The Mental Health Positive Parenting Program (MHPPP)
Empowering Patients

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Introduction

Background
On the Central Coast, between 25-26% of adult mental health clients are parents of children aged 0-17 years.¹

Problem
Despite a strong association between parental mental illness and poor child outcomes,² there are limited parenting interventions specifically for parents with mental illness.³

Aim

Program Development
Central Coast Children and Young People’s Mental Health (CYPMH) developed the Mental Health Positive Parenting Program (MHPPP) specifically for the needs of parents with mental illness.³

Objective
To determine the effectiveness of the MHPPP on the discipline strategies of parents reporting a mental health problem.

Method

Program
The MHPPP is an adaptation of the Triple P⁴ tailored specifically for parents who have mental health problems. The 10-week intervention consists of a 6-week group parenting program followed by four weekly home visits.

Sample
86 parents of children aged 2-10 years who had self-reported a mental health problem (see Figure 1).

Measures
- Children’s behaviour (Eyberg Child Behavior Inventory, ECBI).⁵
- Parental discipline practices (Parenting Scale, PS).⁶

Results

Parent characteristics
With an average age of 33 years, the majority of parents were female (91%), in a relationship (defacto or married: 83%) and unemployed (76%).

Figure 2 illustrates the types of mental health problems reported by parents.

Primary Outcomes
Children’s behaviour
Parents reported significantly lower scores on the ECBI problem subscale (Z = -7.57, P < 0.001) and the ECBI intensity subscale (Z = -7.08, P < 0.001).

Parental discipline strategies
Parents reported significantly lower scores on each of the PS subscales: laxness (Z = -6.23, P < 0.001), over-reactivity (Z = -7.16, P < 0.001), and verbal abuse (Z = -6.69, P < 0.001).

Clinical improvement
Figure 3 illustrates that significantly less (P<0.001) parents scored in the clinical range on outcomes measures after the MHPPP.

Conclusion

Following the MHPPP, parents reported a significant reduction in their children’s behavioural problems and a significant reduction in the number of dysfunctional parenting strategies.

Our findings provide preliminary support that an adaptation of the Triple P can be helpful for parents with a range of mental health problems. The MHPPP is therefore a promising avenue for early intervention in this population.

References