimal when they trust their parent(s) as the secure base from which they can explore the world and to which they can return for comfort and protection (Juffer, Bakermans-Kranenburg, & van IJzendoorn, p. 60, 2012).” Parental sensitivity is a strong determinant of the child – parent relationship. Studies have shown that securely attached children had sensitive mothers and (in) securely attached children had mothers who consistently reacted insensitively (Ainsworth, Bell, & Stayton, 1974; De Wolff & Van IJzendoorn, 1997; Goldsmith & Alansky, 1987). Furthermore, scholars have found that the most successful parents provided security, were sensitive, and provided comfort.

Teenagers rely on their parents for a positive upbringing. The most successful parents are directly responsible for their teen’s emotional and behavioral development. To promote positive development parents must develop a secure attachment with their teenager, so that their teen can maturely interact with the world around them. Securely attached teenagers trust their parents to comfort them and support them as they continue to mature and grow older (Juffer, Bakermans-Kranenburg, & Van Ijzendoorn, 2012).

Positive parenting enables teenagers to grow up without the risk of developing behavioral problems. This is because positive parents have taught them through adolescence to become autonomous and competent (Ainsworth, 1989). By promoting self-development parents are giving their teenagers the tools they need for the real world. It is this respect that creates an affectional bond between the teenager and parent (Ainsworth, 1989). Studies have shown that the more parents are sincere with their child (teenager) the less likely the child (teenager) develop emotional and behavioral problems (Ryan, Boxmeyer, & Lochman, 2009).
It is the parent’s responsibility to be positive and sensitive when raising their teenagers (Kuczynski & Kochanska, 1995). Being raised in a sensitive and healthy environment benefits the attachment between the parent and teen. Francis E. M. Gardner, Edward J. S. Sonuga-Barke and Kapil Sayal state “… that during the first years of life, a stable, warm, sensitive, contingent style of parenting that is responsive to the child’s needs leads to the development of secure attachment (p. 1185, 1999).” Studies have shown that parents who have securely built an attachment with their teen all throughout adolescence are associated with positive outcomes in later development. Whereas an insecure attachment between the child and parent has proven to be problematic for the teen (Juffer, Bakermans-Kranenburg, & van IJzendoorn, 2012).

Parents only have their own experiences (Kuczynski, 1984) for raising their own children. Most parents have little experience when it comes to parenting and have little support networks (Voigt, Hans & Bernstein, 1996). It is important that parents are proactive in order to reduce risk and help regulate the child’s emotional and behavioral state (Sanders, 1999). Parents have to be mindful of the environment in which their child is being raised in. The stability of the home is the most important thing in order to regulate behavioral and emotional problems with their teens, because there are many risk factors that could exacerbate that stability and effect the child's well-being. Teen Triple P is exactly the right type of evidenced-based methodology to enhance the teenager-parent relationship, without programs like these families and communities will be negatively affected.
V. Research Design

The data collected and evaluated for this program evaluation came from pre/post test assessment booklets one and two and Strengths and Difficulties Questionnaire (SDQ). The SDQ measures 25 attributes, some positive and some negative. It is further divided between five scales: emotional symptoms, conduct problems, hyperactivity/inattention, peer relationship problems and prosocial behavior.

For the purposes of this evaluation we chose the quasi-experimental design. The quasi-experimental design allowed us to examine the data while allowing for the independent variable to remain unmoved. The pool of participants completed the pre/posttest booklets one and two and SDQ between 2013-2016.

- Research Questions
  - 1. Primary Research Question
    
    *Does the completion of the Teen Triple P program have an effect on the parent's view of parenting?*

    - *If yes, how can the program(s) be further improved?*
    - *If no, what modifications are needed? (i.e. program or instructor based changes)*
  
  i. **Primary Null Hypothesis**

    Completion of the TTP has no effect on the parent’s view of parenting
ii. **Primary Alternative Hypothesis**

Completion of the TTP has an effect on the parent’s view of parenting

○ 2. Secondary Research Question

*Does the instructor have an impact on the post test results?*

i. **Secondary Null Hypothesis**

The post test results are not affected by the instructor

ii. **Secondary Alternative Hypothesis**

The post test results are affected by the instructor

○ 3. Tertiary Research Question

*Does the location have an effect on the post test results?*

i. **Tertiary Null Hypothesis**

The location has no effect on post test results

ii. **Tertiary Alternative Hypothesis**

The location has an effect on post test results

VI. **Methodology**

In order to evaluate and analyze the Teen Triple P program, a combination of quantitative and qualitative research methods were used. The Teen Triple P program was evaluated by researching pre and post-test scores by measuring the degree of change that occurred as a result
of program participation. The quantitative data came from Group Teen Triple P Assessment Booklet 1 and 2. This survey was handed out to parents upon admission of the course and at the end of the course. The focus of our data analysis was on the Strengths and Difficulties Questionnaire (SDQ) provided in the Group Teen Triple P Assessment Booklets with a total of 293 data sets available to evaluate. The Strengths and Difficulties Questionnaire (SDQ) is a brief behavioural screening questionnaire for parents to complete who have children between the ages of 3 to 16 year olds. It exists in several versions to meet the needs of researchers, clinicians and educationalists. Each version includes between one and three of the following components (Youth in Mind, 2012).

In addition to Assessment Booklet 1 and 2 and the SDQ, Gladiators conducted a benchmark study, interviews, and a S.W.O.T. analysis.

**25 items on psychological attributes:**

All versions of the SDQ ask about 25 attributes, some positive and others negative. These 25 items are divided between 5 scales:

1) Emotional symptoms (5 items)
2) Conduct problems (5 items)
3) Hyperactivity/inattention (5 items)
4) Peer relationship problems (5 items)
5) Prosocial behavior (5 items)
Strengths and Difficulties Questionnaire (SDQ) scores can often be used as continuous variables; scores are classified as normal, borderline and abnormal.

<table>
<thead>
<tr>
<th>Scoring the SDQ</th>
<th>NORMAL</th>
<th>BORDERLINE</th>
<th>ABNORMAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Difficulties Score</td>
<td>0-13</td>
<td>14-16</td>
<td>17-40</td>
</tr>
<tr>
<td>Emotional Symptoms Score</td>
<td>0-3</td>
<td>4</td>
<td>5-10</td>
</tr>
<tr>
<td>Conduct Problems Score (Behavioral Difficulties)</td>
<td>0-2</td>
<td>3</td>
<td>4-10</td>
</tr>
<tr>
<td>Hyperactivity Score</td>
<td>0-5</td>
<td>6</td>
<td>7-10</td>
</tr>
<tr>
<td>Peer Problems Score (Getting Along with Others)</td>
<td>0-2</td>
<td>3</td>
<td>4-10</td>
</tr>
<tr>
<td>Prosocial Behavior Score (Kind and Helpful Behavior)</td>
<td>10-6</td>
<td>5</td>
<td>4-0</td>
</tr>
</tbody>
</table>

Scores were classified and renamed by using numerical values of 1-Abnormal, 2-Borderline, and 3-Normal. Scores were then evaluated by taking the Post-test scores minus the Pre-test scores.

The categories were grouped into the following:

- **Positive**: Borderline to Normal + 1 Improved by 1 level
Abnormal to Borderline  +  1  Improved by 1 level
Abnormal to Normal  +  2  Improved by 2 levels

**Negative**
Normal to Borderline  -  1  Worsened by 1 level
Normal to Abnormal  -  2  Worsened by 2 levels
Borderline to Abnormal  -  1  Worsened by 1 level

**No Change**
Normal to Normal  0  Stayed the Same
Abnormal to Abnormal  0  Stayed the Same
Borderline to Borderline  0  Stayed the Same

- **Qualitative Approach**

  Our qualitative approach was to gather data in a more open-ended fashion and to be able to use the data to help understand and describe the program implementation of Teen Triple P. A questionnaire was developed to assist in the collection of data and to identify ideas that the Parenting Project could utilize to increase competitiveness in procurement of federal grants. It was used to interview three Teen Triple P instructors and to further analyze the results. The questionnaire was made up of seven questions and each interview lasted approximately 40 minutes. At the end of each interview, the participants were asked to give any additional information they deemed necessary. The interviews were considered to be successful in that
most of our findings were consistent through all respondents. Lastly, a benchmark study was attempted but with a limited amount of information available, we focused our attention on two articles evaluating the Teen Triple P program as a whole.

- **Quantitative Approach**

  Our quantitative approach focused on testing hypotheses and using a statistical method to analyze data. The main focus was the instructor educating the parents on TTP, the location TTP was taking place, and the time frame that TTP was completed by the parents. For the instructor analysis we focused on who had the best overall improvement in all six categories of the Strengths and Difficulties questionnaire. The questionnaire consists of 25 items equally divided across five scales measuring emotional symptoms, conduct problems, hyperactivity-inattention, peer problems, and prosocial behavior. Except for the prosocial scale, the combined scale score reflects total difficulties, indicating the severity and the content of the psychosocial problems. For the location analysis we wanted to observe which area of Clark County had the most participants and how it affected the pre/post test scores. For the time frame analysis we focused on participants who completed the program within two months.

- **Benchmark Study**

  We contacted twenty Triple P agencies in the United States by email, asking them a series of 10 questions. We chose to contact Triple P agencies because we had a hard time finding Teen Triple P in the United States.

  1) When did the program start?
2) How is the program funded?

3) What are the categories in which your clientele is referred to you?

4) Is there a time frame to complete the program?

5) Are there various locations for the program?

6) How many staff members do you have?

7) How many people do you reach?

8) What do you measure as a success?

9) What forms are used for pre and post?

We received responses from:

Carolyn E. Wylie Center - Riverside, CA

First 5 Ventura County - Ventura, CA

Any Baby Can - Austin, TX

Department of Health and Human Services - North Carolina

- When reviewing the four responses it was found that:
  - Teen Triple P is a fairly new program, the earliest established TTP from our responses began in 2008, less than ten years ago.
  - Triple P uses the AAPI-2 (Adult Adolescent Parent Inventory) form for their pre and post measures while Teen Triple P uses Assessment Booklet 1 and 2 which contains the SDQ form.

VII. **Major available Findings for benchmark study**
Team Gladiators attempted to conduct a benchmark study, for TTP. However, with the limited amount of information available we were only able to find the following two articles. Articles 1 & 2 were written in 2003 and 2004 respectively and are an evaluation of TTP in Southern and Northern Queensland:

**Article 1:**

Alan Ralph and Professor Matthew Sanders conducted an evaluation of Group Teen Triple P. In the article, “Preliminary evaluation of the Group Teen Triple P program for parents of teenagers making the transition to high school,” Sanders and Ralph conducted “an initial evaluation of the program offered to all parents of students entering their first year of high school” (pg. 1). The groups of children were separated into two groups. One groups was a group in which the children began displaying antisocial behavior at the age(s) of 5-6, and the second group were those who began exhibiting antisocial behavior at the age(s) of 12-13.

Throughout the study 169 families were contacted, 68 families indicated they were interested in attending a group. 37 attended at least one group session. 26 families completed the program (pg.3). As stated in the article, “Of the 37 parents who attended at least one session there were two who were fathers attending without the mother. Four couples attended, and the remainder were mother” (Ralph & Sanders, 2003).

It should be noted that all participation was voluntary and participant’s children attended a high school servicing a low socioeconomic area.

**Major findings from Article 1:**
A. Participating parents reported significant reductions in conflict with their teenager, and on measures of laxness, over-reactivity and disagreements with their partner over parenting issues (Ralph & Sanders, 2003).

B. Parents reported significant improvements on measures of self-regulation and reductions on measures of depression, anxiety and stress (Ralph & Sanders, 2003).

C. The article covered Parent-teen conflict, parenting style, parental beliefs, parental conflict, parental adjustment and parent satisfaction. For the purposes of our research we focused on parental beliefs results.

D. Parental beliefs were such that parents reported significant improvements following the group treatment on measures of self-efficacy, self-sufficiency and self-management, as measured by the Parenting Belief Scale (PBS), but not on personal agency.

**Article 2:**

Alan Ralph and Professor Matthew Sanders conducted a preliminary evaluation of ‘Teen Triple P’ Positive Parenting Program. “This study describes a preliminary evaluation of a group Teen Triple P program delivered to parents of pre-adolescent children at the transition from primary to secondary school” (pg. 2).
Throughout the study 165 families were contacted, 70 families indicated there were
interested in attending a group. 41 attended at least one group session. 30 families completed
the program (pg. 3). “Of the 41 parents who attended at least one session, only three were
fathers attending without the mother. Seven couples attended, and the remainder were mothers”
(Ralph & Sanders, 2004).

It should be noted that all participation was voluntary and participant’s children attended
a high school serving low socioeconomic areas with high juvenile crime rates.

**Major findings from Article 2:**

A. Parents who participated in the group programs reported significant
   improvements on almost all of the assessment measures. Only the change on
   personal agency was not statistically significant (Ralph & Sanders, 2003).
B. Pre-treatment measures of parental adjustments revealed generally low levels of depression, anxiety, and stress, there were nevertheless significant improvements post-treatment (Ralph & Sanders, 2003).

C. Parents’ satisfaction with the group program, which was measured once at the end of the program, was generally high, with scores of 5 or above on the 7-point scale (where high scores indicate high levels of satisfaction) (Ralph & Sanders, 2003).

In addition to the findings from the article, three of the trained instructors were interviewed to receive an inside prospectus. The following are the results of those interviews:
There were approximately seven questions asked, which were:

1. How many sessions do you reach per month/week?

2. How many locations have you been to as an instructor?

3. Do you think if Teen Triple P was offered in Spanish, it would be beneficial?

4. Do you think participation and completion of this program would increase parental knowledge? If yes, how much can the program be further improved. If no, what modifications are needed? (Program or instructor based)

5. What is your average class size for the session(s) you instruct?

6. What is one of the biggest obstacles you have faced during a session?

7. Why did you choose to become a parent educator, for the Parenting Project?

**Major Findings from Interviews:**

1. Some clients have a resentment going in

2. Time of year plays a role in attendance

3. All instructors have a passion for children & parents
   
   a. All instructors believe in the program

4. Getting to sessions can be difficult for some clientele

5. All instructors agree that it should be taught in Spanish
a. Instructors indicated there is a desire for Spanish speaking classes because of participation of Staying Connected with your Teen

6. Instructors know not to take things personal

7. University of Queensland is the only authorized trainer of Teen Triple P instructors

8. Instructors only use their first name

9. Modifications recommended:
   a. Improving interaction
   b. Hands on engagement

10. Females in prison receive more time to finish the program
    a. They are more receptive
    b. Ask more questions
    c. If they complete three programs, they get a few days off of their sentence
    d. Male prisoners are very engaged and have an excellent completion rate

After facing limitations of available information, in regards to TTP, Team Gladiator’s performed a pivot and conducted a SWOT analysis, it is as follows:

Strengths:

• Not Fee based
The program is free to all who participate

- **Evidenced based**

  An evidenced based grant is defined as: Programs which have had rigorous randomized study (evaluation) with statistically significant results (Wells, 2016).

- **Multiple locations**

  JCC – Jean Conservation Camp (minimum security facility for female offenders – all participants volunteer to attend classes)

  FMWCC - Florence McClure Women’s Correctional Facility (all participants volunteer to attend classes)

  DFS – Department of Family Services (community locations for programs)

  Renewing Life, Bridge Counseling and Beach Therapy (counseling programs that request programs)

  The Rooms (community partner that offers space for classes)

- **First known TTP in the U.S. market**

  Unable to find any other TTP in the Unites States, therefore a pioneer in the market

- **Helps enhance and boost parenting skills and competence**

  “Enhance long-term resourcefulness and self-sufficiency of parents in guiding their children through the teenage years” (Ralph & Sanders, 2004).
• **Social support network for families**

  “These include support, friendship and constructive feedback from other parents, as well as opportunities for parents to normalize their parenting experience through peer interaction” (Ralph & Sanders, 2004).

**Weaknesses:**

• **Too much initial paperwork**

  It takes approximately 45-60 minutes to complete initial paperwork

• **Nothing in place to track effectiveness**

  No set metrics for success

• **No thorough data analysis**

  Pre/post surveys only

• **Court mandated clientele**

  Some enter program feeling as though they were voluntold and resent being there

• **Lack of permanent funding**

  Constant competition for available grant funds

• **Lack of full-time staff**

  Only one full-time staff member
• **Currently only taught in English**

  Approximately 20% of participants are Hispanic

**Opportunities:**

• **Advertising**

  Partner with community nonprofits to recruit more clientele; Social media

• **Partner with UNLV for analytics (which could lead to more funding)**

  For through data analysis and proving effectiveness of program

• **Provide internet/computer access to clientele**

  To alleviate the paperwork process during the first session

• **Partner with the Public libraries to have (X) amount of computer set aside for the clientele**

  Some clientele don’t have computer/internet access at home

**Threats:**

• **Training of instructors only authorized by University of Queensland**

  Limited to Teen Triple P, also limits staff availability due to cost(s) associated with training

• **Lack of funding/resources to evaluate the program**
90% of budget goes directly to Triple P program, which leaves very little for anything else

- **Other parenting programs**

  Dignity Health (focuses on baby basics etc)

  The Parenting Project program evaluation was comprised of 293 sets of data including a unique client ID number, gender, program, start and end dates, trainer, location, demographics, reference, and the pre and posttest evaluation.

A. **Overall Analysis**

  Participant survey responses were collected to produce viable data to be analyzed. The analysis presented includes visual representations, quantitative and qualitative data derived from the Strengths and Difficulties Questionnaire (SDQ).

  An analysis was conducted to answer our primary research question:

  *Does the completion of Teen Triple P have an effect on the parent's view of parenting?*

  Additional information sought was to learn about the location and its effectiveness on participants, the number of hours it took participants to complete the program, the effectiveness of specific instructors, and to compare the different results between mandated and voluntary participants.
The data shows the overall mean change between pre and post-test scores. The graph demonstrates improvements in all six categories offered in Teen Triple P. Behavioral Difficulties had the highest improvement at (.20), followed by Overall Stress at (.16), Emotional Distress at (.11), and the rest of the scales had improvement of (.08) for Hyperactivity, Getting Along with Others, and Kind and Helpful Behavior.
The data shows that 7% of participants (21) improved by 2 levels, 14% of participants (40) improved by 1 level, 4% of participants (11) worsened by 2 levels, 5% of participants (14) worsened by 1 level and 70% of participants (207) stayed the same.
The data shows 74% of participants (216) had no change in taking Teen Triple P, 10% of participants (31) improved by 1 level, 7% of participants (20) improved by 2 levels, 4% of participants (12) worsened by 2 levels, and 5% of participants (14) worsened by 1 level.
The data shows 68% of participants (200) had no change in taking Teen Triple P, 11% of participants (31) improved by 1 level, 11% of participants (33) improved by 2 levels, 3% of participants (9) worsened by 2 levels, and 7% of participants (20) worsened by 1 level.
The data shows 72% of participants (211) had no change in taking Teen Triple P, 6% of participants (18) improved by 1 level, 9% of participants (27) improved by 2 levels, 5% of participants (13) worsened by 2 levels, and 8% of participants (24) worsened by 1 level.
The data shows 60% of participants (174) had no change in taking Teen Triple P, 16% of participants (48) improved by 1 level, 7% of participants (20) improved by 2 levels, 5% of participants (15) worsened by 2 levels, and 12% of participants (36) worsened by 1 level.
The data shows 76% of participants (224) had no change in taking Teen Triple P, 11% of participants (31) improved by 1 level, 4% of participants (12) improved by 2 levels, 2% of participants (7) worsened by 2 levels, and 7% of participants (19) worsened by 1 level.
DEMOGRAPHIC INFORMATION

The data shows the majority of participants 79% are female (230), 20% are male (59), and 1% did not disclose their gender (4).

The majority of participants 68% indicated they were not married (199), followed by 31% who are married (90) and 1% did not disclose their marital status (4).
After analyzing the two graphs above, we came to the assumption that the majority of Teen Triple P participants are single mothers. This led us to believe that the recruitment of more males would help further the results and demographics of the program.

24% of overall participants were African American (69), 8% were Asian (23), 9% did not disclose their ethnicity (26), 19% were Hispanic (57), and the majority of the participants were 40% Caucasian (118). This graph shows the diversity within the program. We found this information very relatable to the overall diversity of the city of Las Vegas concluding to the effectiveness of the program reaching out to all ethnicities in the area.
B. Location Analysis

26% of participants attended a class in the South part of Clark County (77), 13% participated in class in the Rurals (37), 13% participated in the Northwest (39), 17% participated in the North (50), and the majority of the participants attended a class in the East (31%) part of Clark County (90).
There was a total of 15 locations that were grouped into 5 regions: East, North, Northwest, Rural and South. The East was broken down by two locations the Department of Family Services and Florence McClure Women’s Correctional Facility. The North had a breakdown of four facilities: Doolittle Community Center, Pearson Community Center, Beach Therapy, and Bridge Counseling Center. The Northwest consisted of one location: Foundation for Recovery. The grouping for the South was mostly contained in the Central part of the City with only 7 data sets located in Henderson. All the participants located in the Rural region were female offenders for the State of Nevada located at Jean Conservation Camp.

The difference in location had the most positive effects on the topics of Overall Stress, Behavioral Difficulties, and Getting Along with Others. Within the different locations, the areas with the most positive outcomes are the Northwest, South, and North location. Both of these findings were found based on the topic results. Each improved section in the given location was added together to get an overall improved percentage.
OVERALL STRESS

NORTH

NORTHWEST

EAST

RURAL

SOUTH

- Worsened by 2 levels
- Worsened by 1 level
- Stay same
- Improved by 1 level
- Improved by 2 levels
EMOTIONAL DISTRESS

NORTH

- Worsened by 2 levels: 16%
- Worsened by 1 level: 8%
- Stay same: 6%
- Improved by 1 level: 12%
- Improved by 2 levels: 10%

NORTHWEST

- Worsened by 2 levels: 13%
- Worsened by 1 level: 3%
- Stay same: 10%
- Improved by 1 level: 5%
- Improved by 2 levels: 15%

EAST

- Worsened by 2 levels: 8%
- Worsened by 1 level: 3%
- Stay same: 5%
- Improved by 1 level: 12%
- Improved by 2 levels: 7%

RURAL

- Worsened by 2 levels: 8%
- Worsened by 1 level: 3%
- Stay same: 3%
- Improved by 1 level: 12%
- Improved by 2 levels: 8%

SOUTH

- Worsened by 2 levels: 12%
- Worsened by 1 level: 5%
- Stay same: 2%
- Improved by 1 level: 10%
- Improved by 2 levels: 6%
GETTING ALONG WITH OTHER CHILDREN

NORTH

- Worsened by 2 levels: 16%
- Worsened by 1 level: 8%
- Stay same: 4%
- Improved by 1 level: 10%
- Improved by 2 levels: 62%

NORTHWEST

- Worsened by 2 levels: 23%
- Worsened by 1 level: 10%
- Stay same: 3%
- Improved by 1 level: 15%
- Improved by 2 levels: 49%

EAST

- Worsened by 2 levels: 14%
- Worsened by 1 level: 5%
- Stay same: 7%
- Improved by 1 level: 14%
- Improved by 2 levels: 60%

RURAL

- Worsened by 2 levels: 14%
- Worsened by 1 level: 5%
- Stay same: 5%
- Improved by 1 level: 8%
- Improved by 2 levels: 68%

SOUTH

- Worsened by 2 levels: 17%
- Worsened by 1 level: 5%
- Stay same: 8%
- Improved by 1 level: 12%
- Improved by 2 levels: 58%
KIND AND HELPFUL BEHAVIOR

**NORTH**
- Worsened by 2 levels: 6%
- Worsened by 1 level: 10%
- Stay same: 4%
- Improved by 1 level: 2%
- Improved by 2 levels: 6%
- Total: 74%

**NORTHWEST**
- Worsened by 2 levels: 20%
- Worsened by 1 level: 5%
- Stay same: 19%
- Improved by 1 level: 8%
- Improved by 2 levels: 8%
- Total: 64%

**EAST**
- Worsened by 2 levels: 8%
- Worsened by 1 level: 0%
- Stay same: 0%
- Improved by 1 level: 6%
- Improved by 2 levels: 7%
- Total: 82%

**RURAL**
- Worsened by 2 levels: 8%
- Worsened by 1 level: 0%
- Stay same: 0%
- Improved by 1 level: 8%
- Improved by 2 levels: 8%
- Total: 84%

**SOUTH**
- Worsened by 2 levels: 12%
- Worsened by 1 level: 6%
- Stay same: 8%
- Improved by 1 level: 8%
- Improved by 2 levels: 6%
- Total: 74%
C. Time Frame Analysis

Participants who completed the program within 2 months:

<table>
<thead>
<tr>
<th></th>
<th>No</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>WITHIN 2 MONTHS</strong></td>
<td>280</td>
<td>13</td>
</tr>
<tr>
<td><strong>OVER 2 MONTHS</strong></td>
<td>13</td>
<td></td>
</tr>
<tr>
<td><strong>GRAND TOTAL</strong></td>
<td>13</td>
<td>280</td>
</tr>
<tr>
<td></td>
<td><strong>293</strong></td>
<td></td>
</tr>
</tbody>
</table>

The information reveals that 96% of participants completed the program within its designated time frame of 2 months with only a small portion of participants taking over 2 months to complete the program at 4%.

This is a graph showing the results of participants who completed the program within the designated timeframe of 2 months versus those participants who completed the program over 2 months. The data indicates that the majority of the Teen Triple P participants completed the
program within its designated timeframe of 2 months at 280 total participants. A small portion of 13 participants took over 2 months to complete the program.

- 59% of participants were mandated to take the parenting class
  - 95% of participants completed the program within the 2 month timeframe indicating that the participants are engaged in the classes whether they are mandated or voluntary participants

D. Instructor Analysis

The analysis of the amount of participants each class instructor taught revealed Paluzzi had the majority of classes at (197), followed by Moorman (55), Richards (15), Hodge (12), and both Bialiecki and Harris had (7).
The instructors that had the best overall improvement rates were Paluzzi, Richards and Moorman. The data reveals that participants have the highest increase in Behavioral Difficulties with Moorman demonstrating the highest increase (.27), followed by Paluzzi (.24), and Richards (.21).

Mean scores for all six scales pertaining to each instructor goes as follows: Paluzzi (.140), Moorman (.130), Richards (.128), Hodge (.113), Harris (.110), and Bialecki (.105). The information reveals that Paluzzi had the highest mean scores on participants indicating instructors have an impact on the post test results.
The following graphs demonstrate the improvements each instructor had on the six scales: Overall Stress, Emotional Distress, Behavioral Difficulties, Hyperactivity and Attentional Difficulties, Getting Along with Other Children, and Kind and Helpful Behavior.
The data reveals that Hodge had the highest improvement in Overall Stress at 32% followed by Harris with a 29% improvement, Palluzzi at 23%, Bialecki at 14%, Moorman at 14%, and Richards at 13%.
The data reveals that Harris had a significant improvement at 43% in Emotional Distress, followed by Hodge with a 33% improvement, Bialecki at 28%, Paluzzi at 16%, Moorman at 15%, and Richards at 13%.
The data reveals that Moorman the highest improvement at 31% in Behavioral Difficulties, followed by Harris with a 28% improvement, Paluzzi and Richards had the same improvement at 20%, Hodge at 17%, and Bialecki had a 14% improvement.
The data reveals that Richards had the highest improvement in Hyperactivity and Attentional Difficulties at 17% followed by Hodge with a 16% improvement, Harris and Bialecki both had a 14% improvement, Paluzzi had a 13% improvement, and Moorman had an 11% improvement.
GETTING ALONG WITH OTHER CHILDREN

The data reveals that Bialecki had a significant improvement at 43% in Getting Along with Other Children, followed by Moorman with a 33% improvement, Haris had a 29% improvement, Paluzzi had a 26% of improvement, Richards had a 21% improvement and Hodge had no improvement.
KIND AND HELPFUL BEHAVIOR

The data reveals that Moorman had the highest improvement in Kind and Helpful Behavior at 20% followed by Hodge at 17%, Bialecki, Harris, and Richards all had a 14% improvement, and Paluzzi had a 7% improvement.
E. Mandatory vs. Voluntary Analysis

The data reveals that the majority of participants were mandated to attend Teen Triple P at 59%, and 41% of participants volunteered to take the program.

Voluntary vs. Mandatory Mean Scores

<table>
<thead>
<tr>
<th></th>
<th>Mean (Mandatory)</th>
<th>Mean (Voluntary)</th>
</tr>
</thead>
<tbody>
<tr>
<td>^OVERALL_STRESS</td>
<td>0.07</td>
<td>0.28</td>
</tr>
<tr>
<td>^EMOTIONAL_DISTRESS</td>
<td>0.13</td>
<td>0.09</td>
</tr>
<tr>
<td>^BEHAVIOURAL_DIFFICULTIES</td>
<td>0.17</td>
<td>0.25</td>
</tr>
<tr>
<td>^HYPERACTIVITY_AND_ATTENTIONAL_DIFFICULTIES</td>
<td>0.02</td>
<td>0.15</td>
</tr>
<tr>
<td>^GETTING_ALONG_WITH_OTHER_CHILDREN</td>
<td>0.09</td>
<td>0.06</td>
</tr>
<tr>
<td>^KIND_AND HELPFUL_BEHAVIOUR</td>
<td>0.09</td>
<td>0.05</td>
</tr>
</tbody>
</table>
These results show that Overall Stress, Behavioral Difficulties and Hyperactivity had the highest increase for volunteers. Whereas Emotional Distress, Getting Along with Others, and Kind and Helpful Behavior had the highest results for mandated participants. The two categories with the most improvement are both Overall Stress and Behavioral Difficulties for voluntary participants. The category with the least improvement was Hyperactivity and Attentional Difficulties for mandated participants. We had a total of 39% from the correctional facilities, but some were categorized as mandated and others volunteers.
VIII. Recommendations

- **Short-term**

  Languages

  ○ There is a unanimous feeling among instructors that the program would be beneficial if it were taught in Spanish. It would allow the program to reach a more diverse population. We also noticed from our ethnicities graph that 19% of Teen Triple P participants are hispanic. If this class were offered in spanish, we assume that the overall increase of scores and hispanic participants will increase.

  Recruitment of parents is crucial for growth within the program

  ○ Initial recruitment of parents was accomplished by a letter from the principal, followed by a telephone invitation. The telephone calls seemed to be an effective way of gaining parents’ interest and resulted in 40% of parents expressing interest in participating in a parenting group (Ralph & Sanders, 2003). Reaching out to parents shows that there is a desire to maximize parental engagement, both within the parenting program and the school more broadly.

  TTP needs to define their metric of success

  ○ There was a high completion rate of participants finishing TTP in 2 months but TTP needs to define their metric of success whether it is SDQ score improvements, number of participants, etc.

  Offer more classes throughout the Las Vegas Valley
○ The majority of classes were offered in the East part of the county and a small portion offered in the South. There is potential to expand classes in South and throughout the Valley.

• Mid-Term

Partner with local libraries

○ Place initial paperwork in an online format. TTP wants the initial forms that the parents need to fill out on the first night of class to be formatted online. The paperwork takes up 45 minutes to an hour on the first night of class so this would eliminate the time spent on paperwork and it would allow the first night of class to focus on positive parenting right away. Many participants don’t have access to computers so by partnering with local libraries it would allow those participants to have the access they need.

Assign more instructors to the women’s correctional facilities

○ Paluzzi taught 67% of classes so that led us to assume that she was teaching most of the classes at the correctional facilities. TTP needs to figure out who is comfortable teaching at the women’s correctional facility so there is an even amount of distribution of classes.

Expand recruitment for male participants

○ The majority of the program participants are women because there’s a large population of women who attend classes from Florence McClure Correctional
Facility. Recruitment can be conducted for male participants by offering a similar program in male correctional facilities. TTP needs to specify what the women in the correctional facility are referenced as - whether mandated or voluntary.

- **Long-Term**

  The findings of the Australian evaluation suggests phone interviews should be conducted to provide additional support to parents as they put into practice what they have learned in the group sessions.

  - Conducting phone interviews once group sessions are over provides several benefits for parents. Although delivery of the program in a group setting may mean parents receive less individual attention than in individual consultation, there are several benefits for parents. These include support, friendship, and constructive feedback from other parents as well as opportunities for parents to normalise their parenting experience through peer interactions (Ralph & Sanders, 2003).

  Teen Triple P should establish a program to track effectiveness and recidivism to minimize the time and resources utilized (UNLV Analytics).

  - TTP used to have a UNLV Phd student who would help with data, but that student has graduated. It would be beneficial to hire another student to help with data so that effectiveness can be tracked as well as recidivism.

With a large amount of quantitative statistics available, additional use of qualitative data to gain feedback from clientele could be useful.
○ The additional information may provide further information on certain programs and allow the Parenting Project to tailor services. A possibility would be creating a parent survey so the parents feel they have a voice and can provide comments and improvements for the program.

Apply for more grants

○ We realize that most of these recommendations require more funding so TTP needs to apply for more grants as well as hire a grant writer or train staff members to write staff.

IX. Limitations

While evaluating Teen Triple P, team Gladiators faced some difficulties. Gladiators attempted to conduct a benchmark study but was unsuccessful due to the lack of Teen Triple P programs across the United States; this led team Gladiators to conduct a S.W.O.T. analysis.

In trying to prove the time frame in which participants completed the program, the sample size of participants that did not complete the program within 2 months was too small to determine the effect time had on participants. Additionally, team Gladiators had a limited amount of time to interview instructors, since all instructors are part time and their schedules vary. The data provided resulted in one instructor teaching 67% of all classes, so there was no definitive results as to whether instructors had an effect on the parent’s view of parenting. Another limitation is that only the University of Queensland can certify instructors to teach TTP.
References


Scoring the SDQ. (2012, January 1). Retrieved from Youth in Mind: http://www.sdqinfo.org/a0.html


XI. Appendix