DOCUMENT RESUME

ED 139 152 EC 100 727

AUTHOR Alexander, Ronnie N.
TITLE Evaluation Procedures in Parent-Teacher Conferencing.
PUB DATE Apr 77
NOTE 39p.; Paper presented at the Annual International Convention, The Council for Exceptional Children (55th, Atlanta, Georgia, April 11-15, 1977)

EDRS PRICE MF-$0.83 HC-$2.06 Plus Postage.
DESCRIPTORS Elementary Secondary Education; *Evaluation Methods; *General Education; *Parents; *Parent Teacher Conferences; *Parent Teacher Cooperation; *Research Methodology

ABSTRACT

Problems in evaluating parent-teacher interaction are examined. Fictional examples are used to describe three main types of problems: 1) the duration and frequency of evaluation, especially after training or conferencing has ceased; 2) alteration of measurement instruments and procedures; and 3) methodological and research design problems. Suggested are procedures such as standardizing measures over the duration of the treatment and followup, and the use of a control group to strengthen the research design. (CL)

p13

# EVALUATION PROCEDURES IN PARENT-TEACHER CONFERENCING

Ronnie N. Alexander

College of Multidisciplinary Studies

The University of Texas at San Antonio



Running head: Evaluation Procedures

EVALUATION PROCEDURES IN PARENT-TEACHER CONFERENCING

That beneficial effects accrue from parent teacher interactions is the general assumption that underlies a wide variety of activities ranging from sending home flyers about school activities, notes and progress reports relative to a child's academic and social progress, to extensive and/or elaborate systems of parental involvement in parent activities within the classroom, at home, and in a variety of roles and capacities. However, if one accepts the assertion by Kroth and Simpson (in press) that the effects of parents, teachers, counselors and therapists may be for better or worse, and that "Inadequate resources (skills, knowledge) on the part of the helper, and an inappropriate process, can lead to a deterioration in performance on the part of the person being 'helped', as well as improved functioning." (pg. 194), it would appear that concern regarding the efficacy of parent-teacher conferencing and parent training is legitimate and warranted.

That parents can be taught to improve their children's behavior is obvious from recent reviews by Berkowitz and Graziano (1972), Johnson and Katz (1973), and O'Dell (1974).

There are also indications that exceptional children benefit from parental involvement in the educative process (Alexander, 1977; Clements & Alexander, 1975; Feldman,

Byalick & Rosedale, 1975; Flint & Deloach, 1975; Kroth, Whelan & Stables 1970; Tavormina, 1975).

There are, however, numerous questions which remain unanswered in relation to parent involvement, conferencing, and training. A number of these concerns have been delineated by the reviewers and authors cited above. Some concerns may have greater or lesser interest or significance, depending on one's role or function in working with parents, whereas other concerns have implications that are pervasive across the field. While concerns or problems of evaluation are often interrelated and interact, an attempt will be made to identify a number of these separately, through fictional examples [1], and to suggest procedures that will foster improvement in evaluation of parent-teacher interactions.

Problem 1: Duration and frequency of evaluation.

A repeatedly cited (Forehand & Atkenson, in press; Johnson & Katz, 1973; O'Dell, 1974; Bernal & Margolin, Note 1) and pervasive concern in assessing the efficacy of parent training and conferencing has been the duration and frequency of measurement, especially after training or conferencing has ceased. Often, most interventions are of a short duration by intent or necessity, and follow-up evaluation is also of limited duration and/or frequency

with the rationale most often presumed to be expediency, economy and/or difficulties in obtaining measures once training or conferencing has ceased.

---

Insert Figure 1, 1a about here

---

Example 1

An example to illustrate this problem is the teacher or therapist who asks parents to collect measures on multiple behaviors several times per day or all day, do reliability checks, graph the data daily, perhaps using this as a criterion for admittance to the next training session, utilizing the records for decisions regarding programming, consequation, etc. The trainer then compares intervention measures to baseline, decides that the parents have "learned" as demonstrated by the changes in the observed behaviors of the child, and tells them to come back in a month (or 3 months, 6 months, etc.) and perhaps bring with them a record of the child's behavior for several days preceding the meeting.

An assumption is that the parents will continue the program at the same degree or level of intensity even though the environmental conditions and contingencies which are assumed to have occasioned and maintained the parents'

behavioral change have been drastically altered; that the most recent record of the child's behavior adequately represents his or her behavior over the period of time from termination to post-check, and that it is predictive of his or her future behavior.

One other problem and concern in relation to frequency of follow-up is the seemingly arbitrary selection of points in time at which follow-up measures are to be obtained. The dates or times selected seem to bear little or no relationship to the type, rate, duration or probable durability of the behaviors of concern. Whereas some types or classes of behavior are quite variable, others are more stable. Investigators would be well advised to note those variables while intensive measurement procedures are being utilized, and to plan appropriate and differential frequencies and durations of follow-up measures to take into account those dissimilarities.

Problem 2: Alteration of measurement instruments and procedures.

A problem that often appears concurrently with the first is a change in measurement procedures; including type of measurement utilized, relative precision of observations, accuracy of recording and/or response cost in reporting procedures. It appears that these problems frequently occur

at a most critical point in time; at the termination of training or toward the conclusion of an extended sequence of parent conferences, and are obvious at follow-up, with probes, or post-check evaluation. This is illustrated in the example below.

---

Insert Figure 2, 2a, 2b about here

---

Example 2

During an extended series of conferences, parents were asked to observe and record daily the frequency of requests and commands they made or gave their child, the frequency of his compliance, the elapsed time from when the command or request was delivered to when the child initiated compliance, and how long it took him to complete the task. They were also instructed to record this information simultaneously at least once per week to obtain a measure of interobserver agreement. After baseline was obtained, they were instructed to place the child in a time-out area of the house (the foyer) for 5 minutes on each occasion when the child did not initiate compliance with 15 seconds.

The parents were requested to graph this data daily, and bring all records to a weekly conference for six weeks. An ABAB reversal design (Hall, 1971) was utilized to verify

effects. A decrease in noncompliant behavior of 30 per cent or more was used as a criterion for success. (Eyberg & Johnson, 1974). The parents were then urged to continue the procedures as necessary.

Two weeks later, the mother was contacted by telephone, asked about frequency of compliance, frequency of use of the time-out procedures, the use of the procedure in relation to any other problem behaviors of the child, and two things were going generally. She was also encouraged to call if any problems arose. One month after termination, a questionnaire was mailed to the parents requesting that the parents rate on a Likert-type scale (Brown, 1976) their perceptions of the effectiveness of the training, the degree of change effected, the various components of the training, and generalization of the use of the procedures. A week subsequent to the mailing, the mother was contacted by telephone and urged to complete and return the questionnaire. Three months subsequent to termination, the mother was again contacted by telephone. She indicated that things were going fine, and the behavior was no longer a problem. Four months subsequent to termination, an attempt was made to contact the mother by phone. The operator indicated that the number had been changed at the owner's request, and was now unlisted. The treatment

was judged to have been a success.

Problems in this example include alterations of the frequency of measurement, a change in the type of measurement information requested, no information requested about some of the measures previously obtained regularly, requests for new information about previously unreported behaviors, and a request for a global subjective assessment. In addition, a new measure was introduced, as well as new and different response demands for the parents' behavior in the method used to obtain reports about the behavior.

It often appears that a tacit agreement or understanding takes place toward or at the end of training or conferencing between the teacher or therapist and the parents; that they now "know the ropes" as demonstrated by their extensive recordkeeping, graphing and consequation over the past several weeks, and that they will continue to apply (and perhaps expand on) the procedures and principles without the bothersome necessity of continued measurement of behavior. The teacher/trainer also seems to reduce expectancies and criterions of acceptable levels of measurement over time and as contact with the parents becomes less frequent. Whereas in the first several weeks, parents were required, taught, urged, and reminded of the necessity and rationale for accurately measuring behavior ("you must first determine the operant level; it's necessary

so we'll know if the change procedure is working; we must make sure that the change is due to the treatment and not to measurement error; we need it to make judgements about future procedures; we need it to determine criterion levels and goals; we need it to make probability statements about the behavior; etc.), in latter stages of conferencing or training and at follow-up, the teacher/trainer finds less rigorous and/or frequent measures acceptable or desirable. This seems incompatable with the principles and procedures of accurate measurement and evaluation. If the investigator is willing to rely on less frequent and less rigorous measures interspersed over longer durations and in environments probably less susceptable to his direction or stimulus control, he should be at least as willing to accept the same levels of measurement while the parent training is under his immediate supervision and direction.

A more appropriate expectancy would be the necessity for more rigorous and frequent measures as training is terminated, or at least measurement as adequate as during training, when monitoring, feedback, and instruction is occurring between the parents and instructor on a frequent, regular basis. If ongoing or follow-up evaluation is an expectancy of the instructor, parents should be informed early in the training process, so that a rationale may be

provided, to answer any questions, and to provide support and encouragement for continuation of the measurement procedures.

The most appropriate suggestion for improvement would include attempting to standardize measures over the duration of the investigation, including follow-up. This should include using measures and procedures planned for follow-up during the course of training or conferencing in conjunction with more rigorous or intensive measures. This would allow comparison of instruments for estimates of reliability and validity, as well as providing at least some consistency of measurement over time throughout intervention and follow-up. Attention should also be directed to the response demands of various measures, instruments and procedures for the collection and reporting of information for purposes of efficiency and effectiveness (Cone & Sloop, 1973; Forehand & Atkeson, in press; Mash & Terdal, Note 2). Just as the most precise instruments are of little value if they cannot be implemented by the investigator or are not used by parents, instruments and measures which are economical and easily obtained are of little or no value if they are not reliable and valid measures of the behaviors of concern. Measures that have been demonstrated to produce desirable ratios of effectiveness/efficiency in relation to particular training procedures, response

classes or behaviors should be used more frequently, with adaptations as needed, rather than starting from "scratch" with each new conference, parent, or procedure. The axiom that more is better in regard to measurement may be fallacious when the above considerations are taken into account. Further, information as to why parents "drop out", fail to respond and are "lost" prior and subsequent to follow-up is sorely needed. Such information could be valuable in planning future training, to provide for additional "booster-shot" training (Patterson, 1974), and potential alterations in instrumention.

Problem 3: Methodological and research design problems.

While the previous vignettes (examples 1 and 2 above) could be considered as hampered with design or methodology problems, their inclusion was not to demonstrate those concerns. Two short examples will serve as illustrations of some of the difficulties encountered in this area.

---

Insert Figure 3, 3a, 3b about here

---

Example 3

A teacher decides to act on the assumption that parent conferencing will improve the behavior and attitude of the children he teaches. Consequently, he sends home notices that a parent group is being formed, and invites parents

to participate. One-third of the parents respond affirmatively, and the parent group begins. Over the eight week duration of the conferencing, some of the parents attend sporadically, and others drop out. Nevertheless, the behavior and attitude of the participants' children significantly improves from pre-to-post assessment. The teacher concludes that this was an effective procedure.

A number of shortcomings in this example are obvious, including lack of controls for maturation, potential selective variables operating relative to attendence and participation; outcome, relative performance of parents and children, etc. However, these problems or concerns may become less obvious, obscured, or ignored when single subject (Sidman, 1960; Hersen & Barlow, 1976) or applied behavior analysis (Hall, 1971) research designs are superimposed on this or similar examples. It is apparent that a control group would strengthen this design; what would constitute adequate controls is still open to question. If a defector control group (Levitt, 1963) or matched sample (Shepperd, Oppenheim, & Mitchell, 1966) is employed, it would seem that the necessity for accounting for potentially significant variables in the groups would be at least twice as great, since differences of concern would include not only those inherent in the parents and children, but also a number of potential interactions

between the two. The necessity for assurance of homogeneity of variance is at issue in this instance, and a violation of this assumption will severely delimit conclusions in regard to effectiveness of procedures.

---

Insert Figure 4, 4a about here

---

Example 4

An investigator is interested in the question of whether behavioral parent training is more effective than nondirective counseling in helping parents manage behavior problems exhibited by their children. Parents of children who attend one of three Behavior Disorders classrooms in an elementary, middle school, and a high school in a local school district are randomly assigned to one of the two experimental conditions or a control group. Each training/counseling group is conducted by an individual who is competent and experienced in the treatment or training modality utilized. A number of valid, reliable measures are used to evaluate children's and parents' behavior prior, during, and subsequent to intervention. Results indicate that while both groups show improvement over the controls, there are no significant differences between the two. A conclusion that might be erroneously assumed is that while both types of intervention are ef-

fective, neither condition is more effective than the other in helping parents manage behavior problems exhibited by their children.

The major problem inherent in this example is the possibility that individual and significant differences of responsiveness to one or the other treatment condition by a few or particular types of parents, children, or behavior problems may be "washed out" by the preponderant nonresponsiveness of other types of parents, children and/or behaviors to a particular training or treatment modality. The assumption of equality of responsiveness of any type of disorder, child or parent to any given type of training or treatment is probably naive, as is the assumption that various rates, intensities and types of behavior disorders are comparable within or between ages and/or grade levels.

A more productive approach might be the matching and assignment by type, rate, intensity or duration of the disorder to one of the three conditions; a preassessment matching and assignment of parents on variables that appear to have face validity as a basis for potential variability of responsiveness to training, i.e., matching and assignment of high, moderate, and low responsive or receptive parents equally to conditions: and/or perhaps matching and assignment across two or more classes of variables; such as parental attitude, level of severity of the child's

behavior, and types of intervention.

Although the above may appear esoteric or unnecessary, until we begin to account for obvious sources of error, less obvious and unknown variables of parent conferencing and training are unlikely to brought to light and accounted for, while the value and efficacy of these endeavors will continue to remain presumptive rather than demonstrable.

REFERENCES

Alexander, R. The role of the resource teacher in parent-teacher conferencing. San Antonio, Tx.: University of Texas at San Antonio, 1977. (ERIC Document Reproduction Service No. ED 127 763)

Berkowitz, B. P., & Graziano, A. M. Training parents as behavior therapists: A review. Behaviour Research and Therapy, 1972, 10, 297-317.

Brown, F. G. Principles of educational and psychological testing. New York: Holt, Rinehart & Winston, 1976.

Clements, J. E., & Alexander, R. N. Parent training: Bringing it all back home. Focus on Exceptional Children, 1975, 7, 1-12.

Cone, J. D. & Sloop, E. W. Parents as agents of change. In A. Jacob & W. Spradlin, (Eds.) The group as agent of change. New York: Behavioral Publications, 1973.

Eyberg, S. M., & Johnson, S. M. Multiple assessment of behavior modification with families: Effects of contingency contracting and order of treated problems. Journal of Consulting and Clinical Psychology, 1974, 42, 594-606.

Feldman, M. A., Byalick, R., & Rosedale, M. P. Parent involvement programs - A growing trend in special education. Exceptional Children, 1975, 41, 638-642.

Flint, W., & Deloach, C. A parent involvement program model for handicapped children and their parents. Exceptional Children, 1975, 41, 638-642.

Forehand, R., & Atkeson, B. M., Generality of treatment effects with parents as therapists: A review of assessment and implementation procedures. Behavior Therapy, in press.

Hall, R. V. Behavior modification: The measurement of behavior. Managing Behavior, Lawrence, KS.: H & H Enterprises, 1971.

Hersen, M., & Barlow, D. H. Single case experimental designs: Strategies for studying behavior change. New York: Pergamon Press, 1976.

Johnson, C. A., & Katz, R. C. Using parents as change agents for their children: A review. Journal of Child Psychology and Psychiatry, 1973, 14, 181-200.

Kroth, R. L., & Simpson, R. Parent Conferences: A Teaching Strategy. Denver, Colorado: Love Publishing Company, in press.

Kroth, R., Whelan, R. J., & Stables, J. M. Teacher application of behavioral principles in the home and classroom environments. Focus on Exceptional Children, 1970, 3, 1-10.

Levitt, E. E. Psychotherapy with children: A further evaluation. Behaviour Research and Therapy, 1963, 1, 45-51.

O'Dell, S. Training parents in behavior modification: A review. Psychological Bulletin, 1974, 81, 418-433.

Patterson, G. R. Interventions for boys with conduct problems: Multiple settings, treatments, and criteria. Journal of Consulting and Clinical Psychology, 1974, 42, 471-481.

Shepherd, M., Oppenheim, A. N. & Mitchell, S. Childhood behavior disorders and the child-guidance clinic: An epidemiological study. Journal of Child Psychology and Psychiatry, 1966, 7, 39-52.

Sidman, M. Tactics of scientific research. New York: Basic Books, 1960.

Tavormina, J. B. Relative effectiveness of behavioral and reflective group counseling with parents of mentally retarded children. Journal of Counsulting and Clinical Psychology, 1975, 43, 22-31.

## REFERENCE NOTES

1. Bernal, M. E., & Margolin, G. Outcome of intervention strategies for discipline problem children. Paper presented at the meeting of the Association for Advancement of Behavior Therapy, New York, December 5, 1976.

2. Mash, E. J. and Terdal, L. G. After the dance is over: Some issues and suggestions for follow-up. Paper presented at the meeting of the Association for the Advancement of Behavior Therapy, New York, December 5, 1976.

## Footnotes

[1]These examples were fabricated for purposes of describing problems of measurement and evaluation. They are not intended to represent actual experiments, published or unpublished. Therefore, the data as represented in figures 1-4 does not exist.

Correspondence concerning the article should be sent to Ronnie N. Alexander, College of Multidisciplinary Studies, The University of Texas at San Antonio, San Antonio, Texas 78285.

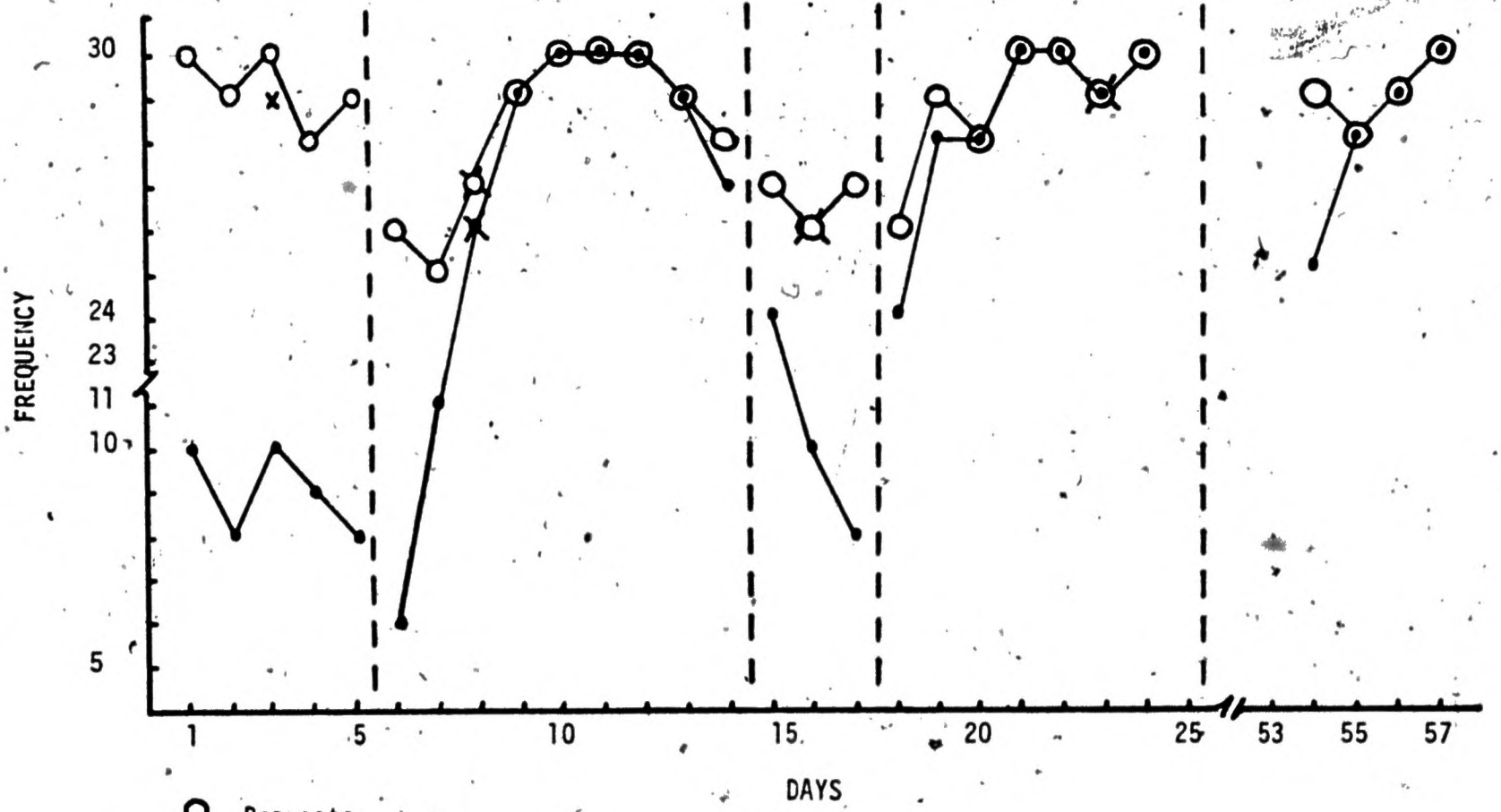
## Figure Captions

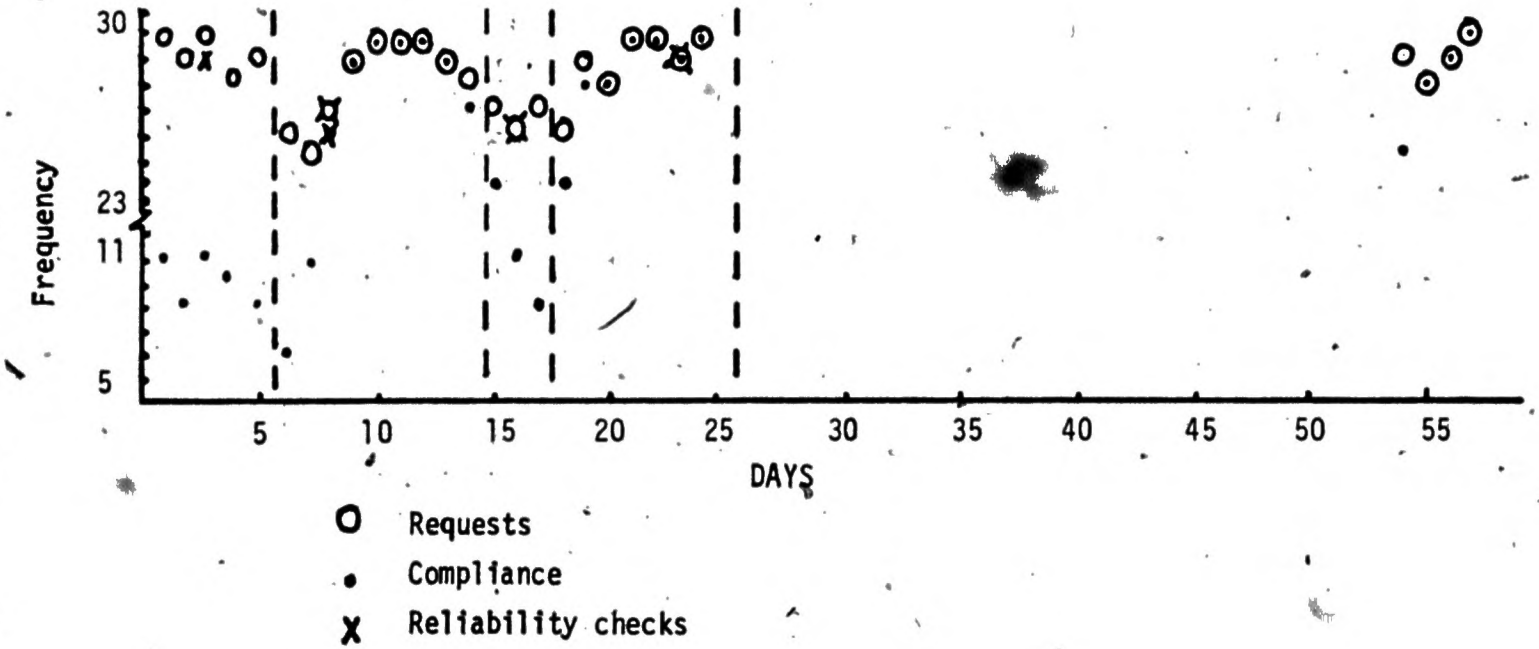
Figures 1, 1a. Examples of concerns about duration and frequency of measurement.

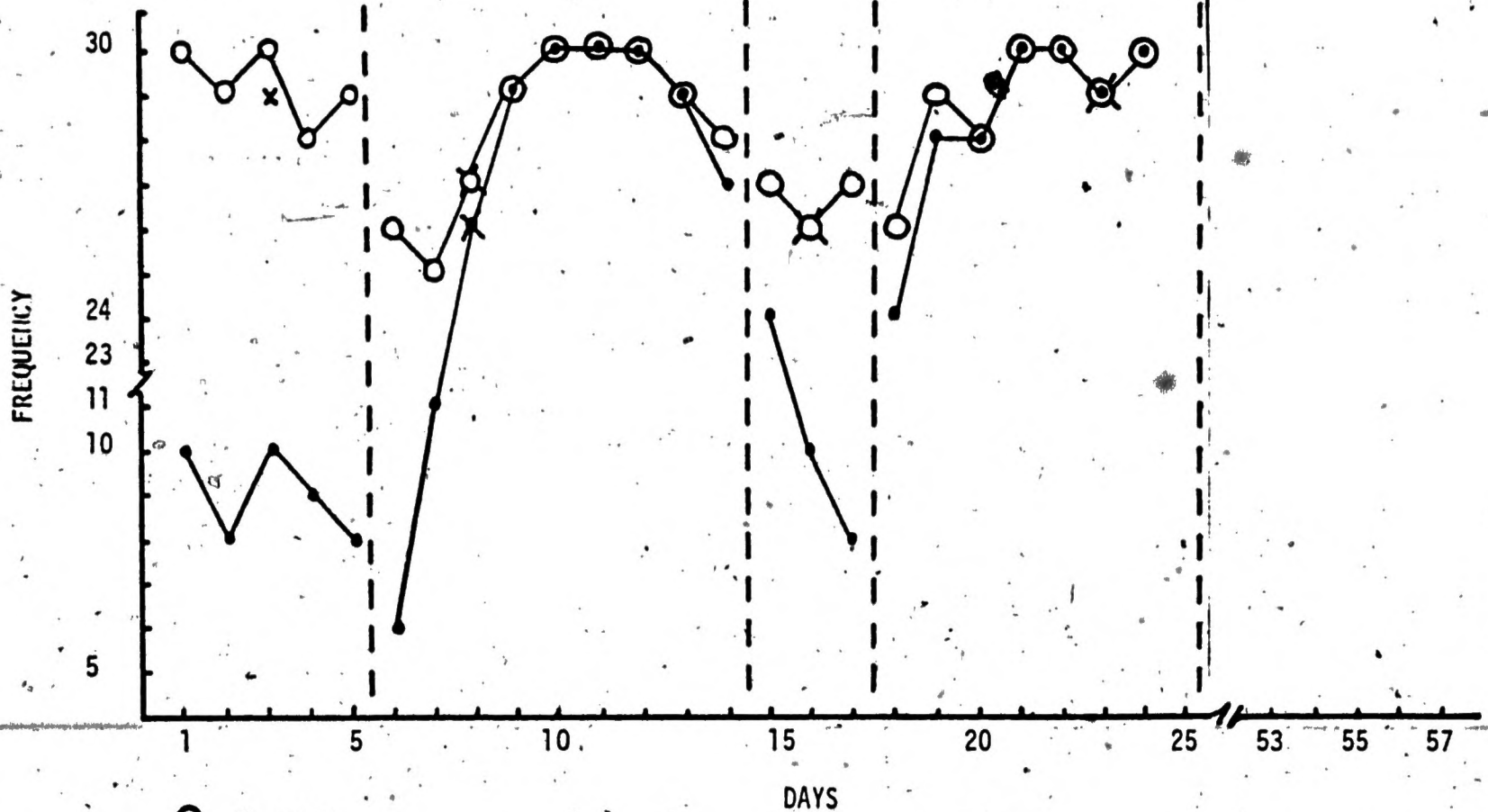
Figures 2, 2a, 2b. Examples of alteration of measurement and measurement procedures.

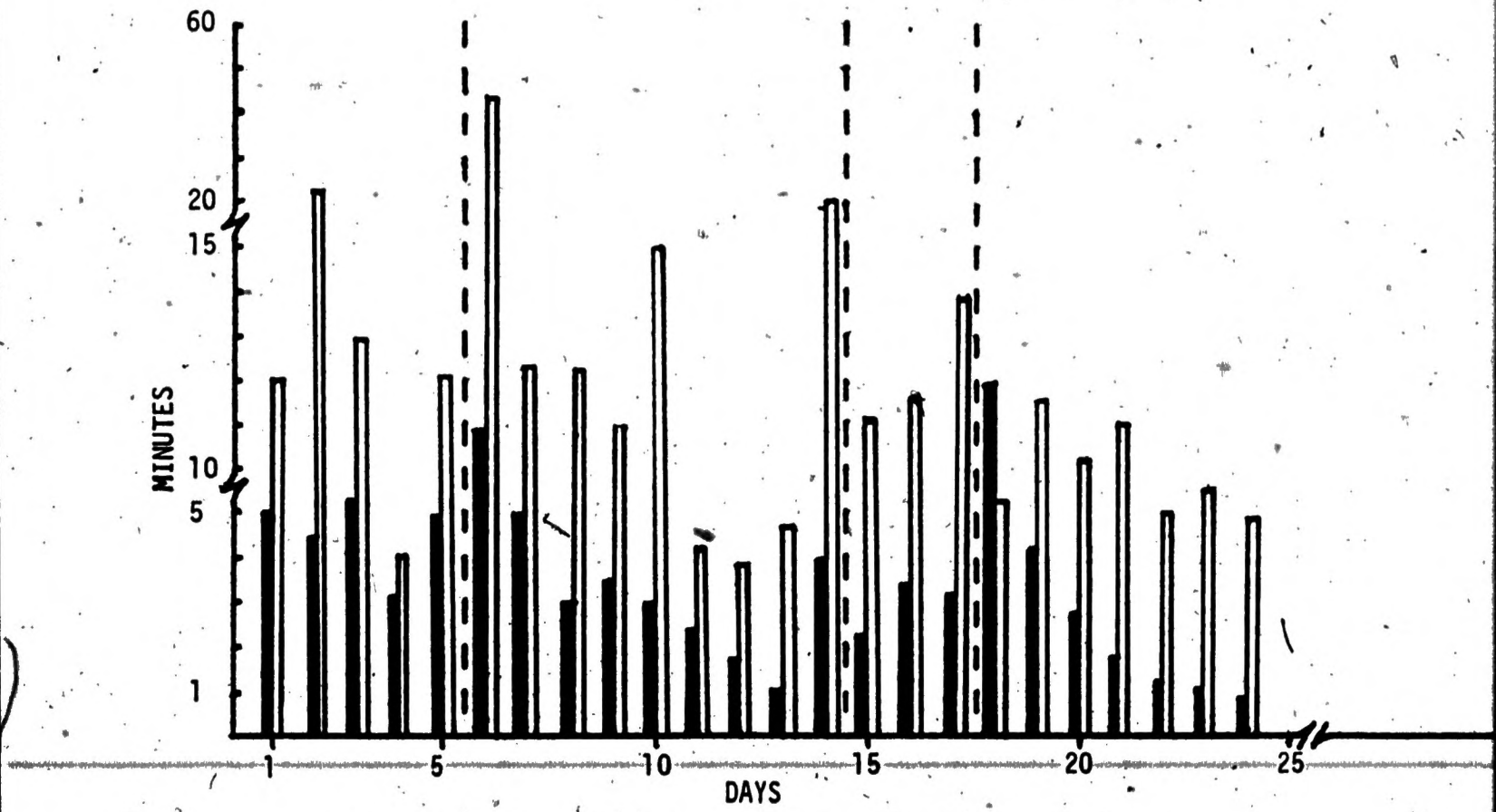
Figures 3, 3a, 3b. Examples of research design and problems of controls.

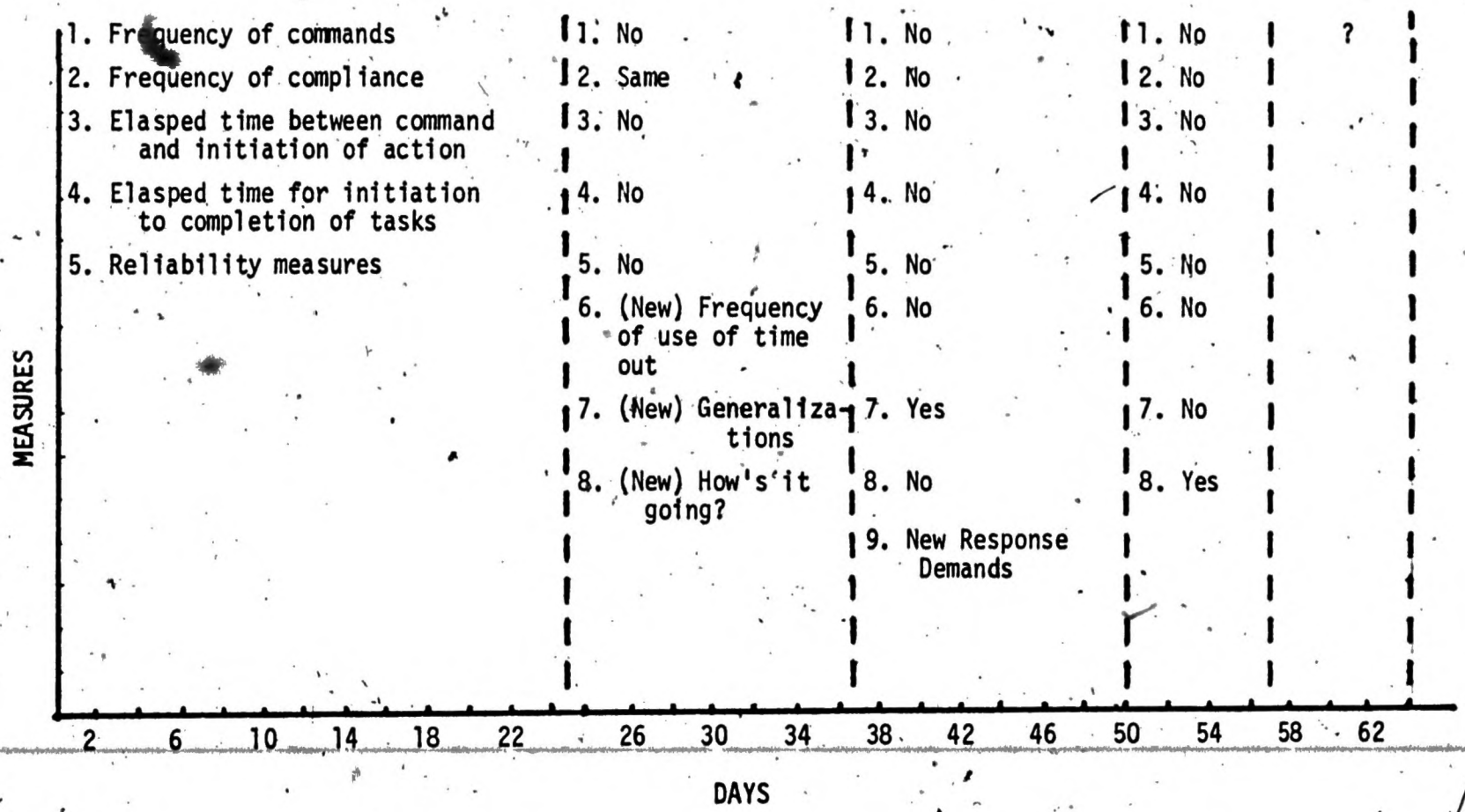
Figures 4, 4a. Examples of potential interactions of variables.

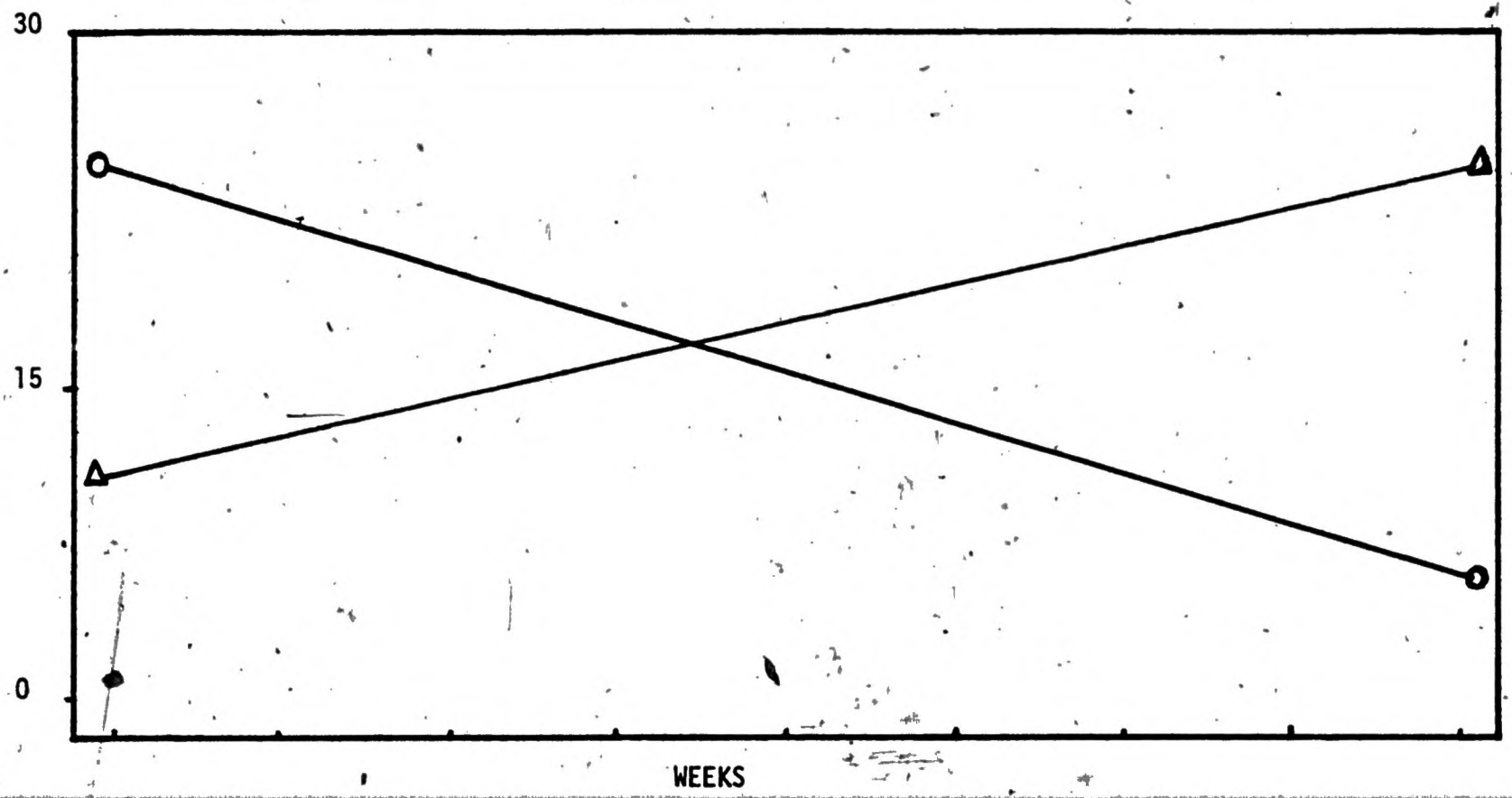

30
24
23
11
10
5
FREQUENCY
1
5
10
15
20
25
53
55
57
DAYS
Requests
Compliance
Reliability checks


30
23
11
5
Frequency
5
10
15
20
25
30
35
40
45
50
55
DAYS
Requests
Compliance
Reliability checks


30
24
23
11
10
5
FREQUENCY
1
5
10
15
20
25
53
55
57
DAYS
Requests
Compliance
Reliability checks

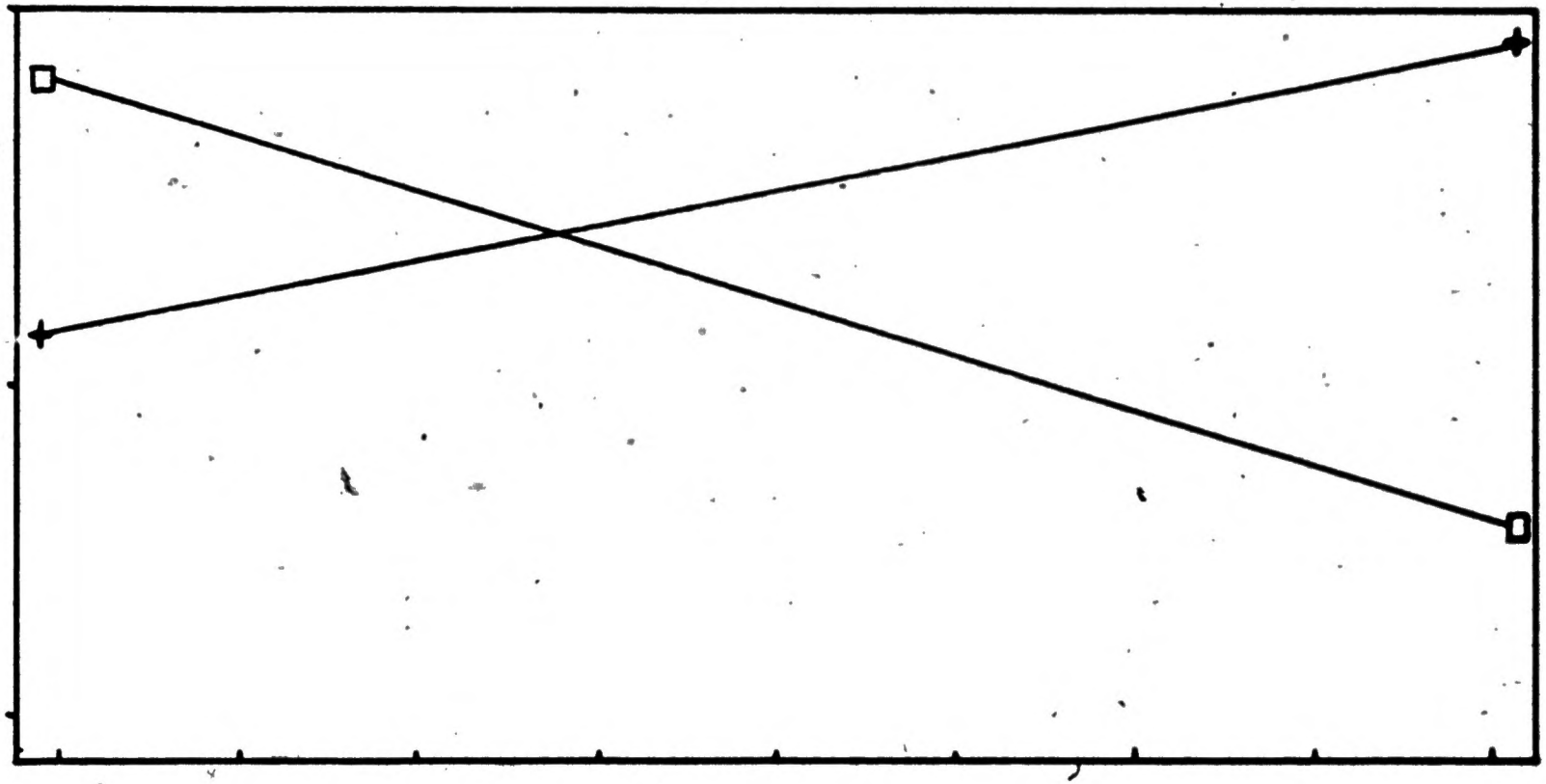

60
20
15
10
5
1
MINUTES
1
5
10
15
20
25
DAYS
Total number of minutes to initiate tasks
Total number of minutes to complete tasks


1. Frequency of commands
2. Frequency of compliance
3. Elasped time between command and initiation of action
4. Elasped time for initiation to completion of tasks
5. Reliability measures
1. No
2. Same
3. No
4. No
5. No
6. (New) Frequency of use of time out
7. (New) Generalizations
8. (New) How's it going?
1. No
2. No
3. No
4. No
5. No
6. No
7. Yes
8. No
9. New Response Demands
1. No
2. No
3. No
4. No
5. No
6. No
7. No
8. Yes
?
MEASURES
2 6 10 14 18 22 26 30 34 38 42 46 50 54 58 62
DAYS




Experimentals: ○ Disruptive Behaviors

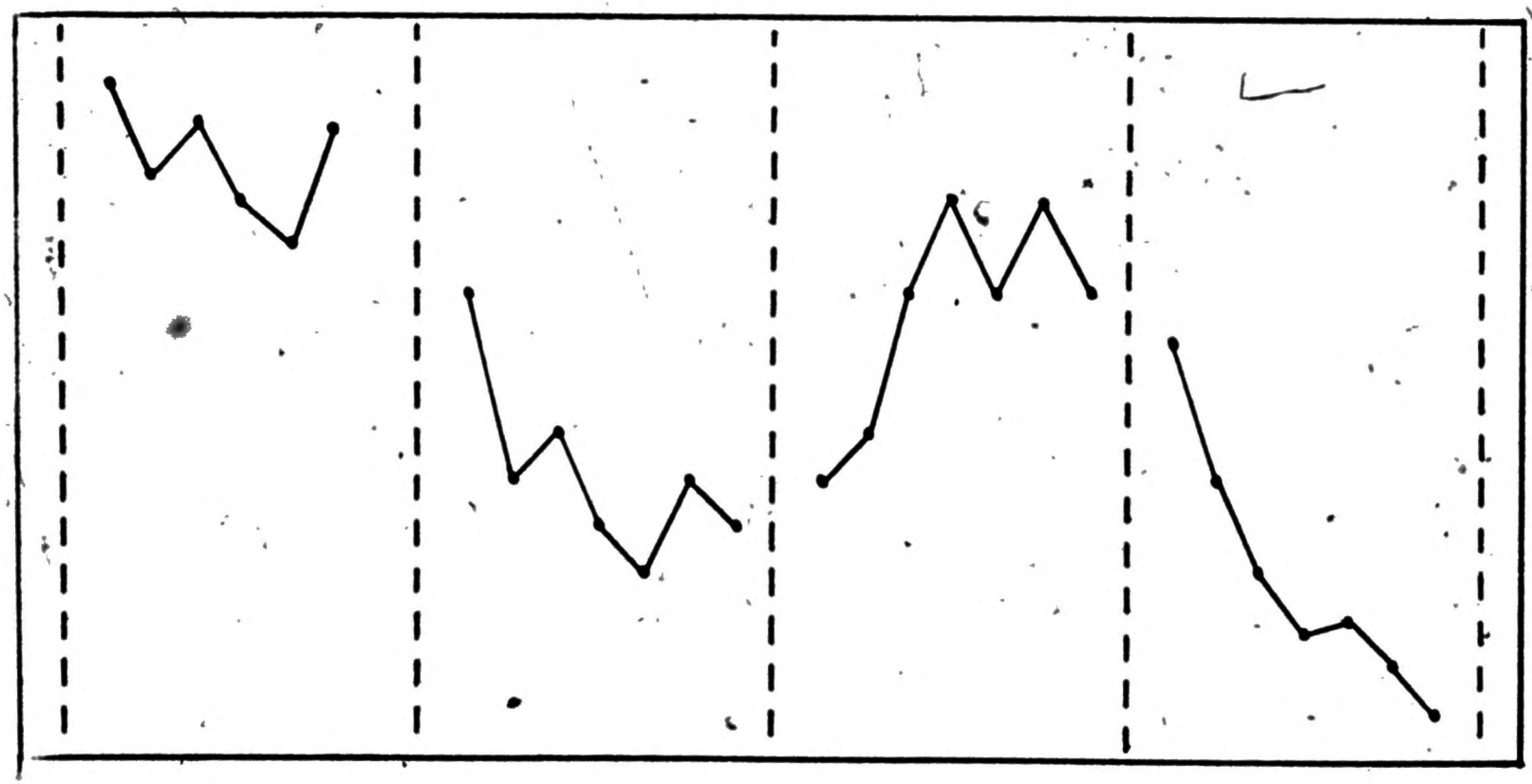
△ Positive self referents

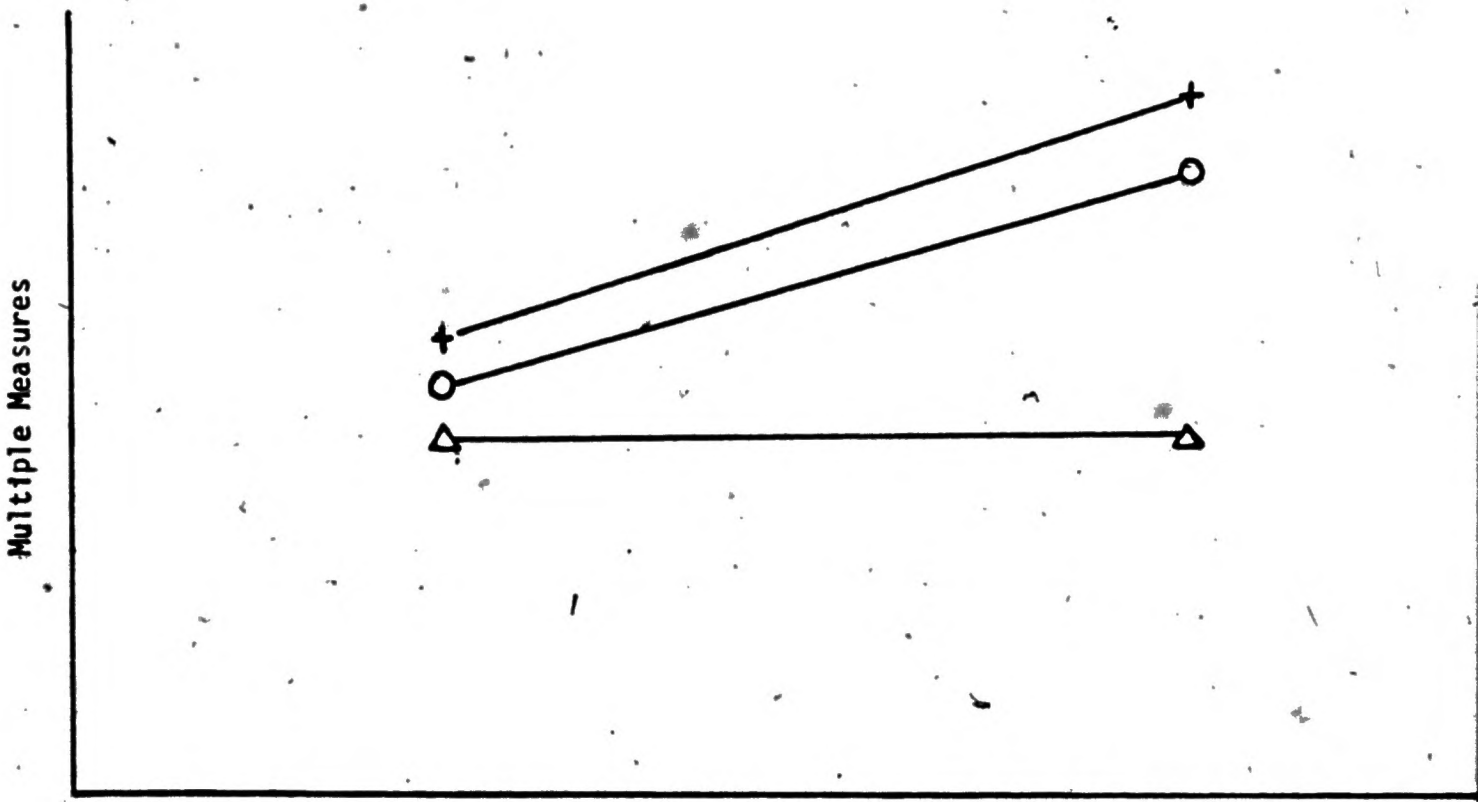




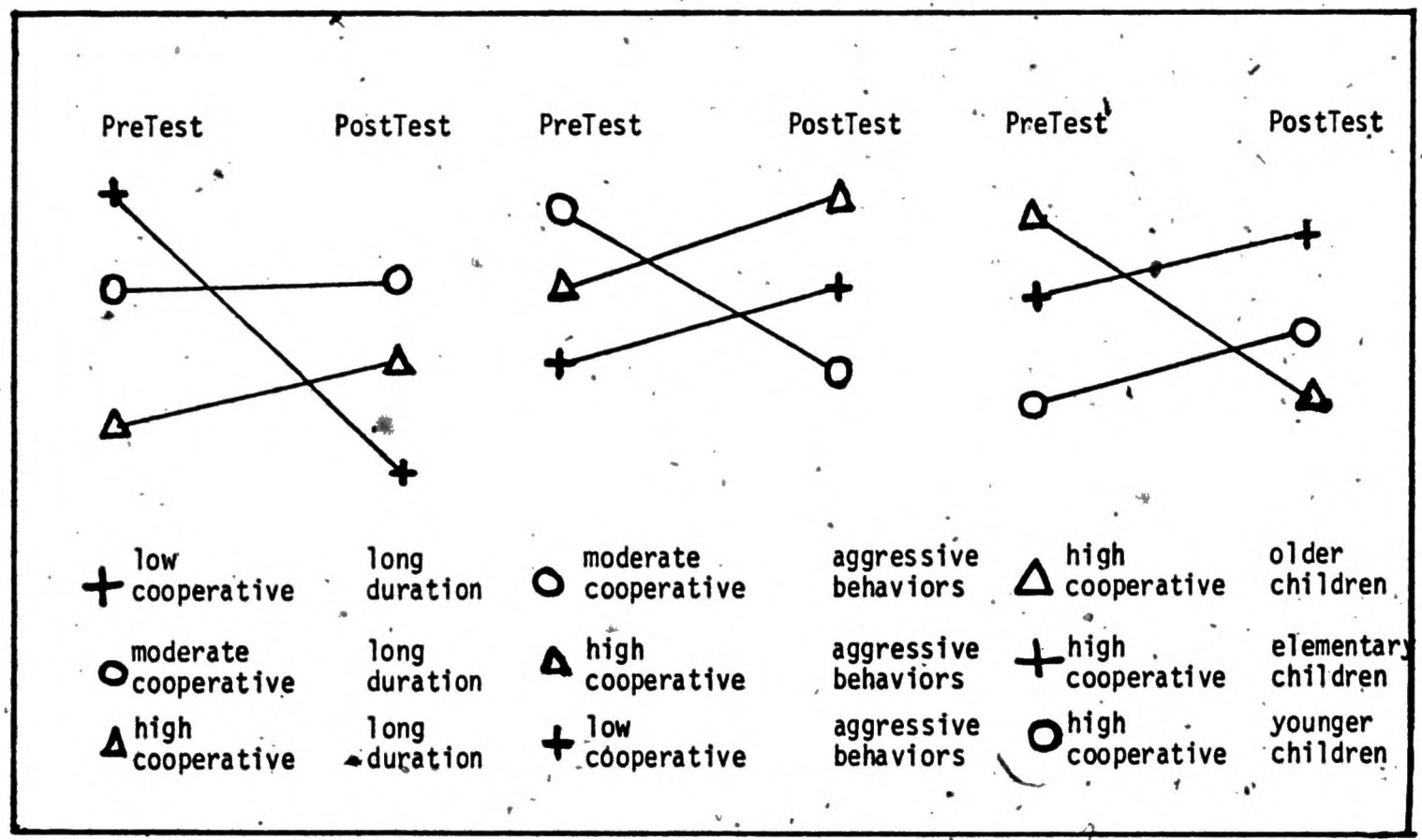
Controls: □ Disruptive Behaviors

✚ Positive Self Referents






+ Behavioral Counseling
O Non Directive Counseling
Δ Control Group


PreTest
PostTest
PreTest
PostTest
PreTest
PostTest
Measures of Concern
(Parents and Children)
low cooperative
long duration
moderate cooperative
aggressive behaviors
high cooperative
older children
moderate cooperative
long duration
high cooperative
aggressive behaviors
high cooperative
elementary children
high cooperative
long duration
low cooperative
aggressive behaviors
high cooperative
younger children
A GIVEN TYPE OF TRAINING