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ABSTRACT

This study was designed to determine whether children's knowledge and ability to solve problems about parenting and caregiving could be promoted by means of a school-based curriculum. The study took place over 2 years and involved 138 fifth graders the first year and 217 fifth and sixth graders the second. Subjects were divided into treatment and control groups. Results indicated that youngsters who attended the parenting and caregiving classes were significantly more knowledgeable about early childhood development than were other children. They also produced significantly more solutions to common parent-child problems. These findings suggest that school-based parenting and caregiving classes may serve as effective means to promote parental competence and prevent maltreatment of children. (MDM)

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Teaching Parenting

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Teaching Children about Parenting

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Abstract

This study was designed to determine whether children's knowledge and ability to solve problems about parenting and caregiving could be promoted via a school-based curriculum. Replicated results from two years of intervention with separate cohorts of fifth and sixth graders revealed that youngsters who attended "parenting and caregiving" classes were significantly more knowledgeable about early development. They also gave significantly more solutions to common parent-child problems and responded with more nurturant solutions when compared with control children. These replicated findings suggest that school-based parenting and caregiving classes may serve as effective means to promote parental competence and prevent child maltreatment.

Teaching Children about Parenting

Probably the most significant task confronting any society is the nurturance of future generations. There is good reason to believe that the roots of parenting and generative competence lie in children's own experiences of caregiving. Children's helping and nurturance is strongly influenced by the kind of childrearing they experience (e.g. Zahn-Waxler, Radke-Yarrow, & King, 1979). Moreover, the impact of these early caregiving experiences appears to extend into adulthood, when an individual's caregiving style becomes, in part, a reflection of the history of their relationship with their parents (Main, Kaplan, & Cassidy, 1985).

Increasing numbers of single parent households, isolation of nuclear families, and decreases in intergenerational contact mean that larger numbers of children have limited access to optimal models of parenting and are therefore less likely to be prepared to provide quality caregiving when they become adults. Children today typically experience and tacitly learn about parenting and caregiving from one, perhaps two, caregivers. Under the worst of circumstances this limited range of parent-child interaction provides children with violent, authoritarian styles of

caregiving that can continue across generations (Parke & Collmer, 1975).

This presentation describes an evaluation of a school-based program designed to teach children about early development, caregiving and parenting. The goals of the program are to enhance children's understanding of the caregiving role and, ultimately, to prevent the long-term impact of poor early childrearing experiences (e.g. child abuse and neglect). This first stage of evaluation was designed to determine whether such an effort could broaden and promote children's ability to solve common parent-child conflicts.

Findings are based on two years of intervention with two cohorts of youngsters. In each year we predicted that, when compared with control youngsters, children attending Education for Parenting classes would; 1) show enhanced knowledge of early child development, 2) be able to generate more solutions to common child-parent problems, and 3) generate more nurturant and fewer physically violent parenting responses to these same parent-child conflicts. It is our premise that such cognitive changes would serve as a first step toward more effective caregiving and parenting.

Participants.

In year 1, fifth graders from three school districts participated: New York City, Philadelphia and suburban Philadelphia. There was one treatment classroom and one control classroom in each school, with 67 students in the treatment group and 71 in the control group.

In year 2, fifth and sixth graders from four different schools participated, and again there was one treatment and one control class in each school. There were 108 youngsters in the treatment condition and 109 in the control group. In year 2 schools were located in inner-city and suburban Philadelphia.

Across both years of the evaluation children were from diverse socioeconomic and ethnic groups. Control children attended regularly scheduled classes during the time treatment children were attending Education for Parenting classes.

Procedure.

The curriculum. The Education for Parenting curriculum is entitled "Learning About Parenting/Learning to Care". It is a comprehensive didactic and experiential approach that emphasizes teaching children about early development (infants and toddlers). It's focus is on developmental milestones

and individual differences (e.g. temperament) and on how parents can effectively provide care to children of different ages and of diverse temperaments. Classes meet at least monthly through the academic year with teachers following a script developed over the past 15 years. Scripts are tailored expressly for children of various ages; from kindergarten through high school. In addition to didactic presentations about early development and caregiving, parents and young children from the local community made regular visits to the classroom throughout the school year. Students were thus able to observe early development firsthand and to question parents about the methods and problems of raising a young child. Copies of the curriculum are available from the authors and would be available at the time of presentation.

Outcome measures. There were two categories of outcome measures.

1) A curriculum-referenced measure was developed expressly for this study that was designed to reflect whether youngsters learned the contents of the parenting curriculum itself. The scale consists 40 statements about early development and caregiving. Children responded to each according to whether they agreed or disagreed. The instrument proved to have adequate

test-retest reliability over a six-month period ($r = .66$) and significantly discriminated children who received the curriculum from those who did not.

2) Based on the work of Spivack and Shure (1985) a measure of children's ability to generate alternative solutions to three common child-parent problems was developed. In individual testing with all children the alternative solutions procedure developed by Spivack and Shure was used. Those authors report adequate reliability and validity for this measure. Of particular interest is the finding that the ability to generate a greater number of solutions to common interpersonal problems predicts more prosocial behavior and less impulsive and disruptive behavior (see Spivack & Shure, 1985). In addition to whether treatment children would generate a greater number of solutions to parent-child problems, we were interested in the kinds of solutions that youngsters would offer. Specifically, we predicted that treatment children would generate a greater number of solutions that reflected positive nurturance and caregiving and fewer responses reflecting physical punishment and authoritarianism. Thus, children's responses were coded according to whether they reflected nurturance or physical punishment. Therefore, each child received a score for total number

of solutions, number of positive nurturing responses, and number of physically punishing responses.

Results.

In year 1 only post-tests were available. A manova was used with the four major outcome variables as dependent variables. Results revealed a significant manova, Wilk's = .92, $F(4,128) = 2.64$, $p = .037$, and significant univariate F tests in the predicted directions for total number of parenting solutions, $F(1,131) = 9.51$, $p = .002$, and nurturant solutions, $F(1,131) = 5.32$, $p = .02$. Univariate differences for parenting knowledge (curriculum referenced) and physically punishing solutions were in the expected directions but were not significant. Table 1 shows means and standard deviations on these four measures for treatment and control children.

Insert Table 1 about here

In year 2 a manova was used with pretests of the curriculum-referenced, total solutions, caring solutions and physically punishing solutions as covariates. Results show a significant manova, Wilk's = .89, $F(4,191) = 6.06$, $p = .000$, with significant univariate differences in the expected directions for

curriculum-referenced, total solutions and caring solutions. The difference in the number of physically punishing responses was in the expected direction. Table 2 shows adjusted least square means for each of the four major outcome variables.

Insert Table 2 about here

Conclusions.

Data from two cohorts of fifth and sixth graders indicate that a curriculum designed to increase children's knowledge and awareness about caregiving and parenting can have a salutary impact on their parenting potential. These results, replicated in two years of intervention, demonstrate that youngsters can be taught alternative and more nurturing strategies to childrearing. The curriculum promoted youngsters cognitive ability to generate solutions about childrearing problems. It also increased their tendency to report positive, nurturing responses to parent-child problems and there was a trend toward reduction in physical punishment as a caregiving response. Therefore the curriculum appears to have exposed children to caregiving alternatives that they might otherwise have never experienced. In this way it promotes "parental

competence" among children. In the future our research will focus on determining whether such an effort might also serve to prevent the cycle of child maltreatment that stems from experiencing a limited- frequently punitive- repertoire of childrearing beliefs and practices.

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Table 1.

Year 1 means and standard deviations () by condition

	1	2	3	ns
	<u>Parenting</u> <u>knowledge</u>	<u>Total</u> <u>solutions</u>	<u>Care</u> <u>solutions</u>	<u>Punishing</u> <u>solutions</u>
Treatment	33.99 (3.73)	18.91 (2.85)	5.20 (1.81)	.52 (.56)
Control	33.05 (4.17)	17.29 (3.17)	4.43 (1.87)	.59 (.84)

Manova: Wilk's = .92, $F(4,128) = 2.64$, $p = .037$ 1- univariate $F(1,131) = 2.02$, $p = .16$ 2- univariate $F(1,131) = 9.51$, $p = .002$ 3- univariate $F(1,131) = 5.32$, $p = .02$

Table 2.

Year 2 least square means and standard deviations ()
adjusted for pretest scores

	1 <u>Parenting knowledge</u>	2 <u>Total solutions</u>	3 <u>Care solutions</u>	ns <u>Punishing solutions</u>
Treatment	34.59 (3.63)	18.85 (3.43)	5.59 (1.80)	.80 (.70)
Control	32.97 (4.08)	17.52 (3.53)	5.03 (1.82)	.91 (.88)

Mancova: Wilk's = .89, $F(4,191) = 6.06$, $p = .000$

1- univariate $F(1,194) = 14.94$, $p = .000$

2- univariate $F(1,194) = 7.76$, $p = .006$

3- univariate $F(1,194) = 5.35$, $p = .02$