

AN EVALUATION OF "GROUPS FOR PARENTS":  
A STANDARDIZED FORMAT ENCOMPASSING  
BOTH BEHAVIOR MODIFICATION AND HUMANISTIC METHODS\*

ORIN W. SADLER, TERENCE SEYDEN, BILLY HOWE, AND TOBY KAMINSKY

*Chatham County Comprehensive Mental Health Center,  
Savannah, Georgia*

The "Groups for Parents" approach is a standardized format for teaching parents child management in which both behavior modification and humanistic methods are integrated. The current study attempted to evaluate 13 of these groups comprised of 277 parents. Measures of client satisfaction indicated very high ratings of whether parents liked the course and whether they perceived it as helpful. A number of outcome measures indicated that the average parent was successful in improving both general child behaviors as well as individually targeted ones. Parents were successfully able to increase their own rates of positive reinforcement as well as being able to increase the compliance rates of their children. A comparison of client characteristics with attendance rates and successful outcome was made.

An interest in both preventing and remediating children's behavior problems by using parents as major intervenors seems to be rapidly growing (Berkowitz & Graziano; 1972; Odell, 1974). Many of these approaches train parents in a group setting and typically apply one of three approaches: 1) behavior modification, 2) Rogerian-based concepts, or 3) neoanalytic concepts. The Groups for Parents approach is a hybrid of behavior modification and Rogerian approaches (Sadler & Seyden, 1976). While a number of evaluations of behavioral group approaches exist (Odell, 1974; Tavormina, 1975; Patterson and Reid, 1973), the results of other group approaches need to be examined.

The Groups for Parents format uses simple human relations training exercises in the beginning of the group to reduce social anxiety and enhance group cohesion. Considerable role playing is used throughout. Behavioral principles are taught and specific child problem behaviors are targeted, observed, and modified by the parents. During the last several sessions of the course, parents are exposed to and practice communication skills which derive from Roger's client-centered counseling (Ivey, 1971). This report represents an initial study of data collected on 277 parents attending a total of 13 groups over approximately two-and-one-half years. It covers measures of client satisfaction, and specific as well as general problem behavior changes. It also seeks to analyze relationships among the course elements which might tend to enhance or detract from the groups.

#### METHOD

*Subjects.* A total of 277 parents enrolled in 13 groups. Each group met for 2½ hours, once a week, for a total of 8 sessions. Of those attending, 76% were female, and 78% were married. The average age was 34 years. Each family had an average of 2.6 children, with a mean age of 8.8 years. The average educational level of the

---

\*Reprint requests to Sadler, P. O. Box 5087, 2 East Henry Street, Savannah, Georgia 31403. *Groups for Parents* is available as a monograph (# 47) from Clinical Psychology Publishing Co., 4 Conant Square, Brandon, Vt. 05733. \$8.00 per copy.

parents was 13.6 years. Approximately one-half the parents were referred by community agencies which specialized in children's problems, including mental retardation, emotional disturbance, learning disabilities, behavior disorders, and similar categories. The rest of the parents reported some difficulty not as severe with their children and were referred to the group by friends, word of mouth, media announcements, and other informal sources.

*Measures.* The measures were of client satisfaction, client perception of behavior change, and how much work each client did within the context of the course. There was an attempt to study interrelationships among these measures and the demographic measures collected at enrollment.

*Problem Behavior Checklist.* This was designed to pick up both severe disorders and milder problems. It was administered at the first and last sessions. Only those parents who completed both pre- and posttests were selected for analysis. Each of the 25 items on the checklist was rated on the following scale: 1 = the behavior occurs nearly all the time, a severe problem; 2 = the behavior occurs about half the time, a bad problem; 3 = the behavior occurs occasionally, a moderate problem; 4 = the behavior occurs rarely, it's a slight problem; and 5 = the behavior never occurs, no problem. Some parents completed the checklist on only one problem child, while other parents rated all of their children. The two groups were analyzed separately. As in many of the outcome measures, the number ( $N = 129$ ) who completed both pre and post measures in a scorable fashion was lower than the original number of parents due to attrition and also because some measures were not started until later groups. A preliminary reliability check was done on the behavior checklist by comparing a small number ( $N = 21$ ) of independent husband and wife ratings of one problem child on the pretest. An interrater reliability coefficient of .74 was obtained.

*Positive Reinforcement Rates.* Parents were taught to measure the rate of positive reinforcement they administered to their children. They initially took a baseline for one hour per day for three days. The next session's assignment asked them to double their reinforcement rates and look for changes in the children's behavior following the increased levels of reinforcement.

*Compliance Rates.* Parents were taught to measure compliance using a procedure developed by Piat, Sadler, and Vickers (1971). A baseline compliance rate was taken for three days by the parents on their most noncompliant child. At the following session parents were instructed to reinforce compliance 100% of the time and observe if the compliance rate changed over a three-day period.

*Client Satisfaction.* An anonymous postsession evaluation provided scaled measures of how much the parents liked each session, and how helpful they thought it was in helping them deal with their children. Each course module or component was also evaluated. A similar instrument was administered at the end of each course. In addition to the like and helpful scales evaluating the entire experience, parents were asked how strongly they would recommend the course to a friend.

*Work and Motivation.* A variety of measures thought to be related to work and motivation were included: (1) total number of sessions attended, (2) the last session

attended—a check for the point when dropout is most likely to occur, (3) fee paid, and (4) payback and percent of payback compared to initial fee.<sup>1</sup>

*Group Data.* Characteristics such as group size, client to staff ratio, the percent of parents who remain in the group, and the date of the group (a possible staff experience factor) were considered.

## RESULTS<sup>2</sup>

The single problem child behavior checklist was administered both before and after the group. In eight weeks the mean improvement shown was +.46. This was from a pretest score of 3.64 to a posttest score of 4.10 on a five-point scale ( $N = 76$ ;  $t = 7.1$ ;  $p < .001$ ;  $w^2 = .38$ ).

The problem behavior checklist for the whole family was administered both before and after some groups. In eight weeks the average improvement was +.39, from a pretest score of 3.77 to a posttest score of 4.16 ( $N = 53$ ;  $t = 4.8$ ;  $p < .001$ ;  $w^2 = .29$ ).

There was a significant increase in parent reinforcement rates. From the baseline to change period the parent reinforcement rate changed from 6.24 per hour to 9.75 per hour for an increase of 3.6 per hour or 50% improvement over baseline ( $N = 75$ ;  $t = 7.1$ ;  $p < .001$ ;  $w^2 = .37$ ).

Parents also increased the compliance rates of their children from baseline to assignment periods. The mean improvement was from 68.1% to 73.2% ( $N = 70$ ;  $t = 2.1$ ;  $p < .025$ ;  $w^2 = .046$ ).

Parents were asked each week to rate how helpful each session was in dealing with their children. This was done anonymously on a post-session evaluation sheet which used the following scale:

1	2	3	4	5	(circle one)
not helpful		moderately helpful		very helpful	

On a similar scale parents rated how much they liked each session. The following graph summarizes parent evaluations collected over 13 groups for session 1 ( $N = 277$ ) through session 7 ( $N = 211$ ). Two hundred and seventy-seven parents initially enrolled for the courses. Of these, 180 parents completed the entire eight-week course. At the last session these 180 parents were asked anonymously how strongly they would recommend the course to a friend (1 = not at all to 5 = very strongly). The average rating given was 4.8.

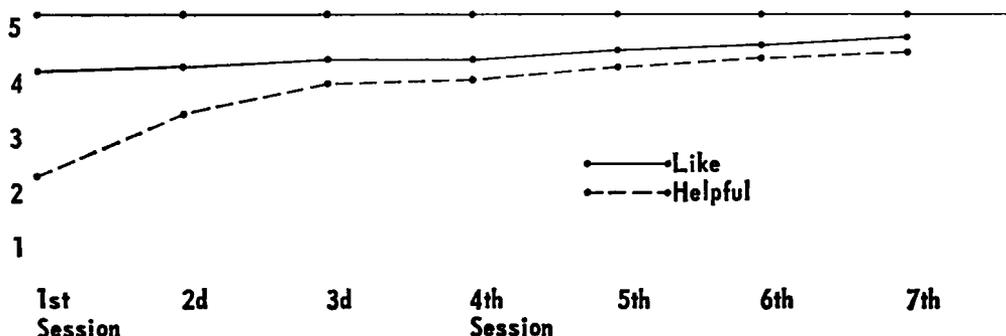
During the last session parents also rated some 19 components of the course on how helpful each was (using a five-point scale). The following list includes five components of the course that were rated as most helpful and five parts that were seen as less helpful.

Data on all 277 parents indicated that the average attendance was 5.1 of 8 sessions; while for those parents who attended at least four out of eight sessions the average attendance was 6.2 sessions ( $N = 211$ ). An examination of the peak

<sup>1</sup>Through a token system parents can earn back up to half of their fee according to the amount of work they do.

<sup>2</sup>All of the available data on each parent and group were analyzed using the computational and multivariate procedures contained in the *Statistical Package for Social Sciences*.

FIG. 1 SESSION BY SESSION LIKE AND HELPFUL RATINGS



sessions when parents dropped out showed that 28% of all dropouts occurred after the second session while 19% of the dropouts occurred after session 7. The remaining 53% of dropouts were relatively evenly spread over the other sessions. Additional analysis of the paradoxically high dropout rate after session 7 indicated that the increased dropout rate over other sessions could be accounted for by two equal factors: (a) Many couples who otherwise had high attendance sent only one member to the last session to collect the payback and certificates; (b) Parents who were not eligible for payback by virtue of being on scholarships or parents who had not attended often enough to receive a certificate (6 out of 8 sessions) tended not to attend the last session (possibly because of embarrassment).

TABLE 1. FINAL RATINGS OF COURSE COMPONENTS

Component	Rating
<i>Most Helpful</i>	
Getting Acquainted, A Human Relation Exercise	4.8
Small Groups to Work on Individual Behavior Change Projects	4.7
Communication Skills Practice	4.7
Token System Used in Course	4.4
Catching Kids Being Good Role Plays	4.4
<i>Least Helpful</i>	
Slide Show on Services Offered by Sponsoring Mental Health Center	3.3
Continued Use of Relaxation Training Beyond Third Session as Ice Breaker	3.5
Enrollment Forms	3.7
Book Quizzes	3.8
Parent Testimonial Using Audio or Video Tape of Parent Who Had Been Through the Course	3.9

A number of multiple regressions were run in an effort to discover factors which would predict who would remain longest in the course and which parent characteristics would best predict successful outcome on the measures of change. Table 2 summarizes the results.

TABLE 2. MULTIPLE REGRESSION ANALYSIS FOR PREDICTING COURSE OUTCOME FROM PARENT CHARACTERISTICS

Dependent Variable	R	R <sup>2</sup>	F	Alpha	Independent Variables	Beta	F	Alpha	Increase in R <sup>2</sup>
Total Attendance	.56	.31	3.8	(.05)	Fee	.57	6.3	(.025)	.12
					Children's Average Age	-.49	4.7	(.05)	.19
Last Session Number Attended	.64	.41	3.7	(.05)	Fee	.67	9.3	(.01)	.15
					Children's Average Age	-.47	4.8	(.05)	.18
					Degree of Spouse Involvement	.30	2.3	(.12)	.08
Change from Pre to Post on Single Problem Child Behavior Checklist	.55	.30	7.7	(.025)	Pre Single Problem Child Behavior Checklist	.55	7.7	(.025)	.55
Change from Base to Assignment on Compliance Rate	.72	.53	4.2	(.025)	Base Compliance	-.25	1.9	(NS)	.17
					Parent Education	.78	10.3	(.01)	.12
					Children's Average Age	-.61	6.2	(.025)	.11
					Pre Family Behavior Checklist	.38	3.9	(.10)	.12

Table 2 shows that both fee paid and average age of children contribute to predict which parents will attend the greatest number of sessions. These two independent variables along with degree of spouse involvement predict the last session attended. As far as outcome measures involving changes in children's behavior are concerned, the initial degree of the perceived problem behavior predicted the parents' perception of change in the problem; also, variables predicting improvement in child compliance rates were the base compliance rate, amount of parent education, children's average age, and the pre-intervention perception of the children's problem behaviors.

#### DISCUSSION

Both family and individual child problem behavior checklists results indicated that not only was there a decrease in problem behaviors for the individual problem child but also for the rest of the family's children as well. This suggests that families were implementing specific behavior change projects as well as the generalized approaches the course taught. One such generalized approach was to increase dramatically the rate of positive reinforcement for prosocial behavior. The data show that this took place at least during part of the course. In addition to reinforcement

of general prosocial behavior, parents also attempted to increase rates of compliance by reinforcing this behavior. There was some degree of success in this endeavor.

These outcome measures indicated that the course was at least somewhat successful in teaching parents some new ways of altering problem behaviors and in general enhancing the quality of family life insofar as parents put what they have learned into practice.

Measures of client satisfaction are important in that it is assumed that a parent who is satisfied will remain in the group thereby increasing the probability of effectively acquiring and using the principles and techniques being offered. While the average session rating of helpfulness started low (thereby accurately reflecting the quality of the first session which is orientation, business, and data collection oriented), the ratings quickly climbed to a high level and stabilized by the third session. In these later sessions, specific help has been offered for problems. On the other hand, the "like" ratings begin and remain high throughout reflecting the continuous effort to create an atmosphere experienced as nonthreatening and pleasant. Nearly all stated that they would strongly recommend the course to a friend at the final course evaluation.

An additional analysis of the high dropout rate at the end of session 2 revealed the following: (1) Group size at session 2 was considered. The median group size was 15 with a range from 6 to 35. It was ascertained that the dropout rate for groups below the median was 8.6% while those groups above had a higher dropout rate of 15.3%. (2) Mean educational level for all parents was 13.6 years. Of those who dropped out at session two, 68% were below the mean. (3) Of those who dropped out at Session 2, 62% paid no fee or paid only for the book. (4) Males tended to drop out slightly more at that time (8% more) than females.

The multiple regression equations suggest that charging and collecting a higher fee was highly related to how long people stay in the group. During the history of the development of the approach, fees have been raised from \$10 to \$15 to \$20 to \$25. Apparently those who have paid a higher fee have tended to remain in the group longer. This is an important factor in that it is one of the factors over which we have some control. The payment of the fee may work as a commitment on the part of the parents to remain in the group. The longer one remains, the more can be earned back.

Another variable that was related to remaining in the group was having younger children. Parents with younger children (ages 10 and under) do not usually have the experience in child rearing and dealing with children's problems. They may be more inclined to remain in a supportive group such as ours. Additionally, the course is designed to deal most effectively with younger children in the earlier sessions. Approaches to preteen and adolescent problems are not covered until the last part of the course. If this latter suggestion is true, special efforts or even separate redesigned groups may be in order for parents of the preteen and adolescent.

A final factor which helps predict who will stay in the course is spouse involvement. Parents who had spouses and whose spouses attended frequently tended to stay in the course longer. Additional efforts to attract and hold the male spouse would seem to increase the chances of parents remaining in the group, to say noth-

ing of enhancing the quality of family interactions when both parents are in agreement in child-rearing practices.

Surprisingly, neither the amount nor the percent of payback entered significantly into the equations predicting who would remain nor did the average number of tokens earned. While these variables related to work may have some mild effect they are apparently largely overridden by the fee itself as a commitment.

Examination of variables predicting the change in the problem behavior checklists showed that only greater degree of severity on the problem child pretest predicted favorable outcome on only this checklist. Quite possibly parents who perceive their child as a severe problem initially are more inclined to work to make changes in the child. Their efforts may be reflected in noticeable improvement.

A number of variables significantly entered the equation predicting increases in compliance. The first was lower compliance at the start. Since this is experienced as a major difficulty by those whose children are highly noncompliant, they may be more motivated to attempt changes. The second factor was higher education. Educated parents may be more challenged by the assignment and more predisposed to correctly carry it out, especially in reinforcing compliance when it occurs. The third factor was younger children. Younger children probably respond more rapidly to increased reinforcement for compliance. In addition, typical parental reinforcers may have higher potency for younger children. The final variable was less severe problems on the prefamily problem behavior checklist. Perhaps parents who are less burdened with a multitude of problems have more energy to carry out the assignment and increase compliance.

Insofar as our results may be generalizable to either behavioral or Rogerian-based parents groups, it would appear that collecting a fee is a major factor in maintaining attendance probably because the fee signifies a commitment. Parents of younger children may be less inclined to drop out, and if both parents attend they may remain longer.

Parents can enhance the general climate of their families by generally increasing positive reinforcement as well as compliance. Specific behaviors can be remediated successfully and all this within the framework of an enjoyable experience.

#### REFERENCE NOTE

1. PIAT, J., SADLER, O., & VICKERS, M. *Command compliance rates in pre-school settings*. Paper presented at Southeastern Psychological Association Convention, April 1973.

#### REFERENCES

- BERKOWITZ, B. P., & GRAZIANO, A. M. Training parents as behavior therapists: A review. *Behavior Research and Therapy*, 1972, 10, 279-317.
- IVEY, A. E. *Microcounseling: Innovations in interviewing training*. Springfield, Ill.: Thomas, 1971.
- ODELL, S. Training parents in behavior modification: A review. *Psychological Bulletin*, 1974, 18, 418-433.
- PATTERSON, G. R., & REID, J. B. Intervention for families of aggressive boys: A replication study. *Behavioral Research and Therapy*, 1973, 11, 383-395.
- SADLER, O. W., & SEYDEN, T. Groups for Parents. *Journal of Community Psychology*, 1976, 4, 3-63.
- TAVORMINA, J. B. Relative effectiveness of behavior and reflective group counseling of mentally retarded children. *Journal of Consulting and Clinical Psychology*, 1975, 43, 22-31.