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ABSTRACT While numerous parent-training programs have been developed over the years, few systematically address the unique difficulties of single-parent families. A 10-week training program, "Parenting Alone Successfully (PALS)," was designed to assist single parents encountering difficulties in the management of their children's behavior. This consumer-oriented program sought to address the needs of single parents who responded to a questionnaire about their problems and parent-training program needs. Parents learned several behavioral interaction skills during weekly consultations with a trainer. The parent and trainer planned treatment strategies for problems and goals identified in the sessions. Results of the evaluation show a decrease in children's problem behavior and an increase in parents' use of praise and teaching skills in the structured setting of the program. (Author/CS)

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Evaluating the Effectiveness of a Training Program
for Single Parents

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During the past decade the single-parent family has become a much more common family form. Recently the Census Bureau reported that the number of families with only one parent had jumped nearly 80% in the past ten years, and it has been estimated that four out of every ten children born in the 1970's will spend a part of their childhood in a single-parent family (Bane, 1976).

While the negative effects of single-parent family membership have been emphasized throughout the literature, few family intervention programs have been designed to address the unique treatment needs of the single-parent family.

Given this apparent need for specialized services or modified programs for single-parents (Woody, 1977; Blechman & Manning, 1976) nearly three years ago, a colleague and I at the Boys Town Center for the Study of Youth Development began developing a parent training program for single-parents who were having difficulty managing their children's behavior. Our goals were: 1) to develop a program which was consumer-oriented, that is, one which was developed with consumer input and which tried to meet the needs of the consumers and 2) to design a program which incorporated both the behavior management techniques typically taught to parents such as time-out, differential attention, and token economies and the teaching techniques developed by the Achievement Place Research Project at the University of Kansas and currently used by teaching-parents in over 150 Teaching-Family group homes nationally (Phillips, Phillips, Fixsen, & Wolf, 1974). Regarding this second goal, we specifically wanted to adapt some of the Teaching-Family technology that is available to teach parenting skills to teaching-parents to single-parents who have problem children.

Consumer Orientation

Our first goal of consumerism was based on the assumption that a training program would be more successful if input regarding the needs, interests, and goals of its potential consumers is solicited and used during the developmental stages of the program. It was our intention therefore to adapt the program design to the participants' needs rather than to "mold" the participants to fit a basic program.

To meet this first goal we needed to define the unique or special needs of the single-parent and design techniques for integrating these into the total training package. To help accomplish this we decided to ask single-parents about both the kinds of child related problems they were having and the other difficulties or problems they were experiencing, such as financial, social, and time-management problems. Using a written questionnaire we asked nearly 100 single-parents in the Omaha area about the kinds of difficulties they faced and the type of parent training program, if any, they would find useful. We then used this information in the development of a training program we called "Parenting Alone Successfully," or PALS for short.

Behavior Technology

PALS was designed to address the families problems at two levels. First, the children's behavior problems and the parents' difficulties with child management were addressed by teaching the parents a number of behavioral interaction skills and a specific interaction style. And secondly, we tried to directly and systematically deal with some of the specific difficulties and problems of the single-parents which we saw as potential obstacles to successful parent training.

Our goals were to teach parents skills that would allow them to decrease their children's undesirable behavior, increase desirable behavior, and prevent future problems from occurring and to teach the parents skills that would help them modify some of their other problems that may be interfering with their attempts to implement the treatment procedures.

PALS. The PALS program combines the advantages of individual training and group training by including both weekly group meetings and individual consultation. The program therefore can provide individualized treatment programs while maintaining the economical advantages of group training.

The training consists of ten, weekly two hour group meetings (six to eight parents in a group) conducted by two trainer/consultants and brief, individual consultation sessions with each parent which occur immediately after each group meeting. The format of the group meetings includes: didactic instruction; open discussion; live and videotape demonstrations of "correct" and "incorrect" parent-child interactions; and structured role-playing practice of the interaction skills. A parent training manual with brief readings and home assignments is provided to supplement the weekly presentations.

During the program the parents are taught a variety of skills. These include: 1) observing and describing behavior; 2) counting and charting behavior; 3) teaching interactions; 4) differential attention; 5) time-out; 6) contracting; 7) developing motivation systems; 8) problem-solving; 9) relationship development; and 10) anticipating and preventing future problems. In addition, basic social learning principles are taught to the parents.

At the beginning of the program each parent is assigned to one of the two trainer/consultants for their weekly consultation sessions. During

these sessions the parent and the trainer develop treatment goals, plan the specific treatment strategies, identify problems and discuss and seek solutions to any problems of implementation that may be occurring. These sessions also give the trainers opportunities to praise and encourage the parents' efforts and accomplishments and to subjectively assess their progress.

Evaluation

The final component of the PALS program is program evaluation. Along with the development of a specific training package, we wanted to develop assessment and evaluation procedures which could be used for both research and programmatic purposes.

Design and participants. To assess the effectiveness of the training program, a study using a multiple-baseline design across two groups of single-parents was conducted. Fourteen parents and their children who volunteered for the training program participated in the study. They were selected on the basis of six criteria.

First, the parent was a single-parent. Second, the target child or children resided with them. Third, the child(ren) was reported by the parent to be exhibiting problem behavior. Fourth, the parent reported difficulty with child management. Fifth, the parent or the child(ren) was not currently involved in any other treatment program. And sixth, the parent gave his or her informed consent to participate in the research. The parents meeting these criteria were then assigned to one of two training groups on the basis of their availability to attend the meetings on the scheduled evenings.

Insert Table 1

Six parents participated in the first training group and eight in the second. The parents in Group I ranged in age from 25 to 34 with a mean age of 32 years, while those in Group II ranged from 28 to 50 with a mean age of 37 years. There were five females and one male in Group I. In Group II there were seven females and one male. Since all but three of the parents joined the training program because of concern about the problem behavior of more than just one child in their family, all such children were included in the study. There were 14 target children in Group I and 17 in Group II. The ages of the children in Group I ranged from 3-1/2 to 16 years with a mean of 7-1/2 years. The age range for Group II was 2-1/2 to 13-1/2 years with a mean of eight years. All of the parents in both groups were divorced. The average length of time as a single parent was 27 months for Group I (range 15-42 months) and 30 months (range 8-78 months) for Group II. The annual income (including any alimony, child support and welfare payments) for all 14 families ranged from approximately \$5,000 to \$15,000.

Goals and measures. Our primary questions in this study were:

First, could we effectively teach parents to use the behavioral interaction skills?

Second, would there be any differences in the parents' interactions with their children following the training?

Third, would there be any differences in the children's behavior following the training program?

And fourth, would there be any differences in the parents' satisfaction with parenting-related issues after the training?

To help answer these questions, four different assessment procedures were used. These included: 1) videotapes of the parents interacting with a confederate; 2) videotapes of the parents and their own children in structured interactions; 3) a problem behavior checklist; and 4) a satisfaction questionnaire. Each of these measures was administered at three different points in time--before Group I began the training program; after Group I completed the ten week training; and after Group II completed the training. In addition, the behavior checklist and the satisfaction questionnaire were administered again during a follow-up period one year later.

To help answer our first question--would the parents learn to use the interaction skills--we videotaped the parents as they interacted in a number of simulated problem situations with a confederate. A child we had trained to engage in a number of specific inappropriate behaviors acted as the confederate. All of the videotaping was done through a one-way mirror into an observation room which was decorated to simulate a home-like setting with tables, easy chairs, a sofa, and such items as toys, books and magazines. Prior to the taping the parents were told to interact with the confederate child as if she was their own child. They also were given brief general instructions to help set up the situations. For example, the instructions for one situation read: "Your child has been working on her homework for over 30 minutes and appears to be having trouble with it. You go to see what the problem is."

This procedure, involving simulated problem situations, was used because it afforded us the opportunity to observe the parents in standard interactions and observe their responses to certain problem behaviors. It

guaranteed that opportunities for the parents to respond to inappropriate child behaviors would occur during the observation periods. That of course, is not always possible when you are observing parents and their own children whether in their own home or in a lab setting. As I mentioned earlier, we used this procedure to assess only if the parents had learned the skills and not if they could use the skills when interacting with their own children.

The problem situations were designed to measure the parents' use of a specific interaction skill known as "the teaching interaction." The teaching interaction is basically a series of specific steps or components used to change problem behavior by directly interacting with and teaching the child. It was originally developed in the 1960's through research and application at the Achievement Place Research Project and Group Home at the University of Kansas and is used primarily as a method to change and prevent problem behaviors of delinquent and predelinquent youth (Phillips, Wolf, Fixsen, & Bailey, 1975; Phillips, Phillips, Fixsen, & Wolf, 1974). The teaching interaction has been found to be effective in teaching a variety of social skills to group home youth (Timbers, Timbers, Fixsen, Phillips, Phillips, & Wolf, 1973; Maloney, Harper, Braukman, Fixsen, Phillips, & Wolf, 1976), as well as an effective tool for parents to use to change their own children's behavior (Daly, Davis, Daly, & Fixsen, 1977) and for teachers to use in classroom management. Rather than punishing or ignoring the inappropriate behavior, the teaching interaction is an active, positive approach designed to teach and encourage the alternative, appropriate behavior and discourage the inappropriate behavior.

Specifically, the teaching interaction consists of nine components.

These are:

- 1) Starting the interaction in a pleasant, calm manner and providing initial praise or an expression of affection.
- 2) Describing the appropriate behavior.
- 3) Describing the inappropriate behavior.
- 4) Demonstrating and describing the new skill or alternative behavior.
- 5) Giving rationales.
- 6) Asking for acknowledgement.
- 7) Actively involving the child through practice.
- 8) Providing feedback concerning the practice.
- 9) Providing encouragement through praise and rewards.

The videotapes were scored by a trained rater who observed the parents on the tapes and recorded the occurrence or nonoccurrence of each of the nine components. Precise criteria for each component were described in advance. A second rater observed over one-third of all the tapes and the percentage of agreement for each component ranged from 83% to 98% with a mean of 92%.

Results

 Insert Figure 1

Parents' Teaching Skills

Figure 1 shows the mean percent of teaching interaction components demonstrated by the parents in both groups before and after training. Before the first training program, both Group I and Group II demonstrated an average of 15% of the components. Following their training, the average percent of components demonstrated by the parents in Group I increased to

74%. During their second pre-training taping, Group II demonstrated an average of 24% of the components. After completing the ten week program, Group II then demonstrated an average of 76% of the components. At this same time, four months after their own training, Group I demonstrated an average of 80% of the components.

Thus, in answer to our first question --did the parents learn to use the skills--the data show clear improvements in the demonstration of the teaching components by both groups following training. It is interesting to note that very similar pre- and post-training scores are demonstrated by teaching-parents from Teaching-Family group homes during their own preservice workshops (Maloney, Bedlington, Maloney, & Timbers, 1974; Daly, Daly, Kane, & Kane, 1978).

Parents' Interaction Skills

To answer our next question regarding the impact of the training on the parents' interactions with their own children, we videotaped the parents while they interacted with their own children in structured situations. During each of the three data collection periods we asked each parent and one of their children to spend approximately one-half hour engaged in a series of standard structured activities in the observation room. This was the observation room described earlier. During these situations, the parent gave his or her child a number of brief instructions such as "Please put away the toys you are playing with." They also taught the child a specific skill; worked with the child on a cooperative task, such as making up a grocery list; and discussed a problem behavior with the child and how to deal with it in the future.

This procedure allowed us to look at four important dimensions: 1) the child's compliance or noncompliance to the instructions; 2) the parent's response to compliance; 3) the parent's use of the teaching skills; and 4) the child's appropriate and inappropriate behavior throughout the session.

The parents' responses to compliance were of special interest to us since one of the goals of the training program was to teach the parents to attend to appropriate behavior, such as compliance. The parent's response to compliance was scored by an observer who viewed the tapes and recorded the parent's behavior following the child's compliance to an instruction. Response categories included providing praise, statements giving negative criticism, repeating the instruction, giving a new instruction, physically interacting with the child, providing other verbal attention, and ignoring or no response.

Insert Figure 2

Figure 2 shows the mean percent of the parents' responses to compliance that were praise statements. The top graph shows Group I's praise responses before and after training. Group II's responses during these same observation periods are shown on the lower graph. As you can see, the percentage of Group I's praise responses that were praise statements increased from an average of 16% before training to an average of 53% immediately after training. Four months following their training their praise responses decreased to an average of 36%. However, this average was still over twice their pre-training response level. The average percentage of praise responses for Group II was approximately 16% and 12% during their two pre-training tapings and increased to 46% following training. Prior to

training, the most frequent response to compliance for both groups of parents was ignoring, or not responding to the child's behavior.

Thus, the data show some definite changes in the parents' responses to compliance following training and provides us with some evidence that there were changes in the parents' interactions with their children. As I mentioned earlier, measures of children's compliance also were recorded from these tapes. Although their data are not shown here, compliance was generally high during all three data collection periods, but did increase following training for both groups.

Changes in Child Behavior

While the data do show some clear improvements in the parents' behavior, a crucial and very fundamental question in parent training research is whether the children's behavior changes as well. We used two different measures to assess changes in the children's behavior. First, as I indicated earlier, raters observing the videotaped parent/child structured interactions recorded the child's behavior. Using a ten-second interval time sampling procedure, the rater recorded the child's appropriate and inappropriate behavior. Appropriate behavior included behavior such as following instructions without complaining, mumbling or arguing; playing during the designated play period; and talking with the parent in a normal tone of voice, without whining, yelling or complaining. Inappropriate behavior included whining, tantruming, yelling, crying, hitting, noncompliance, throwing or destroying toys, and playing during times other than the play period.

Insert Figure 3

The graphs displayed in Figure 3 show the mean percent of ten-second intervals during which the children's behavior was inappropriate. During baseline, before training, inappropriate behavior occurred during an average of 29% of the intervals for Group I and 16% and 17% for Group II. When this is computed as the rate of inappropriate behavior per minute the baseline rates are 1.74 occurrences per minute for Group I and .98 and 1.04 occurrences per minute for Group II. Following training, Group I's inappropriate behavior decreased to an average of 7% and 5% or an average rate of .4 and .3 occurrences per minute. There was a similar decrease in Group II's inappropriate behavior to an average of 5% of the intervals or a rate of .3 occurrences per minute.

The second measure used to assess changes in the children's behavior was a problem behavior checklist. Parents filled out a checklist for each of their children, indicating which of the 39 behaviors, if any, the child engaged in during the previous three months, and which behaviors the parent considered to be problems.

This instrument was designed to assess a number of common, problem behaviors, many of which could go unobserved during typical direct in-home or laboratory observations. Included in this list were common behavior problems such as whining, noncompliance, temper tantrums and fighting, as well as certain time-related or restricted problem behaviors such as going to bed at night, mealtime problems, getting up in the morning, and school-related problems.

Insert Figure 4

Figure 4 shows the average number of problem behaviors reported by the parents before and after training. In addition to the three regular data

collection periods, the parents filled out the checklist a fourth time, during a follow-up period one year later. Before training, the parents in Group I reported an average of 10.9 problem behaviors per child while parents in Group II reported an average of 6.9 and 7.2 problem behaviors per child. After training, reported problem behaviors decreased considerably to an average of 3.9 and 2.2 per child in Group I and to an average of 3.1 per child in Group II.

One-Year Follow-Up

Because this assessment instrument was easily and economically administered and correlated well with more objective data, we used it during the follow-up period which due to time and economic restraints necessitated the use of a less costly data collection procedure. The follow-up checklist and other written questionnaires were mailed to each of the parents in both groups. All but two of the fourteen parents returned the materials. Both of these parents were in Group II and had moved, leaving no forwarding address or phone number. During the follow-up period the parents in Group I reported an average of 3.4 problem behaviors per child, slightly up from the last report but still lower than their immediate post-training report. Group II reported an average of 3.7 behaviors per child, a slight increase from their post-training report of 3.1. However, for both groups, the post-training changes in the children's behavior as reported by the parents had been maintained for one year.

Parent Satisfaction

To help answer our final question regarding the parents' satisfaction with certain parenting-related issues, we asked the parents to rate their

satisfaction with: 1) their ability to manage their children's problem behavior; 2) their ability to teach their children; 3) their relationship with their children; and 4) being a single parent. A seven point, Likert-like scale was used to rate their satisfaction. A rating of seven corresponded to "completely satisfied" and a rating of one to "completely dissatisfied." This measure, like the behavior checklist, was administered during the follow-up period as well as during the pre- and post-training periods.

Insert Figure 5

As Figure 5 indicates, pre-training satisfaction ratings on question one--managing problem behavior--were an average of 2.3 or just above "slightly dissatisfied" for Group I and 3.75 and 4.1 or close to "neither satisfied nor dissatisfied" for Group II. The post-training ratings were 5.5 and 5.6 for Group I and 5.7 for Group II or close to "satisfied" for both groups. One year later almost identical ratings were given by both groups (5.5 for Group I; 5.8 for Group II). Similarly, their satisfaction with their ability to teach their children increased following training (4.2 pre to 5.7 and 6.0 post for Group I; 5.1 and 4.8 pre to 5.9 post for Group II) and this increase was also maintained one year later. The parents' satisfaction with their relationship with their children also increased following the training program (4.2 to 5.2 and 6.4 for Group I; 5.3 and 5.3 to 6.5 for Group II). However, one year later ratings by both groups had decreased. Group I's average rating of 5.8 was still above its first post-training rating but Group II's rating of 5.3 was identical to its pre-training ratings.

The final satisfaction question we asked--"How satisfied are you being a single parent?"--showed some questionable changes. Average ratings before training were 4.0 for Group I and 5.4 and 5.0 for Group II. Immediately following training, Group I's average rating increased only one-half point to 4.5 while four months later it increased to 5.8 while Group II's rating increased one point to 6.4. One year later Group I's rating increased to 6.0 while Group II's decreased to 5.8. Without further information, it is impossible to determine if the training program or other outside factors such as their social lives, jobs, etc., or a combination of both influenced the ratings on this question. Although we asked for comments on their ratings, most parents did not give enough information for us to determine which factors or events were responsible for the changes on this question.

The greatest changes were reported in the parents' satisfaction with managing problem behavior. Although, neither group was "completely satisfied" with their abilities, we were extremely encouraged by the changes reported.

Normative Information

During the time we collected the follow-up data, we conducted a small study of what we called "normative" two-parent families. While we initially recruited these parents for a social validation study of our training program, we also collected data from them on parent training issues, their children's behavior, and their ratings on satisfaction questions. Data were collected from 21 parents, six men and 15 women, recommended to us by parent interest groups from local schools and organizations. In addition to being active in child-related activities, to

participate in this study, the families (parents and children) had to have no prior history of involvement in treatment programs for child-related behavior problems. This was, by no means, a large study of randomly selected "normal" families. However, we found the data from these 21 parents interesting, especially when compared with the data from the 14 single-parents in the study.

Insert Figure 6

Figure 6 compares the average number of problem behaviors reported by the single parents with the average number reported by the "normative" parents. The horizontal line on the graphs represents the "normative" parents. The "normative" group reported an average of 2.18 problems per child--the exact number the parents in Group I reported during their second post-training assessment. When all the pre, post and follow-up reports by the single parents are compared to this "normative" sample it is clear that the post-training and follow-up reports of problem behavior are very close to the normative group. Due to the small sample sizes in both studies it is, of course, quite premature to make any definitive conclusions or implications from these data. However, it is interesting to note that the parents who completed the training program reported a similar number of problems after training as those parents, who by their own and others' reports, were experiencing few problems with their children.

A comparison between the satisfaction ratings reported by the single-parents and those reported by the "normative" parents is shown in Figure 7.

Insert Figure 7

The bar graphs represent the single-parents and the horizontal lines represent the "normative" parents. As I mentioned earlier, the ratings are based on a seven point scale (7 = completely satisfied, 1 = completely dissatisfied).

Looking at the average ratings for each question, we find that the ratings by the "normative" parents are higher than the pre-training ratings by the single-parents on all four questions. However, following training the single-parents' ratings of their satisfaction with "managing problem behavior" are higher than the "normative" parents. The post-training ratings by the single-parents on the remaining three questions are quite similar to the "normative" parents.

Again, we found these comparisons interesting because it appeared that the parents who participated in the training program were as satisfied as the normative group in three of the four areas and were more satisfied in the area of child management.

Conclusion

Although the data I have presented indicate that changes were made by the parents, without directly observing the parents and their children in natural settings and interactions we cannot be sure that they are actually using all of the skills in everyday interactions.

We do however, have evidence that the parents learned the skills, were able to use them with their children in a structured setting, that the children's behavior improved, and that the parents were more satisfied with certain parenting areas. In addition, there were other indications that the parents liked the program and found it useful. The consumer feedback

we received throughout the program was very positive and there were no dropouts and very few absences throughout the two programs.

Although we answered the questions we originally posed, our research seemed to stimulate many more. One question we would like to investigate concerns the basic content of parent training programs--what we actually teach parents to do. Are the techniques we teach parents normal and natural interaction skills? Are we teaching parents to change their interaction styles--the general ways they interact with their children--or, are we teaching them only to "plug in" a management technique when a problem behavior occurs? Could we, as researchers, do a better job of analyzing natural parent-child interactions and relationships so that we can feel confident that the programs we develop teach parents to interact in ways that are similar to those seen in nonproblem families?

Another area for inquiry concerns an issue we tried to address in our program--that of program implementation. We first need to develop ways to determine the extent to which parents are using the skills in their everyday interactions and if they are not, what interferes or prevents them from doing so? Is it that old ways of doing things are hard to give up, or are there other interfering factors such as time organization or personal priorities that make old ways easier?

If it is true that single-parent families face more problems than two-parent families, then there are also probably more outside factors interfering with their attempts at child management. Learning what these factors are and how they can be reduced seems to be an important topic for future research.

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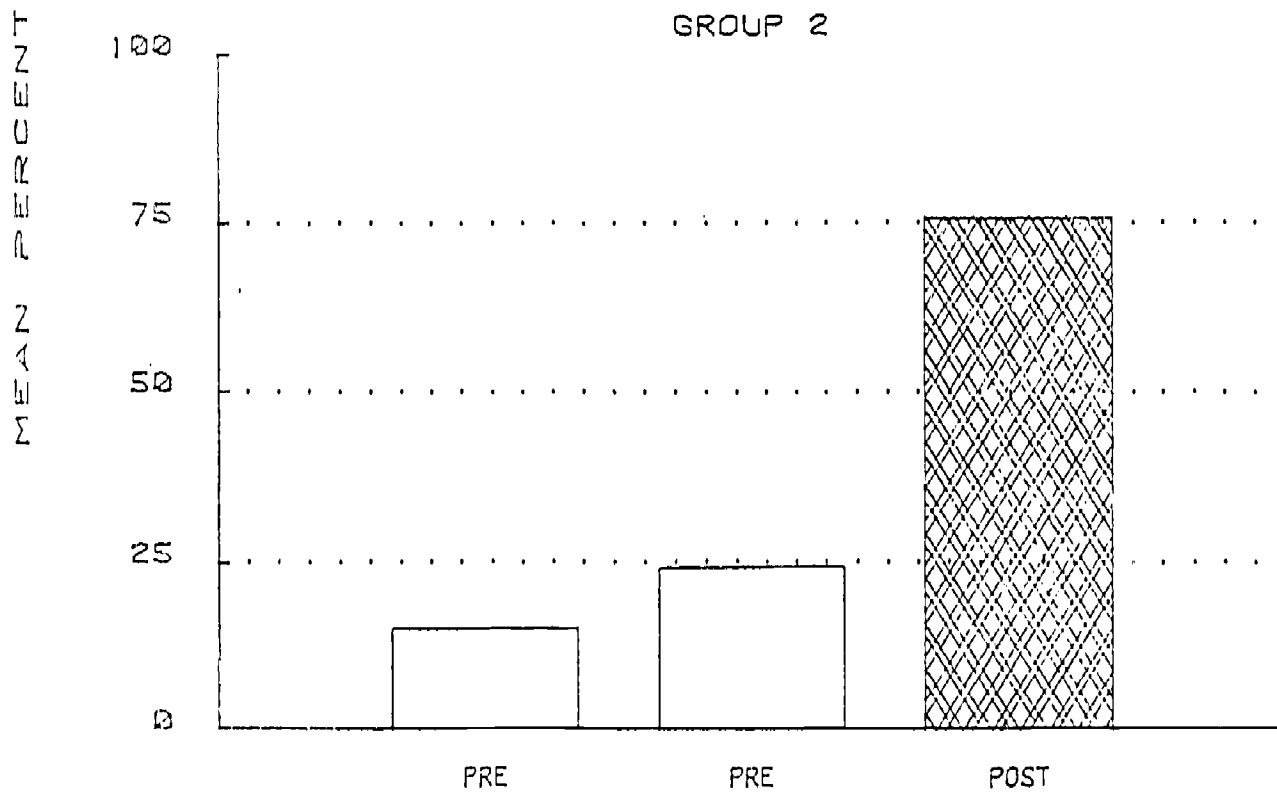
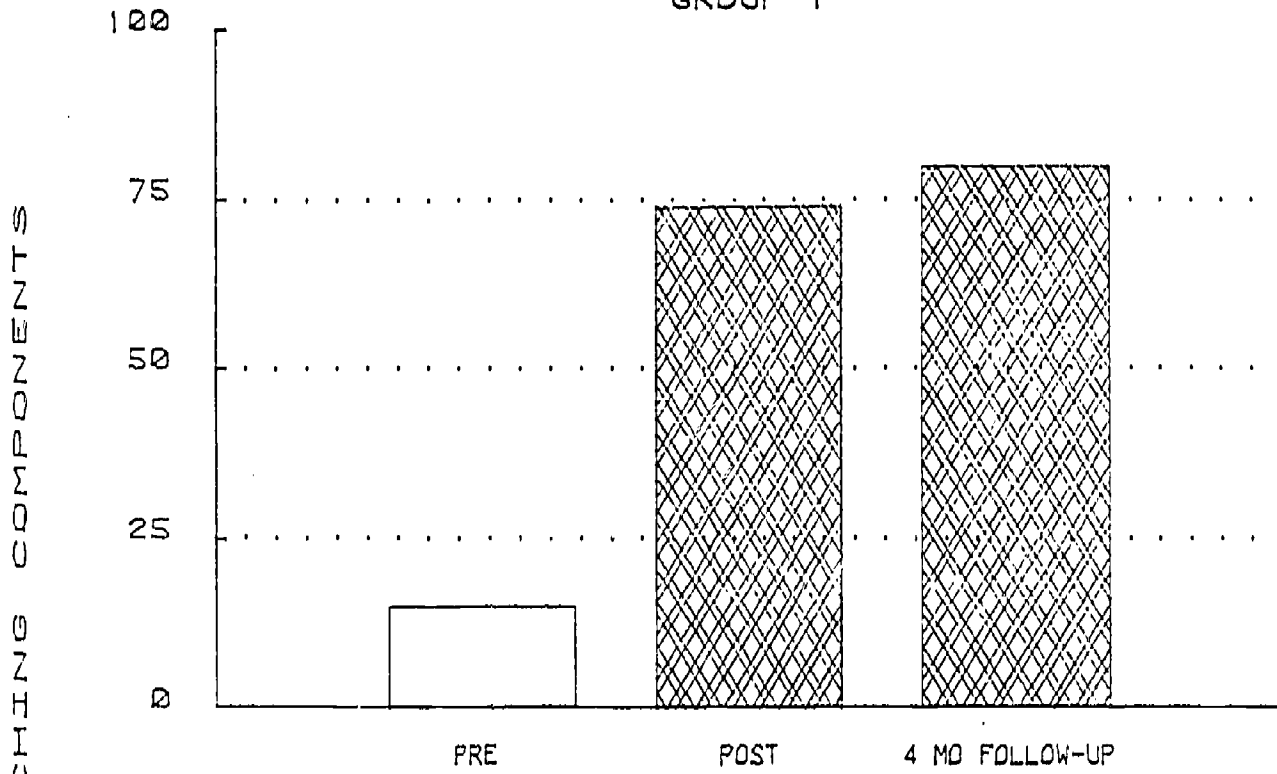
We wish to give special thanks and acknowledgement to Dr. Dean Fixsen, Dr. Dennis Maloney, and Dr. Karen Maloney for their support, input and helpful feedback throughout this research project.

Table 1

Parent Characteristics

	Group I N = 6	Group II N = 8
<u>AGE</u>		
Range	25 - 34	28 - 50
Mean	32	37
<u>SEX</u>		
Female	5	7
Male	1	1
<u>NUMBER OF CHILDREN</u>		
	14	17
<u>AGE OF CHILDREN</u>		
Range	3-1/2 - 16	2-1/2 - 13-1/2
Mean	7-1/2	8
<u>LENGTH OF TIME SINGLE</u>		
Range	15 - 42 months	8 - 78 months
Mean	27 months	30 months
<u>ANNUAL INCOME</u>		
Range	\$5,000 - \$15,000	\$5,000 - \$15,000

TEACHING COMPONENTS DEMONSTRATED BY PARENTS
GROUP 1

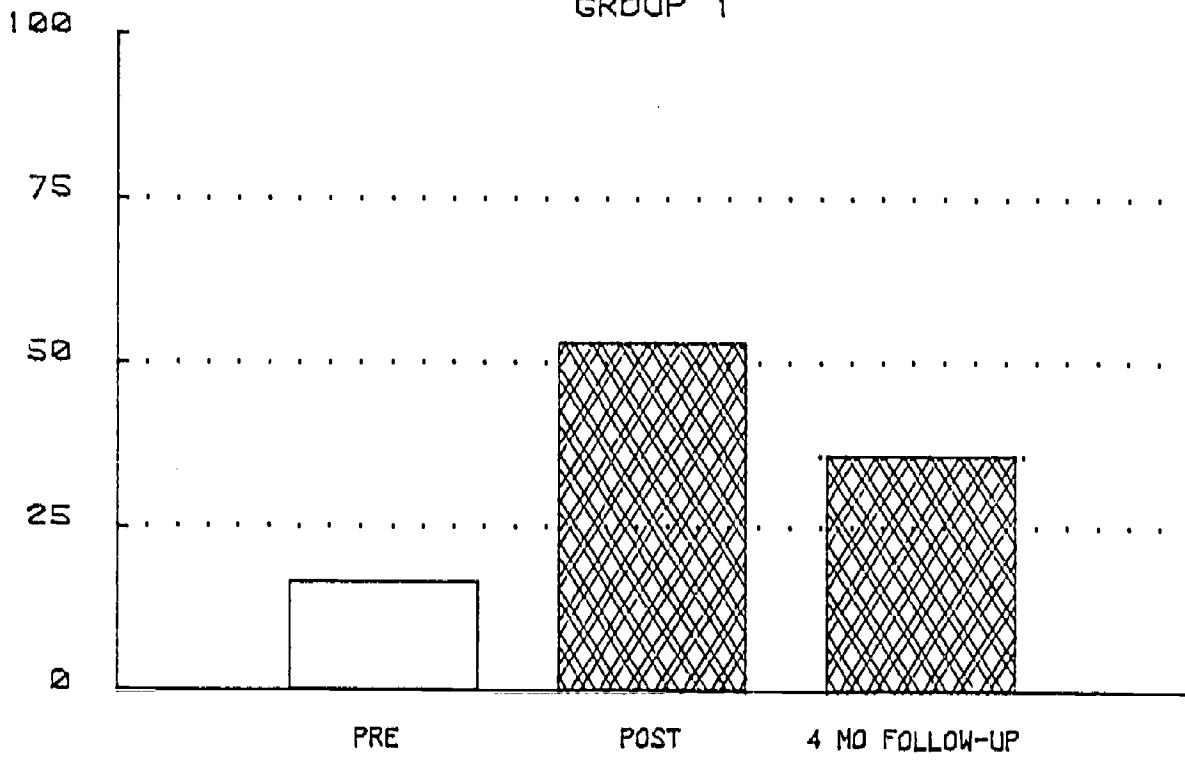


Legend
 □ PRE TRAINING
 ▩ POST TRAINING

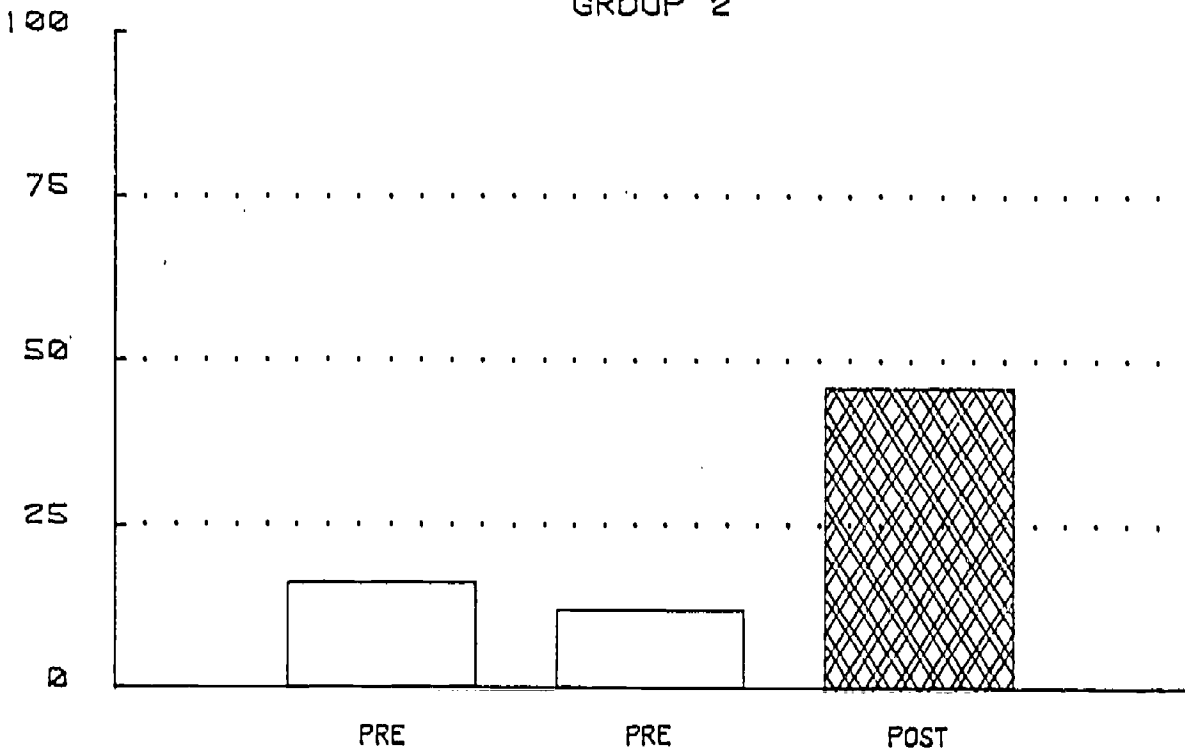
OBSERVATIONS

Figure 1



PARENTS RESPONSE TO COMPLIANCE
GROUP 1



GROUP 2



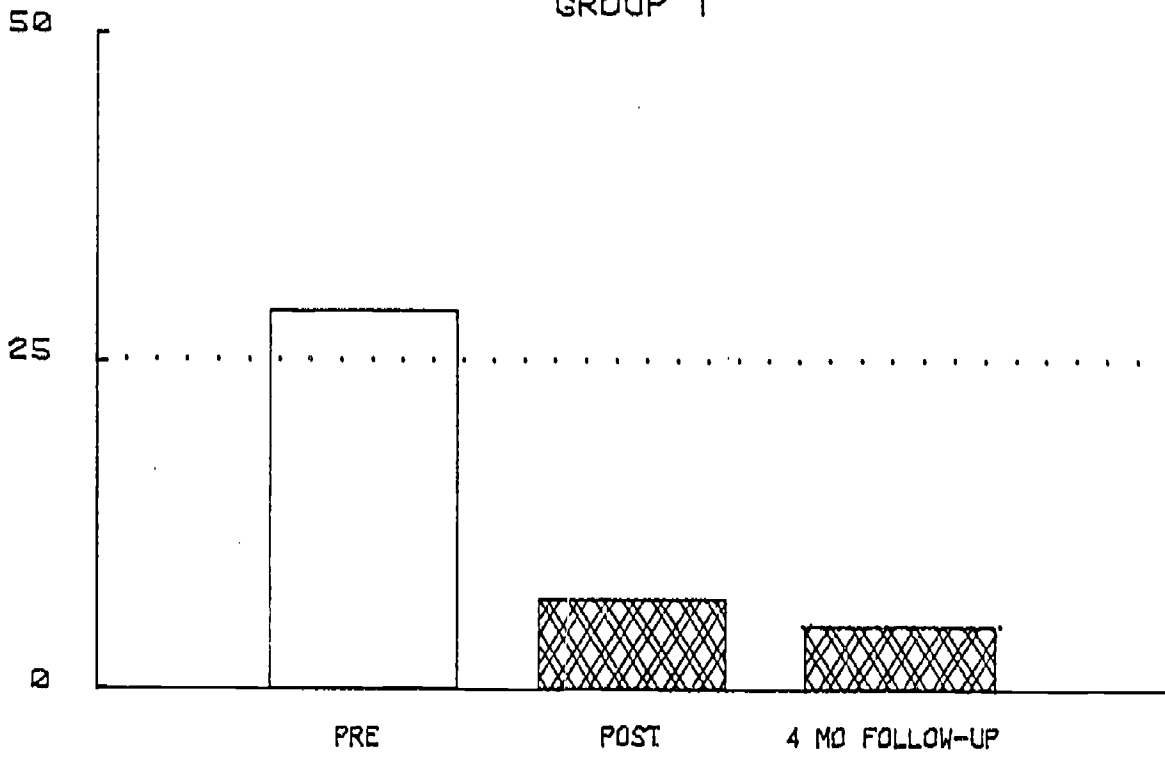
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-  PRE TRAINING
-  POST TRAINING

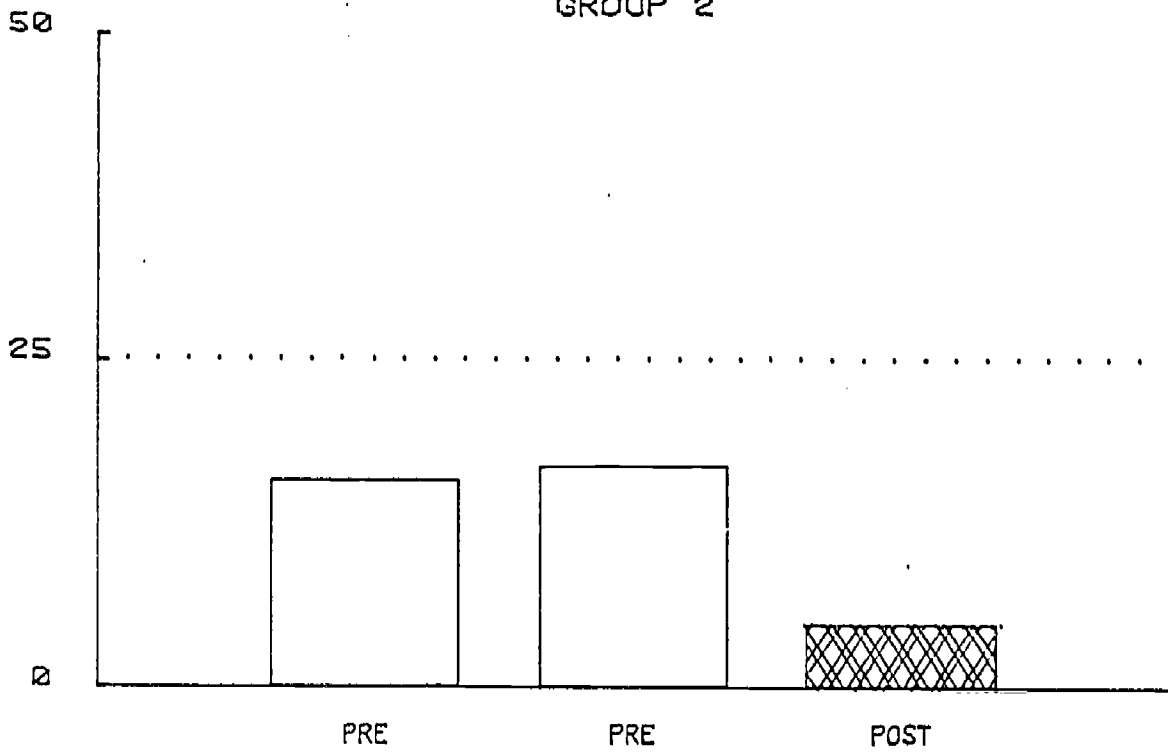
OBSERVATIONS

Figure 2

INAPPROPRIATE BEHAVIOR DURING INTERACTIONS
GROUP 1



GROUP 2



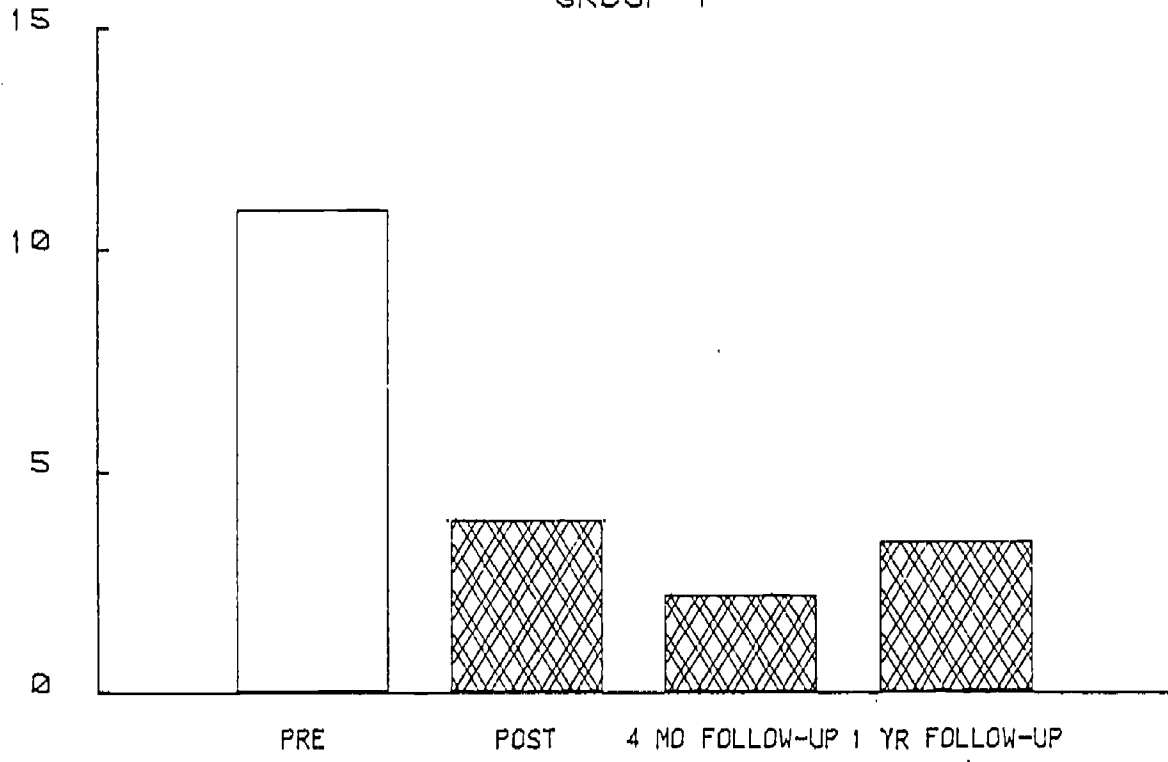
Legend

- PRE TRAINING
- POST TRAINING

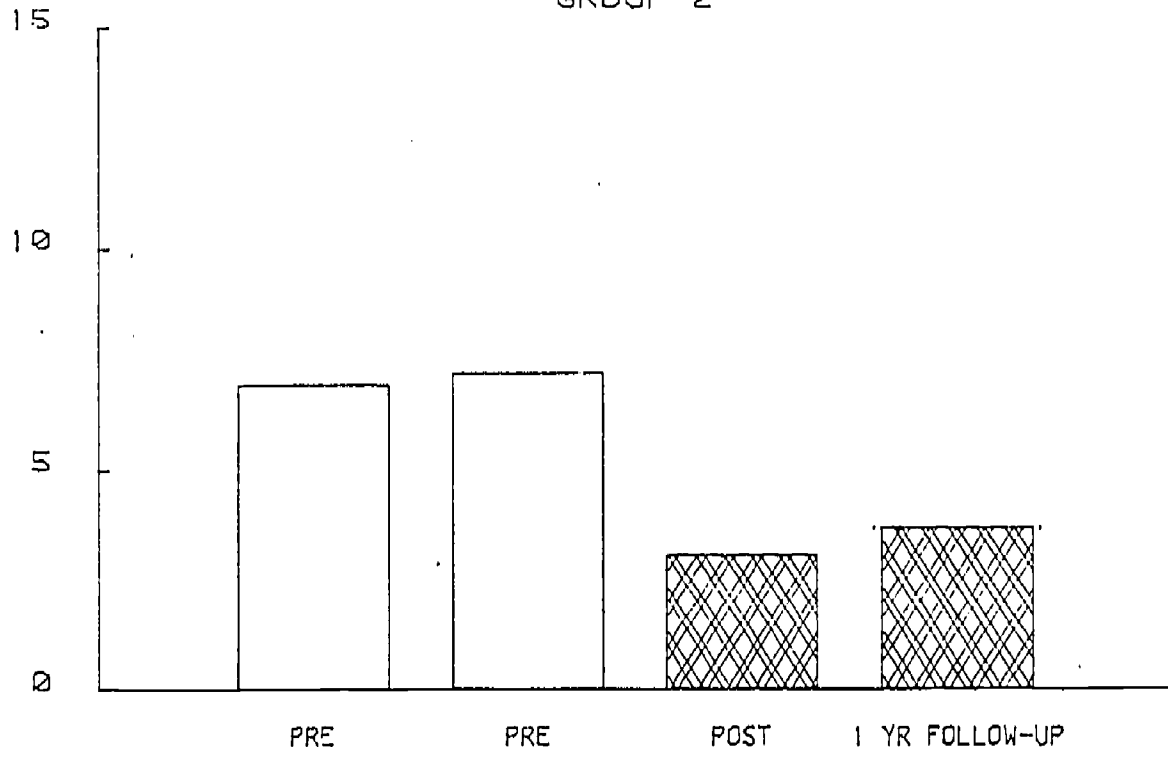
OBSERVATIONS

Figure 3

CHILDREN'S PROBLEM BEHAVIOR REPORTED BY PARENTS
GROUP 1



GROUP 2

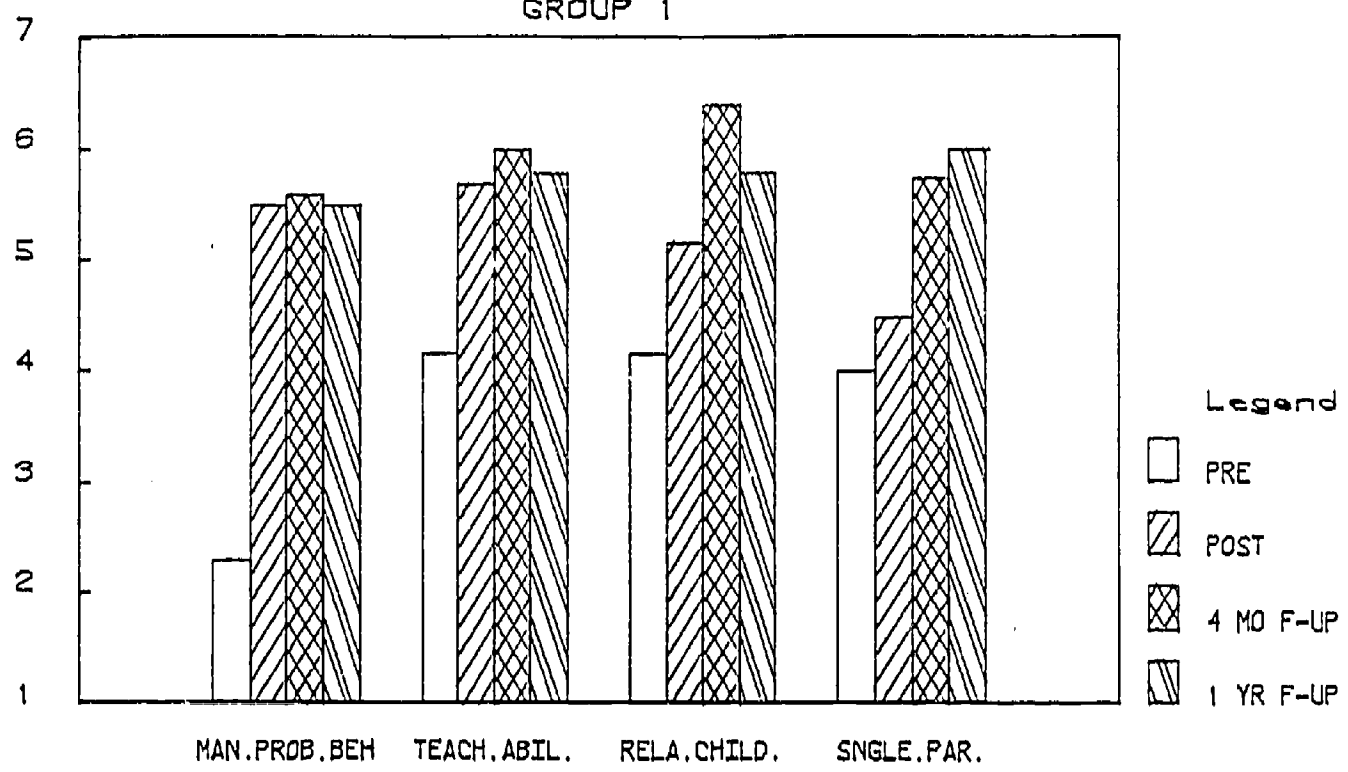


Legend
 □ PRE TRAINING
 ▨ POST TRAINING

OBSERVATIONS

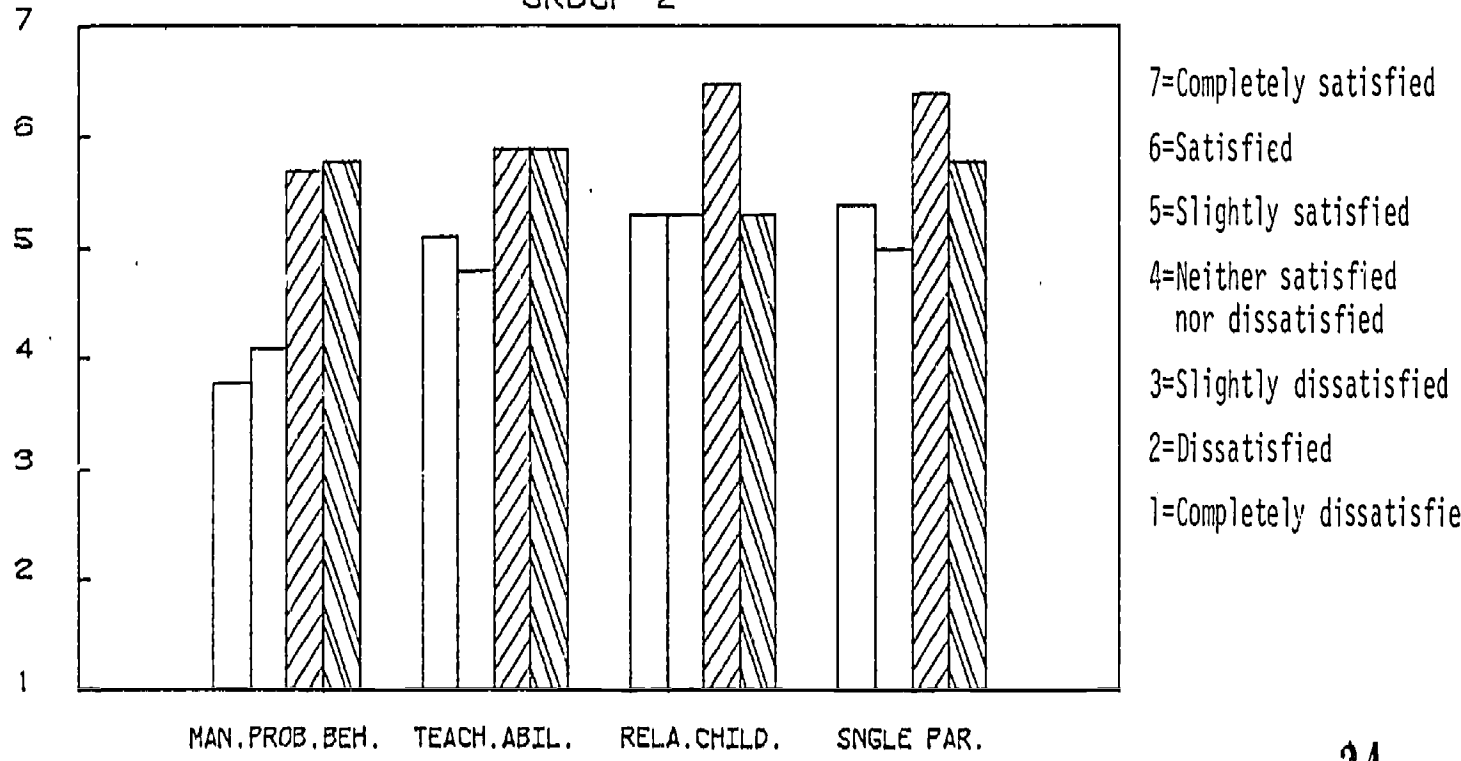
Figure 4

SATISFACTION RATINGS BY PARENTS
GROUP 1



MEAN RATING OF SATISFACTION

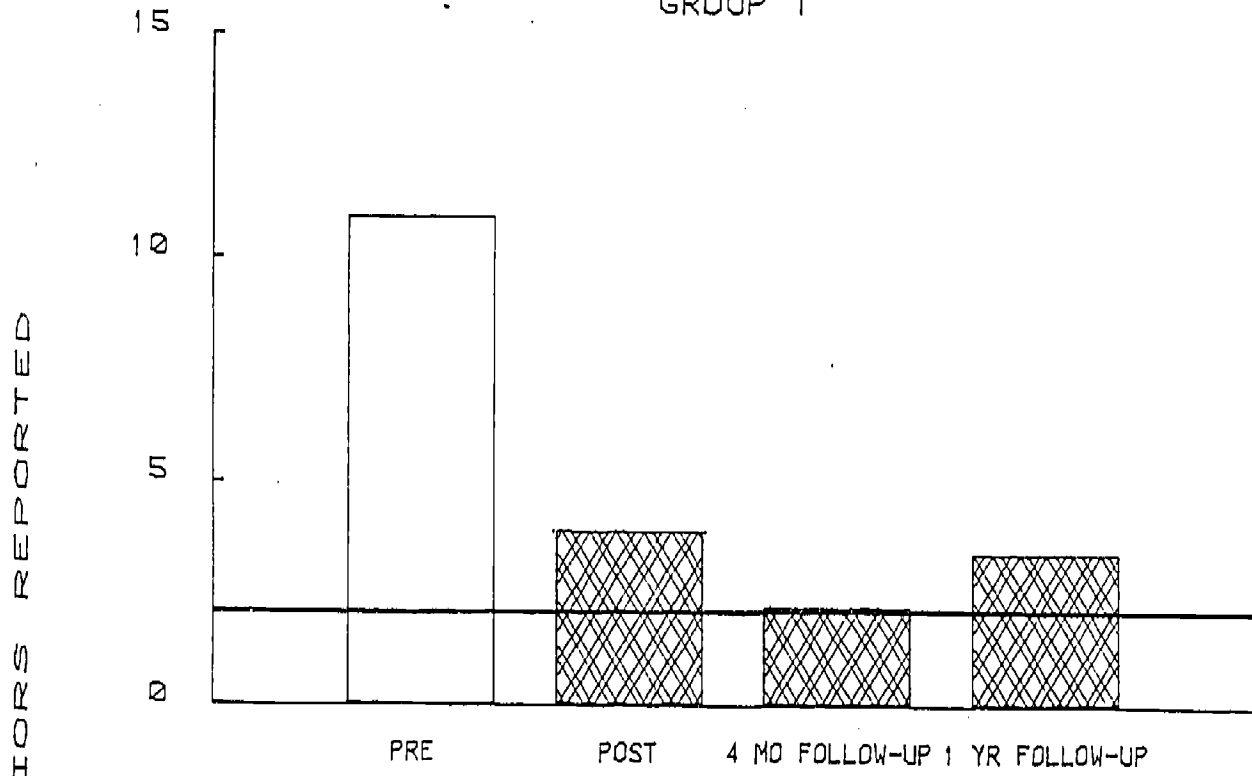
GROUP 2



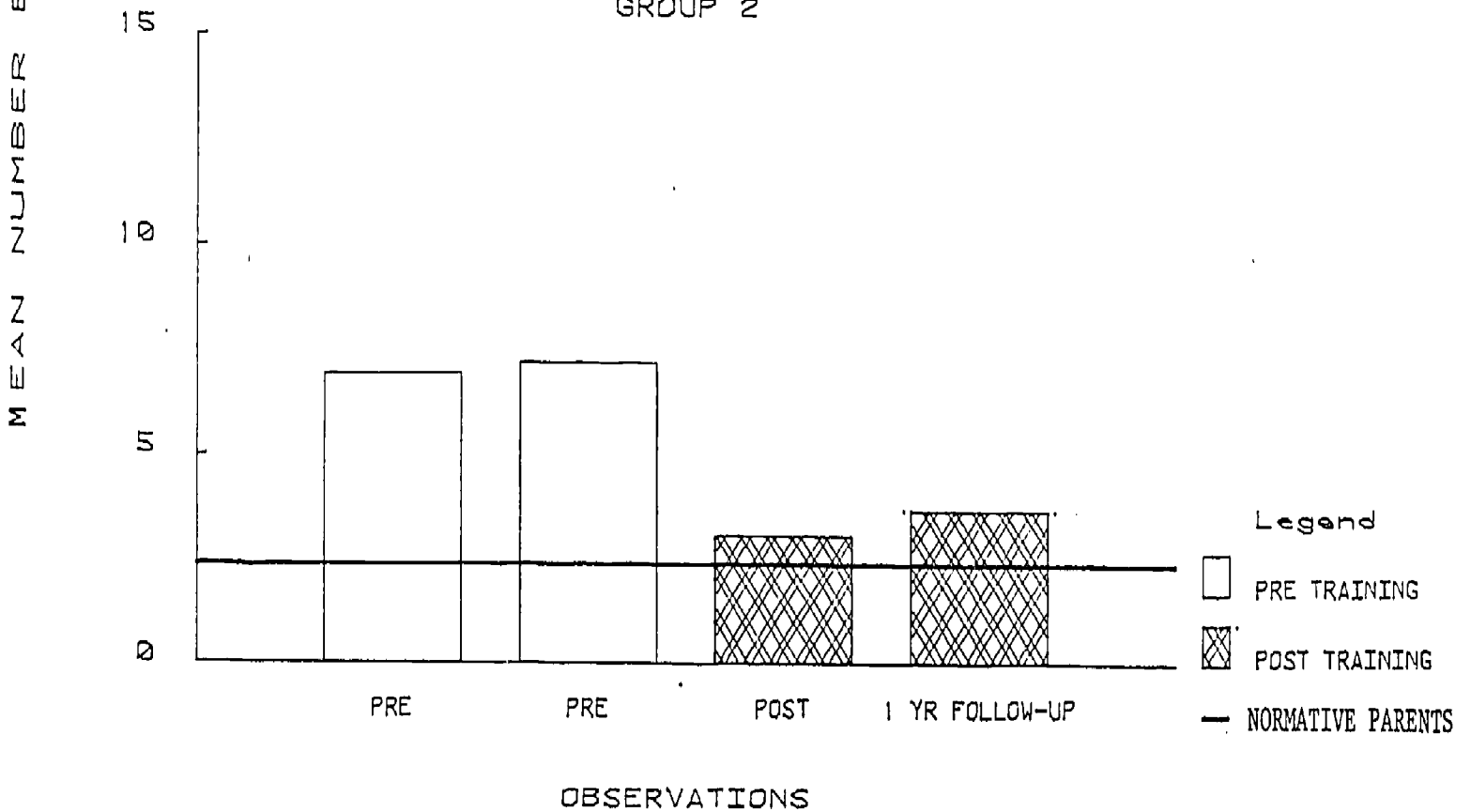
SATISFACTION QUESTIONS

Figure 5

CHILDREN'S PROBLEM BEHAVIOR REPORTED BY PARENTS
GROUP 1



GROUP 2

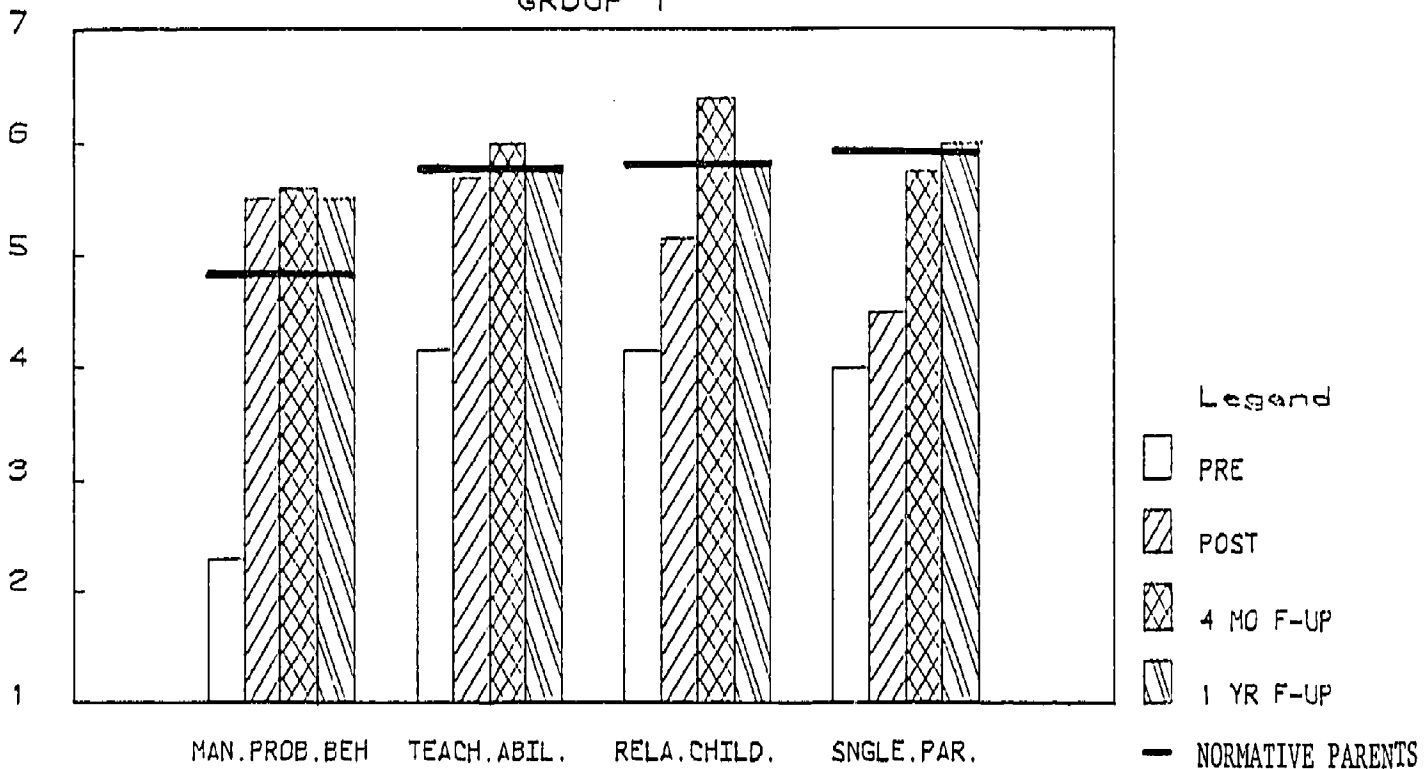


- Legend
- PRE TRAINING
 - ▨ POST TRAINING
 - NORMATIVE PARENTS

OBSERVATIONS

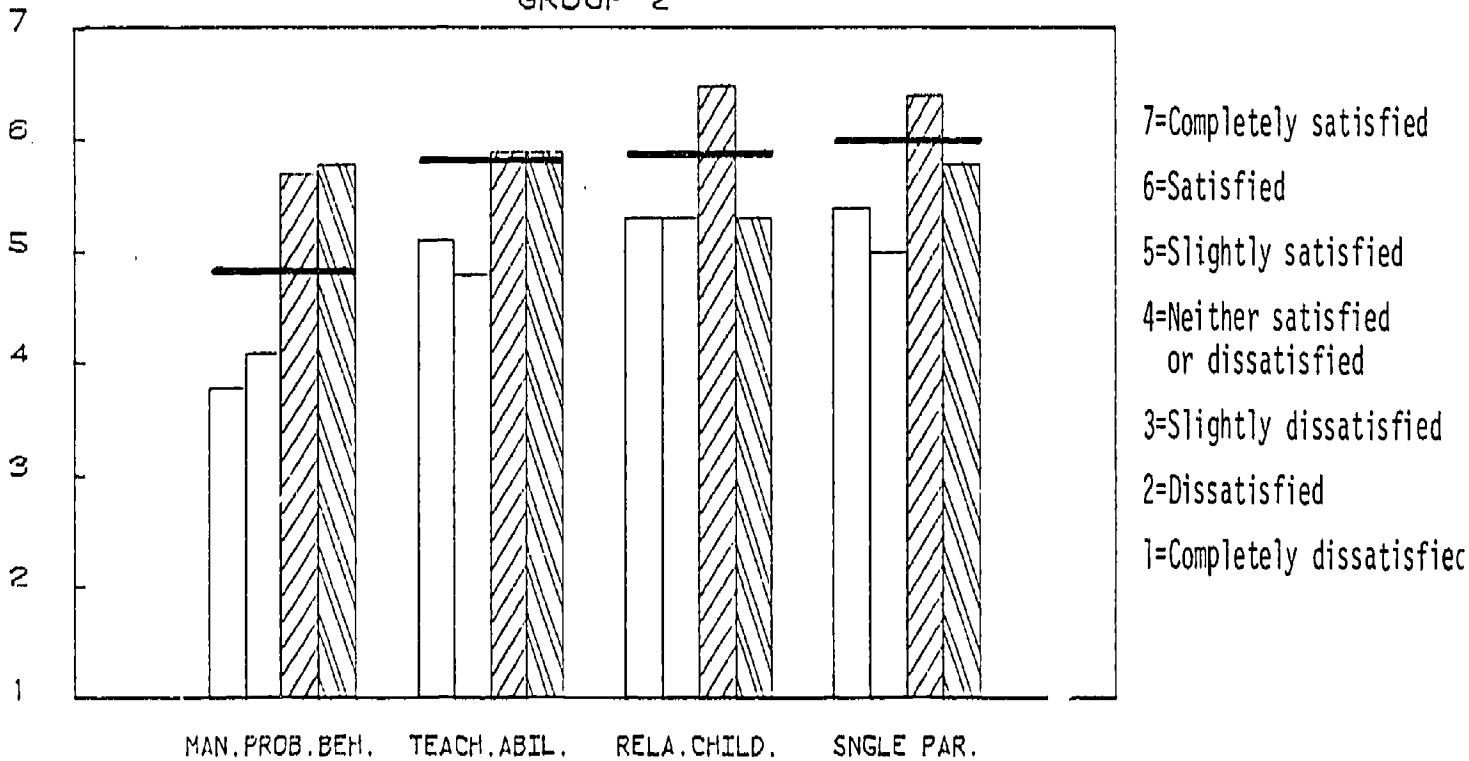
Figure 6

SATISFACTION RATINGS BY PARENTS
GROUP 1



MEAN RATINGS OF SATISFACTION

GROUP 2



SATISFACTION QUESTIONS

Figure 7