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Determinant factors of the maintenance of the family competence

Carmen Orte, Karol Kumpfer, Lluís Ballester and Joan Amer
(University of the Balearic Islands and University of Utah)
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The Spanish Adaptation of the Strengthening Families Program (Selective Prevention)

Programa de Competencia Familiar



45 applications/ 335 families

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<http://gifes.uib.eu>

Webpage of Family Competence Program

www.competenciafamiliar.com



Family Competence Program (FCP)

The Family Competence Program is an adaptation of the **Strengthening Families Program (SFP)** which is a multicomponent program of proven efficiency in preventing drug use and other behavioral problems in children (<http://prevention.samhsa.gov/>).

Through the Family Competence Program an improvement in parenting competence, social skills and children's behavior (8 to 12) is achieved, as well as in family relationships. The complete program includes three simultaneous programs: one aimed at parents (14 training sessions), one aimed at children (14 training sessions) and a third one aimed at the family for joint work (13 training sessions).

The Family Competence Program is the result of research conducted by the Social and Educational Training and Research Group (Grupo de Investigación y Formación Educativa y Social) and their associates during the implementation, assessment and adaptation of the SFP in families with a parent in treatment for detoxification and in at-risk families. On this website you can find information regarding the Family Competence Program and how to contact the authors if you are interested in implementing it.

Initial training in Family Competence Program (PCP) in education's field (7-12 years) (25 hours)

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Two different contexts of application

- 1) Centers for drug addiction treatment (*Proyecto Hombre*).
- 2) Social services.
- 3) Other contexts (Child protection services).

Acknowledgement to the professionals of the different services for all their collaboration and support.

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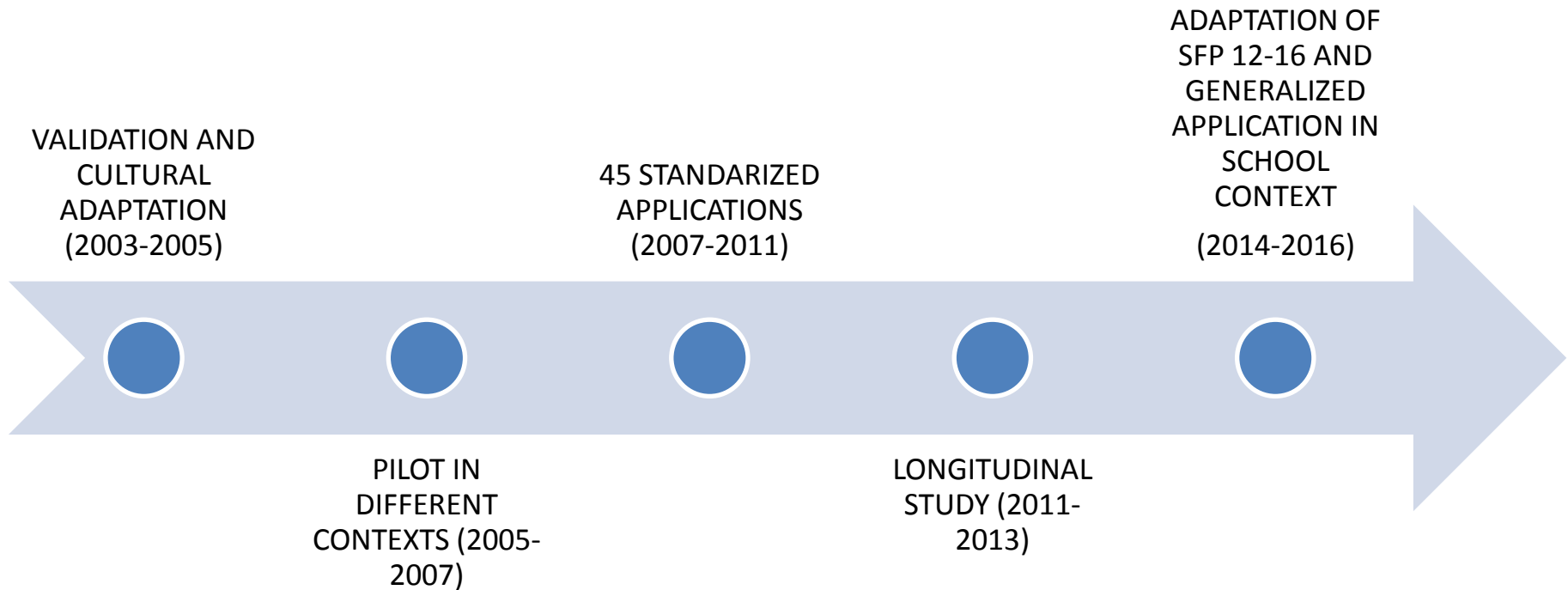
Comparison of the two contexts

- Diagnosis of risk factors in both contexts are common (families at risk).
- Expected protection factors, that we want to boost with the program, are also common.

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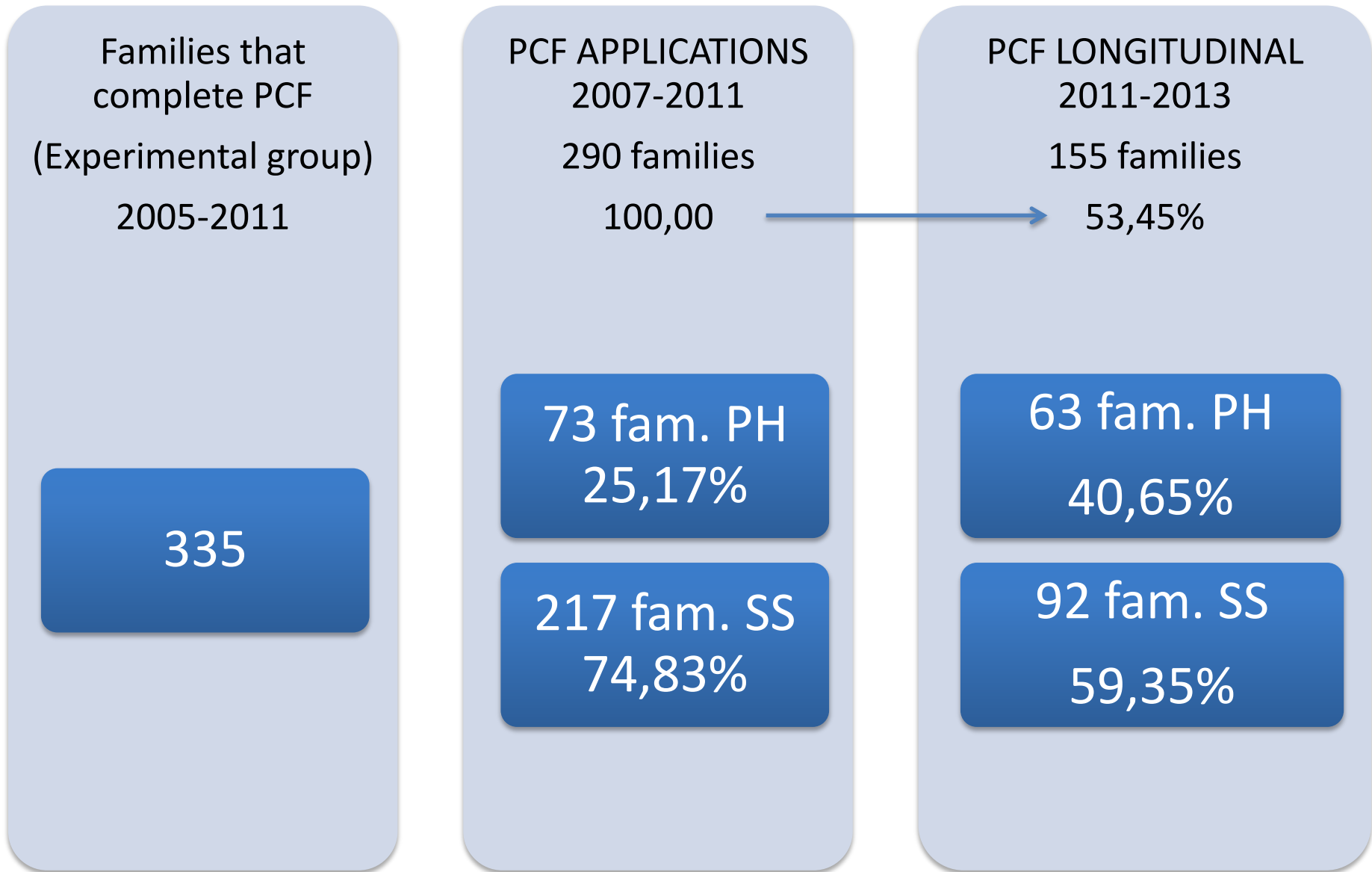
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Timeline



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2011: 8 families participated at an independent experience in Eivissa-Ibiza (SS)

Objectives (1)

- Follow-up objective: The “family competence” aggregated effect is expected to last along two years for the families that participated in the program (Orte, Ballester, & Amer, 2015, in press).
- Family competence: aggregated effect out of scales about family organization, parent-child relationships, positive parenting...

Objectives (2)

- Objective of the current presentation:
Influence on the family competence of factors such as family vulnerability, age of parents and children and participation in the program.

Method (1)

- 24-month follow-up study.
- Sample: 155 families at risk.
- Instruments: Evaluation of family results, using Spanish validated instruments (BASC and Kumpfer's questionnaires).
- Quasi-experimental design, with control group.

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Method (2): Cox Regression

- Methods of survival analysis are an important instrument in the follow-up studies.
- To gage the level of change along time.
- Cox regression → to see the influence of the predictors in the presence or absence of family competence.

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Aggregated index “Family Competence”

Scales referred to parents	Scales referred to children
Scale 1 Family resistance	Scale 1 Family implication
Scale 2 Parent-children relationships	Scale 2 Family cohesion
Scale 4 Family organization	Scale 3 Monitoring of school problems
Scale 5 Positive parenting	Scale 4 Social skills
Scale 6 Parental skills	Scale 5 Capacity of setting limits

Source: Questionnaire KK-Parents

Source: Questionnaire KK-Children

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Aggregated index “Family Competence”

- Range from 0 to 500 points, calculated out of the 10 factors, with the following weight:
 - Factors referred to parents: 50%
 - Factors referred to children: 50%
- Larger punctuation → larger family competence. Index interpreted in positive.

Aggregated index “Family Competence”

Experimental group at the end of PCF	PH (N=63)	Social Services (N=92)
Mean	362,48	339,08
Median	358,00	334,00
Standard Deviation	34,27	38,74
Coefficient of variation	9,45	11,42

There is also some dispersion, for cluster analysis of the program follow-up, please see Orte, Ballester, March, Amer, & Oliver (2014).

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Cox regression: associated factors with the long-term maintenance of the family competence (PH drug treatment program)

PH (N=63)	B	ET	Wald	gl	Sig.	Exp (B)
Age of children	-,075	,058	1,664	1	,197	,928
Age of parents	-,055	,043	1,692	1	,193	,946
Family Vulnerability Index	-,170	,117	2,115	1	,146	,844
Level of participation at the PCF	,080	,091	,770	1	,280	1,123

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Cox regression: associated factors with the long-term maintenance of the family competence (Social Care Services)

Social care services (N=92)	B	ET	Wald	gl	Sig.	Exp (B)
Age of children	-,037	,079	,224	1	,636	,963
Age of parents	,002	,018	,014	1	,907	1,002
Family Vulnerability Index	-,092	,114	,647	1	,421	,912
Level of participation at the PCF	,016	,055	,081	1	,476	1,066

Discussion and conclusion

- Influence of the participation (both in the drug treatment program and in Social Care Services) not only in the short-term (post-test), but also in the long-term (24 month follow-up).
- Participation in the program → predictor of maintenance of the results in the long-term.
- Importance of participation of families in selective prevention.
- Techniques for family involvement techniques are relevant for the participation and retention of the families in the program → topic of next presentation.

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Effectiveness in the techniques of family involvement in Family Competence Program 7-12 (Spanish adaptation of SFP)

Martí X. March, Belén Pascual, Josep Lluís Oliver & Rosario Pozo

<http://gifes.uib.eu>

EUSPR-Palma October 2014



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Objective

- Research on the self-evaluated and hetero-evaluated effectiveness of the diverse techniques for family involvement (games, roles, debates...) in a family prevention program of long duration (14 sessions of 2 hours).

Hypothesis 1

- ✓ H1. There is no significant difference in the evaluated quality of the family involvement techniques used in the applications of the SFP-PCF, implemented in the addiction treatment program *Proyecto Hombre* (11 applications) and in Social Services (29).

Hypothesis 2

- ✓ H2. The most detailed and complete expositions, debates and activities for the participation of the group in the program sessions generate the best results in family involvement (comprehension and participation).

Hypothesis 3

- ✓ H3. The best results on family involvement (comprehension and participation) impacts positively on the long-term results of family competence.

Methodology (1)

- ✓ Quasi-experimental design, with control group and rigorous controls of the possible sources of bias. Follow up of 155 families throughout 24 months, after the longitudinal investigation made from the start of the application of the sessions of SFP-PCF.

Methodology (2)

- ✓ 6 key sessions out of the total 14 sessions of the SFP-PCF (7-12) are analyzed, observed through external evaluators, with a detailed control list of family involvement techniques (regarding their application and response from the participants). The sessions in which there have been detailed evaluations of each one of the activities are in the next table:

Table 1. Fidelity assessment of the sessions

Sessions	Parents	Children	Families
2	Development expectations and stress management	Active listening skills	The game of the sons and daughters
3	Rewards	Communication skills	Rewards
4	Goals and objectives	Learn good behavior	Goals and objectives
10	Setting limits I Redirect bad behavior	Introduction to the game of the fathers and mothers	The game of the fathers and mothers I
11	Setting limits II Practice	Coping abilities I: recognize feelings	The game of the fathers and mothers II
12	Setting limits III Solving behavior problems	Coping skills. Coping with criticism	The game of the fathers and mothers III

3 Types of techniques used in the PCF-SFP sessions:

1. **Expositive techniques:** brief presentations oriented to inform about the basic elements for the elaboration of the diverse processes initiated with the PCF-SFP.
2. **Debates:** exchange situations, based on the contents of the program and the experience of the participants. It aims at facilitating an emotional experience and the involvement of the participants.
3. **Group dynamics:** group activities prepared to experience directly the contents of the sessions.

Evaluated Sessions

Table 2. Total number of evaluated sessions in the longitudinal study

	Number of programs implemented	Number of sessions externally evaluated	Modalities (Parents, Children, Families)	Total number of sessions
<i>Proyecto Hombre</i>	11	6	3	198
Social Services	29	6	3	522
TOTAL	40	6	6	720

Contents of the fidelity protocol for the PCF-SFP sessions

Table 3. Evaluation scales on family involvement techniques

Scale over exposition categories (E)	
Scope (a)	Comprehension (c)
3 = the topic is completely explained	3 = the group clearly understand it
2 = the topic is partially explained	2 = the group partly understand it
1 = few aspects of the topic are explained	1 = the group does not understand it
Scale over debates categories (D):	
Scope (a)	Participation (p)
3 = all aspects of the topic are debated	3 = the whole group participates en the debate
2 = many aspects of the topic are debated	2 = more tan half of the group members participate en the debate
1 = little aspects of the topic are debated	1 = less tan half of the group members participate in the debate
Scale over activities categories (A)	
Performance (r)	Participation (p)
3 = the activity is completely performed	3 = the whole group participates in the activity
2 = the activity is partially performed	2 = more tan half of the group members participate in the activity
1 = the activity is not performed but it will be done in another time/context	1 = less tan half of the group members participate in the activity

Results

H1. The **first hypothesis** is confirmed. There is no significant difference in the evaluated quality of the family involvement techniques used in the applications of the PCF-SFP in Proyecto Hombre (11 applications) and in Social Services (29).

Table 4. Evaluation of PERFORMANCE of family involvement techniques

PCF	Organization developing the program	N¹	Average range	Sum of ranges	Z	Sig. (bilateral)
Parents Amplitude EXPOSITIONS	Proyecto Hombre	65	117,54	7640,00	-,372	,710
	Social Services	174	120,92	21040,00		
	Total	239				
Sons and daughters Amplitude EXPOSITIONS	Proyecto Hombre	65	118,05	7673,50	-,086	,932
	Social Services	169	117,29	19821,50		
	Total	234				
Families Amplitude EXPOSITIONS	Proyecto Hombre	65	119,45	7764,50	-,007	,994
	Social Services	173	119,52	20676,50		
	Total	238				
Parents Amplitude DEBATES	Proyecto Hombre	61	116,00	7076,00	-,149	,881
	Social Services	172	117,35	20185,00		
	Total	233				
Sons and daughters Amplitude DEBATES	Proyecto Hombre	61	119,69	7301,00	-,401	,688
	Social Services	172	116,05	19960,00		
	Total	233				
Families Amplitude DEBATES	Proyecto Hombre	65	119,42	7762,50	-,087	,931
	Social Services	174	120,22	20917,50		
	Total	239				
Parents Performance ACTIVITIES	Proyecto Hombre	65	115,62	7515,50	-,215	,830
	Social Services	168	117,53	19745,50		
	Total	233				
Sons and daughters Performance ACTIVITIES	Proyecto Hombre	64	115,82	7412,50	-,105	,916
	Social Services	168	116,76	19615,50		
	Total	232				
Families Performance ACTIVITIES	Proyecto Hombre	63	116,03	7310,00	-,005	,996
	Social Services	168	115,99	19486,00		
	Total	231				

Table 5. Outcomes of family techniques involved

PCF	Organization developing the program	N	Average range	Sum of ranges	Z	Sig. (bilateral)
Parents Comprehension EXPOSITIONS	Proyecto Hombre	64	123,34	7893,50	-,805	,421
	Social Services	171	116,00	19836,50		
	Total	235				
Sons and Daughters Comprehension EXPOSITIONS	Proyecto Hombre	65	123,37	8019,00	-,671	,502
	Social Services	172	117,35	20184,00		
	Total	237				
Families Comprehension EXPOSITIONS	Proyecto Hombre	65	122,95	7991,50	-,847	,397
	Social Services	169	115,41	19503,50		
	Total	234				
Parents Participation DEBATES	Proyecto Hombre	61	114,77	7001,00	-,262	,793
	Social Services	171	117,12	20027,00		
	Total	232				
Sons and Daughters Participation DEBATES	Proyecto Hombre	61	119,65	7298,50	-,396	,692
	Social Services	172	116,06	19962,50		
	Total	233				
Families Participation DEBATES	Proyecto Hombre	65	120,05	7803,50	-,238	,812
	Social Services	171	117,91	20162,50		
	Total	236				
Parents Participation ACTIVITIES	Proyecto Hombre	64	120,53	7714,00	-,631	,528
	Social Services	168	114,96	19314,00		
	Total	232				
Sons and Daughters Participation ACTIVITIES	Proyecto Hombre	63	118,54	7468,00	-,389	,697
	Social Services	168	115,05	19328,00		
	Total	231				
Families Participation ACTIVITIES	Proyecto Hombre	63	116,21	7321,00	-,032	,974
	Social Services	168	115,92	19475,00		
	Total	231				

H2: The second hypothesis is confirmed, the most detailed and complete performance of the group activities generate the best results in family involvement (comprehension and participation).

In the case of the expositive techniques and debates, the best results are observed when these have not been comprehensive, but have been developed according to scope/amplitude level 2: "many aspects of the topic are debated".

Table 7: Parents comprehension of expositions

EXPOSITION PARENTS		PARENTS COMPREHENSION EXPOSITION		
PARENTS SCOPE EXPOSITION	The group does not understand it	The group partly understands it OR clearly understands it	TOTAL	
Few aspects of the topic are explained	6	37	43	
The topic is partially explained	2	123	125	
The topic is completely explained	28	39	67	
TOTAL	36	199	235	

EXPOSITION PARENTS		PARENTS COMPREHENSION EXPOSITION		
PARENTS SCOPE EXPOSITION	The group does not understand it	The group partly understands it OR clearly understands it	TOTAL	
Few aspects of the topic are explained	13,95%	86,05%	100,00%	
The topic is partially explained	1,60%	98,40%	100,00%	
The topic is completely explained	41,79%	58,21%	100,00%	
TOTAL	15,32%	84,68%	100,00%	

Graph 1: Parents comprehension of expositions

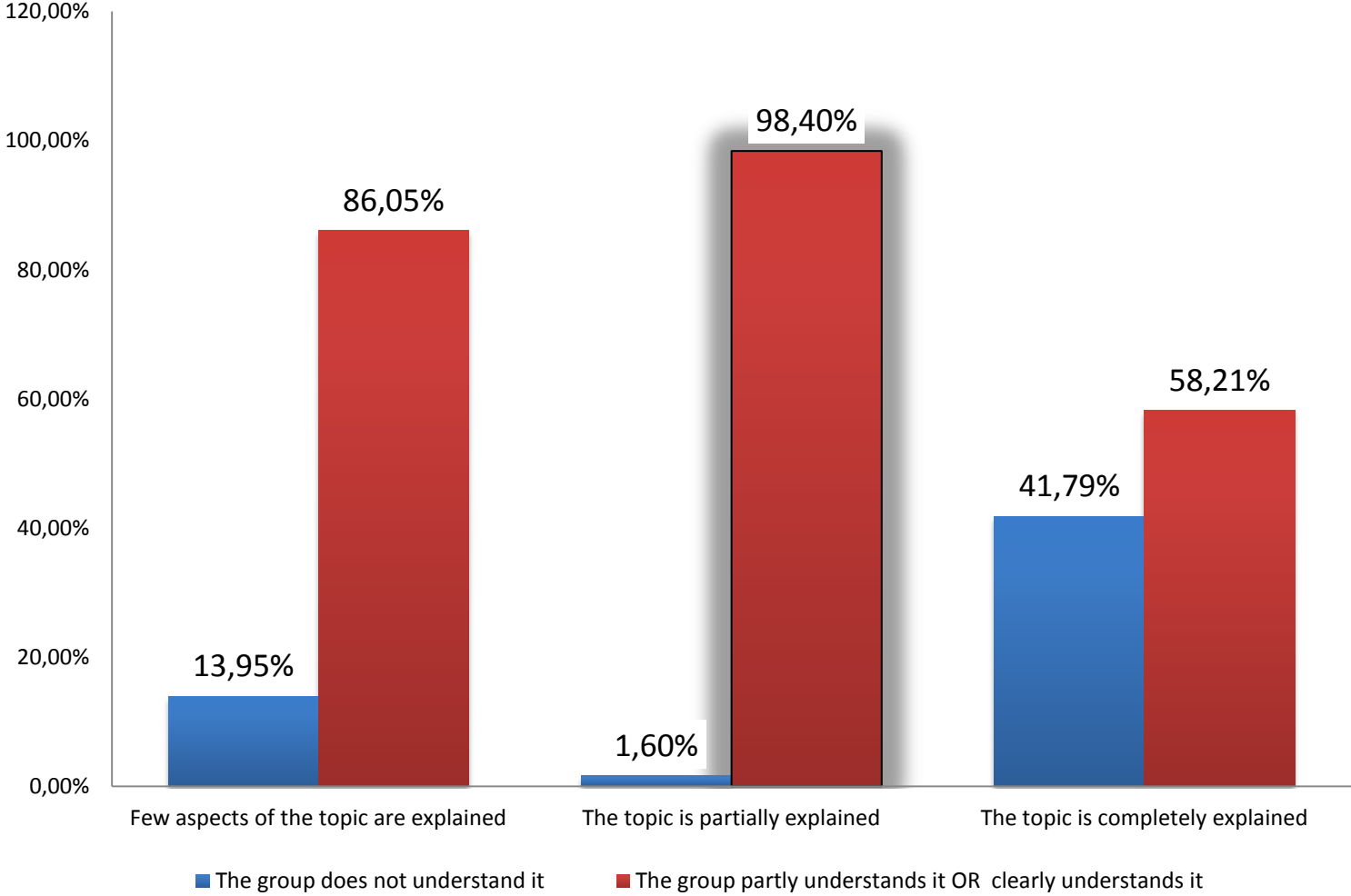


Table 6. Association relationship between the evaluation of the PERFORMANCE and the evaluation of the OBTAINED RESULTS of the family involvement techniques

Sessions	N of sessions	Chi-square of Pearson	Degree of freedom	Sig. (bilateral)
Parents. EXPOSITIONS	235	56,76	4	,000
Children. EXPOSITIONS	232	14,435 ^a	4	,006
Families. EXPOSITIONS	233	11,966 ^a	4	,018
Parents DEBATES	232	18,534 ^a	4	,001
Children DEBATES	233	11,209 ^a	4	,024
Families DEBATES	236	72,458 ^a	4	,000
Parents ACTIVITIES	232	40,216 ^a	4	,000
Children ACTIVITIES	231	70,160 ^a	4	,000
Families ACTIVITIES	231	61,900 ^a	4	,000

H3: The third hypothesis is confirmed on the positive relationship between the best results on family involvement (comprehension and participation) and the results of family competence on long term

Table 8. Correlations between the results obtained in each application and the outcomes

Organization developing the PCF program		Agreggated Index Family Competence	
Proyecto Hombre	Results in EXPOSITIONS	Spearman Rho	0,311*
		Sig. (bilateral)	0,026
		N	51
	Results in DEBATES	Spearman Rho	0,366**
		Sig. (bilateral)	0,008
		N	51
	Results in ACTIVITIES	Spearman Rho	0,592**
		Sig. (bilateral)	0,000
		N	51
Social Services	Results in EXPOSITIONS	Spearman Rho	0,339**
		Sig. (bilateral)	0,000
		N	150
	Results in DEBATES	Spearman Rho	0,623**
		Sig. (bilateral)	0,000
		N	150
	Results in ACTIVITIES	Rho de Spearman	0,490**
		Sig. (bilateral)	0,000
		N	150

*. The correlation is significant at the 0,05 level (2-tailed)

**.. The correlation is significant at the 0,01 level (2-tailed)

Conclusions (1)

- There is no significant difference in the evaluated quality of the family involvement techniques used in the different applications of the SFP-PCF.
- The most detailed and complete performance of the activities of group involvement produces the best results in family participation.
- There is a positive relationship between the best results on family involvement and the results of family competence on long term.

Conclusions (2)

- The data analysis confirms the effectiveness of the family involvement techniques in the program context, for the improvement of the family competence, with the implicit impact over the reduction of risk factors and the increase of protection factors.
- The participation of the families is the most important predictor of the results obtained on the long-term (24M) in family competence.

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