Reported Attitude and Behavior Change as a Result Of Participation in Parent Training Groups

Lorene Allen
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REPORTED ATTITUDE AND BEHAVIOR CHANGE
AS A RESULT OF PARTICIPATION IN
PARENT TRAINING GROUPS

by

Lorene Allen

A thesis submitted in partial fulfillment of the requirements for the degree of

MASTER OF SCIENCE

in

Psychology

Approved:

UTAH STATE UNIVERSITY
Logan, Utah

1974
ACKNOWLEDGMENTS

I would like to thank all those who have assisted in the completion of this study.

To my major professor, Dr. Elwin C. Nielsen, I would like to express appreciation for his suggestions and guidance.

I would like to thank my graduate committee members, Dr. David R. Stone and Dr. Michael Bertosch, for their encouragement and their suggestions.

I would like to thank Mr. Alma Waterson, principal of the Adams School, and Dr. Arthur Jackson, principal of the Edith Bowen School, for their patience and for making the treatment groups available to parents in their schools.

I would also like to thank my family for their encouragement and support.

Lorene Allen
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ABSTRACT

Reported Attitude and Behavior Change as a Result
Of Participation in Parent Training Groups

by

Lorene Allen, Master of Science
Utah State University, 1973

Major Professor: Dr. Elwin C. Neilsen
Department: Psychology

This study investigated the value of participation in a Dreikurs Parent Training group and in a Combination Dreikurs and Parent Effectiveness Training group. The value of participation was measured in terms of three variables: (1) problem behaviors of the child as reported by the parents on a Checklist of Child Problem Behaviors; (2) problems of parents as reported by the parents, themselves, on a Checklist of Parent Problems; and (3) parental attitudes as measured by Hereford's Parent Attitude Survey.

Parents, who volunteered to be included in parent training groups, were assigned to two treatment groups and one control group. All parents in the treatment groups were tested during the first week of group meetings and following the tenth and final group meeting. The control group was also pre and post tested but was given no training in the ten week interim period. The two checklists used were developed by the author to check for specific problem behaviors both in the child and in the parent, himself. Hereford's Parent Attitude Survey is a self-report
measure of five parent attitudes: confidence, causation, acceptance, understanding and trust.

Pre-and post-test data was analyzed using t-tests for matched samples to analyze the change within each group and one-way analyses of covariance to compare post-test scores were used as covariates in the analyses of covariance.

Parents participating in Combination groups increased significantly toward having more trust in their child. Parents in Dreikurs groups increased significantly toward having more confidence in themselves as parents.

Through analysis of results obtained on the Checklist of Child Problem Behaviors; it was discovered that parents in none of the groups changed significantly in total number of problems checked. Parents in all three groups decreased significantly in those problems originally checked on the pre-test. The two treatment groups became aware of a significant number of new problems during the treatment period. The control group did not.

Parents in the Dreikurs Parent Groups checked significantly fewer total problems on the post-test administration of the Checklist of Parent Problems than they did on the pre-test. All groups decreased significantly on those problems originally checked on the pre-test. The two treatment groups became aware of a significant number of new problems not originally checked on the pre-test. The control group showed no such increase.
CHAPTER I
THE PROBLEM

Introduction

Interest in parent education is growing because of the increasing frustration and anxiety parents are feeling about the best ways to treat their children. Ironically, this most complex aspect of their lives is one which received very little emphasis in the education of the average American. Parents have expressed growing interest in learning ways to deal with problems of child growth and development, particularly in the affective domain.

When examining the effect of parent behavior on the child, research indicates that the types of adult models the child encounters effects the child's behavior. In fact, the relationship between the parent and the child is of primary importance in the development of the personality and mental health of the child. It follows logically that training parents to exhibit positive behaviors would greatly improve the child's adjustment to his environment and his over-all mental and emotional health.

Several programs have been developed to train parents to function more effectively in their parental roles. This study reports on the attitudes of parents participating in two types of training groups: Parent Effectiveness Training sessions and Dreikurs' model parent groups. Results of parent's reports of their own problem behaviors of their children will be evaluated and discussed.
"Parents are blamed but not trained" is the introductory statement in Gordon's training book for parents and this idea provides the motivation for expanding parent education groups. Being a parent is a demanding and difficult job. Yet where do parents acquire the knowledge and skills to be effective at the job? Where are parents effectively trained for parenthood?

Parents, for the lack of new and better ideas, fall back on methods used by their parents and grandparents and upon what they see other parents doing. Although our culture in general is experiencing rapid change, the parent-child relationship in most families has retained methods based on slowly changing autocratic practices (Gordon, 1970; Dreikurs, 1964). Even those parents who had effective models for parenting behaviors are often bound by antiquated methods and limited choices. With the increasing breakdown of stable family structure, a growing number of parents has never experienced a functional family model.

Are parents feeling a need for outside help? The popularity of Dr. Hiam Ginott's best selling book, Between Parent and Child, may be suggestive of the hunger of modern parents for answers and ideas. The preface states "No parent wakes up in the morning planning to make his child's life miserable. All parents want their children to be secure and happy." He suggests the purpose of his book as being to "help parents identify their goals in relation to children and to suggest methods of achieving these goals."
Parents are seeking out and participating in parent groups. Over 15,000 parents participated in Gordon's Parent Effectiveness Training Program during its first few years (Gordon, 1970). Parent Effectiveness Training is presently offered in at least 25 states with plans to reach all 50 states in the near future. Dreikurs' model parent discussion groups have been offered in elementary schools in Logan, Utah for three years and for many years prior to this in numerous cities across the country. Parent study groups and educational programs based on a variety of parent effectiveness models have been initiated (Hereford, 1963; Shapiro, 1956; Westport and Weston, 1959). The Child Study Association of America began its first child study group in 1888 (Auerbach, 1968) and has sponsored numerous groups periodically since that time.

**Problem Statement**

As a result of parental frustration with ineffective child-rearing practices, a great many people throughout the country today are involved in some kind of parent education, as participants, trainers or advocates. Questions regarding the effects of these group training methods are particularly pertinent because of the increasing use of a number of patented methods whose effectiveness has not been adequately researched. Rudolf Dreikurs has developed a group method of parent education designed to prepare parents for special problems involved in raising children within a democratic society. Dreikurs' method uses a basic text, prescribed study plan, and group problem-solving approach. Although groups using this format have been offered by the Alfred Adler Institute of Chicago and by Institutions and lay groups across the county, little or no effort
has been made to evaluate their effect on parent attitude and behavior change. The Adlerian Institute reports little or no progress has been made in evaluation by their group. The writer's experience with parent groups in the Logan City schools and with the Utah State University (USU) Psychology Department has demanded evaluation of the effects of the program on participant parents and their problems.

Parent Effectiveness Training is another packaged format which, although newer, is being promoted and widely accepted across the country. The program uses a text and a workbook, but employs a different approach. Like the Dreikers program it has not been adequately evaluated. Parent study groups based on a combination of Dreikurs' model of parent interaction and the Parent Effectiveness Model are also being initiated by members of the USU Psychology Department and offer a useful means for initiating an evaluation program.

It is urgent that researchers be certain that the effort and money being expended on such programs is not wasted and that parent study programs be used to help parents with particular problems.

The most significant variables in the determination of the child's mental health are the attitudes held by the parent and the behavior of the parent (Gordon, 1970b). Parental attitudes regarding the parent/child relationship lead to behavioral acts on the part of the parent which, through the parent/child interaction, lead to attitudial and behavioral changes on the part of the child (Hereford, 1963).

The problem to which this study addresses itself is the question of how to most advantageously communicate to parents the knowledge that has
been gained about child rearing and how to help them to incorporate positive attitudes and behavior change based on that knowledge (Gordon, 1970).

**Purpose**

Specifically this study will attempt to measure the value of two parent education programs in terms of three variables: (1) Problem behaviors of the child as reported by parents, (2) Problems of parents as reported by parents, themselves, and (3) Parental attitude.

**Objectives**

1. To determine to what extent specific problem behaviors are improved as a result of participation in two types of parent study groups.

2. To determine to what extent additional problem behaviors come to the awareness of parents as a result of participation in two types of parent study groups.

3. To measure change in child-raising attitudes of parents as a result of participation in parent groups as measured by Hereford's Parent Attitude Survey. Five attitude variables will be measured: confidence, causation, acceptance, understanding, and trust.

Specifically, the above objectives were studied in the following manner:

The Parent Attitude Survey (P.A.S.) developed by Hereford was employed with three groups to determine if there was a significant change in parental self-assessed attitudes. The groups were:
1. Experimental Groups I. PET and Dreikurs combination groups.
   Parents received a pre and a post test.

2. Experimental Groups II. Dreikurs parent study group.
   These parents were also given a pre and post test.

3. Control Group.
   A group of parents who volunteered for parent groups but did
   not receive the course were given pre and post tests.

To determine to what extent specific problem behaviors were im-
proved or additional problem behaviors came to the awareness of parents
participating in parent groups, two checklists of problems were given
to parents. The first checklist consisted of a list of problems chil-
dren may exhibit and the second was a checklist of problems that parents
themselves may feel they have. These checklists were administered to
the same parent groups in pre and post testing sessions.

Organization

The first chapter of this study is an introduction to the study
and contains an overview of the problem, a problem statement and purpose
and a brief discussion of procedures used to collect data for the study.

To provide a framework for the present study, Chapter II contains
a review of literature pertaining to the parent group movement. Studies
emphasizing the importance of parental child-rearing practices in forming
the child's personality, motivation and mental health will be discussed.
This will be followed by an overview of research showing the importance
of parental attitudes and behavior.
Chapter III will present the methods and procedures used in the study. The hypotheses of the study will be stated formally. The two groups methods used will be presented and described along with sample instruments used. Data collection procedures and analysis methods will be discussed.

Chapter IV is devoted to presentation and analysis of data.

Chapter V will contain a restatement of the problem, a listing of the main findings and conclusions, a discussion of recommendations for further study, and a summary of the study.
CHAPTER II
REVIEW OF LITERATURE

Introduction

Literature reviewed will consider the relationship of child rearing attitudes and methods to the child's emotional, behavioral, and intellectual development. Literature will also be reviewed which suggests that group discussion methods of parent education may lead to attitudinal and behavioral change.

General Studies of Child Rearing Approaches

Experts have avowed and studies have established that the home provides the foundation for the individual's social, emotional, and intellectual development (Becker, 1964). Rogers (1959) states that establishment of deep interpersonal bonds is essential for the development of the individual. A child's relationship with his parents provides the primary training ground for development of these bonds (Satir, 1972; Homan, 1969; Bettleheim, 1967). The family system, according to Satir (1967) "...is the main learning context for individual behavior, thoughts, feelings... . How parents teach a child is just as important as what they teach." DeRosis (1970) indicated that the "ultimate mental health of any individual is directly proportional to the quality of the early relationship which existed between that individual and his or her parents." Horney (1950) declared that the most effective way to prevent
the child from having serious emotional problems is to change the relationship between parent and child.

Shore (1971) surveyed psychological theories concerning causes of antisocial behavior, equating antisocial and delinquent behavior with becoming criminal or delinquent. Although Shore defines eleven theories under four general categories, he summarizes his survey as follows:

Most of the theorists agree that the roots of antisocial behavior most often lie in early and extremely negative interpersonal experiences with important figures such as parents. Large-scale programs can be successful only insofar as they can assist the parental figures in bringing about the intimate, intense, positive individual attachments necessary for growth and development. Programs for prevention must be aimed at improving the emotional climate of an individual's experience with important figures and assisting families and individuals during periods of stress and crisis. (Shore, 1971, pp. 467-468)

Results of research in child development suggest a positive relationship between parental power assertion and child aggression. Hostile parents produce aggressive children. The physically punitive parent sets a model of aggressive behavior for the child which, in effect, sanctions aggression and also shows the child how to be aggressive (Bandura, 1962).

Bandura explored the effects of a behavioral model for children. Children were exposed to aggressive and non-aggressive models and then tested for amount of imitative behavior in a new setting with the model absent. Children exposed to an aggressive model showed considerably more aggressive acts in the new situation than a control group, and children who were exposed to a non-aggressive model showed less aggressive behavior than a control group. There is a substantial body of
evidence demonstrating the power parents have as models in shaping the behavior and psychological development of the child (Bronfenbrenner, 1970).

Sears, Maccoby, and Levin (1957) found the pattern of child-rearing that produces the most aggressive children is one where the parents disapprove of aggression and yet punish it with physical aggression of their own.

McCord, McCord, and Howard (1971) analyzed case histories of boys who were delinquent in various ways and concluded that "aggressive boys were reared by parents who were heavy punishers, rejecters, poor supervisors of their sons' behavior, and were themselves deviant and often in intense conflict with each other.

Gluecks' latest study (1970) revealed that the influence of the mother, her supervision and discipline of the boy, and family cohesion were most important factors in predicting delinquency and need for therapy, especially when the father was often transient.

Shore (1971) explains that overly severe discipline is often related to the development of antisocial behavior in children. Sears, Maccoby, and Levin (1957) state that "... discipline is necessary in child rearing, but parents of highly aggressive children have been found to be more aggressive, less warm, and more inconsistent in applying disciplinary measures."

Hoffman (1960) provided further evidence on the relationship between a punitive approach to discipline and child aggression. Results indicated a strong relationship between what he called "mothers' reactive power-assertion" and the child's hostility toward other children resistance to influence by other children and by the teacher.
Experimental studies of punishment have concluded that punishment, while effective in forcing short-term conformity, does not lead to internalization of moral values or long-term behavior change. It also does not produce control useful in other situations.

Aronfreed (1961) subdivided behavior in terms of whether internal or external forces were the motivating factors. He concluded that the parent who talks and reasons with the child about his misbehavior is more likely to provide the child with a clear understanding of what he did wrong, so that anxiety about misbehavior is connected to the right cues. He also suggested that explanations and reasons provide the child with internal resources for evaluation of his own behavior.

McCord (1961) classified working mothers of boys into three levels of control (over, normal, and subnormal). His findings indicated that nonaggressive boys more frequently came from homes in which the mother used over-control, assertive boys from those using normal control, and aggressive boys both from those using subnormal and over-control.

A longitudinal study of the Fels Institute (Kagan and Moss, 1962) demonstrated that restrictiveness during the first three years appeared to have lasting inhibiting effects on both boys and girls. Restrictiveness was defined in terms of the degree to which the mother attempted to use punishment and threat to force the child to adhere to her standards, and the degree to which deviations from her standards were punished. Restricted children were found to be more conforming, less aggressive, less dominant and competitive with peers, more dependent, and showed less mastery behavior.
A study by Bandura and Walter (1959) discovered that a relatively higher incidence of overly strict disciplines were found among fathers of delinquent boys. Mothers in these families were usually lax in discipline. Permissiveness combined with hostility seemed to maximize aggressive, poorly-controlled behavior. Restrictiveness combined with hostility maximized self-aggression, social withdrawal and internal conflict.

Becker, et al. (1959) studied, extensively, the characteristics of fathers and mothers of thirty-two children who were in need of clinical services. Children were between 6- and 12-years-old at the time of the study. The study concluded that parents of the conduct-problem group were maladjusted and arbitrary with their children and were likely to vent emotion violently and unpredictably. Mothers were inclined to be active and tense, free with suggestions, dictatorial, and thwarting. Fathers withdrew from the situation and tended not to enforce regulations. The child seemed to be left with an antagonistic parent on one side and an unsupportive and withdrawn one on the other.

In a summary of child development research, Becker (1964) concluded that love-oriented techniques of child discipline (using the love relationship to shape behavior in the child) correlated with internalized reactions to transgression (feelings of guilt, self-responsibility, confession) and with non-aggressive or cooperative social relationships. Power assertive discipline techniques correlate with externalized reactions to transgression (fear of punishment, projected hostility) and with noncooperative, aggressive behavior. Becker also concluded that parent restrictiveness, while fostering well-controlled, socialized behavior,
tends also to lead to fearful, dependent, and submissive behaviors, a
dulling of intellectual striving and inhibited hostility. Permissivenes
s on the other hand, while fostering outgoing, socialble, assertive
behaviors and intellectual striving, tends also to lead to less persis-
tance and increased aggressiveness. Inconsistent discipline was found
to contribute to maladjustment, conflict and aggression in the child
and teenager.

Parents have felt that they are loosing the control of their children
to the peer group. In a study by Condry, Siman, and Bronfenbrenner
(Bronfenbrenner, 1970) the characteristics of "peer-oriented" and "adult-ori-
tented" children were compared. It was concluded that "peer-oriented"
children were more influenced by a lack of attention and concern at home
than by the attractiveness of the peer group. These children rated their
parents lower in expression of affection and support and also lower in
exercise of discipline and control.

Many studies have explored ways in which use of parental power re-
lates to the child's attitudes, achievement motivation, and actual
performance in school. Elder (1963) found greater self-consciousness
and high educational aspirations in students whose parents give them a
voice in decisions affecting themselves.

Stebbens and Carr (1970) reported that favorable, democratic atti-
dutes of parents are positively related to educational achievement and
that authoritarian, rejecting, inconsistent behavior is negatively
associated with such achievement.

Miller (1971) reviewed research concerning the relationship between
family variables and scholastic performance in the English schools. He
found that the following were positively related to school performance:
homes where independent thinking and free discussions occur, where there is harmony between home and school values, and where children's curiosity and academic aspirations are supported.

Wachs, Uzgiris, and Hunt's study of infants in Illinois (1971), White and Watts' Harvard Preschool project (1971, 1972), and the longitudinal work of Escalona (1972) all support the idea that what parents do in the early years of the child's life while behaving as teachers of their children influences the development of the child.

There is ample research evidence substantiating the important influence child-rearing methods have on broad education, resistance to failure, learning sets and methods of attack children bring to a school setting.

Parent Attitudes and Child Behavior

Parent attitudes are significant determinants of the child's behavior. (Schaefer and Bell, 1958). Attitudes lead to behavior on the part of the parent and influence attitude and behavior on the part of the child.

Although parent attitude and behavior are intertwined many times as subjects of family research, parent attitude has, itself, been the subject of extensive research.

Freud was among the first to emphasize the role of parental attitude in determining a child's mental health. Psychoanalysts have continued to emphasize this relationship.

As long ago as 1942, parent attitudes were being investigated as causes of behavior problems of children. Brown (1942) found no
correlation between maternal attitudes expressed on a questionnaire and children's emotional adjustment according to a children's personality inventory and teacher ratings.

Hereford (1963) demonstrated that parental attitude changes are significantly related to behavior change in children. Hereford used the discussion group as a means of facilitating parent attitude change. Parent attitudes changed, resulting in more confidence in themselves as parents, better understanding of causation of a child's problems, more acceptance of the child, better understanding, and more mutual trust in the parent-child relationship. These attitude changes were related to behavioral changes in the child as measured by sociometric tests of school adjustment.

Katherine Miles (Anderson, 1946) found that the social adjustment and leadership of adolescents is determined in part by parental attitudes. Seventy children were divided into groups on the basis of their leadership-participant status. Parents were measured on three attitudes, over-protection, dominance by the parent and encouragement of social development. Miles found that "...parents of successful leaders show outstandingly different attitudes from the parents of other groups of children." Parents of successful leaders are less inclined to protect children from the normal risks of life or to shield them from developing an adequate degree of independence. The individual personality is given more respect and parents are much less restrictive.

Shoben (1949) developed the Parent Attitude Survey and administered it to 100 mothers. Fifty mothers had children defined as "problem children" and fifty had "non-problem children." The Parent Attitude
Survey's three scales, maternal dominance, possessiveness and ignoring, were found to be significantly related to child adjustment.

Baldwin, Kalhorn, and Breese (1945) measured parent attitudes on seven dimensions: acceptant democratic, acceptant-democratic-indulgent, indulgent, casual indulgent, casual autocratic, nonchalant rejectant, and actively rejectant. Their research concluded that parents described as "acceptant-democratic" had children who showed greater intellectual development, more spontaneity, and originality and more emotional security and control. "Actively rejectant" and "indulgent" parents had children who showed decelerated intellectual development, emotional instability, aggressiveness and rebelliousness. Children from "indulgent" homes were emotionally immature, socially inactive, unaggressive and shy.

Mark (1953) administered a questionnaire based on Shoben's Parent Attitude Survey to 100 mothers of schizophrenics and 100 mothers of non-schizophrenics. Sample and control groups were matched for age, religion, education, socio-economic status, and age of their sons. Sixty-seven items were found to differentiate significantly between the two groups and were classified into three clusters of attitudes. The three clusters were: control the parent employed to restrict the child's behavior, intellectual objectivity of the parent, and warmth of the relationship.

Mothers of schizophrenics were found to be restrictive in their attitudes, to allow their children little or no freedom and to vacillate between excessive devotion to the child and cool attachment.

Peterson, Becker, and their co-workers in Iowa compared a small group of Child Guidance Clinic attenders with kindergarten and school
children. The major conclusions were that fathers and mothers resembled each other in degree of hostility, restrictiveness, and sex anxiety; and that the attitudes of fathers were at least as important as those of mothers in the genesis of maladjustment in children (Sears, Maccoby, and Levin, 1957).

Schaefer has studied parent attitude extensively. His Parent Attitude Research Instrument has been used in hundreds of studies on parental attitude. In 1969, Schaefer found that the impact of mother's attitudes was more important for boys than for girls, but that how the mother saw herself, how she felt about her own control, and how she felt about the child's projects were positively related to child performance.

The ability to separate the child from his behavior and accept him has been frequently shown to be essential for the development of a normal personality. Human (1969) states that this kind of love builds self-confidence, a good self-image and willingness to try in the child. He further concludes that "... failure to convince the growing child that this is the feeling that his parents have for him is probably the single most important cause of future personality deviations." (Homan, 1969, p. 16)

This review emphasizes the influence that parent attitudes and child-rearing behaviors have on the positive development of the child. Two conclusions can be made: (1) both parent attitudes and behaviors are significantly related to child adjustment and (2) some parent attitudes and parent child-rearing practices promote a healthier atmosphere for the developing child than others.
Many methods have been enlisted in the past in an effort to acquaint parents with available information and understanding and provide optimal use of this information. Lectures, mass media approaches, seminars, and group discussions have all been used in attempts to help parents with their job.

Research reviewed here will focus on group discussion as a means of facilitating attitude change and behavior change in parents.

Auerbach (1968) has observed, "...the principles and practices of parent group education offer a dynamic learning experience, which grows out of the parents interests and needs and in which they participate in their own individual ways. Parent group education recognizes the importance of the feelings and attitudes and uses emotional mobilization as well as intellectual stimulation." In discussing the advantages of group discussion methods of helping parents, Hereford (1963) explains "The main problem in parent-child relations, then, may be viewed as not one of giving information or imparting knowledge. The main problem lies in those parental difficulties which stem from attitudes, feelings, and emotions." Hereford found the group discussion to be the most effective method of dealing with these variables.

Rudolph Dreikurs and some of his followers have developed a model which expresses a recognition of these personal variables. In their manual they state their study group goal: "... to provide a self-help method by which ... (parents) mutually examine problems, concepts, and values, share in stimulation and encouragement and learn new basic
principles and their application in the art of democratic family living." (Soltz, 1967)

Hereford (1963) demonstrated, in a four-year study, that parent attitude change is significantly related to child behavior change in school adjustment. One experimental group, who received 1 to 6 weeks of group discussion, and three control groups were used. Control groups consisted of (1) a lecture group (2) a volunteer control group, and (3) a random control group.

Parents were pre and post tested using the Parent Attitude Survey developed by Hereford and interviewed regarding areas of punishment, family problems, and parent ideals. Children were administered sociometric tests on social acceptability and teacher ratings on adjustment to school setting.

Hereford found that parent attitudes did change as a result of group discussion. All five attitude scales were significantly higher for experimental than for control groups. The child's behavior was also found to change when the parents' attitude and behavior changed. Students of the experimental group changed in a positive direction in school adjustment as rated by peers and teachers more than the controls.

Shapiro (1954) evaluated change in parent attitude as a result of group discussion participation. He used tests devised by Shobin, Harris, Hough, and Martin. The tests were administered to an experimental and a volunteer control group. Experimental subjects improved to a significant degree on three of five scales measured: authoritarianism, good judgment, and possessiveness. Parents attending four or more meetings changed more than those who attended less, and experimental subjects who
initially held more desirable attitudes changed more than those holding less desirable ones.

Research on parent attitude change was also done by the Westport-Weston Mental Health Association and the Child Study Association of America (1959). This program was to offer parents an educational program and to evaluate their program. The groups were led by a trained psychologist. Parents who volunteered for the groups were randomly assigned to experimental and control groups and pre- and post-tested. Problem solving ability and decision-making skills were measured. Results indicated that parent discussion groups failed to exert any statistically significant influence on the characteristics studied.

Auerbach (1968) reported another study initiated by the Child Study Association of America. Goals were to explore the effects of the training program on the trainers who were to lead the groups, study changes in parents attending groups and assess the impact of the program on family agencies.

Conclusions reported were: (1) both parents and trainers felt the program was more than moderately helpful in increasing their knowledge about the parent-child relationship and that it helped them to develop more positive attitudes toward their children; (2) the parents were slightly more positive in their evaluation than were the trainers; and (3) both trainers and parents felt they had improved most in knowledge and least in terms of new behavior.

Stearn (1971) investigated the impact of Parent Effectiveness Training (PET) groups on changing parent attitudes regarding family life in a democratic direction. It was assumed that if parent attitudes
change, parent behavior would change, and this change would be perceived by the child. The relationship of parent participation in PET and changes in the child's self-esteem as measured by the Coopersmith Test of Self-esteem was also observed. Democratic attitudes were assessed by the Traditional Family Ideology Test and the child's perception of parent-child relationship was measured by the Barrett Lennard Relationship Inventory Scale.

Findings indicated that the experimental group became significantly more democratic in its family attitude than the no-training control groups. It was also shown that an increasingly democratic setting was accompanied by gains in self-esteem. The relationship inventory scores indicated that experimental group children rated their parents significantly lower on both pre- and post-tests. Differences between pre- and post-test scores for the experimental group were not significantly different than the control group differences, on children's ratings of their parents' empathy, congruence, acceptance, and positive regard.

Very recently the effectiveness of Parent Effectiveness Training has become the subject of several research studies.

Garcia (1971) studied PET using Hereford's Parent Attitude Survey and a PET Questionnaire Survey. He found that PET graduates from two classes showed significant changes from pre-course to immediately after-course. Change was toward greater confidence in the parental role, greater mutual understanding between parent and child and greater mutual trust between parent and child. He concluded that PET can serve as a model of preventive parent education programs.
Knowles (1971) used the California Test of Personality to study improved communication and understanding as a result of PET classes. Forty parents with children between ages 9 and 15 were involved in the groups. Knowles concluded that "... parents who participate in PET have better understanding of their children than those who have not." Understanding was measured by discrepancies between the child's answers and parental predictions of those answers on the California Test of Personality. Parents showed a significant reduction in authoritarianism and were less inclined to use authority in relations with their children.

Larson (1972) investigated the relative impact of group methods being used in the Youth Research Center programs in Minnesota. Larson compared one group using the Achievement Motivation Program (AMP), a second using a discussion-encounter group program (DEG), and a third using Parent Effectiveness Training (PET) with control groups. Children of PET graduates improved in school performance, indicated by changes in grade point average. The PET group of parents showed the greatest overall gains among groups compared, especially in confidence as parents, insight into the behavior of their children and trust (on Hereford's Attitude Scale). The PET group also showed greatest reduction in problems with their children on a checklist of problems. They had fewer concerns or problems after taking PET than before. PET graduates showed larger improvements in their own self-concept than did parents in a no-training control group. Larson concluded that PET was superior to the AMP or DEG groups in achieving improved parent-child relations, DEG being the poorest.
Lillibridge (1971) assessed change in parent attitude and child's perception of parents using the Parent Attitude Scale and Children's Report of Parent Behavior Inventory. He found that PET graduates improved significantly from before taking the course to immediately after in confidence in themselves as parents, acceptance of their children, and trust of their children. Children of PET graduates showed significant changes in perceiving their parents as more accepting of them as individuals, less rejecting, and more generally accepting.

Peterson (1971) also studied change in parental attitudes and children's reports of parent behavior. She found that the post PET group was more able to accept their child's right to hold different views from his parents and showed more distaste for punitive and rigid parental control. They were more willing to use non-authoritarian methods of resolving family differences and to compromise when appropriate, more willing to hear the problems and complaints of their children and more willing to admit that family differences are natural and should be dealt with directly and openly.

Children of parents who took PET reported that their parents see their good points, display warmth and understanding, comfort them when upset, enjoy their company and like them as they are. They indicated an increased sense of freedom of communication and movement, less lack of interest and a feeling that they were more liked by their parents. Children also reported less fault-finding and less extreme permissiveness on the part of their parents.

Instruments used were Schaefer's Children's Reports of Parent Behavior Inventory and Parent Attitude Research Instrument.
In summary, the parent study group may facilitate attitude and behavior change in parents.

Problems Not Answered by the Literature

Although parent education and study groups are being given more and more attention, little is being done to evaluate their impact and usefulness. In my investigation I could find very few studies that appeared to be statistically significant and that appear to have meaning in terms of their usefulness as models for effecting measurable change. Most of those found have evaluated PET alone and have not compared the effects of PET with those of any other group method. Only two studies attempted to assess whether or not there were changes in parent behavior. That reported changes in attitude reflect changes in parent relationships with their children cannot be stated with certainty at this stage.

Many questions regarding relative effectiveness of study groups are still left unanswered. Questions requiring answers to facilitate optimal use of parent group processes for those involved include: What are the differential effects of group methods on parent problems and parent personalities? Are methods more effective for parents of one socioeconomic class than another? What type of group leadership style facilitates the most positive growth in participants? Is there a method of parent action that answers a particular parent problem more effectively than another? What are the effects of different methods of enrolling parents? Does one method facilitate more attitude or behavior change than another?
CHAPTER III
DESIGN AND METHODOLOGY

Introduction

Chapter III will be concerned with the methods and procedures used in this study. Attention will be given to hypotheses to be tested, selection and description of the subjects, a description of the research instruments, a description of the group methods to be used, a description of the data gathering procedures, and the treatment of the data.

Hypotheses

Three basic sets of hypotheses were formulated in this study. Three instruments were used to correspond with these hypotheses.

The first two hypotheses were concerned with the number of problems parents checked on a list of problems they were having with their children.

**Checklist of child problem behaviors**

1. There will be no significant reduction in number of problems with their children checked on a Checklist of Child Problem Behaviors when compared with a control group.

2. There will be no significant difference in the number of problems parents become aware of on a Checklist of Child Problem Behaviors by parents in treatment groups during the research.
period when compared with a control group for the same period.

The second two hypotheses were concerned with the number of problems parents checked on a list of problems they could be having, themselves, as parents.

Checklist of parent problems

1. There will be no significant reduction in number of problems reported by treatment groups on a Checklist of Parent Problems when compared with a control group.

2. There will be no significant difference in the number of problems parents become aware of on a Checklist of Child Problem Behaviors by parents in treatment groups during the research period when compared with a control group for the same period.

The third set of hypotheses was concerned with parent's self assessed attitudes as measured by the Parent Attitude Survey.

1. There will be no significant difference in confidence in themselves as parents between parents attending a Dreikurs Parent Study Group, parents attending a combination Dreikurs and PET Study Group, and a control group of parents, who volunteer but do not attend such a group.

2. There will be significant difference in parents' insight into the causation of their child's behavior between parents attending a Dreikurs Parent Study Group, parents attending a combination Dreikurs and PET Parent Study Group and a control group of parents who volunteer but do not attend such a group.
3. There will be no significant difference in parents' acceptance of their child's behavior and feelings between parents attending a Dreikurs Parent Study Group and a control group of parents who volunteer but do not attend such a group.

4. There will be no significant difference in parents' understanding of their child between parents attending a Dreikurs Parent Study Group, parents attending a combination Dreikurs and PET Parent Study Group, and a control group of parents who volunteer but do not attend such a group.

5. There will be no significant difference in parents' feeling of trust in their children between parents attending a Dreikurs Parent Study Group, parents attending a combination Dreikurs and PET Parent Study Group, and a control group of parents who volunteer but do not attend such a group.

**Selection and Description of Subjects**

To assess the relative effects of group participation on parent self-assessed attitudes and problems parents were experiencing as parents and with their children, two types of treatment groups and one control group were selected for this study. Two treatment groups were involved in parent study groups using a Dreikurs approach to child rearing practices. For purposes of this study, these groups will be called Treatment Group I. Two treatment groups were involved in parent study groups using a combination of both the Dreikurs approach and Gordon's Parent Effectiveness Training (PET). For analysis these two groups will be combined and
called Treatment Group II. The control consisted of parents who volunteered for groups but were not able to attend at set group time.

A total of 42 parents were used as subjects in this study. Group I consisted of 15 parents who completed tests on both pre and post testing while taking a Dreikurs Parent Study course. Group II consisted of 13 parents who completed pre and post testing while attending Combination Dreikurs and PET Parent Study groups. There were also 7 parents in the volunteer control group who took the tests. Table 1 lists the number of parents in each group and the number of those completing each test.

Table 1. Number of parents turning in testing for each group

<table>
<thead>
<tr>
<th>Groups</th>
<th>no. turned in attitude scale</th>
<th>no. turned in checklists</th>
</tr>
</thead>
<tbody>
<tr>
<td>I. Dreikurs 1.</td>
<td>8</td>
<td>0</td>
</tr>
<tr>
<td>2.</td>
<td>9</td>
<td>9</td>
</tr>
<tr>
<td>II. Combination</td>
<td>10</td>
<td>8</td>
</tr>
<tr>
<td>2.</td>
<td>7</td>
<td>5</td>
</tr>
<tr>
<td>III. Control</td>
<td>8</td>
<td>7</td>
</tr>
</tbody>
</table>

One Dreikurs group did not take the attitude measure because the group leader was afraid taking another test would bother group members too much and they would not come back. Parents in this group seemed to be especially suspicious of testing.
Letters describing the parent groups were sent out from schools. In the letter parents were asked to return the letter if they would be interested in participating in such a group. (See Appendix A.) Parents answering the letter affirmatively were invited to attend Dreikurs group meetings at a designated time and place. Dreikurs parent study groups were formed in this manner and met for 10 weeks. The evaluation program was explained to parents during the first group meeting and parents agreed to participate. Combination PET and Dreikurs model parent study groups were formed in a similar manner.

Additional parents were recruited for one of the Dreikurs groups and both combination Dreikurs-PET groups by administrators of schools their children were attending. The administrators pointed out that the children were having problems and suggested that attending a group might prove helpful.

All groups were led by persons specifically trained in one of the treatment methods.

The control group was comprised of eight parents who responded positively to the letter inviting them to join the group, but who were unable to attend at the particular time chosen. These parents were randomly selected from a larger list of parents who were unable to attend at that time. The evaluation program was also explained to these parents and they agreed to fill out the required pre and post tests.

Instruments

These principal instruments have been selected for measurement in this study. Two problem checklists were developed by the author to
assess number the types of problem behaviors parents had noticed. The Checklist of Child Problem Behaviors assessed the number and types of problem behaviors parents had noticed in their children's behavior.

The second checklist, the Checklist of Parent Problems was developed to assess number and types of problems the parent might see in himself, mostly in his relations with his child or children. Hereford's Parent Attitude Survey was selected to measure parent attitudes in five areas: confidence in the parental role, causation of the child's behavior, acceptance of the child's behavior and feelings, mutual understanding and mutual trust.

Checklist of child problem behaviors (Appendix B)

The Checklist of Child Problem Behaviors was developed to indicate the number and types of problems reported by parents in the group. Items were obtained from an analysis of Gordon's book, Parent Effectiveness Training, Dreikurs' book, Children, the Challenge, recommendations of parents participating in previous groups and others who were asked to read the questionnaire and respond, and a list of behavior patterns suggestive of emotional malfunctioning in children prepared by Lifton. The checklist consists of problems the parent may have noticed in his child's behavior. An attempt was made to develop items which were primarily behavioral in nature. Each parent responds to the scale independently.

Directions on the test form state: This questionnaire is a list of problems many parents have with their children. Please check in the space to the right of the item, those which you have noticed in the behavior of your children.
Total number of problems can be tabulated and specific problems checked can be listed.

Checklist of parent problems
(Appendix C)

This checklist was also developed to indicate the number and types of problems reported by parents in the groups. The checklist consists of possible problems the parent might see in himself, mostly in his relations with his child or children. It was developed in a manner similar to the Checklist of Child Problems, i.e., items were obtained from analysis of Gordon's book, Parent Effectiveness Training; Dreikur's book, Children: the Challenge, recommendations of parents participating in groups and other parents who were asked to read the questionnaire and respond.

Directions from the test form state: Below begins another checklist. This one deals with problems parents, themselves, frequently have. Please check all those that apply to you.

Total number of problems can be recorded as well as specific problems checked can be listed.

Parent attitude survey P.A.S.
(Appendix D)

A 75 item Parent Attitude Survey was constructed by Hereford (1963) to assess attitude change as a result of parent discussion groups sponsored by the Hogg Foundation. Parent attitudes toward their children in five specific areas are measured by the P.A.S.

The first scale measures confidence in the parental role, or the parent's feeling of confidence concerning his competence as a parent.
Parents with low scores feel they have more problems than most parents and are uncertain and unsure as to what to do with these problems. Those parents feel that they don't have the ability to be good parents. Parents with high scores feel sure of themselves and adequate to meet the demands of parenthood.

The second scale, causation, is concerned with "the interpretation a parent makes of his child's behavior, and the extent to which he involves himself as a causative factor." (Hereford, 1963, p. 480) The parent with low scores on this variable emphasizes the impossibility of changing the child from the way he is by nature. He feels that the child's behavior is predetermined. High scorers believe that the parent-child interaction, i.e., the parent's attitudes and behavior are the major determinants of the child's behavior.

Acceptance, the third scale, measures the parent's acceptance of the child's behavior, feelings, need for affection, aggression, and self-expression. High scoring parents are accepting of the child's behavior and feelings, while low scorers are rejecting of behavior and feelings.

The fourth scale measures understanding and deals with parent's communication skills. Items are concerned with freedom of expression parents allow their children, their willingness to talk out problems, and allow joint participation in decision making. Parents scoring at the upper end of this scale "believe in the importance of sharing and communicating attitudes, feelings, and problems, while the parent at the lower end believes that 'children should be seen and not heard'." (Hereford, 1963, p. 49)
Trust, the fifth variable, deals with the degree to which the parent accepts or rejects the individuality of the child. Parents with low scores see their children as extensions of themselves, feel that children cannot be trusted and must be watched. High scores indicate respect for their children as individuals and a feeling that their children can be trusted.

P.A.S. respondents are asked to mark each of fifteen items on each sub-scale on a five point scale:

1. Strongly agree - S.A.
2. Agree - A.
3. Undecided - U.
4. Disagree - D.
5. Strongly Disagree - S.D.

The algebraic sum of the item scores in each area provide the parents total score for that area. Each parent receives five different scores, one for each scale.

The original item pool for the P.A.S. was composed of 52 items from Schaefer and Bell's Parent Attitude Research Instrument, items from the "Family Problems Scale" by Lovinger and Sweet, the "Parent Attitude Survey" by Pierce-Jones and the "Parent Attitude Questionnaire" by Shapiro. Hereford and colleagues developed an additional form of the test from these items.

The P.A.S. was pretested on a group of 72 parents in Texas. Reliability and inter-scale correlations were computed. Items with the highest correlation with each attitude subscale were selected for
inclusion in the final instrument. Original items had been selected by judges, indicating that the item in their opinion measured the attitude sought. The majority of items showed near 100 percent inter-judge agreement.

Split-half reliability coefficients were: (1) confidence, .78 (2) causation, .77 (3) acceptance, .68 (4) understanding, .86 (5) trust, .84. These values are well within the satisfactory range of reliability for measuring instruments of this type (Hereford, 1963).

An interscale correlation matrix was computed to ensure that different scales were not measuring the same area. Intercorrelations obtained were all positive and ranged from .33 to .63 with a mean of .46. Hereford says, "...the correlation coefficients were high enough to indicate that all scales' were measuring related parent attitudes, but not high enough to suggest duplication." (Hereford, 1963, p. 78)

The P.A.S. takes 15 to 20 minutes to administer.

Discussion of Group Methods

I. Dreikurs' parent study group

Parent study groups involved a two-fold approach. Phase I consisted of studying, discussing and becoming acquainted with Rudolf Dreikurs' principles of child behavior as espoused in his book, Children: the Challenge. The second phase consisted of group problem-solving sessions in which group members attempt to use Dreikurs' principles in devising and implementing ways of solving their own problems and those of other group members.
Dreikurs emphasizes the idea that any human relationship should be developed around democratic processes. He explains that every action has a purpose—to belong, and if a child cannot feel like he belongs in an adaptive way, he will develop "mistaken goals" which help him belong in a maladaptive way. Possible mistaken goals include attention, power, revenge, and inadequacy. The group helps parents discover which mistaken goals their children are following and teaches them to respond appropriately. Dreikurs also stresses encouragement as an important process in a child's life and teaches parents to word compliments to encourage rather than praise. Other topics covered are: behavior modification at home, replacing criticism and dominance with respect and firmness; how to avoid reinforcing misbehavior, encouraging independence in the child; being fair, reasonable, and consistent; listen, talk, and have fun together; and setting up a family council. (For a complete agenda, see Appendix E.)

II. Parent study group combining Dreikurs and PET

The combination group method combines the PET communication model and the Dreikurs' method of defining and dealing with misbehavior.

The Dreikurs approach helps parents to understand the basis of children's behavior, while Gordon's approach elaborates communication and problem solving techniques which can be used to deal with difficulties within a family. The combined course emphasizes these aspects of each approach.

In the PET model instructors give lectures, demonstrations, role play and facilitate group interactions. How to talk to and listen to
children is a major focal point of PET. Each parent is shown the particular ways in which he tends to block communication with his children. Gordon lists twelve commonly used roadblocks to communication: ordering, warning, moralizing, lecturing, advising, evaluating, reassuring, diagnosing, and kidding. PET attempts to teach parents to avoid those roadblocks and introduces parents to a method of responding to children's messages, called "active listening", and then attempts to develop problem solving skills. The course attempts to teach parents to be "effective counselors" for their children.

Parents' needs, feelings, worries, and concerns are also a focal point of PET. Parents are encouraged to tell the child how he feels about things the child does that bother the parent. This process is called sending "I-messages." Gordon believes that one result of the course is more honest two-way communication.

PET uses two-way communication as the foundation for implementing a democratic approach to conflict resolution called the "No-lose Method." This method attempts to find solutions to problems which are pleasing to both parties.

Gordon's book, Parent Effectiveness Training, was used as the text for the course along with a pamphlet summarizing Dreikurs' theories and containing other useful information.

Data Gathering Procedures

The researcher administered all tests used in this study to parents in the treatment groups and to parents in the control groups. All parents in the experimental groups were given both testing instruments at the first group meeting. The parents took home both tests.
The parents completed the tests, individually, and returned them to class the next week. At the conclusion of the final group session, group members were given copies of the testing instruments once more and asked to take them home and complete them with instructions that the researcher would pick up the test blank the following week or they could mail them in. Some difficulty was experienced in collecting the forms following the group sessions. Some parents would not complete one or both instruments.

Parents in the control group were contacted by phone and asked if they would fill out parent forms within the next week and again 10 weeks from that time. The researcher took the testing instruments to the participating parents and made an appointment to pick them up one week from the day delivered. The same procedure was followed 10 weeks from the initial testing period.

Number of parents in each group and number of parents completing testing instruments was listed in Table 1.

**Treatment of the Data**

**Parent attitude survey.** Data collected from the Parent Attitude Survey was analyzed using both t-tests for correlated analysis and means of covariance. Five analyses of covariance (one for each of the five subtests) were computed. A one-way design was used (see schematic representation, Figure 1.). T-tests between pre and post test scores for each group on each of the five subscales were also computed. Care was exercised to ensure that the assumptions underlying the analysis of covariance and correlated t-test designs were not violated.
<table>
<thead>
<tr>
<th>Groups</th>
<th>I.</th>
<th>II.</th>
<th>III.</th>
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<tbody>
<tr>
<td>Dreikurs</td>
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<tr>
<td>Combined PET and</td>
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<tr>
<td>Dreikurs</td>
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<tr>
<td>Control Group</td>
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<tr>
<td>(volunteer)</td>
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</table>

| X - covariate       |     |      |      |
| Pre test scores     |     |      |      |
|                     |     |      |      |
| Y - criterion       |     |      |      |
| variable =          |     |      |      |
| post test scores    |     |      |      |

Figure 1. Schematic representation of analysis of covariance design.
Parent checklists. Total number of problems checked on pre and post test forms were determined. Also, the number of problems checked on the pre test that were not checked on the post test or those "solved" during the course of the 10 weeks was found, and the number of problems checked on the post test that were not checked on the pre test or those the parents became aware of during the 10 week course was computed. A percentage of problems checked on the pre test that were not checked on the post test was computed for each parent. Also the number of problems checked on the pre test and the new problems checked on the post test were summed to determine the total number of problems checked in both sessions by each parent.

Means were computed for each category of data mentioned for each group. Also, the total number of problems solved by parents in each group and the total number of new problems checked on the post test by parents in each group was computed.

T-tests for correlated means were computed for the three groups on three categories for each of the two checklists. The three categories were (1) total problems checked pre vs post, (2) the total number of problems checked on the pre compared with the number of those problems still checked on the post test, (3) the number of problems checked on the pre test compared with the total number of problems checked in post sessions or the pre plus the new checked on the post.

An analysis of covariance using the pre test scores as a covariate and comparing the post test scores between the three groups was also computed for the three categories used for the t-tests. The format illustrated in Figure 1 was followed.
CHAPTER IV

RESULTS

The previous chapter outlined the procedures and methods used in this study. The sample group, group techniques and instruments used in the study were described.

This chapter will deal with results obtained. First, data regarding the Parent Attitude Survey are presented. Second, data will be presented concerning the Checklist of Child Problem Behaviors. Finally, data collected from the Checklist of Parent Problems will be examined.

Parent Attitude Survey

The Parent Attitude Survey was given to parents in this study to determine whether parents' attitudes changed in a positive direction while parents participated in a parent group. Five attitude variables measured were: acceptance, understanding, causation, trust, and confidence.

Scores on each of the five subscales of the test were compiled. Mean scores on the pre and post test scales were computed for each of the three treatment groups on each subscale. Mean scores on pre and post tests were compared for the Dreikurs group, the Combination Dreikurs and PET group, and the Control group. The scores are illustrated on graphs included in Figures 2 through 6. The graphs illustrate findings on acceptance, understanding, causation, trust, and confidence subscales, respectively. The graphs are designed to show gains and loses in mean score made by each group between pre test and post test sessions.
Figure 2. Comparison of pre and post scores on acceptance subscale—Parent Attitude Survey.
Figure 3. Comparison of pre and post scores on understanding subscale-Parent Attitude Survey.
Figure 4. Comparison of pre and post scores on causation subscale—Parent Attitude Survey.
Figure 5. Comparison of pre and post scores on trust subscale—Parent Attitude Survey.
Figure 6. Comparison of pre and post scores on confidence subscale-Parent Attitude Survey.
T-tests for correlated means were used in comparing those subscores which showed an increase or decrease on the graphs. Table 2 contains a summary of t-test results. Pre and post test scores were compared to determine if increase or decrease between pre and post tests was significant. Each group was analyzed separately for each of the five subscales.

Table 2. Summary of t-test results for Parent Attitude Survey

<table>
<thead>
<tr>
<th>Subscale</th>
<th>Group I</th>
<th>Group II</th>
<th>Group III</th>
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<td>Acceptance</td>
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**Significant at .01 level

Increases between pre and post test scores were found to be significant on the trust subscale for Group II, the Combination Dreikurs and PET groups, and on the confidence subscale for the Dreikurs groups, Group I. Both increases were significant at the .01 level.
A significant increase in trust indicates that parents participating in Combination Dreikurs and PET groups gained significantly in respect for their children as individuals and also in feeling that their children can be trusted. The control group and the Dreikurs groups did not increase significantly on this variable.

A significant increase in confidence indicates that parents participating in Dreikurs parent groups changed significantly toward feeling sure of themselves as parents and adequate in meeting the demands of parenthood. The control group and the Combination Dreikurs and PET groups did not increase significantly on this variable.

Neither treatment group showed a significant increase or decrease in acceptance of the child's behavior or feelings, acceptance of his need for affection, aggression, and self-expression. Neither group showed a significant increase on the subscale called understanding, which measures communication skills or in causation, which is the extent to which the parent sees himself as being a causative factor in his child's behavior.

The volunteer control group did not show a significant increase or decrease on any of the five subscales either at the .01 or .05 level of significance.

Analyses of covariance were computed separately for each of the five subscales of the Parent Attitude Survey. A one-way analysis of covariance design with unequal numbers in each cell was used for analysis of differences between post test means due to treatment when pre test scores were used as covariates.

F scores resulting from the analyses of covariance were not significant at the .05 level of significance for four of the five factors:
acceptance, understanding, causation, and trust. Table 3 enumerates results of analyses of covariance on the Parent Attitude Survey. F scores for the four subscales were: 1.01, acceptance; .33, understanding; 1.43, causation; and 1.23, trust.

Table 3. Summary of results of analysis of covariance for Parent Attitude Survey

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<th>MS</th>
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<tr>
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<td>469.3</td>
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<td>18.77</td>
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</table>

*Significant at .05 level

The analysis of covariance performed on confidence subscores yielded an F score of 3.668, which was significant at the .05 level for 2/25 degrees of freedom. This indicates that treatment group I, the Dreikurs group, scored significantly higher than the other two groups on the confidence subscales for the post test measurement.

Checklist of Child Problem Behaviors

The Checklist of Child Problem Behaviors was developed and administered to parents in this study for the following three reasons: (1) to
determine whether participation in parent groups would increase or decrease the number of problems parents felt their children were experiencing; (2) to determine if participation in parent groups would help parents solve problems they felt their children were having; and (3) to determine if participation in parent groups would help parents become aware of other problems that their children were having.

Data obtained from test administration was analyzed in categories according to the above stated purposes of the test. Data compiled is included in Tables 4 through 6.

In answering purpose number one, total number of problems checked on the pre and post tests were noted. Mean scores for Group I, the Dreikurs group, were 14.8 problems on the pre test and 8.8 problems on the post test. Mean scores for Group II, the Combination group, were 30.9 problems on the pre test and 35.5 on the post test; and for Group III, the Control group, 11.57 problems on the pre test and 7.4 problems on the post test.

To answer purpose number two, the following scores were computed. First, the number of problems checked by each parent on the pre test that were not rechecked on the post test was noted. These scores are listed under the heading entitled "solved" in the tables. Group I "solved" a mean of 9.7 problems; Group II a mean of 8.2 problems; and Group III, the control group, a mean of 8.2 problems during the time the groups were in session. Also included in the tables are categories entitled "still checked on post" and "percent solved." These two categories list the number of problems that were checked on the pre test
Table 4. Results of Checklist of Child Problem Behaviors for Group II-Combination Groups

<table>
<thead>
<tr>
<th></th>
<th>Total Checked on Pre</th>
<th>Solved</th>
<th>Still Checked on Post</th>
<th>Solved (percent)</th>
<th>New Checked on Post</th>
<th>Total Post</th>
<th>Total Problems Checked</th>
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<td>7</td>
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<td>15.2</td>
<td>30.75</td>
</tr>
<tr>
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Total Problems solved 82
Total New checked on post 128
Table 5. Results of Checklist of Child Problem Behaviors for Group I-Dreikurs Groups

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Total Problems solved: 146
Total New checked on post: 56
<table>
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<th>Solved (percent)</th>
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<th>Total Post</th>
<th>Total Problems Checked</th>
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<td>67.9</td>
<td>3</td>
<td>7.4</td>
<td>14.5</td>
</tr>
</tbody>
</table>

49 21
which were still checked on the post tests; and the percentage of the original number of problems checked on the pre test that were not checked again on the post test, respectively. Group I "solved" a mean of 65.9 percent of the original problems checked, Group II, 29.76 percent, and Group III, 67.9 percent.

Parents involved in Dreikurs Parent Groups "solved" a total of 146 problems while the groups were in session; parents in Combination Dreikurs and PET Parent Groups a total of 82 problems and parents in the control group a total of 49 problems.

To answer stated purpose number three, do parents involved in parent groups become aware of a significant number of problems after participation in parent groups, the number of problems checked after participation in parent groups and the number of problems checked on the post test that were not checked before on the pre test were compiled. This second category is subsumed under "new checked on post" in the tables. Dreikurs groups, Group I, checked a mean of 4.7 new problems on the post test; Group II, Combination Groups, a mean of 12.8 and the Control Group, Group III, a mean of three new problems. For statistical analysis the number of new problems checked by each parent was added to the number of problems originally checked by each parent and this figure is included under the heading, "total problems checked." During the 10-week time period that groups were in session, Group I became aware of a total of 56 problems, Group II became aware of 128 new problems and Group III, 21 problems.

Figures 7, 8, and 9 illustrate change in group means for each of the three groups classifications. Graphs compare pre and post test means.
Figure 7. Comparison of total number of problems checked on pre vs post tests—Checklist of Child Problem Behaviors.
Figure 8. Number of problems checked on pre test compared with those still checked on post test—Checklist of Child Problem Behaviors.
Figure 9. Number of problems checked on pre test compared with number of problems checked on pre and new problems checked on post—Checklist of Child Problem Behaviors.
Table 7 contains a summary of correlated t-test scores computed between pre and post test scores for each group in each of the three data classifications previously described.

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<td>9</td>
<td>-4.45 **</td>
</tr>
<tr>
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<td>III</td>
<td>6</td>
<td>-4.02 **</td>
</tr>
<tr>
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<td></td>
<td></td>
</tr>
<tr>
<td>post</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>New problems</td>
<td>I</td>
<td>14</td>
<td>4.15 **</td>
</tr>
<tr>
<td>checked on post</td>
<td>II</td>
<td>9</td>
<td>4.63 **</td>
</tr>
<tr>
<td></td>
<td>III</td>
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</tr>
<tr>
<td>pre</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

** Significant at .01 level
*** Significant at .001 level

Figure 7 illustrates change in total number of problems checked on pre vs post administrations of the checklist. As enumerated in Table 7, none of these changes was significant at the .01 level. Therefore, there was no significant change in total number of problems checked on post tests when compared with pre tests on the Checklist of Child Problem Behaviors. Therefore, participation in parent groups was found to neither increase or decrease the number of total problems parents felt their children were having.

Figure 8 compares the mean number of problems checked on the pre test with the mean number of those problems still checked on the post
test for each group. Group I, the Dreikurs groups, checked a mean of 14.8 problems on the pre test and a mean of 5.07 of those remained checked on the post test. This change yielded a t-score of -6.51, which was significant at the .001 level. Group II, the Combination group, checked a mean of 30.9 problems on the pre test and of those a mean of 22.7 were still checked on the post test. This change yielded a t-score of -4.45 which was significant at the .01 level. Group III, the Control group, checked a mean of 11.57 problems on the pre test and of those 4.6 were still checked on the post test. This change produced a t-score of -4.02 which was also significant at the .01 significance level.

All three groups "solved" a significant number of problems parents felt they were having with their children during the 10 week treatment period.

Figure 9 compares the mean number of problems checked on the pre test with the total number of problems checked during the test administration periods. This is to show the number of new problems parents checked following the group period. Group I checked a mean of 14.8 problems on the pre test and a mean of 4.7 new problems on the post test, yielding a mean of 18.53 total problems checked. Problems checked on the pre test were compared with number of new problems checked and this increase yielded a t-score of 4.15, which was significant at the .01 level of significance. Group II checked a mean of 30.9 problems on the pre test and a mean of 12.8 new problems on the post test, yielding a total number of problems checked in both sessions of 45.4. This change was compared and yielded a t-score of 4.63, which was significant at
the .01 level of significance. The Control group checked a mean of 11.57 problems on the pre test and a mean of three new problems on the post test. This increase yielded a t-score of 2.24 which was not significant at the .01 level of significance.

Groups I and II checked a significant number of new problems on the post test that were not checked on the pre test. The Control group, Group III, did not. This suggests that parents participating in parent groups of both models became aware of a significant number of problems that they felt their children were having other than those checked on the pre test.

Table 8 is a tabulation of analyses of covariance performed on the data already described.

A one-way analysis of covariance with pre test scores used as covariates was performed on each of the three groups of scores.

<table>
<thead>
<tr>
<th>Source of Variation</th>
<th>SS</th>
<th>DF</th>
<th>MS</th>
<th>F</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total problems</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>checked pre vs post</td>
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<td>209.3</td>
<td>2</td>
<td>104.65</td>
</tr>
<tr>
<td></td>
<td>E</td>
<td>2314.4</td>
<td>30</td>
<td>77.147</td>
</tr>
<tr>
<td>Number of</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>problems &quot;solved&quot;</td>
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<td>64.04</td>
<td>2</td>
<td>32.02</td>
</tr>
<tr>
<td></td>
<td>E</td>
<td>150.6</td>
<td>30</td>
<td>5.02</td>
</tr>
<tr>
<td>New problems</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>checked on post</td>
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<td>2</td>
<td>77.6</td>
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<tr>
<td></td>
<td>E</td>
<td>997.4</td>
<td>30</td>
<td>33.25</td>
</tr>
</tbody>
</table>

**Significant at .01 level
An analysis of covariance performed on the total post test scores produced an $F$ of 1.36 for 2/30 degrees of freedom. This was not significant at the .01 level of significance. There was no significant difference in post test scores between the two treatment groups and the control group, when pre test scores were used as covariates.

An analysis of covariance on the number of problems checked on the pre test that parents still felt they had on the post test yielded an $F$ score of 6.38 which was significant at the .01 level for 2/30 degrees of freedom. There was a significant difference between the three groups on the number of problems parents still felt their children had following the group treatment period when pre test scores were used as covariates.

An analysis of covariance on the number of new problems checked on the post test when the pre test scores were used as covariates produced an $F$ of 2.334 which was not significant at the .01 level for 2/30 degrees of freedom. There was no significant difference in number of new problems checked between the three groups when pre test scores were used as covariates.

In summary, there was no significant difference between total pre and post test scores for either treatment group or the control group. There also was found to be no significant difference between the two treatment groups and the control group on post test scores when the pre test scores were used as covariates.

Parents were found to have solved a significant number of problems checked on the pre-administration of the Checklist of Child Problem Behavior in both treatment groups and also in the control group. There was also a significant difference between the three groups on the number
of problems parents still felt their children had following the group treatment period when the pre test scores were used as covariates.

Parents in Groups I and II became aware of a significant number of new problems on the post test administration of the checklist. The Control group showed no such big increase. However, there was no significant difference in number of new problems checked between the three groups when compared using analysis of covariance when pre test scores were used as covariates.

Checklist of Parent Problems

The motivation behind the development of the Checklist of Parent Problems was similar to that for the Checklist of Child Problem Behaviors. The checklist was developed (1) to determine whether participation in parent groups would increase or decrease the number of problems parents felt they were having as parents; (2) to determine if participation in parent groups would help parents solve problems they felt they were having as parents; and (3) to determine if participation in parent groups would help parents become aware of other problems they were having as parents that they were unaware of when they volunteered for group participation. (Tables 9, 10, and 11.)

To determine whether participation in parent groups would increase or decrease the number of problems parents felt they were having as parents, the total number of problems checked on the pre and post test were noted. Mean scores were: Group I, 15.7 problems on the pre test and 9.47 on the post test; Group II, 24.2 problems checked on the pre
Table 9. Results of Checklist of Parent Problems--Group I: Dreikurs Groups

<table>
<thead>
<tr>
<th></th>
<th>Total Checked on Pre</th>
<th>Solved</th>
<th>Still Checked on Post</th>
<th>New Checked on Post</th>
<th>Total Post</th>
<th>Total Problems Checked</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Group A.</td>
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</tr>
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</tr>
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<td>5</td>
<td>13</td>
</tr>
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<td>5</td>
<td>8</td>
</tr>
<tr>
<td>5.</td>
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<td>9</td>
<td>47.05</td>
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<td>11</td>
</tr>
<tr>
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<td>17</td>
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<td>21</td>
</tr>
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<td>7.2</td>
<td>55.3</td>
<td>3.5</td>
<td>10.7</td>
</tr>
<tr>
<td>Group B.</td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
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<td>1</td>
</tr>
<tr>
<td>2.</td>
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<td>0</td>
<td>100.0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
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<td>60.0</td>
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<td>9</td>
</tr>
<tr>
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<td>46.1</td>
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</tr>
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<td>4</td>
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<td>30.7</td>
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<td>15</td>
</tr>
<tr>
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<td>9</td>
<td>5</td>
<td>3</td>
<td>66.7</td>
<td>2</td>
<td>5</td>
</tr>
<tr>
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<td>78.5</td>
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</tr>
<tr>
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<td>61.4</td>
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Total Problems Solved 150
Total New Checked on Post 56
Table 10. Results of Checklist of Parent Problems--Group II: Combination Groups

<table>
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<tr>
<th></th>
<th>Total Checked on Pre</th>
<th>Solved</th>
<th>Still Checked on Post</th>
<th>Solved (percent)</th>
<th>New Checked on Post</th>
<th>Total Post</th>
<th>Total Problems Checked</th>
</tr>
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<td>11</td>
</tr>
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<td>4</td>
</tr>
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<td>50.95</td>
<td>5.5</td>
<td>14</td>
</tr>
<tr>
<td><strong>Group B.</strong></td>
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<td>12</td>
<td>42.9</td>
<td>5</td>
<td>17</td>
</tr>
<tr>
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<td>2.</td>
<td>22</td>
<td>7</td>
<td>15</td>
<td>31.9</td>
<td>15</td>
<td>30</td>
</tr>
<tr>
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<td>6</td>
<td>20</td>
<td>23.1</td>
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<td>35</td>
</tr>
<tr>
<td></td>
<td>4.</td>
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<td>19</td>
<td>21</td>
<td>47.5</td>
<td>8</td>
<td>29</td>
</tr>
<tr>
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<td>0</td>
<td>26</td>
<td>0.0</td>
<td>29</td>
<td>55</td>
</tr>
<tr>
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<td>18</td>
<td>17</td>
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<td>15</td>
<td>32</td>
</tr>
<tr>
<td></td>
<td>Mean</td>
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<td>9.8</td>
<td>18.5</td>
<td>32.8</td>
<td>14.5</td>
<td>33</td>
</tr>
<tr>
<td><strong>Total Means</strong></td>
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<td>24.2</td>
<td>9.7</td>
<td>14.5</td>
<td>40.06</td>
<td>10.9</td>
<td>25.4</td>
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</table>

Total Problems solved 97

Total New Checked on Post 109
Table 11. Results of Checklist of Parent Problems--Group III: Control Group

<table>
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<tr>
<th></th>
<th>Total Checked on Pre</th>
<th>Solved</th>
<th>Still Checked on Post</th>
<th>Solved (percent)</th>
<th>New Checked on Post</th>
<th>Total Post</th>
<th>Total Problems Checked</th>
</tr>
</thead>
<tbody>
<tr>
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<td>5</td>
<td>50.0</td>
<td>5</td>
<td>10</td>
<td>15</td>
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<tr>
<td>2.</td>
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<td>33</td>
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<td>4.</td>
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<td>3</td>
<td>62.5</td>
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<td>10</td>
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<td>0</td>
<td>100.0</td>
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<td>0</td>
<td>8</td>
</tr>
<tr>
<td>6.</td>
<td>8</td>
<td>3</td>
<td>5</td>
<td>37.5</td>
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<td>6</td>
<td>9</td>
</tr>
<tr>
<td>7.</td>
<td>24</td>
<td>5</td>
<td>19</td>
<td>20.8</td>
<td>6</td>
<td>25</td>
<td>30</td>
</tr>
<tr>
<td></td>
<td><strong>Total Mean</strong></td>
<td>15.3</td>
<td>8.7</td>
<td>6.6</td>
<td>60.6</td>
<td>2.1</td>
<td>8.7</td>
</tr>
</tbody>
</table>

51 |

15
To determine if participation in parent groups would help parents solve problems they felt they were having as parents when they volunteered for group training, the number of problems checked by each parent on the pre test that were not rechecked on the post test were recorded. Group I "solved" a mean of 10 problems, Group II a mean of 9.7 problems and, Group III, the Control group, a mean of 8.7 problems. Group I solved a mean of 61.4 percent of the original problems checked, Group II, 40.06 percent, and Group III, 60.6 percent.

Parents involved in Dreikurs Parent Groups solved a total of 150 of the problems they felt they had as parents at the beginning of the group sessions. Parents in Combination Dreikurs and PET Parent groups solved a total of 97 problems and parents in the Control group a total of 51 problems.

To determine if participation in parent groups would help parents become aware of other problems they were having as parents that they were unaware of when they volunteered for the groups, the number of problems checked after participation in parent groups and the number of problems checked on the post test that were not checked before on the pre test were computed. Dreikurs groups, Group I, checked a mean of 3.7 new problems on the post test, Group II, Combination groups, a mean of 10.9 new problems, and the Control group, a mean of 2.1 new problems. For statistical analysis the number of new problems checked was added to the number of problems originally checked and this figure is included under the heading, "total problems checked." During the 10 week time period that groups were in session, Group I, as a whole, became aware
a total of 56 new problems, Group II became aware of a total of 109 new problems, and the Control group, a total of 15 new problems.

Graphs included in Figures 10 through 12 illustrate change in group means for each of the three group classifications. Graphs compare pre and post test means.

Table 12 lists results of correlated t-test scores computed between pre and post test scores for each group in each of the three data classifications mentioned above.

Figure 10 illustrates change in total number of problems parents felt they were having on pre vs post administrations of the checklist. As enumerated in Table 12, Group I, the Dreikurs Groups, showed a significant change in the negative direction. This indicates that Group I checked significantly fewer problems that they felt they were experiencing as parents on the post checklist than they did on the pre checklist. Group I checked a mean of 15.7 problems on the pre test and a mean of 9.47 total problems on the post test. This difference was significant at the .01 level. Group II checked a mean of 24.2 problems on the pre test and a mean of 25.4 problems on the post test. Group III checked a mean of 15.3 problems on the pre test and a mean of 8.7 total problems on the post test. Neither Group II or Group III changed to a significant degree.

Figure 11 compares the mean number of problems still checked on the post test with the mean number of those problems still checked on the pre test for each group. Group I, the Dreikurs groups, checked a mean of 14.7 problems on the pre test and a mean of 5.6 of those problems were checked again on the post test. This change yielded a t-score of -5.74
Figure 10. Number of total problems checked on pre test compared with total number of problems checked on post test—Checklist of Parent Problems.
Figure 11. Number of problems checked on pre test compared with those still checked on post test—Checklist of Parent Problems.
Figure 12. Number of problems checked on pre test compared with number of problems checked on the pre and new checked on post—Checklist of Parent Problems.
Table 12. Summary of results of t-tests for Checklist of Parent Problems

<table>
<thead>
<tr>
<th></th>
<th>Group</th>
<th>DF</th>
<th>T</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total problems</td>
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<td>-3.37</td>
</tr>
<tr>
<td>checked</td>
<td>II</td>
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<td>NS</td>
</tr>
<tr>
<td>pre vs post</td>
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<td>6</td>
<td>-2.28</td>
</tr>
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<td><strong>5.74</strong></td>
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<td>III</td>
<td>6</td>
<td>2.31</td>
</tr>
</tbody>
</table>

**Significant at .01 level**

which was significant at the .01 level of significance. Group II, the Combination groups, checked a mean of 24.2 problems on the pre test administration and of those a mean of 14.5 problems were again checked on the post test. This change yielded a t-score of -4.67 which was also significant at the .01 level of significance. Group III, the Control group, checked a mean of 15.3 problems on the pre test and of those 5.6 were still checked on the post test. This change produced a t-score of 5.6 which was also significant number of problems that the parents in the groups felt they were having as parents during the 10-week group period.

Figure 12 compares the mean number of problems checked on the pre test by each of the three groups with the total number of different problems checked during the post test administration periods. This is to show the number of new problems parents checked on the pre test for a total of 19.9 different problems checked on both checklist administrations. This increase proved to be significant at the .01 level of significance with a t-score of 5.78. Group II checked a mean of 24.2
problems on the pre administration of the checklist and checked a mean of 10.9 new problems on the post test that were not checked on the pre test for a total of 35.1 different problems checked. This increase was also significant at the .01 level of significance with a t-score of 3.907. The control group checked a mean of 15.3 problems on the pre administration of the checklist and a mean of 2.1 new problems on the post test for a total of 17.4 problems on both administrations of the test. This increase was not significant at the .01 significance level. Treatment Groups I and II checked a significant number of new problems on the post test indicating that they became aware of a significant number of new problems that they were having as parents during the 10-week group period. The Control group showed no such significant increase.

Table 13 is a tabulation of analysis of covariance performed on the data already described.

Table 13. Summary of results of analyses of covariance for Checklist of Parent Problems

<table>
<thead>
<tr>
<th>Source of Variation</th>
<th>SS</th>
<th>DF</th>
<th>MS</th>
<th>F</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total problems</td>
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<td>758.3</td>
<td>2</td>
<td>379.15</td>
</tr>
<tr>
<td></td>
<td>E</td>
<td>2287.3</td>
<td>30</td>
<td>76.24</td>
</tr>
<tr>
<td>Number of problems</td>
<td>U</td>
<td>119.9</td>
<td>2</td>
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<tr>
<td>&quot;solved&quot;</td>
<td>E</td>
<td>630.2</td>
<td>30</td>
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<tr>
<td>New problems</td>
<td>U</td>
<td>289.3</td>
<td>2</td>
<td>144.6</td>
</tr>
<tr>
<td>checked on post</td>
<td>E</td>
<td>694.2</td>
<td>30</td>
<td>23.14</td>
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</table>

* Significant at .05 level
** Significant at .01 level
A one-way analysis of covariance with pre test scores used as covariates was performed on each of the three data classifications already enumerated.

An analysis of covariance performed on the total post test produced an F of 4.97 with 2/30 degrees of freedom. This was significant at the .05 level of significance. There was a significant difference in post test scores between the two treatment groups and the control group when the pre test scores were used as covariates.

An analysis of covariance of the number of problems checked on the pre test that parents still felt they had on the post test yielded an F score of 2.85 which was not significant at the .01 significance level for 2/30 degrees of freedom. There was not a significant difference between the three groups on the number of problems parents still felt they had following the group treatment period when pre test scores were used as covariates.

In summary, Group I checked significantly fewer problems that they felt they were having as parents on the post checklist than they did on the pre checklist. This would indicate that they felt better about themselves as parents following group participation. This conclusion is substantiated by Groups I's significant gain on the confidence variable of the Parent Attitude Survey. Group II and the Control group showed no such significant gain.

Both treatment groups and the Control group "solved" a significant number of problems that the parents in the groups felt they were having as parents during the 10-week treatment period. Participation in parent
group sessions did not significantly change the number of problems the parents felt were solved during the 10-week period.

Treatment Groups I and II both became aware of a significant number of new problems that they were having as parents during the 10-week treatment period. These were problems that they did not check as being problems for them prior to participation in the group sessions. It is interesting to note that although Group I increased significantly in the number of new problems they were aware of having, they also increased significantly in confidence in themselves in their parental role. The Control group showed no such significant increase.

Analysis of covariance showed, in addition, that there was a significant difference in total post test scores between the two treatment groups and the control group when the pre test scores were used as covariates. There was no significant difference between the three groups on the number of problems parents still felt they had following the group treatment that they also checked on the pre test when the pre test scores were used as covariates. There was a significant difference between the three groups in the number of new problems parents checked following the 10-week treatment period when the number of problems checked originally on the pre test were used as covariates.
Parental frustration with ineffective child-rearing practices is providing impetus for increasing involvement in parent education and training groups across the country. However, a review of the literature has suggested that there has been little done to evaluate the impact or effectiveness of these groups. Many questions, the answers to which would greatly facilitate optimal use of parent group processes for those involved, remain unanswered. The objective of this study was to measure the value of two parent education programs in terms of three variables: (1) problem behaviors of the child as reported by parents on a Checklist of Child Problem Behaviors, (2) problems of parents as reported by the parents, themselves, on a Checklist of Parent Problems, and (3) parents' self-assessed attitudes in five attitude areas: parental confidence, understanding of causation of child's problems, acceptance of the child; understanding, and trust of the child. These attitudes are measured using Hereford's Parent Attitude Survey.

Two groups using a Dreikurs Parent Study Group, two groups using a Combination Dreikurs and Parent Effectiveness Training (PET) format and a control group composed of parents who had volunteered for group participation but did not attend groups were tested.
Hypotheses were framed and classified in three categories according to the instrument each dealt with. Hypotheses generally dealt with the question of whether there was a significant difference between pre and post test scores for each group on each data classification and also whether there was a significant difference between post test scores for the two treatment groups and the control group when the pre test scores were used as covariates.

Conclusions

Parent attitude survey

Parents participating in Combination groups increased significantly between pre and post tests toward being able to respect their children as individuals and feeling that their children can be trusted. There was, however, no significant difference between the Combination group, the Dreikurs group and the Control group on post test scores on the trust variable when pre test score differences were taken into consideration. Although the Combination group, itself, showed a significant increase in trust, this change still did not make the Combination group significantly different than the other groups on this variable. This may have been because the Combination group was below the other groups to begin with and the change only brought them up to the original level of the other groups.

A possible explanation for the finding that the Combination method produced a significant rise in trust and the Dreikurs method did not, may lie in the Parent Effectiveness Training emphasis on open and honest communication between family members. The PET program is based on a
belief that with open communication between parents and children in the form of "I-messages" and "active listening" from the parent most children are able to make positive decisions. Dreikurs emphasizes the idea that the child has a hidden agenda or "mistaken goals" at the root of his behavior and that the parent's task is to overcome these hidden goals. The Dreikurs method doesn't require that the parent trust his child to practice the behaviors taught by the method, nor does it promote trust in the sense described above for the PET method.

Parents participating in Dreikurs Parent Training groups felt significantly more confident, sure of themselves as parents and adequate in meeting the demands of parenthood after group participation than they did before participating. This difference remained significant when all three groups were compared considering the initial pre test differences. A possible explanation for this result is found in the author's observation that the skills learned in the Dreikurs method are much easier for parents to learn and apply. Those skills require that the parent give up much less of his power and, therefore, do not require that the parent make as many radical changes in his attitudes and behavior. The Dreikurs course gives parents specific prescriptions for behavior and specific responses they are to emit in response to their child's behavior. A communication model, such as PET, requires more risk on the part of the parent because he must become more open and honest with his child. It seems reasonable to assume that these factors would promote confidence in the parental role faster in the Dreikurs program than would the PET program.
The results of the testing on the other scales; causation, acceptance, and understanding showed that none of the groups as a whole increased significantly on the attitudes measured. An examination of the individual parent's responses to these scales revealed a possible explanation of the results. There appeared to be individual variations in direction of change, which, when the group mean was found, cancelled each other out. Some parents made significant positive changes, while others changed in the negative direction. For example, some parents felt more understanding and accepting following the treatment while others felt less so. One group leader reported that several parents in his group had commented that they had thought to begin with that they were really quite understanding, accepting parents, but that they had discovered that they were very critical, domineering, and unwilling to accept their children as individuals of equal worth, and that they were now striving to develop these attitudes which they felt would be useful to themselves and to their children. Thus, these parents apparently reported feelings on the pre test administration of the attitude scale which were not really being reflected in their behavior towards their children. The responses on the post test administration were lower because they reflected a new understanding of where the parents actually were in terms of their attitudes as reflected by their behavior. Thus, it may be assumed that even though these parents showed no gain, these scales actually may reflect gains on the parent's part. It appeared that using a statistical analysis of results of the attitude scale masked individual gains and losses which could have been, of themselves, important.
Parents indicated no significant increase or decrease in total number of problems parents felt their children were having. To the extent that the total number of problems parents checked is an indication of how well parents felt their children were doing, group participation seemed to have no effect on this feeling, positively or negatively. A 10-week period is a short time period in which to expect parents to change their attitudes and their behavior. Even though some changes were recorded, perhaps more would be found in a longer period of time, and perhaps also, more time would be needed for the changes in the parents' attitudes and behavior to be reflected in the children's behavior.

On the post test, parents were found to have solved a significant number of problems which they had checked on the pre administration of the Checklist of Child Problem Behaviors, in both the treatment groups and also in the control group. There was a significant difference between the three group scores on the post test when the pre test score differences were taken into consideration. By examination this difference seems to be between the treatment group involved in the combination methods and the Dreikurs group along with the control group rather than between the two treatment groups and the control group. This seems to indicate that group composition had an effect on results and that parents in one combination group differed from parents in the other two groups on some uncontrolled factor or factors.

Parents in both the Dreikurs group and the Combination group became aware of a significant number of new problems on the post test
administration of the checklist. The Control group showed no such big increase. As some of the parents were asked about the reasons for checking these new problems, they reported that they had become much more sensitive to things that were causing trouble in their families and found problems that they had not been aware of before participating in the parent group. Other parents reported that the root of their original problem had not been what they had previously thought, and their new understanding of the problem had caused them to check a new problem, entirely, on the checklist. The fact that parents in the groups were able to isolate and become sensitive to a large number of new problems that they had not recognized before is considered by this writer to be a positive result. An analysis of covariance with pre test scores as covariates revealed no significant difference between the groups on the number of new problems checked.

Checklist of parent problems

The Checklist of Parent Problems was designed to assess number and type of problems that a parent sees in himself, mostly in his relationship with his children.

Parents participating in Dreikurs Parent groups checked significantly fewer total problems following group participation than they did prior to group participation. This is an indication that they felt better about themselves, as parents, following the treatment period. This finding is substantiated by the significant increase shown by the same parents on the confidence attitude scale. The parents in the Combination group and the Control group did not, as a whole, show such a decrease in total number of problems.
Both treatment groups and the Control group solved a significant number of problems that the parents in the groups felt they had as parents during the 10-week group period. There was no significant difference between the three groups on this variable when pre test scores were considered.

Both the Dreikurs group and the Combination group became aware of a significant number of new problems that they were having as parents, while the Control group showed no such significant increase. There was also a significant difference between the three groups on the number of new problems they checked on the post test. This difference appears to be between the Combination group and the other two methods. Participation in the groups helped parents become aware of problems they had not been aware of before. This is, in my opinion, an important finding, because the first step to changing any problem is to become aware of its existence and to define its nature more clearly. Parents in the groups reported an increased awareness of and sensitivity to things they were doing to turn their children off and problems they had which were getting in the way of a positive relationship with their children.

**Implications**

While this study, in retrospect, has some flaws in it, this study is an attempt to obtain behavioral data. Results indicate both a need for and a future possibility of obtaining such behavioral data.

While many results of this study are not conclusive, it does show that parent groups help parents become more aware of the problems they
are having as parents and that their children are having. It also seems to help them define these problems more clearly, thereby increasing the probability that solutions attempted will solve the real problems involved.

It may be important to note here, that in both treatment groups the parents were very enthusiastic about the program and consistently verbally reported positive results. Even those who were discovering that they were much more negative and punitive with their children than they had realized, were optimistic. They were commenting that their new, changing attitudes and behaviors were beginning to have an effect on their children and that they had hopes for making their lives better. The instructors also reported that they felt that very positive results were being obtained with the groups.

Thus, although positive results were obtained from this study, they are not as positive as might have been expected on the basis of opinions from participants and instructors. As suggested earlier, perhaps a longer time period would have shown more results as the parents would have had more time to allow the new principles they were using to work. Nevertheless, it seems important to take these results seriously. As suggested in the introduction to this study, a great deal of time, effort, and money is being spent around the country on such groups, and we must consider, on the basis of this study, the possibility that people are not getting as much for their effort as they think. Further study, therefore, seems to be most urgent.
Generalizations should not extend to parents who do volunteer to participate in parent groups.

Although the sampling was done on a random basis, as it turned out, one group seemed to have been drawn from a lower socio-economic category than the other groups and seemed to have a different set of values. This group checked a mean number of problems on the pre test that was much higher than the number checked in the other groups used in this study. They also showed an unusually high increase in number of problems checked during the testing period. In the opinion of the author, this was because the values held by this group were in opposition to the assumptions of the training methods used, so that much of the group time was taken in changing values and in convincing parents that the assumptions of the program were valid rather, than in problem-solving. The effect of socio-economic classification on results of parent group participation should be the subject of further study.

Another limitation which may have affected results of this study was the attrition rate of parents in the treatment groups and the number of parents who failed to complete all testing. A great deal of difficulty was experienced in attempting to get parents to complete and return the testing forms. The effects of this variable on results of this study is undetermined.
Limitations of Instruments

Studies have shown that the reliability of attitude instruments is not very high. Results are influenced to a great extent by mood, the events preceding the test and many other uncontrollable variables. The effects of these things must be taken into consideration when evaluating results of this and other studies involving attitude measures.

The checklists used also seemed to be affected by the variables previously mentioned, to some extent. Another weakness of these measures was that parents had to keep the behavior of all of their children in mind at once while filling out the checklists. Some parents expressed a desire to fill out the checklist for each of their children separately because filling it out for all of their children at one time confused them. Due to the amount of time filling out a separate checklist for each child would involve, the decision was made to have parents fill out the checklists for all children at once. Perhaps choosing a target child to have parents concentrate on would have improved the confusion, but information on the family as a whole would have been lost.

A seriousness scale may have improved results of the checklists by checking for improvement in problem situations. The instruments at present only measure whether or not a problem exists in the parent's opinion. The problems included are rather serious problems and probably would show improvement in a 10-week period, rather than disappearing totally.
This study was not designed to determine at exactly what point in the treatment process changes measured occurred. Therefore, conclusions can not be reached concerning exactly what step or methods used caused the changes measured.

Recommendations for Further Research

Parents' own reports of their own and their children's behavior are subject to the parent's defensiveness and moods. A much more accurate measure of both the parent's behavior and the child's behavior would be made by an observation technique. Measurement of change in actual behavior is required if results of any treatment technique are to be evaluated accurately.

Groups included in further study could be held earlier in the year allowing inclusion of a teacher observation inventory in addition to the inventories included in this study.

If a checklist to be filled out by parents, similar to those used in this study is to be used, a seriousness scale would improve the accuracy of results greatly. Such a scale would include measurement of improvement as well as the total solution of problems.

Parents to be included in treatment groups and control groups need to be matched according to their socio-economic classification and number of problems they feel they have initially to allow greater comparability of results.

The effects of leader personality on results have not been adequately studied and should be considered in further research.
This study did not attempt to measure the effects of specific steps used in each group treatment method on the variables studied. It would be beneficial in further research to further break down the methods used and the testing to measure specific effects of each step of the treatment used.
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Appendix A.
Letter Inviting Parents to Join Parent Groups

Dear Parents:

The Psychology Department, in conjunction with various schools in the valley, has offered groups for parents following a format developed by Dr. Rudolf Dreikurs. So far this year the groups have been offered by invitation to a few parents. Now we would like to know if there would be enough interest to hold groups for some of the other parents in the school.

The parent study groups consist of two major phases. The first is a study phase in which Dr. Dreikur's principles for understanding and dealing with children are read and discussed. Dr. Dreikur's book Children: The Challenge is the text used. The second phase consists of discussing problems presented by various group members and discussing how Dreikur's ideas could be used to help solve these problems. The goals of the child, the need to belong, the use of natural consequences, raising a child in a democratic society and setting up a family council will be some of the topics dealt with. "Parents are blamed but not trained" is an observation made by a leading psychologist. These groups are attempting to solve this problem by giving parents new ideas to try with their children and by giving them a chance to compare notes and exchange ideas with other parents.

Groups will be held on either Wednesday or Thursday nights from 7:30 to 9:00 p.m. weekly for 10 weeks. The only charge will be $7.00 for the book, or there is a possibility of borrowing one if this is not possible.

Would you please check an appropriate box below indicating whether or not you would be interested in the program and return this letter to the Adams School.

Thank you.

_____ We would like to participate in one of these groups
_____ We would be interested but unable to attend at this time
_____ I would not be interested in the parent groups.

Name________________________________________
Address_____________________________________
Phone_______________________________________
Appendix B.

Checklist of Child Problem Behaviors

This questionnaire is a list of problems many parents have with their children. Please read each statement and check in the space to the right of the item those which you have noticed in the behavior of your children.

My Child: (check for all children)

1. Becomes angry over seemingly small incidents
2. Becomes excessively worried or anxious
3. Appears to be depressed frequently
4. Steals large or small items
5. Appears to be lost in daydreams
6. Exhibits habitual facial grimaces, or tics, especially when under emotional strain
7. Although he has adequate mental ability, he doesn't apply himself and do well in school
8. Is restless and seems unable to remain still for even short periods of time
9. Is very sensitive over real or imagined insults
10. Seems to be cruel to younger or smaller children or animals
11. Is abnormally anxious to achieve perfection in tasks
12. Is overconcerned about disease and germs
13. Shows evidence of disliking or hating people
14. Feels that he is being singled out for punishment more than other children
15. Seems to be lazy and irresponsible about completing any disagreeable task
16. Shows little concern over failure
17. Repeatedly misbehaves although punished or warned over the same problem several times
18. Shows little or no affection
19. Lacks in confidence, won't try a task for fear of failure
20. Just sits without seeking entertainment or activity of any sort
21. Has extreme fears of certain activities, animals or situations
22. Lies frequently
23. Shows little guilt over injury he has caused
24. Seems to do certain tasks over and over again without reason
25. Is excessively absent from school
26. Is indecisive even when making minor decisions
27. Stutters; especially when attention is called to him
28. Doesn't seem to relax and let himself go or enjoy himself
29. Loses his voice momentarily when frightened or very embarrassed
30. Seems tired, lethargic, listless
31. Has a dazed, confused look on his face
32. Seems to be hostile toward any higher authority—a parent, teacher, the police, etc.
33. Has headaches or illness for which no physical cause can be found
34. Seems to have more accidents than the other children
35. Dislikes being in large groups of people
36. Is destructive of material things
37. Often appears to ignore parents or others when they are talking to him
38. Seems to have a very narrow range of interests
39. Will not take responsibility at home, such as: cleaning room, shoveling walks, etc.
40. Seems to be jealous of other children
41. Never finishes tasks he starts
42. Lets others choose his interests and activities for him
43. Other children don't seem to like to be around him
44. Is excessively over or under weight
45. Fights with other children
46. Wets clothing or bed
47. Has difficulty sharing or cooperating with someone else
48. Seems to expect punishment
49. Listens to TV or radio constantly
50. Seems to take delight in doing or saying things to hurt his parents
51. Doesn't want to participate with or be near the family
52. Seems to think he should have anything he wants
53. Will do anything for attention
54. Has trouble communicating with others
55. Causes problems at mealtimes; too finicky, always late, needs to be coaxed to eat
56. Acts younger than the other children his age
57. Won't go to bed on time or without fuss or trouble
58. Won't attempt new things on his own, without someone helping him
59. Bullies younger children
60. Runs away from home
61. Whimpers and begs to get her/his own way
62. "Shows off"
63. Seems to be a walking question mark; asking "why?"
64. Contradicts
65. Messes he leaves or messes all around him don't seem to bother him
66. Seems unhappy most of the time
67. Won't mind
68. Fights with brothers and sisters
69. Seeks to want to cling to me
70. He doesn't seem to be willing to talk to me
71. Lives and plays in a world of make-believes excessively
72. Is preoccupied with death and morbid topics
73. Can't find things he wants to do
74. Doesn't seem to care how I feel
75. Seem to be overly sensitive
76. I always have to tell him what to do
77. Embarrasses me in public
78. Always seems to be one step ahead of me
79. Gets his own way most of the time
80. I just can't control him
81. Blames everyone else for his mistakes
82. Plays alone constantly
83. Sucks his thumb
84. Won't share his things with other children

If you have any other problems not covered here, would you please list them below.
Appendix C.

Checklist of Parent Problems

Below begins another checklist. This one deals with problems parents, themselves, frequently have. Please check all those that apply to you.

1. I find myself constantly criticizing his/her efforts
2. I seem to be yelling over something constantly
3. I am often depressed
4. I feel like I'm not a very good parent
5. I think I'm spoiling my child
6. I feel like I'm inconsistent with discipline
7. I'm not firm enough
8. I seem to be forcing my child to do as I say
9. I make promises that I can't keep
10. When my child is trying to provoke me, I fall for it
11. I treat my child like he is younger than he really is
12. I try to protect my child too much
13. I find myself doing things for my child that he can do for himself
14. I correct my child too much in public
15. I find myself paying attention to my child for all the wrong things
16. My relationship with my child is just one big fight after another
17. I become excited over little things
18. I am nagging, trying to get my child to do something, constantly
19. I ask my child why he acts the way he does frequently
20. I am easily frightened into telling lies
21. I pay attention to all his hurts and ills
22. I don't seem to get around to answering my child's questions
23. I try too hard to be perfect or infallible
24. I'm afraid we're not united as a family
25. I give my child everything he wants
26. I can't help laughing over his/her bad behavior
27. I don't ever seem to convey the idea that some things are wrong or right
28. I find myself picking up after my child, constantly
29. Sometimes I just can't help losing my temper totally
30. I find myself defending my child against neighbors, teachers, policemen, etc.
31. I just can't make my child care about neatness or order
32. Even when my child's right, I don't let him know that
33. When we discuss some point, I back down
34. I spend a lot of time explaining my behavior to my child
35. My child doesn't respect me
36. I find myself caught in my children's arguments, playing referee
37. We have trouble establishing a household routine
38. I'm not sure about the when and hows of discipline
39. I find myself comparing my children with each other
40. I am meticulously clean too much
41. I have trouble showing our child that I love him
42. We have a hard time agreeing on what to do with our child
43. I can't seem to get the kids to cooperate
44. I do a lot of things for my child that he could do for himself
45. I feel impatient with my children
46. My goals for my children seem to be too high for them.

47. I make decisions too quickly, that I regret.

48. I make rules too quickly, without enough thought.

49. My kids don't listen to what I say.

50. I can't talk to my child.

51. I don't tell him when he's right or wrong.

52. I feel lonely.

53. I feel that nobody appreciates me.

54. I feel that nobody really understands my problems.

55. I don't really enjoy my children.

56. I am tired constantly.

57. My daily life isn't interesting.

58. I often feel tense.

59. I have trouble being interested in what my child says.

60. I find myself expecting too much of my children.

61. I have trouble respecting my child as a separate person.

62. I seem to be threatening my child into doing the right thing.

63. I make threats I don't or can't carry out.

64. I have trouble understanding how my child feels.

65. I think I'm too strict with my child.

66. My children don't seem to realize that I have a life, too.

67. We can't seem to agree on how our family should be handled.

68. I just don't feel close to my husband/wife any more.
Appendix D.

Parent Attitude Survey

Please read each statement and mark it according to how you feel about the idea: Strongly Agree, Agree, Undecided, Disagree, or Strongly Disagree. Please be sure to mark each statement. Circle the letters representing your choice.

1. Parents have to sacrifice everything for their children.  
2. Parents should help children feel they belong and are needed.  
3. Taking care of a small baby is something that no woman should have to do all by herself.  
4. When you come right down to it, a child is either good or bad and there's not much you can do about it.  
5. The earlier a child is weaned from its emotional ties to its parents the better it will handle its own problems.  
6. Most of the time giving advice to children is a waste of time because they either don't take it or don't need it.  
7. It is hard to let children go and visit people because they might misbehave when parents aren't around.  
8. Fewer people are doing a good job of child-rearing now than 30 years ago.  
9. With all a child hears at school and from friends, there's little a parent can do to influence him.  
10. If a little girl is a tomboy, her mother should try to get her interested in dolls and playing house.  
11. A child has a right to his own point of view and ought to be allowed to express it, just as parents express theirs.  
12. If children are quiet for a while you should find out why.
13. It's a rare parent who can be even-tempered with the children all day.
14. Psychologists now know that what a child is born with determines the kind of person he becomes.
15. One reason that it is sad to see children grow up is because they need you more when they are babies.
16. The trouble with trying to understand children's problems is they usually just make up a lot of stories to keep you interested.
17. A mother has a right to know everything going on in her child's life because her child is a part of her.
18. Most parents aren't sure what is the best way to bring up children.
19. A child may learn to be a juvenile delinquent from playing games like cops and robbers and war too much.
20. There is no reason why a child should not learn to keep his clothes clean very early in life.
21. If a parent sees that a child is right and the parent is wrong, they should admit it and try to do something about it.
22. A child should be allowed to try out what it can do at times without the parents watching.
23. It's hard to know what to do when a child is afraid of something that won't hurt him.
24. Most all children are just the same at birth; it's what happens to them afterwards that is important.
25. Playing with a baby too much should be avoided since it excites them and they won't sleep.
26. Children shouldn't be asked to do all the compromising without a chance to express their side of things.
27. Parents should make it their business to know everything their children are thinking.
28. Raising children isn't as hard as most parents let on.
29. There are many things that influence a young child that parents don't understand and can't do anything about.

30. A child who wants too much affection may become soft if it is given to him.

31. Family life would be happier if parents made children feel they were free to say what they think about anything.

32. Children must be told exactly what to do and how to do it or they will make mistakes.

33. Parents sacrifice most of their fun for their children.

34. Many times parents are punished through the bad behavior of their children.

35. If you put too many restrictions on a child, you will stunt his personality.

36. Most children's fears are so unreasonable it only makes things worse to let the child talk about them.
Appendix E.

Schedule of Dreikurs Parent Meeting

Parent Study Group

Meeting Times: Wednesday, 7:00-8:30 p.m.
Thursday, 7:00-8:30 p.m.

Number of Meetings: 10

Text: Children, The Challenge by Rudolf Dreikurs and Vicki Stoltz
Hawthorne Books, New York, $6.95.

Method: Read text at home. Group discussion at study sessions.

Objectives:
1. Group members will learn Dreikurs' Principles for more effectively relating to children.
2. Group members will come to understand these principles by applying them to specific problem situations.

Schedule: (To be changed if need arises.)

Week 1. Theme: Self concept and belonging
Discussion: Chapters 1 and 2
Reading assignment: Chapters 3 and 4

Week 2. Theme: Encouraging the child and discovering mistaken goals
Discussion: Chapters 3 and 4
Reading assignment: Chapters 5 and 6

Week 3. Theme: Behavior modification at home
Discussion: Chapters 5 and 6
Reading assignment: Chapters 7, 8, 9, 10, and 11

The first three weeks will be spent learning and discussing Dreikurs ideas and principles. From this week on only the first 30 minutes or so will be spent discussing reading material with the remainder of the time spent in applying these ideas to specific problems presented by parents in the group.

4. Replacing rewards and punishment with natural consequences
Discussion: Chapters 5 and 6
Reading assignment: Chapters 7, 8, 9, 10, and 11

5. Replacing criticism and dominance with respect and firmness
Discussion: Chapters 7, 8, 9, 10, and 11
Reading assignment: Chapters 12, 13, 14, 15, 16, and 17

6. How to avoid reinforcing misbehavior
Discussion: Chapters 12, 13, 14, 15, 16, and 17
Reading assignment: Chapters 18, 19, 20, and 21

7. Changing parent actions towards children
Discussion: Chapters 18, 19, 20, and 21
Reading assignment: Chapters 22, 23, 24, 38, and 39.
8. Encouraging independence in the child and starting up a family council  
Discussion: Chapters 22, 23, 24, 38, and 39  
Reading assignment: Chapters 25, 26, 27, 28, 29, and 30

9. Being fair, reasonable, and consistent  
Discussion: Chapters 25, 26, 27, 28, 29, and 30  
Reading assignment: Chapters 31, 32, 33, 34, 35, 36, and 37

10. Developing courage  
Discussion: Chapters 31, 23, 33, 34, 35, 36, and 37
VITA

Lorene Allen

Candidate for the Degree of

Master of Science

Thesis: Reported Attitude and Behavior Change as a Result of Participation in Parent Training Groups

Major Field: Counseling Psychology

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