

ASSESSMENT OF THE LÍMITS PARENTING SKILLS TRAINING PROGRAMME

NEWSLETTER DISSEMINATION OF RESEARCH

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1. Introduction

The scientific community has recently felt the need to assess the intervention programmes for improving parenting, especially in the context of children and adolescents at risk. This presents notable methodological difficulties, but it is the first necessary step towards moving from the evidence to the generation of examined knowledge to optimise the programmes applied. In this study we present the results of the assessment of the Límits programme, providing evidence of efficacy and effectiveness that enables us to identify and describe its strengths as well as any elements that are open to improvement.

Límits is a structured selective programme of preventive intervention with groups of families with children between 14 and 18 who are passing through the juvenile justice circuit. The programme has been functioning since 2007 all over Catalonia, accumulating substantial experience, a process which has involved 351 people and 245 families. Its purpose is to reinforce the educational function of the families of the minors who pass through the juvenile justice circuit in order to reduce drug use and prevent their children from reoffending (Larriba and Duran, 2009). The programme consists of eight sessions with groups from twelve to fifteen participants, led by two monitors. It works on different strategies using contents that deal with relations and bonds, communication, conflicts, setting rules and discipline.

This study has been developed from the applications of the Límits programme and was carried out between September 2012 and November 2013.

2. Goals

The assessment of the Límits programme sets out to identify the strengths and the aspects that need improvement in its functioning and to determine its effectiveness and efficacy, specifically:

1. To appraise the objective efficacy of the programme in the short and long term (two months after it has ended) in relation to the goals set and the application of the parenting practices in everyday life.
2. To appraise the effectiveness of the programme in relation to the unforeseen effects of its implementation.
3. To identify perception by the children, the families themselves and the professionals of any positive changes in the parenting practices of the families taking part which can be attributed to the application of the programme.

3. Methodology

This is a piece of assessment research and therefore combines an appraisal of the different elements that make up an intervention programme and the elements for controlling variables from the field of educational research.

To assess the Límits programme the starting point was a quasi-experimental design, pretest–posttest, with a programme group (PG) and a collaborating group (CG). The design has enabled us to obtain and record information before developing the Límits programme, while it is in progress, when it ends and after a lapse of time (two months) to find out whether we have obtained the expected results once it has ended.

Two questionnaires were given to the families after the programme: when it ended and two months later: a) a questionnaire to measure their perception of the parenting practices taught on the programme and b) a questionnaire to find out their perception if their children's behaviour problems. Both instruments have been validated. Observation grids applied by the technicians have been used after each session to note the changes in the families' parenting skills during the programme and how they are put into practice in their everyday lives. Two discussion groups were formed, one with the technicians and the other with the programme directors and coordinators to complement the information about the context and development. Lastly, the children of the parents taking part (in both the PG and the CG) were consulted to compare their parents' perception of the improvement in their parenting skills with their own once the programme had finished.

The real sample was made up of 53 participants in the PG (42 families) and 20 participants in the CG (17 families). The technical teams who apply the programme and 12 people involved in its coordination also took part. Lastly, we had the participation of the children: 35 from the PG families and 12 from the CG families.

4. Main results and discussion

Limits programme user profile

67% of the participants are from Spain; the remainder are from Latin America, Algeria, Morocco or other European countries. The average age of the parents is 47.98 (with a deviation of 7.6). The average age of the children is 18.2, with a typical deviation of 4.7. 64.4% of the participants are mothers, 29% are fathers and 5.6% legal guardians. Almost two thirds (62%) of the family structures have two parents; the others are separated and in these cases the one the children live with is usually the mother. 40% of the participants have completed or started primary education. 63% say that the children are studying and 32% that they are neither studying nor working.

Concerning the children's judicial situation, more than half have received a final judicial decision, a quarter are awaiting one and 8.8% have a preventive order. Five are in other situations (hearing, awaiting mediation resolution, resolution completed and voluntary attendance).

47.3% of those taking part in the Límits programme have a child making first contact with juvenile justice, 36.3% have one with 2 to 3 lawsuits and 13.2% one with more than 3. In half the cases the crime they are accused of is *against persons* (50.5%), 41.8% are crimes *against property*, in 14.3% *other* kinds of crime (bodily harm and robbery with violence, threats or intimidation mostly), 6.6% *against public health* and one case is a sex crime. The age at which the children committed their first crime ranges from 14 to 17; half of the cases are concentrated between 15 and 16.

70% of the young people have had contact with drugs. In almost half the cases there is abuse of toxic substances.

Empirical analysis of the short term efficacy of the Límits programme

When we analyse the evolution of the PG we observe improvements in the skills relating to emotional self-control as in the CG, but the former also improves positive reinforcement and family relations.

However, from the families' point of view we have not observed the significant changes we had hoped for in the direction of improvement of their perception of self-efficacy in the parental role in relation to the CG before and after the programme. These results coincide with other investigations designed to assess parenting skills training programmes in which significant differences between the pretest and the posttest in relation to the perception of self-efficacy in the parental role have not been observed either (Amorós et al., 2012; Letarte et al., 2010).

68.6% of the children of families who have taken part in the Límits programme have noted positive changes in behaviour in their parents in those two months. The qualitative answers about the changes are fundamentally related to an improvement in the way they are treated and in relations, communication and parental self-control; to a lesser extent the possibility of talking about drugs or setting and explaining rules. These results coincide to some degree with the improvement in relations and self-control reported by the families once the programme had ended, where the parents saw themselves as more capable in those two aspects fundamentally. 10% fewer of the children in the CG have noted a positive change in their parents' behaviour.

80% of the participants in the PG say they have applied in everyday life strategies related to an improvement in the communicative processes and a positive assessment of their children's behaviour. The strategies they say they have applied least (under 70%) are related to the management of rules and sanctions (deciding, explaining and enforcing) and with setting limits. This perception coincides with that of the technicians, who report that the skills most put into practice by the largest number of participants are the ones related to the communicative skills and improvement of family relations, although the percentage of applicability and transferability of skills they perceive is lower than the figure stated by the families in almost all the ones worked on in the programme.

65.5% of the technicians believe that the families who have taken part in the programme have increased their capacity for taking action over their children's behaviour. In some cases they emphasise a clear and notable improvement in the families' actions, speaking of greater security and self-determination, a greater awareness of the problem and the application of new kinds of action to deal with their children's disruptive behaviour. However, some warn of the families' need to continue practising to confirm those changes in behaviour since they have their doubts about the process of "real" interiorisation of the skills worked on. A few of them are more reticent about recognising improvement owing to the parents' social and emotional problems, the children's recalcitrance and the fact that they are living with associated risks such as a shortage of money in the home.

In relation to their perception of their children's behaviour no significant differences have been noted between the two groups, except for three items: emotional self-control, communication and physical aggression (though this is very infrequent). They continue to be more present in the PG than in the CG, although the frequency with which they occur in the PG children has decreased significantly from the situation at the beginning. The PG is far more critical of the initial perception of their children's behaviour problems than the CG and shows a more evident concern about the situation with the young person. However, the intensity of the behaviour seen as a problem in both groups is reduced once the programme has ended.

Empirical analysis of the long-term efficacy of the programme

In the participants' data two months after the end of the programme, in the PG no significant differences have been observed between the posttest and the scores on the questionnaire about their perception of the self-efficacy of the parenting practices after that time. This is what was expected since it supposes that if there are no new actions there is no reason for the scores to rise. If they have not fallen, we can state that perceptions of competence in the parental role have remained steady; in any case they have not got worse two months after the end of the programme. The same thing happens with their perception of the children's behaviour, which remains the same. In some cases concern over that behaviour has been reduced when compared with the final situation.

Effectiveness of the programme: strong points and weak points

Strong points:

1. In the opinion of the directors and technicians the programme is useful because it generates in the families an awareness of the problem and of the need to change.
2. The participants say that they have transferred to everyday life some of the skills they have learned during the sessions, especially the ones that have to do with communication and improvement of family relations. The technicians agree with the families' perception, though they declare slightly lower percentages. The strategies or skills least applied are the ones that have to do with setting rules and sanctions, an aspect in which there is also agreement between technicians and families. The PG say that they have put the explanation of limits into practice at a substantially higher percentage than the CG.
3. The technicians also single out the complicity and cohesion between the participants and their motivation to take part in the programme. In general the level of satisfaction of both technicians and participants is high.
4. The technicians report that the intervention through the *Limits* programme helps give meaning to their work and enriches it. It is seen as a professional complement to their task which helps them monitor the cases better and enables them to work with the families later on.
5. The programme is considered sustainable from the point of view of the resources available.

Weak points:

1. The majority perception of everyone consulted is that the goals set by the programme are excessively ambitious and therefore difficult to accomplish.
2. Although the sessions are highly valued, both technicians and professionals emphasise that monitoring is difficult, as is carrying out the tasks assigned to the parents at home (putting into practice what has supposedly been learned during the programme is considered the crucial part).
3. For some professionals it involves major emotional wear and tear and in some cases an extra work load since they cannot compensate for the hours or reduce them. However, there are always more technicians willing to work than there are programmes in progress.
4. The programme directors consider that in some cases the profile of the families who are sent to take part is not the most suitable one (in many cases they have far more serious problems than the ones a programme of this kind is designed for). It should be improved, possibly through the use of the SAVRY programme.
5. The programme directors stated that coordination is complex because of the variability between the teams: conditions and levels of involvement or features of the territory, to mention a couple.

5. Conclusions and recommendations

The assessment has enabled us to form a picture of the families taking part, the technicians who have worked on the programme and the directors in charge of the organisation and application. The outstanding elements of the assessment can be summarised in six points:

According to Arruabarrena (2009), the Límits programme can be recommended as a model if it is adjusted to the objective profile of the families it was originally designed for. In its formulation it is rigorous and highly systematised, which means that it can be applied with a high level of fidelity (potentially it can be applied with rigour in accordance with its own precise indications). In the present conditions of application (the children are older and their problems far greater than the ones provided for in the programme) and in accordance with the data collected it could be described as a promising programme which should be rethought in order to adjust it to the profiles of the families currently taking part.

Límits is an organised programme with a structure that has been empirically confirmed, which should be very positively valued. The six factors it works on are clearly marked out with the factorial analysis that has been developed.

The Límits programme generates satisfaction in everyone connected with it. The technicians who apply the programme mention its value for structuring and directing the work with the families and bringing continuity to the relation they keep up after it has ended. For their part, the families also say they are satisfied with it as it gives them criteria and clarity in their awareness of the challenge of communication with their children, as well as for analysing the problems they are facing. Also because it provides a space for collective and mutual support which enables them to become aware of the problems and the possible ways of analysing and coping with them.

The Límits programme clearly affects awareness of the problems and the behaviours that should change, what DiClemente et al. (1991) call the phase of contemplation and preparation of the action for change. In the technicians' opinion, 65.5% of the families manage to become aware of their children's situation and their ability to affect it. A high percentage if we take account of the degree of complexity and difficulty of the problems these families are facing (children with an average age of 18.2, drug use, episodes of violence, economic difficulties at home, situation of the couple, among others). The measures taken after participating in the programme show how the families are critical of their initial situation and they say they have improved in issues of communication, emotional self-control and relations with their children. In some cases they have managed to change and improve, to try out a strategy for changing their relationship with their children, which has been considered an important first step. These attempts at change have been perceived by almost 70% of the children.

Communicative competence as a vehicle of most of the processes and interactions between parents and the children is one of the elements most affected by the programme. Perhaps because it is a competence that can start to develop from a trial of simple strategies which the programme helps train. Far more difficult is to tackle the criteria, the rules, the sanctions and the axiological elements the programme includes but cannot deal with in depth because it is short. Consequently, they are transferred to a lesser degree.

The difficulties of the programme are mainly to be found in two key factors: the ambition and scope of its goals and the age of the young people. Perhaps the goals should be better gauged so that they can be accomplished in eight two-hour sessions. Probably in order to achieve that we should give the programme a boost and enrich it with other actions. Secondly, it is designed to work on prevention with families whose children are an average age of 15.5 but at present it is applied with an average age of 18.2. There are added problems involved (children-parent violence, drug use or institutionalisation).

Maintain the programme but aim it at the profile of the families it was created for, reviewing the goals to make them more realistic and attainable. Although the families taking part share certain sociodemographic characteristics they do not constitute a homogeneous group and consequently their needs for intervention are different. The users' characteristics should be made explicit in order to detect and diagnose the cases, avoiding crowding the host of needs and problems of the families together in one programme. Rethink the selection system for the families (specification of the potential users) and establish inclusion-exclusion criteria for the programme (age of access, family situation, type of conflict, seriousness).

Improve the design of the assessment system used by the programme to equip it with a sufficient and adequate instrumental device that can collect information diachronically, record and analyse it in order to take decisions based on empirical evidence. The assessment must be useful for the professional who applies it so that while he sees it from the point of view of someone integrated into the intervention process, it also allows him to take well-founded decisions aimed at improvement. It would also have to be feasible in terms of the professional's limited time available. Perhaps it could be integrated into one of the questionnaires (self-perception of parenting skills) designed in the study, which the technicians themselves rate as useful and feasible.

In the framework of accountability we should make an analysis that relates the investment in human resources –not only in economic terms but also of the emotional wear and tear and stress in the teams applying the programme– to the efficacy of the results and user satisfaction. Those data should enable us to incorporate or boost aspects concerning supervision of teams, optimisation of working conditions or coordination and communication with a view to constant improvement.

In order to improve the transfer of learning and optimise the processes of change we might consider whether it would be appropriate to **complement the programme as it is designed with other resources or actions addressed directly to the young people**, which would affect aspects such as communication or management of the emotions and would give a boost to the goals set. We could also consider coordinating the Límits programme with other existing actions along the same lines.

Design other more effective programmes according to the type of family or problem or risk situation they find themselves in and promote the design of the ones that best respond to the needs of the Catalan context. The efficacy of parenting skills training programmes improves when there is early detection of the case, adaptation of the type of programme (specificity) to the type and seriousness of the family problem, and lastly the functioning of the other resources and support services (and their intensity) intervening in the case (Arruabarrena, 2009).

As a complement we should reinforce aspects of the programme through the **design of short training courses and actions to monitor, accompany or strengthen and support** the skills that bring continuity to the programme and consolidate its effects. These resources would be available to the professionals to continue to structure their task with the families. They **could be applied in coordination with those of other local agents** (social services, health, education and young people's for example) in a network.

It seems important **for the technicians to continue to have the training, the advice** and the support which, as well as improving their competence in the application –an issue which is already being dealt with– enables us to unify criteria for action and assessment and can complement the technical advice, monitoring and supervision during and after the end of the programme. That support is also a factor that can contribute to maintaining fidelity in the application of the programme.

The **future scenarios** should allow us to imagine at least three lines of action:

1. Improving the programme and complementing it with local actions of reinforcement and consolidation. The programme would have to be preventive in nature and therefore be used with adolescents and their families when they show the first signs of difficulties in relation and communication. So the first line has to do with optimising the criteria and practices of passing people on to the programme to guarantee participants who are adjusted to it. The goals would also need adjusting so that they are really attainable in the eight sessions the programme lasts.

We should study the possibility of more agents being able to apply it, both those linked to justice or others from local welfare or education services. Families who are on welfare or education circuits could also take part. We need to study the best formulae for collaboration, coordination, technical support and monitoring the application. This coordination enables networking with other local public and Catalan government agents.

It is also important to think of the design of other actions with structures and protocols, monitoring, reinforcement or consolidation, which could complement and complete the task begun with the Límits programme.

2. The design of other programmes for structured work on other clearly detected needs. The assessment of the programme identifies other specific needs that have not been dealt with: drug use as an outstanding problem or child-parent violence. The technicians on the Límits programme stress the usefulness of being able to work on the basis of a defined structure such as a programme and so it is best to continue to design and put into operation programmes that address these problems more specifically.

3. The development of systems of assessment, monitoring, supervision and support for the teams to reinforce the task. It is highly productive to boost the assessment of programmes each time a new initiative is launched. Any intervention programme has to include an appraisal of the context to clearly identify the needs, but also of the processes and results it generates so as to have criteria for taking the decisions for improvement, recycling and updating collected in the evidence. Assessing public programmes is a requirement and a mark of quality of the public organisms that promote them and the best mechanism for accounting for the use of public resources, but most of all it is the only way of consolidating projects and actions for improvement aimed at the citizens.

As a complement, and especially in the context of justice, we can see the importance of the supervision and monitoring of this professional practice which, when provided with guidelines, protocols and an organisation, has parameters for optimising the professional response that can be made objective. For that reason we must not neglect mechanisms for monitoring and supporting the teams and professionals who apply this or other programmes.

Boletines *Invesbreu* publicados

- 1 Inmigrantes y criminalidad en Europa. Los ejemplos de Alemania y España. Enero 1995.
- 2 La cárcel pública de Barcelona durante la etapa isabelina / La casa de corrección de Barcelona (1836-1856). Enero 1998.
- 3 El coste de la justicia penal. Privación de libertad y alternativas. Febrero 1998.
- 4 El niño abusado sexualmente como testigo / Los delitos contra la libertad sexual relacionados con menores. Marzo 1998.
- 5 Inteligencia y personalidad en el proceso rehabilitador del delincuente. Mayo 1998.
- 6 Salud y prisión. Octubre 1998.
- 7 La prensa frente a la violencia juvenil y la cárcel. Noviembre 1998.
- 8 El tratamiento de los agresores sexuales. Febrero 1999.
- 9 La victimización en Cataluña en el año 1996. Abril 1999.
- 10 Programas aplicados de psicología comunitaria con personal penitenciario. Junio 1999.
- 11 Justicia juvenil: inserción laboral y medidas en medio abierto. Octubre 1999.
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- 20 El arresto de fin de semana en Cataluña (1996-2000).
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- 23 Intervención institucional. Elementos para el análisis en menores infractores o en riesgo.
- 24 Los menores extranjeros indocumentados no acompañados (MEINA).
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- 29 Intervención en centros de justicia juvenil.
- 30 La clasificación inicial en régimen abierto de los condenados a prisión.
- 31 La reincidencia en las penas alternativas a la prisión en Cataluña.
- 32 La asistencia religiosa y la libertad de culto en las prisiones de Cataluña.
- 33 Bullying - Violencia de género. Elementos para el análisis.
- 34 Violencia de los jóvenes en la familia.
- 35 Infractores y conducta violenta.
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- 37 Perfil profesional del juez de primera instancia e instrucción de Cataluña.
- 38 Violencia de género y justicia.
- 39 Delitos sexuales y reincidencia.
- 40 Intervención con infractores juveniles.
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- 56 La reincidencia en el programa de mediación y reparación de menores.
- 57 Intervención penal con infractores de tráfico.
- 58 Evaluación de menores infractores: factores protectores y de riesgo..
- 59 El tiempo en la justicia de menores.
- 60 Intervención en el marco de la ejecución de medidas penales en la comunidad.
- 61 Prestaciones en beneficio de la comunidad y realización de tareas socioeducativas en justicia juvenil.
- 62 La victimización de niños y jóvenes en riesgo.
- 63 La libertad condicional en Cataluña.
- 64 Gestión de casos en el ámbito penitenciario.
- 65 Ejecución penal y toxicomanías.