

PERCEIVED EFFECTIVENESS OF BOOSTER SESSIONS FOLLOWING A  
STEPFAMILY EDUCATION COURSE

by

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## ABSTRACT

Perceived Effectiveness of Booster Sessions Following a Stepfamily Education Course

by

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The study's purpose was to determine if participants reported that booster sessions following a stepfamily education course were effective. Agencies in northern Utah that provide services to low-income (including minorities) families were used to recruit a sample of 487 males and 560 females. Participants were required to be in a relationship that formed a remarriage or to have children from a previous relationship, forming a stepfamily. Booster sessions were educational meetings that occurred four to six weeks after the completion of the stepfamily education course. Intervention theory states that as protective factors are implemented through prevention education they lessen the effects of risk factors in participants' lives. Booster sessions were focused on reiterating protective factors taught in the stepfamily course material and served as a protective factor through offering continued support to participants. A self-report measure was used at the completion of the booster session. Participants were asked if the booster session was worthwhile (fun, educational, and worth their time), if they learned

something, and if they recognized a change in their knowledge base concerning healthy stepfamily skills through attending the booster session. Participants consistently reported that they did find the booster session worthwhile, that they learned something, and that they increased in knowledge concerning healthy stepfamily skills. Although all participants reported that booster sessions were effective, Latino participants reported higher averages than Caucasian participants in research questions two and three. Study findings suggest that booster sessions can serve as a means of increasing educational gains of participants after the conclusion of course material. Also, discussion is provided concerning the implications of providing family life education for the Latino population.

(81 pages)

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# CHAPTER I

## INTRODUCTION

This chapter will review literature documenting the growing prevalence of stepfamilies. Consideration will be given to educational programs developed for stepfamilies and evaluation of programs. Incorporating and evaluating booster sessions in conjunction with stepfamily education courses will be discussed. Finally, the purpose of the current study will be addressed.

### Stepfamilies

In 1969 the well-known show “The Brady Bunch” aired on national television for the first time (Shwartz, 1969). This show spotlighted the marriage of widower Mike Brady and widow Carol Martin and their upper middle-class family. The family was unique in the sense that Mike had three sons from his previous marriage and Carol had three daughters from her previous marriage. This sitcom stepfamily shared a number of adventures concerning their family formation over several television seasons. Carol and Mike did have some different opinions about gender roles and parenting decisions occasionally, but always resolved these issues quickly and maintained a high level of marital satisfaction.

Although “The Brady Bunch” served as entertainment and an introduction to the increasing prevalence of stepfamilies in the United States, the show provided limited information about the realities of stepfamilies. Traditionally, early stepfamilies in

America were formed through remarriage after the death of a spouse (Robertson et al., 2006). In the later 20<sup>th</sup> century a more complex stepfamily developed as there was an increase in life expectancy and in divorce rates. Also, there was an increase in first marriages involving children born out-of-wedlock and an increase in cohabitation involving children which lead to formation of these more complex stepfamilies (Ganong & Coleman, 2004; Teachman & Tedrow, 2008). These stepfamilies have existing relationships inside and outside of the household (e.g., non-residential parent, children living with ex-spouse; Ganong & Coleman; Robertson et al.; Teachman & Tedrow).

Roberston et al. (2006) reported that the risk of first marriage disruption increases when marriages are economically disadvantaged. Divorce rates are also higher among minority populations in the United States. A majority of divorced individuals go on to remarry within five to ten years after divorce (Robertson et al.). Many of these remarriages involve children from previous relationships and there is also some evidence that these remarriages dissolve more quickly than first time marriages (Robertson et al.; Whitton, Nicholson, & Markman, 2008). It has been found that the best outcomes for stepfamilies come from having realistic stepfamily expectations and a strong couple relationship (Adler-Baeder & Higginbotham, 2004; Visher, Visher, & Pasley, 2003; Whitton et al.).

As the prevalence of stepfamilies has increased and the unique issues that are involved in stepfamilies have been identified, it has become apparent that there are limited educational resources and supports designed specifically for stepfamilies (Adler-Baeder & Higginbotham, 2004). Robertson et al. (2006) contacted representatives from

40 different agencies that provided services for low-income families and individuals. Findings from this contact included these agencies having a high accessibility to low-income stepfamilies. The agencies were also very interested in supporting and addressing the needs of these stepfamilies. Using agencies that already cater to the needs of low-income families could increase the possibility of providing stepfamily education resources to more low-income minority stepfamilies (Robertson et al.).

### Stepfamily Education

Family life education (FLE) has been developed to meet the needs of families and individuals (Thomas & Arcus, 1992). As new family forms are developing and specific needs of families and individuals are changing, programs are evolving and new programs are being developed to meet these needs (Powell & Cassidy, 2001). In providing FLE for stepfamilies it is important to give consideration to the unique aspects of these families (Adler-Baeder & Higginbotham, 2004; Hughes, 1994; Whitton et al., 2008). Satisfied stepfamilies are families that develop realistic expectations and strong couple relationships (Adler-Baeder & Higginbotham; Visher et al., 2003; Whitton et al.). Successful stepfamily education courses should provide objectives to meet these two goals.

Although several stepfamily education programs have been developed there is still limited information about the evaluation of these programs (Adler-Baeder & Higginbotham, 2004). Understanding the initial, intermediate, and long-term effects of all FLE programs is essential in ensuring that the needs of the participants are being met

(Powell & Cassidy, 2001). This information is obtained through program evaluation. Each aspect of the stepfamily education program should be evaluated including the content, instructional style, and the implementation of the program (Hughes, 1994). Evaluating stepfamily education programs provides information that can lead to the improvement and evolution of programs that meet the unique needs of stepfamilies (Adler-Baeder & Higginbotham; Hughes).

### Booster Sessions

FLE program developers are particularly interested in increasing the lasting effects of education for participants (Hawkins, Carroll, Doherty, & Willoughby, 2004; Hughes, 1994). With this in mind some programs have included *booster sessions* at the conclusion of course content (Accordino & Guerney, 2003; Braukhaus, Hahlweg, Kroeger, Groth, & Fhem-Wolfsdorf, 2003; Clarke, Rohde, Lewinsohn, Hops, & Seely, 1999; Guerney, Voglesong, & Coufal, 1983). Booster sessions are meetings that occur less frequently when the content of the program is complete. These sessions are opportunities for participants to review course material, ask questions, discuss problems, and receive additional support (Clarke et al.). Time periods between course completion and booster sessions are individually defined by each FLE program.

Hughes (1994) suggested thorough FLE program evaluation should involve evaluating the implementation process, which would include booster sessions. There is research on booster sessions that provides evidence that there is a potential value to including booster sessions in FLE programs (Accordino & Guerney, 2003; Baer,

Williams, Osnes, & Stokes, 1984; Baggs & Spence, 1990; Braukhaus et al., 2003; Clarke et al., 1999; Guerney et al., 1983; Krauss, Godfrey, O'Day, & Friedin, 2006). Current research has suggested that booster sessions can aid in the maintenance of gains, recovery of gains, and increase gains of participants in various FLE programs. Further evaluation of booster sessions is needed to support these findings.

### Intervention Theory

Theory is an important component of research and provides structure for understanding phenomena (Chibucos & Leite, 2005). Theory is composed of a set of empirically testable propositions that explain the interconnectedness among a set of concepts formulated to explain phenomena (Chibucos & Leite; Leary, 2004). Theory can provide a framework for predicting what outcomes to expect before research is conducted (Leary). One theory that was developed with the intention of improving prevention programs is intervention theory (Coie et al., 1993).

Intervention theory is based on the interaction between risk factors and protective factors. Risk factors increase vulnerability to the development of disorders or dysfunction (Coie et al., 1993). These risk factors can be personal dispositions and environmental risk factors. A person's overall risk for dysfunction is found in the interaction between personal and environmental risk factors. Dysfunction is reduced through intervening at the individual level and/or in the environmental level using protective factors. Protective factors are factors that improve resistance to the risk factor or to the effects of the dysfunction (Coie et al.).

Intervention theory also requires that the prevention should be targeted at those who are at “high risk” (Coie et al., 1993). These individuals and families can be difficult to reach, thus special efforts must be taken to get them to participate in prevention programs (e.g., using agencies that provide services for these individuals and families). Particular attention must be given to the cultural implications in the prevention program, recognizing that the program may be effective with one culture and not another. Coie and colleagues encouraged researchers to investigate prevention program effectiveness with people from multiple cultures. Understanding the effectiveness of a prevention program should be done looking at both intermediate outcomes and long-term outcomes.

#### Purpose of Current Study

The current study is part of Higginbotham’s (2006) grant that was awarded by the U.S. Department of Health and Human Services to educate lower-income, ethnically diverse stepfamilies in Utah about healthy marital skills. The preexisting *Smart Steps* (Adler-Baeder, 2001) stepfamily education program was used to teach these skills. Booster sessions were held 4-6 weeks after the conclusion of the coursework.

The purpose of this study was to evaluate booster sessions at the conclusion of a stepfamily education course in northern Utah. The evaluation was specifically focused on participant’s perceptions of booster session’s effectiveness (e.g., whether they stated the booster session was worthwhile, if they reportedly learned something from the booster session, and if they reported an increased in their knowledge of stepfamily skills through attendance at the booster session). Evaluating the booster sessions should provide some

information relating to the effectiveness of the booster sessions in meeting the needs of participants. The study furthers research about the perceived effectiveness of booster sessions in general and provides some evaluation of the perceived effectiveness of the implementation process of Higginbotham's (2006) stepfamily program.

## CHAPTER II

### LITERATURE REVIEW

This chapter reviews recent changes in the area of family life education (FLE). There is a focus on the development and evaluation of education programs that are designed specifically to meet the needs of stepfamilies. The evaluation process is explored examining several different types of family education programs. The examination leads to research questions concerning the evaluation of booster sessions following a stepfamily education program that is connected with a stepfamily education grant in Utah.

#### Family Life Education

Family life education has been developed with the purpose of enriching and strengthening individual and family well-being (Thomas & Arcus, 1992). A variety of topics are addressed and taught under the umbrella term of FLE. Families and individuals are introduced to topics such as interpersonal relationships, family interaction, human development, parenting, and family resource management (Powell & Cassidy, 2001; Thomas & Arcus). Emphasis on the processes of decision-making, communicating, and problem-solving are evident in all areas of family life education to strengthen and enrich families and individuals (Thomas & Arcus). Courses have been designed to meet the changing needs of families and individuals throughout time; these include parenting skills courses, relationship enrichment courses, sexuality education courses, and premarital education courses (Powell & Cassidy). These courses continue to evolve as they are used

in diverse settings and as family and individual needs continue to change (Powell & Cassidy).

### *Marriage Preparation Courses*

Silliman and Schumm (1999) explained that there has been an increasing demand for FLE in the area of premarital education. Before World War II, marriage preparation was primarily offered through the clergy, community counseling, and a few college classes. After the war, a more systematic approach to marital preparation was introduced in pastoral counseling and therapy (Silliman & Schumm, 2000). The increase in demand for marital preparation has been associated with a better understanding of the factors linked with marital satisfaction, the increase in divorce rates and domestic violence, the growing evidence of the success of these programs, and the increasing interest in preventative care (Silliman & Schumm, 1999). Silliman and Schumm (2000) stated that it is the general consensus among marriage and family scholars and practitioners that strengthening marriage will benefit not only couples but also their families and communities.

Several different premarital and marital enrichment courses have been developed and evaluated (Silliman & Schumm, 2000). The Couple Communications Program (CCP) was designed to teach couples positive verbal and nonverbal communication skills (Miller, Nunnally, & Wackman, 1976). After reviewing 19 studies that had been conducted on CCP, Wampler (1982) concluded that the CCP had immediate effects on communication and marital satisfaction. Another conclusion from this review, however, was that most of the communication skills were not maintained over time.

Another marriage enrichment course that focuses on teaching disclosure and empathy is the relationship enhancement (RE) program (Guerney, 1977). Brock and Joanning (1983) compared the effectiveness of RE and CCP. Marital couples who participated in the RE program showed a greater increase in communication and marital satisfaction than the participants in the CCP. Gains were found to be maintained by RE participants even after a 3-month follow-up.

Another well known program is Premarital Relationship Enhancement and Prevention (PREP; Markman, Stanely, & Blumberg, 2001). Skills are taught to couples in a group setting using cognitive-behavioral skills training. Schilling, Baucom, Burnett, Allen, and Ragland (2003) looked at longitudinal marital outcomes in couples who had learned PREP skills. A pretest and posttest design was used to determine positive or negative changes in communication. The results indicated that both men and women increased their positive communication skills. Men with increased positive communication were less likely to have marital discord. Another finding was that positive communication increases among women were associated with an increase in marital discord (Schilling et al.).

As programs have been researched and evaluated, alterations have been made to them to enhance their lasting effects (Silliman & Schumm, 2000). There is still a limited amount of information about the efficacy of these programs and FLE programs in general. Hughes (1994) explained that as the need for FLE increases, it is important to identify the criteria necessary for programs that will truly enrich individuals and families.

### *Stepfamilies*

A majority of the FLE programs that have been developed have catered to the needs of first-time married couples and first-time married couples and their children (Accordino & Guerney, 2003). Hughes (1994) encouraged FLE program developers to consider the populations with which they will be working. In recent years, more courses have been developed, although limited, to meet the needs of a variety of populations such as mother-daughter programs or college roommate programs (Accordino & Guerney). A particular population of interest in FLE is stepfamilies (Adler-Baeder & Higginbotham, 2004).

Stepfamilies are a growing demographic within the United States (Teachman & Tedrow, 2008). The rates of first marriages failing on a national level are just below 50% (Greene, Anderson, Hetherington, Forgatch, & DeGarmo, 2003; Robertson et al., 2006). The percentage of people who remarry after divorce in the United States is over 60% (Greene et al.). Several of these remarriages involve children from previous relationships. With a broader view of stepfamilies, it is also important to take into account the children living with a biological parent in a cohabitating situation (Teachman & Tedrow).

The 1994 Survey of Income and Program Participation (SIPP) surveyed around 37,000 households specifically asking for each person in the household and their relationship with every other person in the household (Teachman & Tedrow, 2008). Findings from the SIPP indicated that 7% of children under the age of 18 were living with at least one stepparent. Teachman and Tedrow explained that these statistics are from cross-sectional research which does not account for long-term changes. The reality

is that children can move in and out of family forms throughout their childhood. It is estimated that 25% of children will spend at least part of their lives in stepfamilies (Teachman & Tedrow).

As the members of stepfamilies are increasing on a national level and have a potential to increase on a state level, it is becoming more evident that support and educational resources are limited for this population (Adler-Baeder & Higginbotham, 2004). In a marriage baseline study in Utah it was discovered that there was a 30% divorce rate among low-income residents compared to the 15% rate found in the general Utah population (Schramm, Marshall, Harris, & George, 2003). The lower-income residents also reported that they had a desire to remarry and were more likely than the general population to be open to attending relationship education classes. Providing resources for stepfamilies is important because stepfamilies have an increased risk for lower marital satisfaction and/or divorce (Whitton et al., 2008).

## Program Development

### *Developing Family Life Education Courses*

When developing family life education courses, content for the courses should be based on a clearly defined theoretical perspective (Hughes, 1994; Powell & Cassidy, 2001). From this framework, it is important for developers to understand the context in which they will be using the theoretical perspective (e.g., marriage preparation, parenting, or single parenting). Developers should understand the general research about people and families in this context and address pertinent contextual issues in their programs

(Hughes). Having this understanding will provide a baseline for program design and implementation. It is important to provide education for all races, ethnicities, and socioeconomic backgrounds, as well as to recognize that individuals and families are unique and will have different reactions to different situations (Hawkins et al., 2004; Powell & Cassidy). Having a broad understanding of several theories can lead to understanding some of these differences. Hughes also recommends referring to and utilizing tools and techniques from other FLE programs that have been shown to be successful.

After the content development has taken place, FLE developers should begin to consider the instructional and implementation processes (Hughes, 1994). Hawkins and colleagues (2004) explained that there are different levels of dosage that can be used in FLE and should be taken into consideration in this phase of program development. A low level dosage utilizes media messages or pamphlets. A moderate level would make the program less time consuming but allows for more topic coverage. The high level dosage requires more time commitment which allows participants to explore a variety of topics at deeper levels.

Teaching plans should be varied at all dosage levels, including several different types of activities to cater to several types of learning styles (Hawkins et al., 2004; Hughes, 1994; Powell & Cassidy, 2001). Consideration must also be given to the time spent on each issue needing to be addressed (Hughes; Powell & Cassidy). The population that is being targeted should be considered in the development of a teaching plan as well as in implementing the program. Time must be spent understanding where the family or

individual is in the life-span (Hawkins et al.; Powell & Cassidy). Through the development and implementation processes, attention must also be given to the developmental stages of the participants involved to ensure that their needs will be met in an instructional manner that works with their cognitive abilities.

Understanding the demographics and populations where programs will be implemented should influence both the instructional and implementation processes (Hughes, 1994). When serving more than one culture, opportunities are available for recognizing common goals among cultures and building on unique strengths from different cultural backgrounds (Powell & Cassidy, 2001). Cultural needs will vary and understanding these needs is essential when developing FLE programs. Advertising, program materials, and instructional materials should be developed carefully, taking into account these cultural issues (Hughes).

According to Hughes (1994) the evaluation phase is the last step of program development. This phase of development has been viewed as a weakness in the field of FLE. Evaluation of programs is important in the evolution and success in the programs' abilities to enrich and strengthen individuals and families. Hughes suggested that every level of the development framework (content, instructional, and implementation) of the program should be evaluated. Powell and Cassidy (2001) stated that it is important to evaluate and understand the initial, intermediate, and long-term effects that are initiated through participation in FLE programs which is consistent with intervention theory (Coie et al., 1993). Documenting the outcomes and successes through program evaluation leads to the potential of influencing how human services are delivered in this country. The

evaluation process can also identify what is working and what needs to change to improve the quality of the program (Hughes).

*Developing Family Life Education  
Programs for Stepfamilies*

As family life education programs are developed for the stepfamily population, special consideration needs to be given to unique aspects of these families (Adler-Baeder & Higginbotham, 2004; Hawkins et al.; 2004; Hughes, 1994; Whitton et al., 2008). Research has shown that there are several issues that are part of the stepfamily formation and integration process (Ganong & Coleman, 2004; Visher et al., 2003; Whitton et al.). Issues involve developing unity among family members, resolving boundary disputes, addressing power issues, understanding conflicted loyalties, disbanding triangulation, and developing a unified rather than a fragmented couple relationship (Visher et al.).

Satisfied stepfamilies generally are formed when there is a strong couple relationship and when the family has realistic expectations (Adler-Baeder & Higginbotham, 2004; Ganong & Coleman, 2004; Visher et al., 2003; Whitton et al., 2008). To aid stepfamilies in the development of strong couple relationships and realistic expectations, programs should provide education about stepfamilies, strengthen couple relationships, build communication and problem-solving skills, develop parenting and step-parenting skills, and include information about working with children's nonresidential parents (Ganong & Coleman; Whitton et al.). As programs are developed and existing programs are evolving, it is essential to evaluate and determine whether the

unique needs of stepfamilies are being addressed (Adler-Baeder & Higginbotham; Whitton et al.).

A limited number of stepfamily FLE programs have been developed.

Olsen (1997) of Kansas State University developed *Stepping Stones*, a program that can be used as an at-home study program or a facilitated group program. The program consists of six lessons that include handouts and worksheets with relevant information for stepfamilies. The program specifically educates stepfamilies about stepfamily formation myths and facts, strengthening couple relationships, step-parenting, stepchildren, communication, and building support systems. No published evaluation information about *Stepping Stones* is currently available (Adler-Baeder & Higginbotham, 2004).

Adler-Baeder (2001) developed the 12-hour stepfamily education program entitled *Smart Steps*. *Smart Steps* was developed using a framework of ecological and systems theories. The program was designed based on existing research to be an interactive learning experience with group discussion, media presentations, and other interactive exercises. The program was developed to have separate sessions for stepparents and stepchildren occurring during the same time period. During the last 20 minutes of each session, parents and children come together to participate in family activities and/or discussions.

Adler-Baeder (2001) listed several objectives that are met through *Smart Steps*. Her program is designed so that stepfamilies will come away with a better understanding of laws and financial issues regarding stepfamilies, validation of feelings they have experienced in their stepfamilies, and development skills to adjust to change. Another

major emphasis of the program is to develop a stronger marital relationship as well as have a better understanding of child development and positive skills for step-parenting. General communication skills, problem-solving skills, and ideas for increasing positive behaviors are also emphasized. The program includes an evaluation component for presenters; however, recently some preliminary participant evaluation information about this program has been published (Higginbotham & Adler-Baeder, 2008).

### Program Evaluation

#### *Evaluating Family Life Education Programs*

During the evaluation stage, a program developer assesses whether the program is meeting the short-term needs of the clientele in the specific population. Silliman and Schumm (1999) reviewed several different marriage preparation courses to evaluate areas that could be improved. They found that the use of formal and informal assessments throughout the programs was more likely to describe the specific needs of the clients.

Silliman and Schumm (1999) also pointed out that if clients do not believe the preparation program is effective, they are no better off than when they had no marriage preparation at all. A large component in evaluating the effectiveness and satisfaction of family education courses is done through self-report instruments. Russell and Lyster (1992) used a sample of 196 couples to evaluate a marital preparation course using a consumer satisfaction survey. Results using the satisfaction survey showed that overall, the couples were very satisfied. Components that are especially helpful in the course were also identified through self-report instruments.

Hawley and Olson (1995) used self-report measures to evaluate whether newlywed couples saw marital enrichment courses as effective and worthwhile. Three marital enrichment courses were evaluated using 71 newlywed couples and a control group of 28 newlywed couples. The 71 couples were divided among three different programs, which included Training in Marriage Enrichment (TIME), Growing Together (GT), and Learning to Live Together (LLT). Two instruments were used following the completion of the courses. The first instrument evaluated 13 areas of marital functioning. The second instrument was a satisfaction questionnaire that asked the participants to rate their overall experience, whether the topics were relevant, whether they thought they had learned something from the program, whether they would do it again, and whether they would refer the program to a friend. Satisfaction was measured on two, five-option Likert scales. The Likert scales ranged from poor to excellent and from very little to an exceptional amount.

Findings showed very little difference among the three programs using the first instrument (Hawley & Olson, 1995). The majority of the couples responded on the satisfaction instrument that the overall experience was satisfying. Over 50% of the couples responded that they had learned very much or an exceptional amount during the course. Ninety-six percent of couples said they would do the course again and 98% said that they would refer friends to the course. A limitation from Hawley and Olson's study was that the follow-up study was done immediately after the completion of the course.

*Evaluating Stepfamily Education Programs*

Adler-Baeder and Higginbotham (2004) evaluated the curricula associated with eight different stepfamily education programs. Programs varied in length and implementation. Some were designed to be viewed on a DVD while others were 8-week courses. Programs were implemented using a variety of instructional styles. A common finding when reviewing these programs was that the evaluation and outcome information was extremely limited in all eight programs. More information needs to be provided about the effectiveness of the existing stepfamily education programs. This can be accomplished through documenting long-term and short-term effects using an experimental design.

Understanding that there is a need for more evaluation studies on stepfamily education programs, it is important to see what evaluation has been done with these programs. Nelson and Levant (1991) evaluated the effectiveness of a skills training program for parents in stepfamilies. A sample of 34 stepfamilies that had at least one child between the ages of 6 and 18 was used for this study. An experimental group consisted of 14 stepfamilies participating in the four 6-hour sessions in a 4-month time period. The program was designed to enhance communication and parenting skills that were intended to meet the needs specific to stepfamilies. Four self-report scales were used to measure parent's perceptions of children, children's perceptions of parents, and overall family adjustment and cohesion. A significant finding was that parents improved their communication by increasing desirable responses to their children when compared

to the control group. Children did not decrease or increase in their perceptions of acceptance or rejection from parents in the experimental group.

Another evaluation of a stepfamily education program was conducted by Michaels (2000). Michaels evaluated the pilot Stepfamily Enrichment Program (SEP) that was designed to consist of five 2-hour sessions. Sessions were conducted in groups with multiple couples in attendance. Objectives included normalizing stepfamily experiences, understanding the development of stepfamilies, strengthening marital relationships, relationships with biological and non biological children, and progress and future plans for stepfamilies. This study was designed to be a pilot study and the participants consisted of eight Caucasian remarried stepfamily couples. Data were collected weekly using self-report evaluations. After the final session, couples were engaged in a focus group to evaluate the program.

Overall, the participants of the Michaels (2000) study reported that they had gained knowledge through participation in the stepfamily education program. The results from this study were divided into important aspects of the SEP and suggestions for improvement. Couples stated that it was important to have a relaxed atmosphere where the facilitator made the participants feel like the experts. The participants also reported that it was important that each topic build upon previous topic/topics. Suggestions for areas of improvement were in the length of the program and the use of paperwork. Participants thought that the program needed to be longer to cover all the information. Most reported that paperwork was a negative aspect of the program, but could be useful in facilitating and initiating group discussion.

The general conclusion of the SEP pilot study was that the objectives from the program were met with the participants (Michaels, 2000). Michaels stated that further research would need to include the suggested changes to the program from the pilot study. Further research on the program would also need to include more ethnic diversity in sample, larger sample sizes, and control groups. The pilot study will aid in the evolution of the SEP.

Whitton and colleagues (2008) reviewed 20 different studies that evaluated programs and/or interventions used with stepfamilies. Particular interest was given to the evidence of the effectiveness of these stepfamily interventions. Interventions varied in number of sessions, who participated, and in the methods of implementation. Whitton et al. were also interested in discovering the quality of the program evaluation in these 20 different evaluative studies.

Results specific to the quality of program evaluation included that evaluations had small sample sizes (Whitton et al., 2008). The usefulness of the findings was also restricted because only six of the studies randomly assigned participants into active versus control groups. Additionally, follow-up data concerning outcomes were limited; only five of the studies reported any follow-up data. The outcome variables that were evaluated were different in each study and the authors suggested developing unified outcome variables for future research. Finally, there was also some difficulty in accessing the evaluative studies, where 6 of the 20 studies used in this review were unpublished dissertations. Realizing that these studies have their limits, the authors recognized their

value in beginning to provide preliminary data about the effectiveness of programs developed for stepfamilies.

As new stepfamily programs are developed and existing programs are developing, evaluation continues to be an essential component in discovering the effectiveness of the programs (Hughes, 1994). Higginbotham (2006) proposed and received a grant for educating ethnically diverse, low-income stepfamilies about healthy marriage skills in Utah. The proposal included using the already existing *Smart Steps* stepfamily education program (Adler-Baeder, 2001). Careful attention needs to be given to ensure that the unique needs of stepfamilies are being met through evaluation of this and other stepfamily programs (Adler-Baeder & Higginbotham, 2004). It is important to evaluate each aspect of the programs including the content, instructional process, and the implementation process (e.g., the value of using booster sessions; Adler-Baeder & Higginbotham; Hughes).

### Booster Sessions

One of the important components for family life educators to consider is in the lasting effects of the education for the participants (Hawkins et al., 2004; Hughes, 1994). To understand the lasting effects of an intervention, follow-up studies can be conducted. One technique that has been utilized in some therapeutic and educational programs is the incorporation of *booster sessions* (Accordino & Guerney, 2003; Baer et al., 1984; Baggs & Spence, 1990; Clarke et al., 1999; Hawkins et al., 2004; Krauss et al., 2006). Booster sessions are less frequent meetings that occur after the specific curriculum or program

material is completed (Accordino & Guerney; Braukhaus et al., 2003; Clarke et al.; Guerney et al., 1983; Williams et al.). Booster sessions are an opportunity to review material from the course, discuss questions and problems in implementing the information, and evaluate the retention of the skills and information from the course (Clarke et al.). Programs individually define the time period between the end of the actual program and the booster sessions.

Williams, Riley, Risch, and Van Dyke (1999) surveyed 3,195 couples who had been married between one and eight years. Each couple had participated in a marital preparation course. The couples were asked whether they found the marital preparation course to have been helpful in their marriage. Nearly two thirds of the respondents stated that the course was perceived as a valuable experience. The couples who were married longer were less likely to perceive the course as valuable. Williams et al. concluded that marital education is not a one-time event but can be viewed as an ongoing process.

Guerney et al. (1983) evaluated the effectiveness of booster sessions in relationship enrichment programs with 54 mother-daughter pairs. Pairs were placed in a control group (no treatment), traditional treatment group (communication and problem-solving skills), and a relationship enrichment treatment group. Following treatment, half of the traditional and half of the relationship enrichment groups participated in booster sessions in relation to the control group. Results showed that the traditional group made modest gains after treatment and after the booster sessions. Relationship enrichment groups made significant gains after treatment and following booster sessions in comparison to the traditional and control groups.

Baer et al. (1984) were interested in the effects of booster sessions on past gains. The researchers investigated preschoolers' abilities to maintain and generalize correspondence learned through delayed reinforcement of verbalization. The sample consisted of four preschool children. There were five different play behaviors and one social behavior that were defined for this project in which children would engage. Delayed reinforcement was provided by teachers each day in the form of tokens or written consequences (e.g., being the line leader or choosing the song). Observation during 15 minutes of free play time was used to measure the maintenance or the development of these changes. There were three different experiments associated with this investigation.

The second experiment consisted of one preschool child from the sample (Baer et al., 1984). The child was given one target behavior that was reinforced using delayed verbal reinforcement. This was then generalized with three other target behaviors. Summer break occurred following the start of the study so there was a break in the data. When the child returned delayed verbal reinforcement was reintroduced to evaluate the effectiveness of the training over time. The first 6 days after the break the child had a high rate of responding to delayed reinforcement of verbalization which decreased to a rate of 0% responding for the following 3 days. The researchers implemented a booster session on the fourth day reinforcing the already learned behaviors. The previous correspondence behaviors increased after the booster session suggesting that past gains could be recovered after a brief period of training.

Baggs and Spence (1990) were interested in the effects of booster sessions in maintaining and enhancing gains following assertion training with women. Women between the ages of 20 and 65 years were recruited through media publicity and community notices. Various inclusion criteria was used including an instrument that measured assertion level and a prerequisite that they were not receiving treatment psychologically or pharmacologically. The 46 women in the sample were randomly assigned to the treatment group or the waiting list. The treatment group attended eight 2-hour sessions focused on assertion training. Self-report and behavioral observation measures were used pretreatment and again posttreatment in both the treatment and the waiting list groups.

At the completion of the assertion training the treatment group was randomly assigned to an assertion training booster session (ATB), attention placebo booster session (APB), or no booster session (NB; Baggs & Spence, 1990). The ATB focused on reviewing treatment skills and were structured sessions. The APB was structured when introducing the participants in the first booster session, but then was facilitated as a discussion group. Booster sessions were 1.5 hours and were held once a month.

The same self-report and behavioral observation measures were used to measure maintenance and gains in all three groups at 3 months and again at 6 months post-treatment (Baggs & Spence, 1990). Results included no significant differences among the three conditions at the three month follow-up. At the 6-month follow-up the ATB group showed higher maintenance of gains than the NB group, which showed some deterioration of treatment skills. The APB group showed some treatment gains and

maintenance of gains at 6 months, but not as significant as the ATB group. One of the findings was that contact from therapist posttreatment, even nondirective contact, could possibly lead to lower levels of relapse following assertion training.

Clarke et al. (1999) implemented booster sessions in the treatment of adolescent depression. The sample of 123 adolescents was randomly assigned to one of three treatment conditions. Conditions included adolescent cognitive behavioral therapy (CBT) group, adolescent CBT group with a separate parent class, and a waiting list. Adolescents from the two treatment groups were then randomly assigned to participate in booster sessions or only a second assessment group.

The intention of booster sessions was originally to prevent relapse following treatment (Clarke et al., 1999). The booster sessions consisted of one or two meetings following the completion of group treatment and were focused on self-monitoring, support systems, and lifestyle changes needed to deal with future stressful events. The main finding was that adolescents who did not recover during the actual treatment had an accelerated recovery during the booster sessions. Clarke et al. concluded that booster sessions served as a continuation of treatment.

Braukhaus et al. (2003) were interested in the effectiveness of booster sessions following a weekend cognitive-behavioral training program for committed couples. The program was designed to enhance problem-solving skills, communication skills, and ability to discuss expectations in the couples' relationships. After the weekend training, two booster sessions followed at 1 month and 3 months. After 1 year, a follow-up assessment showed that couples who had participated in the booster sessions had higher

levels of marital satisfaction and fewer problem areas than couples who did not attend booster sessions.

Krauss et al. (2006) investigated the relationship between children's comfort level in interacting with people living with HIV and parent training. There were 238 children and 238 adult participants that were randomly quota sampled from apartments from ten housing projects in New York City. A measure assessing attitudes and interactions with people living with HIV was administered to children first to get a baseline and again at six months after parents had completed the training course.

The parent course was composed of four 3-hour courses held once a week. Each course was structured the same and covered a variety of topics from HIV safety skills to parent-child communication skills. Following the courses there was a parent-child session where the parent could discuss HIV with their child in depth and in a safe place. Three months following the completion of the parent course a booster session was held for parents. Booster sessions were designed to reinforce previous teachings, provide support, and to discuss real-life situations that had arisen after the completion of the course.

Krauss et al. (2006) correlated the child comfort scores and the different parent sessions that were attended. The sessions that were most significantly correlated were sessions one, two, or three, the parent-child session, and the booster session. When using the data to predict the child comfort scores from the specific sessions attended by parents, the booster session remained the only significant session. The authors suggest that this could be associated with the benefit of processing their experiences in communicating with their children about people with HIV. It could also be associated with the "types" of

parents who complete all the sessions. The booster session and the parent-child sessions were reported to have been seen by parents as being voluntary and they both had the lowest rate of attendance of all the sessions.

There is still limited information about the effectiveness of booster sessions. Procedural aspects were all different and individually defined by each study (Accordino & Guerney, 2003; Braukhaus et al., 2003; Clarke et al., 1999; Williams et al., 1999). However, each of the studies reviewed consistently defined booster sessions as meetings that occurred after the treatment or the educational program was completed. Booster sessions can serve as an evaluation tool to discover the lasting effects of treatment and education. The limited research also suggests that booster sessions can promote maintenance of gains (Baggs & Spence, 1990; Braukhaus et al.), assist in recovering gains (Baer et al., 1984), and increase gains of participants (Clarke et al.; Guerney et al.; Krauss et al., 2006). Booster sessions have the potential to strengthen the lasting effects of family life education. Continued research is needed to support these findings.

### Purpose and Objective

The current study is conducted in conjunction with Higginbotham's (2006) grant involving educating ethnically diverse, low-income stepfamilies about healthy marriage skills in Utah. In addition to the stepfamily course, *Smart Steps* (Adler-Baeder, 2001), Higginbotham included a booster session for participants 4-6 weeks after the completion of the course. The booster sessions consisted of an experiential activity for stepfamilies to complete together. Opportunities for additional questions and clarification were also

provided during these sessions. The purpose of this study was to utilize self-report measures in order to evaluate the implementation and benefits of these booster sessions for stepfamilies.

### Research Questions

1. Are booster sessions seen by participants as worthwhile?
2. Do participants report that they learned something from the booster session?
3. Do participants report that they recognize a change in their knowledge base of stepfamily relationships from before to after the booster session?

## CHAPTER III

### METHODS

The current study was part of Higginbotham's (2006) *Teaching Healthy Marriage Skills to Ethnically Diverse, Low-Income Couples in Stepfamilies* study. This study was funded as part of the Healthy Marriage Initiative (US Department of Health and Human Services, Administration for Children and Families, 2005). The larger study evaluated the effectiveness of stepfamily education courses on several levels. The current study was specifically interested in the evaluation of booster sessions that occurred after the completion of the stepfamily education course.

#### Design

A descriptive design was used to evaluate booster sessions in the present study. Descriptive research is utilized when there is limited information about a topic (Leary, 2004). The purpose of this type of research is not to compare different groups but to describe the opinions, perceptions, and ideas of a defined population in a systematic way (Leary). Descriptive design was used to assess for participant evaluation of booster sessions following a stepfamily education course. The limited research on booster sessions in conjunction with stepfamily education programs requires further evaluation of the effectiveness of these interventions according to stepfamily education participants (Adler-Baeder & Higginbotham, 2004).

## Sample

A sample of 487 males and 560 females was recruited for this study through agencies in northern Utah. These agencies regularly provide services for minority individuals that have lower income. Of these recruited participants, approximately 23% of the male and 28% of the female participants attended the booster sessions and completed the evaluation form. An inclusion criterion was that participants were in a relationship that created a stepfamily (either one or both spouses had children with a prior partner or were a part of a remarriage). Additionally, there were six classes per course and to be included in the study participants could only miss one class. Participants were generally in their 30's with males averaging two years older than females (see Table 1).

The majority of the participants reported being in a married or an unmarried relationship (see Table 2). The majority of the married participants had been married just over 4 years (see Table 1). The mean for number of times participants had been married was higher for females than males (see Table 1). The participants also reported more residential children than non residential children in their stepfamilies (see Table 1).

The stepfamily courses were offered in both Spanish and English. Courses in the years 2007-2008 included 20 courses in Spanish and 34 courses in English. Over 50% of the participants identified themselves as Caucasian and 36% identified themselves as being Hispanic/Latino (see Table 3). About 50% the participants were Latter-Day Saints and approximately 20% were Catholic (see Appendix Table A1). Both male and female participants reported on average around 12 years of school completed (see Table 1).

Table 1

*Descriptive Variables of Participants*

| Variables                      | Males |       | Females |       |
|--------------------------------|-------|-------|---------|-------|
|                                | Mean  | SD    | Mean    | SD    |
| Age                            | 34.45 | 8.25  | 32.50   | 7.89  |
| Months married                 | 51.97 | 76.20 | 58.53   | 79.08 |
| Months together before married | 20.41 | 33.80 | 22.51   | 35.11 |
| Months together unmarried      | 31.78 | 36.04 | 37.43   | 50.15 |
| Months together cohabiting     | 30.29 | 36.63 | 31.65   | 39.00 |
| Number of times married        | 1.39  | 0.97  | 1.48    | 0.86  |
| Years of school completed      | 12.36 | 2.96  | 12.34   | 3.30  |
| Residential children           | 6.69  | 2.09  | 2.86    | 1.57  |
| Non residential children       | 1.09  | 1.57  | 0.77    | 1.42  |

Table 2

*Marital Status of Participants*

| Marital status         | Male     |       | Female   |       |
|------------------------|----------|-------|----------|-------|
|                        | <i>n</i> | %     | <i>n</i> | %     |
| Married                | 279      | 62.10 | 301      | 57.80 |
| Unmarried relationship | 152      | 33.90 | 169      | 32.40 |
| Single                 | 18       | 4.00  | 51       | 9.80  |

Table 3

*Ethnic Background of Participants*

| Ethnic background | Males    |       | Females  |       |
|-------------------|----------|-------|----------|-------|
|                   | <i>n</i> | %     | <i>n</i> | %     |
| Caucasian         | 262      | 58.70 | 313      | 59.10 |
| Hispanic/Latino   | 165      | 36.30 | 195      | 36.80 |
| Other             | 7        | 1.50  | 7        | 1.30  |
| African American  | 6        | 1.30  | 2        | 0.40  |
| Native American   | 3        | 0.70  | 5        | 0.90  |
| Bi-Racial         | 5        | 1.10  | 2        | 0.40  |
| Asian American    | 2        | 0.40  | 4        | 0.80  |
| Unknown           | 0        | 0.00  | 2        | 0.40  |

Table 1. Finally, the majority of the agencies catered to lower-income clients (see Appendix Table A2).

### Instruments

The *Booster Session Evaluation Form* (see Appendix C) was a self-report evaluation form that was developed to evaluate the booster sessions. Construct validity was established for this evaluation form using a panel of experts in the field of family life education who have expertise in stepfamily education. The form consisted of five parts. Parts A and D were used to answer research questions for this particular study.

To discover whether participants perceived the booster session as worthwhile, Part A of the form included five 5-point Likert scale questions (strongly disagree,

disagree, neither agree or disagree, agree, or strongly agree) that specifically asked whether the booster session was fun, educational, and worth their time. These three questions were aggregated to form the worthwhile variable for research question one. The fourth item inquired as to the whether the length and time of the booster session worked with the participant's work/family schedule. The last question asked whether the participants gained knowledge and skills about healthy relationships. These questions were created and included to (a) assess participants overall perceptions of the value of the booster session, and (b) to inform programmatic decisions about the length, format, and content of future booster activities.

Part D of the evaluation form asked four questions that were directly tied to the booster session objectives approved by the funding source. The question design asked the participants to retrospectively evaluate their knowledge about stepfamilies and relationship skills before the booster session and then again after the booster session. This post-test then retrospective pre-test design has been shown to be a valid way of obtaining self-report changes while limiting pre-test sensitization in program evaluation (Marshall, Higginbotham, Harris, & Lee, 2007; Rockwell & Kohn, 1989).

Participants were specifically asked to respond to the following: (a) I understand that it may take work and time to build close relationships in stepfamilies; (b) I understand communication requires listening to understand, before responding; (c) I understand that stepfamilies can succeed if they work together; and (d) I understand the need to work on all relationships in a stepfamily. The before responses for all four questions were aggregated to form the "before knowledge" and the after responses for the

same four questions were aggregated to form the “after knowledge” variable. The responses provide an indication as to whether or not participants perceive a change in their knowledge and skill due to their attendance at the booster session.

### Procedures

A sample of Caucasian and minority stepfamilies was recruited through 10 agencies that offer services to these populations throughout northern Utah. Agencies included Child Family Support Centers in Logan, Box Elder County, Layton/Clearfield, Ogden, and Sugarhouse/Midvale. Additionally, Head Start agencies including OWCAP, Kids on the Move, Southern Utah University, Bear River Head Start, and Centro de familia were used to recruit participants. These agencies offer a variety of services such as therapy, education, shelter, and anger management programs for lower-income minority families and individuals. While most of the agencies provide services to the entire community, most of the participants were low-income. Each agency was given \$10,000 for each free stepfamily education course held. The number of courses offered at each agency varied. An additional stipulation was that each course had to have at least seven stepfamily couples in order to proceed with the course.

The sample was recruited by agencies through advertisements in newspapers and fliers distributed through neighborhoods. Incentives for participants at every site were meals at every meeting and child care. Other incentives varied by agency and included gas cards or financial (cash) incentives upon completion of the course, including the booster session. An informed consent was provided and stated that participants could

discontinue the program at anytime. The project was approved by Utah State University's Institutional Review Board (see Appendix B).

Facilitators and teachers responsible for teaching the stepfamily course had all been through training. *Smart Steps*, a manualized stepfamily education program, was the curriculum in which the facilitators and teachers were trained (Adler-Baeder, 2001). Training also included teaching skills, skills in leading discussions, and confidentiality.

Agencies and instructors were given flexibility in the time frame that stepfamily education classes were taught. The courses were taught in 2-hour sessions once a week for 6 weeks, or for two Saturdays in 6-hour sessions. After the completion of the classes, participants were encouraged to attend a booster session, held 4 to 6 weeks later.

A Booster Session Evaluation Form (see Appendix C) was completed by each participant at the conclusion of the booster session. The form asked specifically whether the booster session was worthwhile (fun, educational, and worthwhile). It also explicitly asked whether the participant thought that they learned something from the booster session. Another part of the evaluation asked participants to evaluate their knowledge of stepfamily relationships before the booster session following the booster session.

When Booster Session Evaluation Forms were completed after each session, they were mailed to the principal investigator at Utah State University. Forms were stored in the principal investigator's locked filing cabinets and identification numbers were used to preserve anonymity. Mailing forms to the principal investigator also ensured that the agencies were meeting the quota requirements. After data were received by the principal investigator, research assistants entered the data into computers. Following the

completion of data input, access to forms was limited to the principal investigator.

Informed consents were also stored in locked filing cabinets only accessible to the principal investigator.

## CHAPTER IV

### RESULTS

This study focuses on the perceived effectiveness of booster session following a stepfamily education program. Three research questions were used to determine whether participants reported booster sessions as being effective. Because of the interdependence of the data, males and females were analyzed separately. Differences between Latino and Caucasian participants' reports of perceived effectiveness are also provided.

#### Reliability

Before scores were calculated, reliability analyses were conducted on variable measurements that contained more than one question. Variables for research question one (worthwhile) and research question two (before-booster and after-booster session change in stepfamily skills knowledge base) fit this criteria. Internal consistency analyses produced a Cronbach's alpha coefficient of .925 for worthwhile, .852 for before-booster session, and .818 for after-booster session. The alpha levels are appropriate levels for social statistics (Leary, 2004). To avoid making type I errors a .05 alpha level was selected which also allowed for maintenance of a 95% confidence interval.

#### Research Question 1

The first question assessed whether or not participants reported that the booster sessions were worthwhile (fun, educational, and worth their time). Three-five point Likert scale questions were summed to address this question. Descriptive statistics were used to

find the mean responses of males and females (Leary, 2004). Both males and females means were less than one and a half points away from the total score possible of 15 (see Table 4).

Independent  $t$  tests were used to discover possible differences between responses of English and Spanish participants. The results from the  $t$  test show no significant differences between language of participants for males or females (see Table 5).

Additionally, a group  $t$  test was used to identify differences among male and female respondents. The analysis produced no significant differences between male and female participants (see Table 6).

## Research Question 2

The second question examined whether or not participants reported learning something from the booster session. A one item-five point Likert scale question

Table 4

*Descriptive Statistics for Research Questions*

| Question          | Male     |       |           | Female   |       |           |
|-------------------|----------|-------|-----------|----------|-------|-----------|
|                   | <i>N</i> | Mean  | <i>SD</i> | <i>N</i> | Mean  | <i>SD</i> |
| Worthwhile        | 110      | 13.70 | 2.00      | 154      | 13.59 | 2.29      |
| Learned something | 112      | 4.46  | 0.73      | 155      | 4.56  | 0.77      |
| Before knowledge  | 95       | 15.29 | 3.33      | 139      | 15.26 | 3.08      |
| After knowledge   | 106      | 18.44 | 1.95      | 147      | 18.58 | 2.33      |

Table 5

*Research Questions 1 and 2: Independent t Test for Language of Participants by Gender*

| Variable          | Male  |      |          |           | Female |      |          |           |
|-------------------|-------|------|----------|-----------|--------|------|----------|-----------|
|                   | Mean  | SD   | <i>t</i> | <i>df</i> | Mean   | SD   | <i>t</i> | <i>df</i> |
| Worthwhile        |       |      |          |           |        |      |          |           |
| English (E)       | 13.51 | 2.25 |          |           | 13.46  | 2.45 |          |           |
| Spanish (S)       | 13.95 | 1.45 | -1.14    | 110       | 13.81  | 2.00 | -.946    | 153       |
| Learned something |       |      |          |           |        |      |          |           |
| E                 | 4.35  | 0.83 |          |           | 4.49   | 0.83 |          |           |
| S                 | 4.66  | 0.48 | -2.16*   | 110       | 4.68   | 0.65 | -1.48    | 153       |

*Note.* \* $p < .05$ .

Table 6

*Research Questions 1, 2, and 3: Independent t Test for Gender of Participants*

| Variable          | Male  |      | Female |      | <i>t</i> |
|-------------------|-------|------|--------|------|----------|
|                   | Mean  | SD   | Mean   | SD   |          |
| Worthwhile        | 13.67 | 2.00 | 13.59  | 2.29 | 0.28     |
| Learned something | 4.46  | 0.73 | 4.56   | 0.77 | -1.03    |
| Before knowledge  | 15.29 | 3.33 | 15.26  | 3.09 | 0.05     |
| After knowledge   | 18.44 | 1.95 | 18.58  | 2.33 | -0.50    |

was used to attend to this research question. Means were calculated separately for male and female responses. Male and female means were roughly a half point away from the total score possible of five. These high means indicated that the participants did report learning something from attending the booster session (see Table 4).

In addition to the descriptive statistics, independent *t* tests were used to evaluate differences between English- and Spanish-speaking participants. There were no

significant differences for language among female participants (see Table 5). There was a significant difference for male participants. Male Spanish-speaking participants reported higher rates of learning something than male English-speaking participants (see Table 5). Finally an independent *t* test was used to identify possible differences between male and female participants. The test yielded no significant differences between genders concerning learning something from the booster session (see Table 6).

### Research Question 3

The final research question was interested in participants' recognition of a change in their knowledge base concerning stepfamily relationships retrospectively after completion of the booster session. Four two-part questions (before and after) assessed for this change on five point Likert scales. Questions included: (a) I understand that it may take work and time to build close relationships in stepfamilies, (b) I understand communication requires listening to understand before responding, (c) I understand that stepfamilies can succeed if they work together, and (d) I understand the need to work on all relationships in a stepfamily.

Descriptive statistics were used to determine means for both male and females on the before and after portions of these questions. Both male and female means in the before-booster session section were between four and five points away from the total score possible (see Table 4). There was an increase for both male and female means in the after booster session section. Both male and female means were around one and one half points away from the total score possible in the after booster session section. This

increase in means in both genders implies that participants reported an increase in knowledge base of stepfamily relationships after participating in the booster session (see Table 4).

This question was analyzed by running Repeated Measures Analysis of Variance (RM ANOVA; Leary, 2004). These procedures allowed for discovery of the influences of language and marital status on reports of knowledge base change over time (before and after booster session). First, an RM ANOVA was used to evaluate changes in knowledge base with marital status of participants. Analysis was again run separately for male and female participants. There was a significant within-subjects main effect for time for both male and female participants (see Table 7). This indicates that there was a significant increase in means between before-booster session reports and after-booster session reports across time for both male and female participants. There were no statistically significant differences for marital status for male or female participants (see Table 7).

A second RM ANOVA was used to determine the relationship of stepfamily knowledge base change over time with language. Both male and female participants had significant within-subjects main effects for time (see Table 8). This indicates that means across language increased between before- and after-booster session responses. Additionally, there were significant within-subjects main effects for language for both male and female participants (see Table 8). With time being a factor, Spanish speaking participants consistently reported gaining more knowledge about healthy stepfamily relationships in booster sessions than English speaking participants.

Finally, independent *t* tests were used to identify differences between male and

Table 7

*Research Question 3: Analysis of Variance for Marital Status*

| Source             | Males     |           |          |          | Females   |           |          |          |
|--------------------|-----------|-----------|----------|----------|-----------|-----------|----------|----------|
|                    | <i>df</i> | <i>MS</i> | <i>F</i> | <i>p</i> | <i>df</i> | <i>MS</i> | <i>F</i> | <i>P</i> |
| Time (T)           | 1         | 91.96     | 21.74    | .000**   | 1         | 413.34    | 78.89    | .000**   |
| T X marital status | 2         | 4.91      | 1.62     | .318     | 2         | 0.71      | .14      | .874     |
| Within-group error | 84        | (4.23)    |          |          | 128       | (5.24)    |          |          |

*Note.* Values enclosed in parentheses represent mean square errors. \* $p < .05$ . \*\* $p < .01$ . Time = before- and after-booster session responses

Table 8

*Research Question 3: Analysis of Variance for Language*

| Source             | Males     |           |          |          | Females   |           |          |          |
|--------------------|-----------|-----------|----------|----------|-----------|-----------|----------|----------|
|                    | <i>df</i> | <i>MS</i> | <i>F</i> | <i>p</i> | <i>df</i> | <i>MS</i> | <i>F</i> | <i>P</i> |
| Time (T)           | 1         | 544.67    | 130.36   | .000**   | 1         | 910.83    | 187.70   | .000**   |
| T X language       | 1         | 46.14     | 11.04    | .001**   | 1         | 127.24    | 26.22    | .000**   |
| Within-group error | 93        | (4.18)    |          |          | 135       | (4.85)    |          |          |

*Note.* Values enclosed in parentheses represent mean square errors. \* $p < .05$ . \*\* $p < .01$ . Time = before- and after-booster session responses

female participants. There were no significant differences between male and female participants in the before or after booster sessions responses (see Table 6).

## CHAPTER V

### DISCUSSION

This study examined three research questions to determine the participant's perceived effectiveness of booster sessions following the completion of the stepfamily education course. Particular attention was given to intervention theory and its propositions related to preventative factors, risk factors, and program implementation. Implications, limitations, and recommendations for future research based on the study's findings were also taken into consideration and provided in this chapter.

#### Research Question 1

The purpose of this first research question was to determine if participants reported that attending the booster session was worthwhile. Worthwhile was defined as fun, educational, and worth their time. Means of both males and female participants were less than a half a point away from the highest score possible. These high ratings indicated that participants found the booster sessions to be worthwhile. This is an important finding in light of Silliman and Shum's (1999) results of their evaluation of FLE programs. The authors explained in their evaluation that if participants do not view the program as effective and worthwhile the participants were no better off than they were before they started the program.

Literature concerning booster sessions has been limited to effectiveness and lasting outcomes of participating in booster sessions rather than participants' reports of the booster sessions being worthwhile. Marital education in general provides some

information concerning participants' reports of perceived effectiveness. Hawley and Olson (1995) found similar satisfaction levels from newlyweds in all three marital enrichment courses they were comparing. Self-report measures indicated 96% of their participants said they would participate in the program again. The findings of the current study are congruent with other FLE course participants' ratings. A limitation mentioned by Hawley and Olson was that the self-report questionnaires were completed immediately following the courses. Evaluation forms following booster sessions were also administered immediately after the completion of the session.

Administering evaluations only at the end of the course could also be seen as strength programmatically and logistically (Marshall et al., 2007; Rockwell & Kohn, 1989). Participants taking a traditional pre/post-test would have to be in attendance from the beginning to the end of the program. This would prevent participants that arrived late from being part of the evaluation even though they were in attendance for the program. In addition, baseline data is difficult to determine with a pre-test because participants have limited knowledge at the beginning of the program to provide baseline data. A retrospective design is used to correct for these complications allowing participants at the end of the program to evaluate their knowledge changes before and after the program.

The "ceiling effect" needs to be considered when discussing these findings (Cohen, 2008). The majority of participants' scores were clustered on the high end of the scale, indicating a skewed distribution. This limits variance which extinguishes the opportunity to discover differences across gender and ethnicity. There were no

statistically significant differences when analyzing language and gender with participants' reports of booster sessions being worthwhile.

A variety of factors could have influenced the considerably high ratings by all participants for booster sessions being worthwhile. The booster sessions were designed to appeal to different learning styles and were offered in both Spanish and English (instruction and course materials). These factors could have influenced the participants' perceptions of booster sessions being worthwhile as they are identified as common factors of successful FLE programs (Hawkins et al., 2004; Hughes, 1994; Powell & Cassidy, 2001).

However, self-report bias could have influenced the high ratings of participants. Rapport that was developed between the instructor and participants could have resulted in a social-desirability bias (Leary, 2004). Kraus et al. (2006) used caution when interpreting their results of the effectiveness of booster sessions. They indicated that there is a possibility that the "type" of people who attend all sessions (including booster sessions) of education may be very different than those who do not attend booster sessions. People who attended these booster sessions may have already had higher degrees of learning. They could have also formed bonds with other group members or the instructor.

## Research Question 2

The second research question examined whether participants reported that they learned something from the booster session. Males and females consistently reported that

they did learn something from the booster sessions. Means were around a half-point away from the total score possible. After the completion of the stepfamily education course participants reported learning something new. This finding is consistent with previous studies concerning booster sessions.

Clarke and colleagues (1999) concluded in their study that booster sessions served as a continuation of treatment with accelerated participant gains. Guerney et al. (1983) identified that participants in booster sessions made additional gains when compared to participants that did not attend booster sessions. Krauss et al. (2006) also concluded booster sessions increased participant gains. The current findings from this study add additional support concerning the booster session's role in increasing gains of participants following the completion of education and treatment programs.

Group analysis indicated that there were no significant differences between the responses of male and female participants. However, a statistically significant difference for language was identified for male participants. Although all participants reported high ratings of learning something from the booster sessions, male Latino participants reported higher ratings than male Caucasian participants. This could be associated with the particular care in providing stepfamily education instruction, activities, and materials in Spanish (Hughes, 1994). Another possible explanation would be that participants attending the Spanish groups had the opportunity to interact with people in stepfamilies from similar cultural backgrounds. This could build on common unique cultural strengths (Powell & Cassidy, 2001). Both of these factors could have influenced the higher rating of learning something because of implementation of cultural consideration in the

development of this program (including booster sessions). Many of these participants were first generation immigrants and FLE was not originally part of their culture (Garcia-Preto, 2005). The opportunity to learn about relationships in this type of educational setting may have also been a factor in higher reports by Latino participants.

### Research Question 3

Research question three was concerned with participants' retrospective rating of understanding stepfamily relationship skills before and after the completion of the booster session. Descriptive statistics explained that male and female participants reported having a knowledge base of stepfamily relationship skills before attending the booster session. Means increased for both males and females in their reports following the completion of the booster session. Female's means were roughly one point away from the total possible score and male's scores were one and one-half point away from the total possible score. In addition, this increase of knowledge of stepfamily relationship skills was determined to be statistically significant. Statistically significant main effects for time were found for both male and female participants.

Participants' reports indicated that there was an increase in knowledge concerning stepfamily relationship skills that came from attending the booster session. This finding is also consistent with previous research concerning booster sessions. Participants reported that there was an increase in gains after attendance of the booster session (Clarke et al., 1999; Guerney et al., 1983; Krauss et al., 2006).

Krauss et al. (2006) indicated that booster sessions could be helpful in providing an opportunity for participants to clarify and ask questions about material several weeks after the completion of the program. Booster sessions in the current study provided the opportunity to have group discussions and ask questions. The structure of the booster sessions (Baggs & Spence, 1990), using a variety of activities that attract different learning styles (Hawkins et al., 2004; Hughes, 1994; Powell & Cassidy, 2001), and having several weeks between course completion and the booster session might have influenced the increase of knowledge in the participants.

Williams et al. (1999) discuss that as time passes after the completion of an FLE course gains can be lost. Baer et al. (1984) found that past gains could be recovered through attending booster sessions. This could account for part of the knowledge base increase. Participants may have gained knowledge from actual course content and re-learned it through attending the booster session.

A statistically significant main effect for marital status was identified when evaluating change in knowledge base with language and marital satisfaction on question two. Both single and married participants rated an increase in stepfamily skills knowledge base from attending the booster session. The single participants had a larger change in knowledge of stepfamily skills specific to communication than their married counterparts.

Group analysis did not discover any significant differences in changes in knowledge base between male and female participants. There were statistically significant main effects for language when analyzing the influence of language with

change in stepfamily skill knowledge base for both male and female participants. Latino participants consistently reported lower levels of before-booster session knowledge and higher levels of after-booster session knowledge than Caucasian participants. These findings provide further support that the booster sessions were culturally sensitive in the implementation process (Hughes, 1994). Also this provides some evidence that the Latino population is receptive to FLE.

### Intervention Theory

Intervention theory explains that there is an interaction between risk factors and protective factors (Coie et al., 1993). Internal risk factors for stepfamilies could be, but are not limited to conflicted loyalties, boundary issues, fragmented couple relationships, lower marital satisfaction, increased risk of divorce, and unrealistic expectations (Visher et al., 2003; Whitton et al., 2008). Environmental risk factors for stepfamilies could include poverty or low-income, the legal system, and limited access to support and educational resources (Adler-Baeder & Higginbotham, 2004).

Protective factors are factors that increase resistance to risk factors or mediate the effects of dysfunction (Coie et al., 1993). Protective factors for stepfamilies are realistic expectations and strong couple relationships (Adler-Baeder & Higginbotham, 2004; Ganong & Coleman, 2004; Visher et al., 2003; Whitton et al., 2008). In addition, support and FLE education can serve as protective factors (Robertson et al., 2006). The stepfamily education program used in the current study was Adler-Baeder's (2001) *Smart Steps* program. The program was designed to focus on educating and implementing these

protective factors in stepfamilies. A booster session was implemented to reiterate information learned in the program as well as provide additional support for stepfamilies.

Intervention theory states that the prevention programs should be targeted to serve “high risk” populations (Coie et al., 1993). Because these populations are difficult to reach, special efforts by educators are required (Coie et al; Robertson et al., 2006). Agencies that already provided services to lower-income and minority stepfamilies were used for recruitment in the current study. The findings from the three research questions provided information concerning the perceived effectiveness of the protective factors as reported by stepfamily participants from this “high risk” population. Participants consistently reported that attending the booster session was worthwhile, that they at least learned something, and that they increased in their knowledge about healthy stepfamily skills. These protective factors seem to have been integrated into the participants’ lives and can serve as moderators to risk factors.

Another important component of intervention theory was to ensure that programs need to be culturally sensitive (Coie et al., 1993). The current study offered booster sessions in both Spanish and English. Research questions were analyzed looking for differences in reports of perceived effectiveness between Latino and Caucasian participants. On average all participants reported that booster sessions were effective in all three research questions. Latino participants reported higher rates of perceived effectiveness in research questions two and three. These findings indicated that the booster sessions were culturally sensitive to both Caucasian and Latino participants.

The final concept from intervention implemented in this study was the evaluation component. The theory states that successful prevention programs are evaluated for both intermediate and long-term outcomes. Booster session evaluation forms provided information about intermediate outcomes of the stepfamily program in general. Research question four asked for before booster session means concerning knowledge of healthy stepfamily skills. Means for both males and females were rather high indicating that stepfamilies had maintained some knowledge from the course concerning healthy stepfamily relationship skills.

Intervention theory provided an effective framework to guide this study. Protective factors seem to have been accepted and found useful to the “high risk” participants of the booster session. Booster sessions were found to be effective for both Caucasian and Latino stepfamily participants. Cultural and perceived effectiveness information was made possible through booster session evaluation. The high ratings of perceived effectiveness of booster sessions give additional support to the tenants of intervention theory.

### Application

Findings from this study provide implications in several areas of FLE. First, there is limited information about the perceived effectiveness of booster sessions following any type of intervention. The current study provides more supporting evidence for the effectiveness of booster session implementation at the completion of FLE. In the current study, booster sessions following the stepfamily education course were shown to increase

treatment gains of participants. This finding is consistent with previous research conducted with booster sessions (Clarke et al., 1999; Guerney et al., 1983; Krauss et al., 2006). As FLE programs are developed family life educators should consider the identified benefits for participants through implementing a booster session.

Participants in the current study collectively reported that the booster sessions that they attended were fun, educational, and worth their time. Booster sessions were designed to integrate activities, group discussion, and question/answer portions to engage people with several different learning styles (Hawkins et al., 2004; Hughes, 1994; Powell & Cassidy, 2001). If participants do not perceive FLE programs as being worthwhile they do not maintain gains (Silliman & Shumm, 1999). When developing booster sessions and FLE programs in general, it is important to take these factors into consideration to keep the attention of participants, make education a worthwhile experience, and meet the needs of the participants.

Intervention theory proved to be an effective guide for implementing booster sessions and should be incorporated and used in the development and implementation of FLE programs. Intervention theory suggested that meeting the needs of FLE participants requires increasing protective factors to moderate the effects of risk factors (Coie et al., 1993). The *Smarts Steps* program, including the booster session, focused on the implementation of these protective factors (Adler-Baeder, 2001). Participants reported that they increased in their knowledge of these skills even in the booster session. FLE programs should focus on meeting participants needs through educating and implementing protective factors.

Identifying and meeting the needs of high risk participants is also a part of intervention theory (Coie et al., 1993). Reaching high risk people can be difficult and requires some creativity (Robertson et al., 2006). This was made possible in this study by using agencies throughout northern Utah that provide services for lower income minority residents. Stepfamily participants were recruited through these agencies. Providing child care, meals, and money upon completion of the program were found to be successful incentives to increase participation from the high risk population. FLE educators should take the necessary steps to reach high risk populations that would benefit from increased protective factors.

Working with this high risk population requires providers of FLE programs to be aware of cultural implications and contextual information. Stepfamilies have a variety of different risk factors and are formed in a variety of ways (Visher et al., 2003; Whitton et al., 2008). Course material should be sensitive to these differences. Different cultures are also found within these populations. This study was unique in the fact that it also looked for cultural differences in participants' reports of booster session effectiveness. There was not another study concerning booster sessions in the literature review where this difference was highlighted. The booster session and materials were provided in this stepfamily education program in both Spanish and English. Both Latino and English participants reported that booster sessions were effective. Latino participants in several analyses reported higher levels of perceived effectiveness when compared to Caucasian participants. This indicates that the Latino population is receptive to booster sessions when cultural considerations are examined. Additional FLE programs should be

developed and evaluated to meet the needs of people from different cultures, particularly the Latino population.

### Limitations and Recommendations

In interpreting the results limitations should be taken into consideration. The descriptive design was utilized because there was limited information concerning the evaluation of booster sessions and stepfamily education programs (Leary, 2004). The purpose of this design is to describe thoughts and opinions of a defined population.

No comparison group or control group was implemented because of the chosen design. Future research on booster sessions in conjunction with stepfamily education courses should include a control group. Previous studies on booster sessions in association with other FLE programs have been able to randomly assign participants to control and booster session groups (Baggs & Spence, 1990; Guerney et al., 1983). These studies have been able to compare differences among participants that attended booster sessions and those that did not. This is a key point in this study. For the agency to get “credit” for the class, they had to have a minimum number of participants so reminder calls were made. While this may have happened for the booster session, the agency was not rewarded nor penalized if fewer people attended. This adds credence to the idea that attendance was voluntary.

Attrition was also a limitation of this study (Leary, 2004). A large portion of the stepfamily education participants did not attend the booster session or did not complete the booster session evaluation form. Krauss et al. (2006) indicated this as a limitation of

their study; participants reported that booster sessions were seen as voluntary. This was a procedural limitation.

Course instructors would announce the booster session during the last day of course material and booster sessions would occur 4 to 6 weeks later. Agencies provided the location for the booster sessions, but were not accountable for reminding participants. This limitation has since been modified in the larger study by placing more accountability on the agencies to provide reminders to participants concerning booster sessions (e.g., phone reminders, mailers). This has provided higher rates of attendance at booster sessions.

The sample selected for this study included low-income minority stepfamilies in northern Utah. The sample was predominately Caucasian and Latino. Other cultures were underrepresented in the sample. Also, the vast majority of the sample was composed of people who identified themselves as being Latter-day Saints and Catholic. As pointed out by Whitton et al. (2004) and Powell and Cassidy (2001), it is important to provide education for a variety of family types, cultures, religions, and socioeconomic status because each will have different reactions to education. Additional research concerning booster sessions and stepfamily educations should include more cultures and religious affiliations. Children of the participants were also not included in the study although they did attend the booster sessions. In future research the implications of children attending booster sessions could be addressed.

Self-report measures were used for data collection in this study. There are some potential limitations associated with this type of data collection. Social desirability

response bias relates to participants responding differently because of concern about how they were perceived. This was controlled as best as possible through assuring participants that their responses were anonymous. Participants were surveyed at one point in time at the conclusion of the booster session. The fourth section on the evaluation used a retrospective design. The question asked participants to rate their knowledge before and after the completion of the booster session. This design was used because it has been shown to be effective in other program evaluations (Marshall et al., 2007; Rockwell & Kohn, 1989). The design takes into consideration the logistics and implementation process of education programs. Understanding that this design has its strengths, one apparent weakness may be that the question could be seen as unclear. A possible way to strengthen the evaluation in future research would be to include a pre-test and a post-test design (recognizing there are limitations to this design as well).

As previously discussed one of the weaknesses of FLE is the lack of evaluative outcome data (Hughes, 1994). FLE program developers encourage educators to make evaluation an important part of their programs (Hughes; Powell & Cassidy, 2001). Intervention theory also states that intermediate and long-term outcome data should be a part of prevention programs (Coie et al., 1993). The current study only provides immediate self-reports of participants at the conclusion of the booster session. Long-term effects of booster sessions cannot be identified from this methodology. Implementing a longitudinal type design in other research concerning booster sessions has provided some information concerning the lasting effects of booster sessions (Baggs & Spence, 1990; Braukhaus et al., 2003). Long-term outcomes concerning booster sessions following

stepfamily education courses could be discovered by implementing a longitudinal design in future research.

### Summary

Despite the limitations, this study provides informative and helpful information concerning the implementation of booster sessions as well as contributing to the limited booster sessions and stepfamily education literature. Low-income minority stepfamily education participants reported that booster sessions were seen as being worthwhile. The participants also reported that they increased in their knowledge through attending booster sessions. The study also indicated that Latino participants reported gaining more knowledge concerning healthy stepfamily skills than Caucasian participants. This encourages educators in providing more FLE programs that meet the needs of diverse participants while remaining sensitive to cultural and contextual factors.

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APPENDICES

## Appendix A. Sample Characteristics Tables

Table A1

*Primary Religious Affiliation of Participants*

| Religious affiliation    | Male     |       | Female   |       |
|--------------------------|----------|-------|----------|-------|
|                          | <i>N</i> | %     | <i>n</i> | %     |
| Latter-day Saint         | 127      | 48.10 | 169      | 51.20 |
| Catholic                 | 50       | 18.90 | 56       | 17.00 |
| No religious affiliation | 41       | 15.50 | 49       | 14.80 |
| Other                    | 31       | 11.70 | 37       | 11.20 |
| Baptist                  | 8        | 3.00  | 8        | 2.40  |
| Atheist                  | 4        | 1.50  | 1        | 0.30  |
| Jewish                   | 3        | 1.10  | 8        | 2.40  |
| Methodist                | 0        | 0.00  | 2        | 0.60  |

Table A2

*Total Annual Income of Participants*

| Income              | Males    |       | Females  |       |
|---------------------|----------|-------|----------|-------|
|                     | <i>n</i> | %     | <i>n</i> | %     |
| Less than \$5,000   | 27       | 6.40  | 133      | 30.00 |
| \$5,001-\$10,000    | 17       | 4.00  | 44       | 9.90  |
| \$10,000-\$15,000   | 38       | 9.00  | 68       | 15.30 |
| \$15,001- \$20,000  | 42       | 10.00 | 59       | 13.30 |
| \$20,100- \$25,000  | 67       | 16.00 | 36       | 8.10  |
| \$25,100- \$30,000  | 44       | 10.50 | 42       | 9.50  |
| \$30,100- \$35,000  | 43       | 10.20 | 19       | 4.30  |
| \$35,100- \$40,000  | 43       | 10.20 | 21       | 4.70  |
| \$40,001- \$50,000  | 47       | 11.20 | 0        | 2.70  |
| \$50,001- \$75,000  | 39       | 9.30  | 7        | 1.60  |
| \$75,001-\$100,000  | 11       | 2.60  | 1        | 0.50  |
| More than \$100,000 | 2        | 0.50  | 1        | 0.20  |

Appendix B. IRB Approval Letter

# UtahState UNIVERSITY

INSTITUTIONAL REVIEW BOARD OFFICE  
9530 Old Main Hill, Suite 214a  
Logan, UT 84322-9530  
Telephone: (435) 797-1821  
FAX: (435) 797-3769

USU Assurance: FWA#00003308  
Protocol # 2265

SPO #: 90FE0129  
AES #: UTA00

2/6/2009

## MEMORANDUM

TO: Scot Allgood  
Mitch Vaterlaus

FROM: Kim Corbin-Lewis, IRB Chair   
True M. Fox, IRB Administrator 

SUBJECT: Booster Sessions: Booster Sessions Following a Stepfamily Education Course

Your proposal has been reviewed by the Institutional Review Board and is approved under exemption #4.

- X There is no more than minimal risk to the subjects.  
There is greater than minimal risk to the subjects.

This approval applies only to the proposal currently on file. **Any change in the methods/objectives of the research affecting human subjects must be approved by the IRB prior to implementation.** Injuries or any unanticipated problems involving risk to subjects or to others must be reported immediately to the IRB Office (797-1821).

The research activities listed below are exempt based on the Department of Health and Human Services (DHHS) regulations for the protection of human research subjects, 45 CFR Part 46, as amended to include provisions of the Federal Policy for the Protection of Human Subjects, June 18, 1991.

4. Research, involving the collection or study of existing data, documents, records, pathological specimens, or diagnostic specimens, if these sources are publicly available or if the information is recorded by the investigator in such a manner that subjects cannot be identified, directly or through identifiers linked to the subjects.

Appendix C. Booster Session Evaluation Form

Revised 09/08

Name: \_\_\_\_\_ Site (location): \_\_\_\_\_  
(Please Print)

**Booster Session Evaluation Form**  
 (To be completed at the end of the booster session)

**PLEASE ANSWER THE FOLLOWING QUESTIONS ABOUT YOURSELF AS HONESTLY AND ACCURATELY AS POSSIBLE. THERE ARE NO "RIGHT" ANSWERS. ALL RESPONSES WILL REMAIN CONFIDENTIAL AND WILL NOT BE SEEN BY YOUR SPOUSE/PARTNER OR THE CLASS FACILITATOR.**

| PART A. Please indicate if you agree or disagree with the following statements.       | Strongly Disagree | Disagree | Neither Agree or Disagree | Agree | Strongly Agree |
|---|-------------------|----------|---------------------------|-------|----------------|
|   | ①                 | ②        | ③                         | ④     | ⑤              |
| 1. The booster session was fun.   | ①                 | ②        | ③                         | ④     | ⑤              |
| 2. The booster session was educational.   | ①                 | ②        | ③                         | ④     | ⑤              |
| 3. Attending the booster session was worth my time.                                   | ①                 | ②        | ③                         | ④     | ⑤              |
| 4. The length and time of this booster session fit well with my work/family schedule. | ①                 | ②        | ③                         | ④     | ⑤              |
| 5. I have learned knowledge and skills about healthy relationships.                   | ①                 | ②        | ③                         | ④     | ⑤              |

**PART B. What did you like MOST about the booster session?**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**PART C. What did you like LEAST about the booster session?**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**PART D. Please mark the boxes that reflect your knowledge BEFORE and AFTER attending the booster session**

|  | BEFORE this booster session: |           |             |          |                 | Now, AFTER this booster: |          |            |         |                |
|--|------------------------------|-----------|-------------|----------|-----------------|--------------------------|----------|------------|---------|----------------|
|  | Was Really False             | Was False | Was Neither | Was True | Was Really True | Is Really False          | Is False | Is Neither | Is True | Is Really True |
| 1. I understand that it may take work and time to build close relationships in stepfamilies. | ①                            | ②         | ③           | ④        | ⑤               | ①                        | ②        | ③          | ④       | ⑤              |
| 2. I understand communication requires listening to understand, before responding.           | ①                            | ②         | ③           | ④        | ⑤               | ①                        | ②        | ③          | ④       | ⑤              |
| 3. I understand that stepfamilies can succeed if they work together.                         | ①                            | ②         | ③           | ④        | ⑤               | ①                        | ②        | ③          | ④       | ⑤              |
| 4. I understand the need to work on all relationships in a stepfamily.                       | ①                            | ②         | ③           | ④        | ⑤               | ①                        | ②        | ③          | ④       | ⑤              |

**Part E. Please think about your overall experience in the Stepfamily course (6 classes AND the booster).**

- If this stepfamily course was NOT free, would you have attended?      ① Yes      ② No
- How much would you be willing to pay for a stepfamily educational course such as this? \$ \_\_\_\_\_

|                 |               |               |                          |
|-----------------|---------------|---------------|--------------------------|
| Office Use Only |               |               |                          |
| Class: _____    | Cohort: _____ | Agency: _____ | ID: _____ Entered: _____ |

3. What is the most important outcome/result that has occurred in your family due to participation in this course?

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**PART F. AT THE END OF THE LAST CLASS WE ASKED A NUMBER OF QUESTIONS ABOUT YOUR RELATIONSHIP WITH YOUR CURRENT PARTNER/SPOUSE. PLEASE ANSWER THE QUESTIONS AGAIN TO HELP US EVALUATE THE LONG-TERM EFFECTS OF PARTICIPATING IN THIS COURSE.**

1. Since attending the *Smart Steps* classes, on a scale from 1 to 7, how happy are you currently with your relationship with your partner/spouse?

| ①                  | ②                  | ③                | ④                        | ⑤              | ⑥                | ⑦                |
|--------------------|--------------------|------------------|--------------------------|----------------|------------------|------------------|
| Completely Unhappy | Moderately Unhappy | Slightly Unhappy | Neither Happy or Unhappy | Slightly Happy | Moderately Happy | Completely Happy |

2. Since attending the *Smart Steps* classes, do you agree with the following statements?

|   | Strongly Disagree | Disagree | Neither Agree nor Disagree | Agree | Strongly Agree |
|---|-------------------|----------|----------------------------|-------|----------------|
| A. My relationship with my partner/spouse is more important to me than almost anything else in my life. | ①                 | ②        | ③                          | ④     | ⑤              |
| B. I may not want to be with my partner/spouse a few years from now.                                    | ①                 | ②        | ③                          | ④     | ⑤              |
| C. I like to think of my partner/spouse and me more in terms of "us" and "we" than "me" and "him/her."  | ①                 | ②        | ③                          | ④     | ⑤              |
| D. I want this relationship to stay strong no matter what rough times we may encounter.                 | ①                 | ②        | ③                          | ④     | ⑤              |

3. Since attending the *Smart Steps* classes...

|  | Never | Yes, in the past but not recently | Yes, recently |
|--|-------|-----------------------------------|---------------|
| A. Have you ever thought your relationship might be in trouble?                                | ①     | ②                                 | ③             |
| B. Has the thought of getting a divorce or separation crossed your mind?                       | ①     | ②                                 | ③             |
| C. Have you discussed divorce or separation with a close friend?                               | ①     | ②                                 | ③             |
| D. Have you or your partner/spouse ever seriously suggested the idea of divorce or separation? | ①     | ②                                 | ③             |

4. Since attending the *Smart Steps* classes, how often do you and your current partner/spouse agree or disagree about...

|   | Always Disagree | Frequently Disagree | Equally Agree/Disagree | Frequently Agree | Always Agree |
|---|-----------------|---------------------|------------------------|------------------|--------------|
| A. Finances                               | ①               | ②                   | ③                      | ④                | ⑤            |
| B. Dealing with family/relatives          | ①               | ②                   | ③                      | ④                | ⑤            |
| C. Dealing with ex-spouses or ex-partners | ①               | ②                   | ③                      | ④                | ⑤            |
| D. Parenting                              | ①               | ②                   | ③                      | ④                | ⑤            |

5. Regarding your current relationship with your partner/spouse...

|  | Very Strongly Disagree | Strongly Disagree | Disagree | Mixed | Agree | Strongly Agree | Very Strongly Agree |
|--|------------------------|-------------------|----------|-------|-------|----------------|---------------------|
| A. We have a good relationship                       | ①                      | ②                 | ③        | ④     | ⑤     | ⑥              | ⑦                   |
| B. My relationship with my partner is very stable    | ①                      | ②                 | ③        | ④     | ⑤     | ⑥              | ⑦                   |
| C. Our relationship is strong                        | ①                      | ②                 | ③        | ④     | ⑤     | ⑥              | ⑦                   |
| D. My relationship with my partner makes me happy    | ①                      | ②                 | ③        | ④     | ⑤     | ⑥              | ⑦                   |
| E. I really feel like part of a team with my partner | ①                      | ②                 | ③        | ④     | ⑤     | ⑥              | ⑦                   |