



## Early intervention to help parents manage behavioural and emotional problems in early adolescents: What parents want.

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### Abstract

Parents of 468 children aged between 12 and 14 years in ten high schools in a city in regional north Queensland and metropolitan Melbourne participated in a survey of early adolescent behaviour. The major undesirable behaviours experienced by parents were fighting with siblings, talking back to adults, moodiness, and school difficulties. Frequently listed desirable behaviours that were experienced were related to housework and communication. Parents indicated a desire for education to help them assist their teenage children develop more appropriate behaviour, and in particular in regard to better managing their emotions. The findings are discussed in the context of the challenge of designing and delivering effective early intervention programs to large numbers of parents of early adolescents.

### Keywords

*early intervention, adolescents, parents, behavioural problems, emotional problems*

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### Introduction

Family support and associated parenting practices are significant predictors of positive adjustment in childhood and adolescence, and indirect evidence suggests that family support is also a protective factor for adolescent substance abuse and conduct problems (Cauce, Reid, Landesman, & Gonzales, 1990; Cohen & Wills, 1985; Wills, Vaccaro & McNamara, 1992). In contrast, dysfunctional parenting practices place children at risk for developing conduct problems (Hawkins, Catalano & Miller, 1992), and are among the strongest predictors of later delinquent behaviour (Loeber & Stouthamer-

Loeber, 1986). Family conflict and dysfunctional parenting practices are also related to a wide variety of adverse developmental and behavioural outcomes in adolescence including drug abuse, poor school achievement, and truancy (Sanders, 1995).

As a child matures, poor regard for family norms of appropriate behaviour typically extends to disregard toward school and wider community expectations. The violation of these expectations and codified standards often results in criminal behaviour and legal sanctions by late childhood and adolescence. There are also adverse effects on a young person's

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employment opportunities and their capacity to maintain appropriate social and personal relationships. Without consistent and fair consequences for violations of family rules, a child will increasingly engage in defiant and antisocial behaviour that sets them further on this socially dysfunctional path.

Patterson and his colleagues (Patterson, 1982; Patterson, Capaldi, & Banks, 1991) identified two developmental pathways that explain the emergence of anti-social/conduct behaviour problems in childhood. The 'early-starter' model becomes entrenched in the pre-school years, and family-based intervention that addresses the risk factors associated with parenting practices has demonstrated the potential to provide parents with effective strategies for child management which preserve parental authority in a consistent and nurturing manner.

One such intervention is the Triple P - Positive Parenting Program (Sanders & Markie-Dadds, 1992), which was designed as an early intervention program for this group of children and proven remarkably effective (Sanders, Markie-Dadds, Tully, & Bor, 2000). However, a significant number of children do not exhibit problem behaviour in early childhood, but become part of a late starter group, with problems emerging in early adolescence (McMahon & Estes, 1997). Interventions aimed at reducing adolescent antisocial behaviour and delinquency have typically been based on a treatment model, although there is currently only limited evidence of its effectiveness once adolescents have developed severe and pervasive antisocial behaviour patterns. There has been some limited success with family interventions with severely conducted-disordered youth (Chamberlain, 1990; Henggler et al, 1998). However, these programs have had little impact on the prevalence of juvenile crime at a population level and the Pathways to Prevention Report (National Crime Prevention, 1999) defined the need for a developmental approach to crime prevention which is now beginning to influence developments in the field.

One family factor that is hypothesised to contribute to children entering this late starter trajectory is where adolescents experience problems in the normative task of individuating from their family of origin. Adolescents may face particular problems where parents become over involved in making decisions and completing tasks that should increasingly become the adolescent's responsibility. Attending to and promoting increasing adolescent involvement in this context appears to be an important dimension of parenting. Related concepts include Baldwin's distinction between 'emotional involvement' versus 'detachment', Parker and colleagues' identification of 'overprotection', and Ainsworth's notion of 'responsiveness', where parent and child behaviour become linked or enmeshed (Maccoby & Martin, 1983, pp 37-38). Efforts to study parents' efforts to individuate from the adolescent have been hampered by a lack of appropriate research instruments. Clinical evidence suggests that adolescents face particular difficulties where attempts to individuate from the family of origin are resisted by parents (e.g., Stanton, Todd & Associates, 1982).

One major challenge facing those planning early interventions with parents of pre-adolescent children who may be on the late-starter developmental pathway is to actively engage the parents before problems become severe. The transition from primary to secondary school around the age of 12 or 13 years is often a time of apprehension and anxiety for parents who may then be more receptive to receiving advice on adolescent and parenting problems at this time. Making parenting programs universally accessible through schools will normalise the parent preparation process, as schools provide a convenient and appropriate community-based contact point where parenting issues can be legitimately discussed. One of the identified barriers to participation in parenting programs is a lack of perceived personal relevance by parents concerning program content (Prinz & Miller, 1996). To maximise parental engagement, it is therefore critical to have information about the issues parents perceive to create most difficulties for them so as to provide face validity for program content.

The current study reports the views of a sample of parents with a child enrolled in the first years of high school, aged between 12 and 14 years. One focus of the study was to determine the issues causing difficulty for parents of young adolescent children making the transition from primary to secondary school, and to ascertain whether these issues are similar for parents in a large metropolitan urban setting compared to parents from a smaller more regional city. This information was deemed critical for the design of early intervention programs that might be expected to assist most parents mediate the behavioural trajectories of children at risk for developing severe antisocial behaviour in later adolescence and early adulthood.

## Method

### *Participants*

Participants were parents of first-year high school students who resided either in a large regional city in north Queensland, or in three areas of suburban Melbourne, Victoria. Toward the middle of the academic school year and with the assistance of the school principals, letters and survey forms were sent home with every child enrolled in Years 7 or 8 in the participating schools. In Queensland, children enter secondary school at Year 8, the year they turn 13, while in Victoria they enter a year earlier at Year 7. Parents were invited to complete the survey form and assured of anonymity. Pre-paid envelopes were provided for the completed form to be returned to the University at no cost to parents. In north Queensland, 870 questionnaires were sent home and 268 completed forms were returned (32%); and in Melbourne, 792 questionnaires were sent home and 200 were returned (25%). This yielded 468 usable data sets. Due to the relatively low return rate the sample is best regarded as a convenience sample comprising parents who were willing to contribute their knowledge and concerns about raising teenagers. As such, it is not considered useful to attempt to derive prevalence estimates from the analyses, but to regard the findings as being indicative of issues that parents find relevant to the task of raising a teenager.

### *Measures*

The survey instrument was styled on the Parenting Early Adolescents Survey (PEAS) and contained seven components: Undesirable Adolescent Behaviours, Desirable Adolescent Behaviours, Weekly Adolescent Time-use, Parents' Emotional Dependence on Adolescent Behaviour, Family Conflict, Mental Health, and Parent Demographics. The PEAS was designed for use by the Centre for Adolescent Health in Melbourne and had been developed through content analysis of parents' comments returned in routine feedback following parent education seminars. The instrument had been previously trialed and found to be acceptable to parents and informative about a range of information relevant to establishing parental perceptions about parenting adolescents. Copies of the instrument are available from the second author on request.

*Undesirable Adolescent Behaviours.* Forty-six undesirable behaviours were extracted from parent feedback and examination of related behaviour checklists. Examples included: watching too much television, sulking, overeating, hitting parents, getting into trouble with alcohol, and fire-setting. Parents were requested to check boxes to indicate the behaviours that had occurred during the previous month, and to circle any items that caused them serious concern.

*Desirable Adolescent Behaviours.* Seventeen desirable behaviours were extracted from the developmental literature and listed. Examples included: helped with household tasks; tried hard to manage emotions such as anxiety, fear, or anger; politely refused unreasonable requests from others; let parents know how things were going at school. Parents were requested to check boxes to indicate the behaviours that had occurred during the previous month, and to circle any items for which they would like to receive parent education to help improve that behaviour.

*Weekly Adolescent Time-use.* Five items were constructed relating to either desirable or undesirable activities. Examples included: spent

half an hour or more completing household duties; went out without saying where he/she was going. Parents were also asked to estimate over the previous four weeks how many days per week the adolescent tended to engage in the listed activities. Options were arranged on a 5-point Likert-type scale anchored by 'Most days' and 'Rarely or never'.

*Parents' Emotional Dependence on Adolescent Behaviour.* This sub-scale was designed to detect parents who perceived their emotional reactions to be linked to their adolescent's behaviour. The five items used were: My ability to feel good was completely linked to my child; I found I couldn't be happy while my child was not happy and healthy; I found myself constantly worrying about my child; I felt very responsible for my child's misbehaviour; and I had to put my needs aside to adequately care for my child. Parents were asked to estimate over the previous four weeks how often they would have felt that way. The response options were rarely/never (1), occasionally (2), often (3), and almost always (4). Responses were reported as an average item score. The five-item measure demonstrated satisfactory internal consistency within the present population (Cronbach's  $\alpha = 0.78$ ).

*Family Conflict.* Three items were included to provide a measure of perceived family conflict. The items were: People in the family had angry arguments where something was broken or someone got hurt; There was hostility or angry conflict between a parent and another adult; and Adults in our family hurt each other with angry words. The response options for these items were rarely/never, occasionally, often and almost always. Internal consistency within the present population appeared satisfactory (Cronbach's  $\alpha = 0.68$ ).

*Mental Health.* To provide an index of depression versus well-being the five SF-36 mental health scale items were included (Ware, Kosinski, & Keller, 1994). This brief scale is summed and adjusted to provide a score ranging from 0 to 100, with higher scores indicative of better mental health. Cronbach's  $\alpha$  for this scale in the present sample was 0.75.

*Parent demographics.* Parents were asked to check boxes to indicate their gender, age, place of birth, relationship to the target adolescent, homeownership status, level of education, current employment and marital status. They were also asked to indicate their partner's level of education and current employment status. Parents were not asked whether they had been involved in any parenting interventions prior to participating in this study

## Results

Data were entered on computer for analysis using SPSS for Windows. Significance levels were set at  $p < .05$  unless otherwise stated.

### *Sample characteristics*

Data were analysed for 468 parents or permanent care-givers who reported information about a child aged between 12 and 14 years, although there were missing data from some survey forms which reduced the data set to a minimum of 456 for some analyses. A description of the sample follows, including Chi-square analyses of the relative proportions of parents from the Townsville and Melbourne data sets for the major demographic and socioeconomic variables. Table 1 displays a summary of parent data for the two sub-sets for the demographic and socio-economic indicators where significant differences were observed.

At the time of the study, the majority of children were aged 13 years (55%), with the remainder being 12 (34%), or 14 (8%). A small proportion of parents omitted to record the child's age. For the full sample, girls (54%) slightly outnumbered boys (46%). However, this distribution was different for the two sub-samples. In the Melbourne sample there were twice as many girls (66%) as boys (34%), whereas in north Queensland, boys (55%) outnumbered girls (45%) (Chi-square = 19.2,  $p < .001$ ). Parents completing the survey were the child's biological parent in 97% of cases. Of these, 86% were mothers, and 14% were fathers. Almost 80% of parents reported being married, with a further six percent in de facto relationships. The remaining fourteen percent

were predominantly separated or divorced (12%) with a few widowed or single (never married) parents. An analysis of the ratio of fathers to mothers in the two samples revealed no significant differences.

Over 95% of parents were aged between 30 and 50, although there appeared to be a higher proportion of younger parents in north Queensland. Because of small cell sizes at the extreme ends of the distribution, cells were collapsed to create two groups of parents aged younger or older than 40 years. Chi-square analysis confirmed that a higher proportion of parents in the Melbourne sub-sample were older ( $\chi^2 = 7.35, p < .01$ ).

Just over 80% of parents reported being born in Australia. However, Chi-square analysis confirmed that a higher proportion of parents in the Melbourne sub-sample were born somewhere other than Australia ( $\chi^2 = 14.5, p < .001$ ). Parental level of education showed a bimodal distribution with just over one-third of parents (36.3%) reporting their highest level of education as year 10/11, and another third

(32.3%) reporting a tertiary degree or diploma. Cells were again collapsed to create 2 groups of parents completing more than year 12 education or less than this. Chi-square analysis confirmed that a higher proportion of parents in the Melbourne sub-sample had completed higher levels of education ( $\chi^2 = 9.9, p < .005$ ).

Other socioeconomic variables analysed were level of home-ownership, welfare or pension receipt, and employment status. Over three-quarters of parents (77.3%) reported owning or buying their own home, although the proportion in Melbourne (83%) was significantly higher than that in north Queensland (73%) ( $\chi^2 = 6.4$ ). The proportion of parents receiving welfare or pension payments was 14.3%, although it was significantly higher in Melbourne (18.5%) than in north Queensland (11.2%) ( $\chi^2 = 5.0$ ). Of the full sample, 299 (64%) reported being in full- or part-time employment, with a further 24% employed on home duties, studying, or receiving a pension. Of the 399 parents who reported having a partner, 319 (80%) reported having partners who were also in the full- or part-time workforce.

**Table 1. Comparison of demographic and socio-economic data from Townsville (n = 268) and Melbourne (n = 200) samples.**

Parent variable	Townsville %	Melbourne %	Combined %
<b>Age</b>			
39 or younger	53.4	27.4	42.3
40 - 49	42.5	63.5	51.4
50 or older	4.1	9.1	6.2
<b>Country of birth</b>			
Australia	86.2	72.0	80.1
Elsewhere	13.8	28.0	19.9
<b>Level of education</b>			
Year 9 or below	5.6	10.0	7.5
Year 10 or 11	45.9	23.5	36.3
Completed year 12 or trade training	20.9	12.0	17.1
Tertiary diploma or degree	23.9	43.5	32.3
Post-graduate qualification	3.7	9.5	6.2
<b>Home ownership</b>			
Own or buying home - Yes	73.1	83.0	77.4
Own or buying home - No	22.9	17.0	22.6
<b>Welfare or pension recipient</b>			
No	88.8	81.5	85.7
Yes	11.2	18.5	14.3

**Table 2. Listed undesirable adolescent behaviours for boys, girls and combined sexes, ranked by proportion of parents reporting occurrence and concern.**

Behaviour	Boys (n=209)		Girls (n=247)		Combined (n=468*)		
	% Occur	Rank	% Occur	Rank	% Occur	Rank	% Concern
Fighting with siblings	52	1	52	1	50	1	11
Talking back to adults	49	2	46	2	47	2	9
Moodiness or irritability	41	3	46	2	44	3	7
Watching too much television	38	4	29	4	33	4	4
Angry arguments	23	8	23	5	23	5	5
Lack of physical activity	23	8	23	5	22	6	4
Not doing homework	33	5	11	14	22	7	7
Finding school difficult or not trying hard enough	27	7	12	11	19	8	7
Overly influenced by friends	19	10	19	7	19	9	6
Sulking	21	10	15	8	17	10	1.5
Found to have lied about something	17	12	13	10	14	11	4
Unhappy with school	14	14	15	8	14	12	3
Playing computer games too much	28	6	3	20	14	13	2
Negative attitude, overly pessimistic	16	13	12	11	13	14	5
Rebellious	13	15	10	16	12	15	2
Abusive or offensive language	12	16	10	16	11	16	3
Deliberate disobedience	11	17	9	19	10	17	3
Crying or emotional distress	9	18	11	14	10	18	3
Throwing tantrums	9	18	12	11	10	19	2
Shyness	8	20	10	16	9	20	1.5

12 parents failed to report the sex of the target adolescent

### *Undesirable Adolescent Behaviours*

Table 2 reports the 20 most common undesirable behaviours based on the percentage of parents reporting them as occurring during the previous month, and the percentage of parents circling the item as an indication that the behaviour caused serious concerns for their family. Items were ranked for boys and girls separately and for the combined sample.

Over 40% of parents reported fighting with siblings, talking back to adults, and moodiness or irritability as the three most common problems experienced for both boys and girls. Between seven and eleven percent of parents reported these problems caused them serious concern. Inspection of the two geographically separate data sets revealed no differences in these top rankings. After these top three issues, parents with adolescent boys reported slightly different problems, but only in the order in which they occurred. Of the ten most common problems reported, girls were less likely to be having trouble with school, and boys were more likely to be playing computer games too much. Inspection of the two separate data sets revealed

considerable symmetry in the top 20 ranked behaviours, both for boys and girls separately, and for the combined samples.

Items were then selected from the checklist of undesirable behaviours to index various forms of adolescent adjustment problems. A first index was formed to indicate externalising behaviour problems. At the first step items were aggregated indicating more serious conduct problems, each of individual low prevalence. The items that were summed at this step were; Self-harm (cutting or burning self) reported by 3 parents (0.6%), Stealing from home – 7 parents (1.5%), Physically bullying others – 19 parents (4.1%), Police contact regarding the child's offending – 8 parents (1.7%), Hitting parents – 2 parents (0.4%), Hitting others – 25 parents (5.3%), Fire-setting – 2 parents (0.4%), Deliberate household property damage – 3 parents (0.6%), and, Running away from home – 5 parents (1.1%). A total of 47 parents or 10% of the sample reported one or more of these behaviours. To extend this index, a further four items were aggregated to reference more common oppositional or rebellious adolescent behaviours. The four items that were summed at this step were; Abusive or

offensive language - reported by 52 parents (11.1%), Deliberate disobedience – 48 parents (10.3%), Rebelliousness – 57 parents (12.2%), and, Found to have lied about something – 72 parents (15.4%). One hundred and forty parents (29.9%) reported at least one of these oppositional behaviours, and 57 parents (12.2%) reported two or more. Responses showed moderate internal consistency across all the externalising behaviour items ( $\alpha = 0.65$ ). Forty-three parents (9.2%) indicated that one or more of the externalising problems caused serious concern to their family.

A second index aggregated three items relevant to school difficulties. These were: Not doing homework (103 parents, 22.0%), Unhappy with school (66 parents, 14.1%), and, Finding school

difficult or not trying hard enough at school (90 parents, 19.2%). One of these problems was reported by 157 parents (33.5%), while 76 parents (16.3%) reported more than one problem. Responses appeared moderately interrelated across these items ( $\alpha = 0.65$ ). At least one of these problems caused serious concern to the family for 63 parents (13.4%).

A third index was formed to measure internalising behaviours. The six items that were summed to form this index were: Crying or emotional distress (46 parents, 9.8%), Depression (17, 3.6%), Nervousness (26, 5.6%), Sadness (28, 6.0%), Negative attitude / overly pessimistic (63, 13.5%), and, Not eating meals/excessive dieting (12, 2.6%). These

**Table 3. Listed desirable adolescent behaviours for boys, girls, and combined sexes, ranked by proportion of parents reporting occurrence and wishing to learn how to teach them.**

Behaviour	Boys (n=205)		Girls (n=239)		Combined (n=468)		
	%Occur	Rank	%Occur	Rank	%Occur	Rank	%Teach
Helped with household tasks	78*	1	87*	1	84	1	5
Assisted with meals, dishes	70**	2	84**	2	77	2	2
Let parents know how things were going at school	65**	4	85**	3	76	3	4
Generally communicated well with adults	70*	2	79*	4	75	4	3
Helped with cleaning, vacuuming, tidying up	62**	6	75**	5	69	5	3
Showed confidence and skill in social situations	57*	8	67*	6	62	6	4
Showed appropriate respect and appreciation of others	59	7	62	7	60	7	5
Assisted with rubbish, house maintenance, gardens	63**	5	48**	10	56	8	3
Cared for another family member (eg baby sat)	39**	12	56**	8	49	9	2
Participated in planning family activities	43*	10	52*	9	48	10	1
Managed tensions or frustrations in sport etc	42	11	44	11	43	11	4
Negotiated things they wanted with reasonable patience	36	13	44	11	41	12	7
Enjoyed adventure and/or risk-taking without hurting self or others	44	9	37	13	40	13	2
Tried hard to manage emotions such as anxiety, fear, anger	28*	14	36*	14	32	14	7
When in a bad mood, didn't take it out on others	25	15	23	15	25	15	7
Politely refused unreasonable requests from others	14	17	19	16	17	16	3
Had trouble calming him/herself when tense or upset	16	16	13	17	14	17	6

\*\*  $p < .01$ , \*  $p < .05$

behaviours demonstrated moderate internal consistency ( $\alpha = 0.62$ ). Of the parents, 116 (24.8%) reported one or more of these behaviours, with 47 (10.0%) reporting two or more. At least one of these problems caused serious concern to the family for 40 parents (8.5%).

**Desirable Adolescent Behaviours**

Table 3 reports the most common desirable behaviours based on the percentage of parents reporting them as occurring during the previous month, and the percentage of parents circling the item as an indication that they would like to receive parent education to help them teach their adolescents to increase or improve the behaviour. Items are ranked for boys and girls separately and for the combined sample.

Between 62% and 84% of parents reported that their adolescent: Helped with household tasks; Assisted with meals and dishes; Let parents know how things were going at school; Generally communicated well with adults; Helped with cleaning, vacuuming, and tidying up; and, Showed confidence and skill in social situations. Between two and five percent of parents reported an interest in learning how to teach these behaviours. Chi square analyses of parents’ reports for boys and girls revealed that girls were significantly more likely than boys to engage in these behaviours. Girls were also significantly more likely than boys to care for another family member, participate in planning family activities, and try hard to manage

emotions. Assisting with rubbish removal, house maintenance, and gardening were the only activities where boys were significantly more likely to be engaged than girls. Inspection of the two separate geographical data sets revealed no differences in the top rankings.

**Weekly Adolescent Time-use**

Table 4 displays the percentages of parents reporting three co-operative and two potential risky behaviours engaged in by their teenager during school days.

Although the vast majority of parents (89%) reported that their teenager enjoyed some time with them on a regular basis, 10% reported this occurring on fewer than 2 days each week. A slightly lower proportion of parents (86%) reported their teenager completed homework and prepared for school on at least two days each week, although only 60% of parents reported the same frequency of completing household duties of half an hour or longer. In relation to risky behaviour, almost 90% of parents reported their teenager rarely or never went out without saying where he or she was, or when they were coming back, although 3% of parents reported this occurring on two or more days each week. Teenagers spending time unsupervised after school was more common, with only 55% of parents reporting this happening rarely or never, and 15% of parents reporting this occurring on at least two days a week or more. Inspection of the data sets for the two locations revealed no significant differences.

**Table 4. Percentages of parents reporting teenager activity from Monday to Friday**

Activity	Most days	2-3 days per week	Weekly	Less than weekly	Rarely or never
Enjoyed some time with parents	81.4	7.9	6.6	2.1	1.3
Completed homework and prepared for school	72.4	14.3	8.1	2.6	2.4
Spent half an hour or more completing household duties	30.4	29.3	24.8	6.4	7.7
Went out without saying where he/she was going or when he/she would be back	1.5	1.7	2.6	2.2	90.7
Spent an hour or more after school with friends unsupervised by adults	6.1	9.3	11.7	17.1	55.2

**Table 5: Percentages of parents reporting emotional dependence on adolescent behaviour during the previous month (n = 468).**

Feeling or belief	Almost always	Often	Occasionally	Rarely or never
My child got me upset	3.9	14.2	39.0	42.9
My ability to feel good was completely linked to my child	15.8	15.8	23.9	44.1
I felt my child was making their own decisions in life	18.1	29.7	29.0	22.9
I found I couldn't be happy when my child was not happy and healthy	26.7	14.7	21.8	36.8
I found myself constantly worrying about my child	16.1	11.4	29.9	42.6
I felt very responsible for my child's misbehaviour	11.2	6.6	19.0	63.2
I could stand back and separate myself from my child's actions	24.9	16.2	21.4	37.5
I had to put my needs aside to adequately care for my child	21.8	19.0	28.4	30.7

### *Parents' Emotional Dependence on Adolescent Behaviour*

Table 5 displays the proportion of parents reporting the degree to which their emotions were related to their teenager's behaviour.

Only 18% of parents reported that their teenager got them upset often or almost always, but larger proportions of parents reported feelings or beliefs at these levels for the other seven items. For example, almost one-third of parents reported that their ability to feel good was often or almost always completely linked to their teenager (31.6%), and over a quarter (27.1%) reported that they found themselves often or almost always constantly worrying about their teenager.

### *Family Conflict*

Table 6 displays the proportion of parents reporting family conflict during the previous month. Almost 80% of parents reported that the conflict situations described by the items happened rarely or never, while around 15% reported these occurring occasionally. However, six percent of parents reported angry arguments often or almost always where something got broken or someone got hurt, with similar but slightly lower percentages reporting hostility or angry conflict, or adults hurting each other with angry words at this level of frequency. Inspection of the two sub-sample data sets suggested that more parents in the north Queensland sample were likely to use the extreme ends of the 4-point scale. However, when cells were collapsed to form two categories (Almost always/Often, and Occasionally/Rarely or never) Chi square analyses revealed no significant differences.

**Table 6: Percentages of parents reporting family conflict during the previous month (n = 468)**

Activity	Almost always	Often	Occasionally	Rarely/Never
People in the family had angry arguments where something was broken or someone got hurt	2.5	3.7	15.5	78.3
There was hostility or angry conflict between a parent and another adult	1.6	4.0	15.7	78.7
Adults in our family hurt each other with angry words	1.9	3.0	16.4	78.7

**Table 7. Parent mental health (n = 468)**

<b>Mental Health item</b>	<b>All of the time</b>	<b>Most of the time</b>	<b>A good bit</b>	<b>Some of the time</b>	<b>None of the time</b>
Have you been a very nervous person?	3.2	5.4	10.3	32.8	47.9
Have you felt so down in the dumps nothing could cheer you up?	1.5	3.6	9.2	25.1	59.7
Have you felt calm and peaceful?	27.5	31.2	20.0	15.7	4.3
Have you felt downhearted and blue?	1.9	5.6	13.5	44.0	34.3
Have you felt optimistic about the future?	35.8	28.3	13.9	15.2	5.8
Have you been a happy person?	45.6	32.1	9.9	11.1	0.9

### ***Mental Health***

The majority of parents reported positive mental health. However, between 14% and 21% of parents reported feeling nervous, down in the dumps, or downhearted and blue, a good bit, most, or all of the time. Proportions of parents are reported in Table 7. Inspection of the two sub-sample data sets again suggested that more parents in the north Queensland sample were likely to use the extreme ends of the 4-point scale. However, when cells were collapsed to form two categories (All of the time / Most of the time / A good bit, and Some of the time / None of the time) Chi square analyses revealed no significant differences. Parents who reported negative emotions (feeling down in the dumps, downhearted and blue, not optimistic, and not a happy person), in the three higher frequency categories were significantly more likely to report higher frequencies of the three conflict items from the previous family relations section (angry arguments, conflict between parent and another adult, and adults in the family hurting each other with angry words).

### ***Family and Demographic Variables***

In order to investigate the relationship between problematic externalising behaviours and other variables, parents were divided into two categories, based on whether they reported their child demonstrating one or more serious external problems in the previous month. These included items such as self-harming, stealing from home, physically bullying others, hitting, fire-setting, deliberate property damage, and running away from home. A second group allocation was made on the basis of whether parents reported one or more depressive behaviours being exhibited by their teenager, characterised by the three items:

crying or emotional distress, depression, or sadness. Chi-square analyses revealed no significant association for child's externalising behaviour or depressive behaviour, with age of parents or parent's country of birth. However, significant associations were obtained relating to whether parents owned their own home or not, and whether or not parents were in receipt of welfare or a pension. A significantly higher proportion of parents who were not buying their own home reported that their children had displayed one or more of the serious external behaviours ( $\chi^2 = 11.8$ ,  $p < .001$ ), and this pattern was repeated for parents in receipt of welfare or pension payments (Chi square = 5.4). In addition, a significantly higher proportion of parents who were not buying their own home reported one or more depressive symptoms for their child ( $\chi^2 = 4.4$ ), although this pattern was not repeated for parents in receipt of welfare or pension payments. Also, being in receipt of a pension was not significantly related to any of the top ten most common negative adolescent behaviours, and nor was level of parent education, although significantly more parents with less formal education reported their children found school difficult ( $\chi^2 = 4.3$ ).

### **Discussion**

Based on the information provided by these parents, it appears that the most common problems they experienced with their young adolescent children could be classified as sibling conflict, engaging in undesirable behaviour (watching television, not enough exercise, not completing homework, peer influence), conflict with parents (talking back, angry arguments), and moodiness or irritability (including sulking). These same items are those that also caused parents most concern. These issues should then

feature strongly in any early intervention program that aims to engage parents of young adolescent children.

Although there was some suggestion that parents of teenage boys experienced more school-related problems, this distinction between boys and girls was more evident regarding the occurrence of desirable behaviours, with girls being reported as more likely to help around the home. However, only small proportions of parents expressed interest in receiving assistance to increase the frequency of chore-related behaviours. It is unclear whether this is because parents are satisfied with the current level of these behaviours, believe teenage children should not be required to assist around the home, or believe the effort of making this happen to be too great. The behaviours selected by the highest proportion of parents to receive assistance or advice were related to emotional management (negotiated things they wanted with reasonable patience, tried hard to manage emotions, managing being in a bad mood without taking it out on others, showed appropriate respect and appreciation of others, and learning to calm down when tense or upset). This may suggest that parents consider teaching children to do chores, something they are able or expected to do, whereas emotional management may be more difficult and legitimate to seek help for.

One of the most powerful risk factors identified in the literature has been poor supervision and monitoring of teenagers by parents. This study shows that over a quarter of parents reported their teenager spent an hour or more after school with friends unsupervised by adults at least once a week. Almost five percent indicated their teenager went out without saying where they were going or when they would be back, at least weekly. While this shows the majority of parents supervise their teenage children, there is a minority who are already behaving in ways that have the potential to expose their teenagers to significant risk, and set them on a trajectory that may lead to serious consequences. Although parents may not consider these to be issues that would lead them to engage in parent education, early intervention programs will need to incorporate information about the risks associated with poor supervision and monitoring,

and suggest strategies to assist parents maintain or increase these activities.

It appears that many parents find themselves inextricably linked with their teenager's welfare with high proportions reporting substantial concerns and emotional links. While this may in part offer a positive finding, there is nevertheless some evidence that some parents find it difficult to appropriately negotiate a changing relationship with their teenager that actively promotes their teenager's growing autonomy and emotional independence. It is possible that parents might be encouraged to more readily participate in parenting programs if the advantages of such a change in the parent-teenager relationship were more widely publicised as being achievable.

Although almost 80% of parents completing the survey reported serious conflict occurring rarely or never within the family, this leaves over 20% where such events occur occasionally or more frequently. If we assume that parents in families where such conflict is common may have been reluctant to complete the survey, this proportion could be expected to be higher. Coupled with the comments from parents indicating they would be interested in receiving assistance in teaching their teenager to better manage their emotions, this area would also seem critical for any program intending to provide effective advice to parents of teenagers.

The literature on early intervention with younger children has consistently shown parental depression to be a major risk factor for the development of problem behaviours in children. This may be because of the difficulty for depressed parents of providing positive attention, parental monitoring, and consistent discipline. The data in the current study seem to indicate that similar associations are present for parents of older children. This is to be expected as the demands of parenting older children tend to increase with age, especially if the children have experienced parental depression during their earlier years. Parents who are depressed are also less likely to attend education or training sessions about parenting (or about anything), due to the nature of the disorder. Early intervention programs thus need to find ways to identify and

encourage depressed parents to seek treatment for their depression, and for their parenting skills. For many parents these can be conducted concurrently as the issues are often related, but collaboration with general practitioners may be vital if depressed parents are to be referred to effective treatment for depression, as well as to programs to assist their parenting.

Finally, some socioeconomic variables, do seem to be implicated in some aspects of parenting, with more severe teenager problem behaviours being negatively associated with home-ownership, and positively associated with receipt of welfare or pension payments. Teenager depressive behaviours were also shown to be negatively related to home ownership. These findings suggest that it is crucial for parents in poorer economic circumstances to gain access to parenting programs. Such programs therefore must be affordable and accessible. This may include the provision of programs at times, and in locations, where parents can easily attend. Apart from these variables which seem to differ somewhat between the two geographical samples, there were few differences observed between parents of teenagers in Melbourne and those in regional northern Queensland. This lends further support to the view that the issues confronting parents are similar no matter where the family is located, and that generic programs can be devised that will provide assistance to a broad range of parents.

### ***Methodological considerations***

The main limitation of the findings reported here relates to the method of data collection. The mean return rate of 28% raises questions about the representativeness of the views reported and necessarily limits the degree to which the results can be generalised. Sending questionnaires home with school children is a cheap and efficient way of disseminating questionnaires to parents. However, there is no way of knowing how many are delivered. The likelihood of children failing to deliver such questionnaires increases when the survey asks questions which may reflect badly on the children themselves. It is therefore likely that a higher proportion of parents with problematic behaviours to report may never have been given that opportunity, compared to parents with fewer problems to report. There were also

no inducements offered for parents to complete and mail the completed survey, although the provision of prepaid addressed envelopes was designed to reduce financial cost and effort. Historically, questionnaires have produced a relatively low rate of return and yet are considered a useful and cheap way of gathering useful information. However, caution is needed in interpreting findings too widely, especially as the sample may represent only parents who are motivated to report on their parenting experiences. Whether these can be considered representative of parents in general is uncertain.

### **Conclusion**

This study provides preliminary information about some of the salient issues being experienced by parents of young teenage children. To be successful in preventing the development of serious adolescent behaviour problems in our communities, parenting programs must be effectively delivered in a way that makes them attractive, relevant, and accessible to large numbers of parents. Although issues of attractiveness and accessibility are the subject of other papers, this paper does speak to the issue of relevance. It is established that parents are more likely to participate in parenting programs where they believe that the program will address issues that are personally relevant to them. While parents will have different issues they wish to address, the inclusion of problems known to be common to many increases the probability that such a program will indeed be seen as relevant. The information gleaned from this survey has therefore provided valuable information for the further development of programs to assist parents of teenagers. One such example is the Teen Triple P – Positive Parenting Program, an upward extension of the Triple P program for parents of younger children. In extending the Triple P program for parents of teenagers, many of the concerns raised by parents and reported in this study have been incorporated into the materials and strategies that comprise the Teen Triple P program. Further detail about these components and a preliminary evaluation of the Teen Triple P program is provided in a second paper in this issue (Ralph & Sanders, 2003).

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